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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust **Treated as a Private Foundation**

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For	calend	dar year 2012 or tax year beginning , a	and ending				
Nar	me of fou	undation			A Empl	oyer identification number	
T	HE	GARATONI FAMILY FOUNDATION			26	-2866592	
		d street (or P O box number if mail is not delivered to street address)	· ·	oom/suite		hone number (see instruction	s)
		EDISON LAKES PARKWAY		260	5/	4-271-5145	
		AWAKA IN 46545			C If exe	mption application is pending,	check here
G	heck	all that apply: Initial return Initial return	rn of a former public c	harity	D 1. Fo	oreign organizations, check he	ere ► 🗍
		Final return Amended	return		2. Fo	oreign organizations meeting (he
		Address change Name cha	nge		85	i% test, check here and attach	computation ►
		type of organization X Section 501(c)(3) exempt private				ate foundation status was terr in 507(b)(1)(A), check here	ninated under
			e private foundation Cash X Acc		1		
		rket value of all assets at a see (from Part II, col. (c), Other (specify)	Cash Acc	iruai	ı	foundation is in a 60-month te section 507(b)(1)(B), check h	
	ie 16)		be on cash basis.)				
	irt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and			4.4	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net inv		(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ► X if the foundation is not required to attach Sch. B					
er)	3	Interest on savings and temporary cash investments					
2013	4	Dividends and interest from securities	632,184	6	32,184	0	
^ 3	5a	Gross rents					
2 on	b	Net renta income or (loss): IVED	-520,794		****************		
e 롣	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales pice for all assets on line 6a O 799, 863	-520,194				
NOV 2 2 Revenue	7	Capital gain net income (from Part IV, line 2)	······································		0		
	8	Net short-term capital gain				0	
SCANNED	9	Income modifications DEN, UT	······································		,		
Ž	10a	Gross sales less returns and altowances					
₹	Ь	Less: Cost of goods sold	11 111111111111111111111111111111111111				
Š	c	Gross profit or (loss) (attach schedule)					***************************************
	11	Other income (attach schedule) STMT 1	-123,934		23,934	0	
	12	Total. Add lines 1 through 11	-12,544	5	08,250	0	
ses	13	Compensation of officers, directors, trustees, etc.	0				
	14	Other employee salaries and wages		<u> </u>			
pe	15	Pension plans, employee benefits	~				
Ж	16a	Legal fees (attach schedule) Accounting fees (attach schedule) STMT 2	5,000			-	
Ve Ve	b	Other professional fees (attach schedule) STMT 3	171,950		71,950		
rati	17	Interest	202,236		02,236		
Operating and Administrative Expen	18	Taxes (attach schedule) (see instructions) STMT 4	3,205		·		
Ë	19	Depreciation (attach schedule) and depletion					
l d	20	Occupancy					
Q	21	Travel, conferences, and meetings					
an	22	Printing and publications					
Вu	23	Other expenses (att. sch)					
ati	24	Total operating and administrative expenses.	200 201		74 106	^	_
Jer		Add lines 13 through 23	382,391		74,186	0	614 767
ŏ	25	Contributions, gifts, grants paid Total expanses and dishursements. Add lines 24 and 25	614,767 997,158	***********	74,186	0	614,767 614,767
	26 27	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12	991,130	ļ	. = , ±00	<u>_</u>	014,101
	a	Excess of revenue over expenses and disbursements	-1,009,702				
	b	Net investment income (if negative, enter -0-)	, ,		34,064		
	c	Adjusted net income (if negative, enter -0-)				0	
For I	Papen	work Reduction Act Notice, see instructions.					Form 990-PF (2012)
DAA						5 6	

17,091,914 Form 990-PF (2012)

4

5

6

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains a	<u>nd Losses for Tax on Investm</u>	ent Income	<u> </u>			
	ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
1a SECURITIES SALE	S ST		P	VARIO	ous	VARIOUS
b SECURITIES SALE	······································		P	VARIO	ous	VARIOUS
C		-				
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	Cost or other basis			n or (loss) f) minus (g)
а			1,320,657			-1,320,657
b 799,863						799,863
c						
d						
e			-			
	g gain in column (h) and owned by the	foundation on 1	2/31/69		Gaine (Cal	(h) gain minus
	(j) Adjusted basis	T	k) Excess of col (i)		(k), but not	less than -0-) or
(i) F M V as of 12/31/69	as of 12/31/69		over col (j), if any		Losses (fr	rom col (h))
a						-1,320,657
b		7				799,863
С					-	
d						
е						
2 Capital gain net income or (net c	apıtal loss) If gain, also enter ir		}	2		-520,794
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and (
	, column (c) (see instructions). If (loss),		¬			
Part I, line 8				3		
7.01.1111111111111111111111111111111111	nder Section 4940(e) for Redu	ced Tax on	Net Investment Inco	ome		
If "Yes," the foundation does not qua	tion 4942 tax on the distributable amou lify under section 4940(e). Do not comp	lete this part.				Yes X No
	each column for each year, see the inst	luctions before				(d)
(a) Base period years Calendar year (or tax year beginning in			(c) Net value of noncharitable-use asse			tribution ratio divided by col. (c))
2011	1,078		16,566,			0.065105
2010	1,025		20,043,			0.051164
2009		,150	19,464,			0.048557
2008	610	,524	10,781,	625		0.056626
2007					7	
2 Total of line 1, column (d)				2		0.221452
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 I	nas been in existence if less than 5 year	rs		3	-	0.055363
4 Enter the net value of noncharita	ble-use assets for 2012 from Part X, lin	e 5		4	ļ	17,975,563
5 Multiply line 4 by line 3				5	<u> </u>	995,181
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)			6	ļ	1,341
7 Add lines 5 and 6				7		996,522
8 Enter qualifying distributions from				8	<u></u>	614,767
If line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line 1	b, and complet	e that part using a 1% tax	rate See th	e	·

	990-PF (2012) THE GARATONI FAMILY FOUNDATION 26-2866592	1		<u>, Б</u>	age 4	
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)					
1a	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)	1		_		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			2,	<u>681</u>	
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	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-)	 			-0	
3	Add lines 1 and 2	+		۷,	681	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	-		2	- 0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				681	
6	Credits/Payments.	1				
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 12,686					
b	Exempt foreign organizations – tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c 0					
d	Backup withholding erroneously withheld			10	co.c	
7	Total credits and payments. Add lines 6a through 6d	_		12,	080	
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		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10,	005	
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ 10,005 Refunded ▶ 11					
Pa	rt VII-A Statements Regarding Activities		1			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		<u> </u>	Yes	No	
	participate or intervene in any political campaign?		1a		<u> </u>	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?		1b	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	X	
	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				77	
С	Did the foundation file Form 1120-POL for this year?		1c		X	
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. ▶ \$					
е	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?		2		X	
	If "Yes," attach a detailed description of the activities.					
3	, 120 (110 102 111) 1120 and 1130 and 1					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>X</u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	/-	4a		<u>X</u>	
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b 5		<u>x</u>	
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?		6	X		
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	<i>'</i>	7	X		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶					
	IN					
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		8b	X		
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		9		<u> </u>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses		10		X	

*** ** ***	990-PF (2012) THE GARATONI FAMILY FOUR			866592			Page <u>6</u>
<u>Pa</u>	rt VII-B Statements Regarding Activities for W	<u>/hich Form 4</u>	<u>720 May Be R</u>	equired (cont	inued)		
5a	During the year did the foundation pay or incur any amount to					-	
	(1) Carry on propaganda, or otherwise attempt to influence legis	lation (section 4	945(e))?	<u> </u>	'es 🗓 No		
	(2) Influence the outcome of any specific public election (see se	ction 4955); or to	carry on,		(mm)	- 1	
	directly or indirectly, any voter registration drive?			<u> </u>	'es 🔀 No		
	(3) Provide a grant to an individual for travel, study, or other similar	ilar purposes?		<u> </u>	'es 🛚 X No	- 1	
	(4) Provide a grant to an organization other than a charitable, etc.	c., organization o	lescribed in	_		I	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see inst	ructions)		Y	es X No		
	(5) Provide for any purpose other than religious, charitable, scien	ntıfic, literary, or	educational	_	_	I	
	purposes, or for the prevention of cruelty to children or anima	als?		Y	'es 🗓 No	1	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fa	ıl to qualify unde	r the exceptions d	escribed in			
	Regulations section 53.4945 or in a current notice regarding disa	ster assistance	(see instructions)?	•	N/A	5b	
	Organizations relying on a current notice regarding disaster assis	stance check hei	re		▶ 🔲		
С	If the answer is "Yes" to question 5a(4), does the foundation clair	n exemption from	n the tax				
	because it maintained expenditure responsibility for the grant?			N/A 🗌 Y	'es 🗌 No		
	If "Yes," attach the statement required by Regulations section 53	49455(d).		_		1	
6a	Did the foundation, during the year, receive any funds, directly or		y premiums			1	
	on a personal benefit contract?			Y	′es 🛚 No	[
b	Did the foundation, during the year, pay premiums, directly or ind	lirectly, on a pers	sonal benefit contr	act?	<u> </u>	6b	X
	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, was the foundation a party to a p	rohibited tax she	elter transaction?		es 🗓 No	1	
	If "Yes," did the foundation receive any proceeds or have any net			tion?	N/A	7b	
ATTENTO	rt VIII Information About Officers, Directors, T				Paid Employe	es,	
	and Contractors	•					
1 L	ist all officers, directors, trustees, foundation managers and	their compensa	tion (see instruc	tions).	·		
			(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Name and address		hours per week	(If not paid,	employee benefit plans and deferred		nse account, allowances
			devoted to position	enter -0-)	compensation	Outer 6	illowances
LA	VRENCE H GARATONI MISHAWAKA		TRUSTEE				
	00 EDISON LAKES PARKWAY SUITE 260 IN 46545		5.00	0	o	ł	0
	DITH A GARATONI MISHAWAKA		TRUSTEE				
	00 EDISON LAKES PARKWAY SUITE 260 IN 46545		5.00	o	o		0
	O DOLOGN ELEB PLEATING SOLID DOLOGN						
			,				
							
2	Compensation of five highest-paid employees (other than th	ose included o	n line 1 – see ins	tructions). If non	e, enter		
_	"NONE."			•	•		
			(b) Title, and average		(d) Contributions to		
	(a) Name and address of each employee paid more than \$50,000		hours per week	(c) Compensation	employee benefit plans and deferred		ense account, allowances
			devoted to position		compensation	- Outer 6	MUHANCCS
NO	VE.						
							
						1	
							
		·		_			
						1	
Total	number of other employees paid over \$50,000		· 				0
					F	orm 990)-PF (2012)

Form 990-PF (2012) THE GARATONI FAMILY FOUNDATION	26-2866592	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundard Contractors (continued)	ındation Managers, Highly Paid Er	
3 Five highest-paid independent contractors for professional services (see in	structions). 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		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informat organizations and other beneficiaries served, conferences convened, research papers produced, etc	tion such as the number of	Expenses
1 NONE - THE FOUNDATION MAKES CONTRIBUTION 501(C)(3) PUBLIC CHARITIES ONLY. SEE L. CONTRIBUTIONS.	NS TO OTHER IST OF	
2		
3		
4		
		· · · · · · · · · · · · · · · · · · ·
Part IX-B Summary of Program-Related Investments (see ins		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 N/A		Amount
1 N/A		
2		
All other program-related investments See instructions 3		

Total. Add lines 1 through 3

Suitability test (prior IRS approval required)

Enter 1% of Part I, line 27b (see instructions)

Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Form 990-PF (2012)

614,767

614,767

3a

3b

4

5

6

b

5

Pa	rt XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012
	line 7	***************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	896,097
2	Undistributed income, if any, as of the end of 2012:				
а	Enter amount for 2011 only		<u></u>		,,
b	Total for prior years. 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2012				
а	From 2007				
b	From 2008 52,576				
С	From 2009				
d	From 2010 35,533				
е	From 2011 255, 674				
f	Total of lines 3a through e	343,783	***************************************		
4	Qualifying distributions for 2012 from Part XII,				
	line 4: ▶ \$ 614,767				
а	Applied to 2011, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2012 distributable amount		·······		614,767
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2012	281,330	···		281,330
	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	62,453			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
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				
е	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)		111-11111	<u></u>	<u></u>
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	62,453	······································		***************************************
10	Analysis of line 9				
а	Excess from 2008				
b	Excess from 2009				
С	Excess from 2010				
d	Excess from 2011 62,453				
е	Excess from 2012				

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

N/A

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

N/A

c Any submission deadlines:

N/A

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

N/A

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Purpose of grant or status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 7 614,767 614,767 ▶ 3a Total Approved for future payment N/A ▶ 3b Total

Part XV	I-A Analysis of Income-Producing Act	ivities				
	amounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	
g		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
_	n service revenue:					(See instructions)
				 		
				 		
				 		
				1		
·						
g Fee	es and contracts from government agencies					
-	rship dues and assessments					
	on savings and temporary cash investments					
	ds and interest from securities			14	632,184	
5 Net ren	tal income or (loss) from real estate					
a Del	ot-financed property					
b Not	debt-financed property					
6 Net ren	tal income or (loss) from personal property					
7 Other in	vestment income					
	(loss) from sales of assets other than inventory			18	-520,794	· · · · · · · · · · · · · · · · · · ·
	ome or (loss) from special events		<u></u>			
-	profit or (loss) from sales of inventory					
11 Other re		<u> </u>		 		122 024
	C 988 LOSS/OTHER					-123,934
a	-				·	
9 12 Subtata	Add columns (b), (d), and (e)		0 111,39		111,390	-123,934
	Add line 12, columns (b), (d), and (e)	L		´li	13	-12,544
	heet in line 13 instructions to verify calculations.)					
Part XV		complishm	ent of Exempt P	urpose	es	
Line No						
▼	accomplishment of the foundation's exempt purpo					
4	THE FOUNDATION HOLDS ONL	Y INVES	TMENT ASSET	'S AN	D RELIES ON	
	THESE ASSETS TO GENERATE		MENT INCOME	TIW :	H WHICH	
	TO MAKE CHARITABLE EXPEN	DITURES				
··			· ·			
						
						
						
	- - - - - - - - - - 					
	-					
						,
						

Part 3	XVII	Information Reg	_	ansfers To an	d Transactio	ons and Relation	nships Wit	h Noncharitable		
1 Dic	d the oras	Exempt Organization directly or ind		ge in any of the fol	lowing with any	other organization de	escribed		Yes	No
		01(c) of the Code (other								
	ganızatior			.,,,	•		•			
a Tra	ansfers fr	om the reporting found	lation to a n	oncharitable exem _l	pt organization o	f.				
(1)	Cash							1:	a(1)	X
(2)	Other a	ssets						1:	a(2)	X
	her transa									
• •		f assets to a noncharit	-	-					0(1)	X
		ses of assets from a no			on			_	0(2)	X
• •		of facilities, equipment		sets					0(3)	X
		rsement arrangements	3						0(4)	$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
		r loan guarantees		a firadesiama aalisi	lations			_	b(5) b(6)	X
		ance of services or mo							1c	X
		acilities, equipment, m er to any of the above i				mn (h) should alway	e chow the fai	_	10 1	1 **
		goods, other assets, o								
		transaction or sharing	-		•					
(a) Lii		(b) Amount involved		ne of noncharitable exem				sactions, and sharing arran	gements	
N/A		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			· <u> </u>					
				· · · · · · · · · · · · · · · · · · ·						
		-								
				-						
				<u></u>						
						l				
		ation directly or indirec	-				ns	_)
		section 501(c) of the	•	than section 501(c	c)(3)) or in section	n 5277		L	Yes 🛚	No.
<u>b_lf "</u>		nplete the following sc	hedule.	1		1				
- 37 /·		a) Name of organization		(b) Type of o	organization		(c) Descripti	on of relationship		
N/	<u> </u>		****	<u> </u>						
						_				
	-		<u> </u>							
	Under per	alties of perjury, I declare th	at I have exam	Ined this return, including	g accompanying sch	I edules and statements, ar	nd to the best of m	y knowledge and belief, it is	s true,	
1	correct, ar	nd complete Declaration of p	oreparer (other	than taxpayer) is based	on all information of	which preparer has any k	nowledge	May the IRS discuss		\neg
Sign				, 17				with the preparer sho		_
Here		\mathcal{I}	1 _	1 Pro-				(see instructions)?	Yes	No
TIEIE	L		1 -	17.	\ I\	15/13	TRI	ITEE	·	
1	Signa	ature of officer or trustee			Date)	Title			
		pe preparer's name			Preparer's signatu	/		Date	T.	
	FINITY	he hiehaiei s Haille			ricpater 3 signatu	1/2000		11/,-		(X) if
Paid	THOM	AS J VARGA JR	CPA		(1.1)	my 1		10/	グー	p.0,00
Preparer	Firm's n			ASSOCIATES	s —		I	PTIN P012	2180	3
Use Only	v 	ddress ► 53700		RATIONS DI				Firm's EIN		
	1 """ 3		BEND				<u> </u>		243-3	3200
		20011		,	- -				000 P	<u> </u>

GARFAMILY THE GARATONI FAMILY FOUNDATION Federal Statements

FYE: 12/31/2012

Income
e 11 - Other
I. Line 1'
F. Part
I - Form 990-PF. Part I. Line
1 - Forn
Statement

Description	Revenue per Books	ž	Adjusted Net Income
SEC 988 LOSS/OTHER	\$ -123,9	34 \$ -123,934	\$
TOTAL	\$ -123,9	· ጭ	φ.
Statement 2 - Form 990-PF,	art I, Line 16b - /	990-PF, Part I, Line 16b - Accounting Fees	
	Net	Adjusted	Charitable

Adjusted Net	တ	\$	
Net Investment	φ.	\$	
Total	5,000	5,000	
	တ	ς	

Description.

ACCOUNTING FEES

TOTAL

Purpose

	Charitable Purpose	\$	\$
ssional Fees	Adjusted Net	\$	0 \$
Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees	Net Investment	\$ 171,950	\$ 171,950
	Total	\$ 171,950	\$ 171,950
Stateme	Description	INVESTMENT FEES	TOTAL

	Charitable Purpose	\$	\$
axes	Adjusted Net	\$	0 \$
I - Form 990-PF, Part I, Line 18 - Taxes	Net Investment		0
-PF, Par	L	တ	ω
4 - Form 990	Total	3,205	3,205
<u>Statement</u>		တ	် လ
	Description	FED INVEST INC TAX -	TOTAL

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GARFAMILY THE GARATONI FAMILY FOUNDATION

26-2866592

Federal Statements

FYE: 12/31/2012

Statement 5 - Form 990-PF, Part II, Line 15 - Other Assets

Description	_	Beginning of Year		End of Year	_	Fair Market Value
SECURITIES ACCOUNTS LOAN RECEIVABLE CA	\$	17,960,046 5,067,814	\$	17,062,415 4,574,614	\$	18,562,766 4,574,614
TOTAL	\$_	23,027,860	\$_	21,637,029	\$_	23,137,380

Statement 6 - Form 990-PF, Part III, Line 3 - Other Increases

Description	 Amount
OTHER INVESTMENT VALUE INCREASES	\$ 614,648
TOTAL	\$ 614,648

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GARFAMILY THE GARATONI FAMILY FOUNDATION 26-2866592 FYE: 12/31/2012

Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

	Amount	1	200	25	, ,	200	40,000	17,180		2,500	882		1,000		295,000		100,400		200		5,000	(2,600	(((2,000	0.50	000	200	,	200
	Purpose		GENERAL CHARITY	GENERAL CHARITY		GENERAL CHARITY	GENERAL CHARITY	GENERAL CHARITY		GENERAL CHARITY	GENERAL CHARITY		GENERAL CHARITY		GENERAL CHARITY		GENERAL CHARITY		GENERAL CHARITY		GENERAL CHARITY		GENERAL CHARITY		GENERAL CHARLTY	SETERAL CHARLES		GENERAL CHARITY		GENERAL CHARITY
Address	Relationship Status	130 RED COACH DRIVE	501(C)(3)	\$ \$	P.O. BOX 80544	501 (C)(3)		1411 LINCOLN WAY WEST 501 (C)(3)	2505 E. JEFFERSON BLVD		AIIN AMANDA MILLER 501(C)(3)	813 S. MICHIGAN STREET	501(C)(3)	615 S ALABAMA STREET		2930 S NAPANEE ST		P.O. BOX 11365	501(C)(3)	59701 MYRTLE ROAD	501 (C)	1234 NOTRE DAME AVENUE	,	F.O. BOX 1049	:	F.O. BOX 4394	901(5) P.O. BOX 1593	501(C)	1202 LINCOLN WAY EAST	501(C)(3)
Name	Address	Į	MISHAWAKA IN 46545 NONE	\sim	•	INDIANAPOLIS IN 46280 NONE ANNIAL RISHOPS APPEAL	FORT WAYNE IN 46801 NONE	BOYS & GIRLS CLUB MISHAWAKA IN 46544 NONE		SOUTH BEND IN 46624 NONE	CENIER FOR HISIORI SOUTH BEND IN 46601 NONE	CENTER FOR THE HOMELESS	SOUTH BEND IN 46601 NONE	CENTRAL INDIANA COMM FOUNDATION	INDIANAPOLIS IN 46204 NONE	CTR		~	IN 46634-0365	RENTS FOR EDUCATION .	SOUTH	INE	SOUTH BEND IN 46617 NONE			MEDICAL EDUCATION FOUNDATION	A FOUNDATION	MISHAWAKA IN 46546 NONE	SCHOOL	MISHAWAKA IN 46544 NONE

GARFAMILY THE GARATONI FAMILY FOUNDATION Federal Statements

26-2866592 FYE: 12/31/2012

Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name		AC	Address				
Address	Re	Relationship	Status		Purpose	ose	Amount
MONTESSORI ACADEMY AT EDISON LAKES	AKES	530 E DAY R	ROAD				
MISHAWAKA IN 46545	NONE		501(C)(3)	GENERAL	GENERAL CHARITY		8,000
PLAY LIKE A CHAMPION TODAY		107 CAROLE	SANDER HALL				
	NONE	-,	501(C)(3)	GENERAL	CHARITY		200
PORT ROYAL CLUB SCHOLAR		2400 TAMIAM	MI TRAIL NORTH	H			
NAPLES FL 34103	NONE	-,	501 (C) (3)	GENERAL	CHARITY		4,000
REINS OF LIFE		55200 QUINC	E ROAD				
	NONE		501(C)(3)	GENERAL	CHARITY		250
S ANSARI CENTER FOR AUTISM		2505 E JEFF	ERSON BLVD				
SOUTH BEND IN 46624	NONE	-,	501(C)(3)	GENERAL	CHARITY		2,100
SALVATION ARMY		P.O. BOX 62	24				
MISHAWAKA IN 46546	NONE		501 (C) (3)	GENERAL	GENERAL CHARITY		10,000
r.,		1402 N. MAI	IN STREET				
MISHAWAKA IN 46544	NONE		501 (C) (3)	GENERAL	GENERAL CHARITY		27,275
SJOGREN'S SYNDROME FOUNDATION		6707 DEMOCR	RACY BLVD #325	5			
BETHESDA MD 20817	NONE		501 (C)(3)	GENERAL	CHARITY		100
SOUTH BEND MEDICAL FOUNDATION		ATTN HEATHE	ER POND				
SOUTH BEND	NONE		501(C)(3)	GENERAL	CHARITY		2,310
ST JOSEPH GRADE SCHOOL		211 N ST LC	SINO				
SOUTH BEND IN 46617	NONE	-,	501 (C)(3)	GENERAL	CHARITY		65,145
TRIANGLE EDUC FOUNDATION		120 SOUTH C	CENTER STREET				
PLAINFIELD IN 46168	NONE		501 (C)(3)	GENERAL	CHARITY		1,500
UNITED WAY OF ST JOE CO		3517 E JEFF	ERSON BLVD				
	NONE	-•	501 (C)(3)	GENERAL	CHARITY		250
WNIT PUBLIC TELEVISION		P.O. BOX 70	034				
SOUTH BEND IN 46634-7034	NONE		501(C)(3)	GENERAL	CHARITY		5,000
WOUNDED WARRIOR PROJECT		NATIONAL PR	ROCESSING CENTE	ΠE			
TOPEKA KS 66675-8516	NONE	-,	501(C)(3)	GENERAL	CHARITY		2,000
YOUNG LIFE		YOUNG LIFE	OF MICHIANA				
SOUTH BEND IN 46624-0563	NONE		501(C)(3)	GENERAL	CHARITY		1,000
YOUTH SERVICE BUREAU		2222 LINCOL	LN WAY WEST				
SOUTH BEND IN 46628	NONE	- ,	501 (C)(3)	GENERAL	GENERAL CHARITY		10,000

11/15/2013 10:46 AM 614,767 Amount Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued) Purpose GARFAMILY THE GARATONI FAMILY FOUNDATION

Federal Statements Status Address Relationship Name Address FYE: 12/31/2012 TOTAL GARFAMILY THE GARATONI FAMILY FOUNDATION

Federal Statements

11/15/2013 10:46 AM

FYE: 12/31/2012

26-2866592

Taxable Dividends from Securities

		Unrelated			US
Description	 Amount	Business Code	_Code	<u>Code</u>	Obs (\$ or %)
INTEREST & DIVIDENDS	\$ 632,184		14	IN	
TOTAL	\$ 632,184				

<u>(2)</u> (3) <u>(4)</u> (5) (6) (7) (8) (9) (10)

Totals

	ILY 11/15/2013 11 13 AM		,			•
Form	ns 0 / 990-PF	Mort	tgages and Ot	her Notes Payable	,	2012
99		or calendar year 2012, o	or tax vear beginning	, and ending		2012
Name	·	or calculate your zotz,	or tax your boginning	, and chang	Employer Identif	ication Number
TH:	E GARATONI FAN	ILLY FOUNDAT	'ION		26-28665	92
FO	RM 990-PF. PAR	RT II. LINE	21 - ADDIT	IONAL INFORMATION		
		ne of lender		Relationship to d	squalified person	
	JP MORGAN		·	NONE		
(2)						· ·
(3)		······································				
<u>(4)</u>						
(5) (6)						·
(6) (7)						
<u>(7)</u> (8)						
<u>(9)</u>		WW		 	······································	
(10)						
<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>						
*************	Original amount		Maturity			Interest
	borrowed	Date of loan	date	Repayment terms		rate
(1)	5,760,830	06/28/11	04/30/13	AT MATURITY		1.000
(2)						
(3)						
(4)						
(5)						<u> </u>
(6)						
(7)		ļ				
(8)						
<u>(9)</u>						
(10)		<u> </u>		<u> </u>		. I.,
				T		
	Security	provided by borrower		Purpose	of loan	
(1)	SECURED BY INV		OUNTS		REER ACADE	EMY
(2)	·				· · · · · · · · · · · · · · · · · · ·	
(3)						
(4)	····				· · · · · · · · · · · · · · · · · · ·	
(5)						
(6)						
(7)						
(8)						
(9)						
(10)			······································			
						
				Balance due at		e due at
		furnished by lender		beginning of year		of year
<u>(1)</u>	NONE			5,544,130	4,	544,130

5,544,130

4,544,130

Form 886	8 (Rev 1-2013)					Page 2
• If you	are filing for an Additional (Not Automatic)	3-Month Exter	sion, complete onl	y Part II and check th	his box	▶ 🗸
Note. 0	Only complete Part II if you have already beer	n granted an aut	tomatic 3-month exte	ension on a previousl		
• If you	are filing for an Automatic 3-Month Extens					
Part I	Additional (Not Automatic) 3-Mon	th Extension	of Time. Only file	the original (no cop	ies needed).	
			• • •	Enter filer's identifyir	ng number, see	instructions
Туре о	Name of exempt organization or other filer,	see instructions.		Employer identification	n number (EIN) o	or
print	GARATONI FAMILY FOUNDATION			26-	-2866592	
File by the	Number, street, and room or suite no. If a P	O. box, see instr	uctions.	Social security number	r (SSN)	
due date	for 4100 EDISON LAKES PARKWAY, STE 260	0				
filing your return Se		le. For a foreign a	ddress, see instruction	S.		
instructio		· · · · · · · · · · · · · · · · · · ·				
Enter th	ne Return code for the return that this applica	ition is for (file a	separate application	for each return) .		. 0 4
Applic	ation	Return	Application			Return
Is For		Code	Is For			Code
Form 9	990 or Form 990-EZ	01	医克斯克斯克斯克斯 克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯克斯	。据"的"于"是的错""图"	SEAST SAFE	17/21.96
Form 9	990-BL	02	Form 1041-A			08
Form 4	1720 (individual)	03	Form 4720		-	09
Form 9	990-PF	04	Form 5227			10
Form 9	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	990-T (trust other than above)	06	Form 8870			12
STODIT	Oo not complete Part II if you were not alread	ly granted an au	stamatic 3-month ov	tansian an a provious	aly filed Form	0060
• If the c • If this for the v list with 4	reganization does not have an office or place is for a Group Return, enter the organization' whole group, check this box ▶ the names and EINs of all members the exterequest an additional 3-month extension of for calendar year 2012 , or other tax year beging the tax year entered in line 5 is for less than Change in accounting period State in detail why you need the extension I this application is for Form 990-BL, 990-PF	of business in soft sour digit Group is four digit Group in the soft sour digit Group in the soft sour digit in the soft in th	NOVEMBER 19 NOVEMBER 19 , 20 eck reason:	er (GEN) this box , 20 13 , and ending ial return	. If th	is is tach a
	onrefundable credits. See instructions.	,		maino tax, 1000 any	8a \$	
e	this application is for Form 990-PF, 990 stimated tax payments made. Include any mount paid previously with Form 8868.		•		8b \$	
	Balance due. Subtract line 8b from line 8a. Inclu Electronic Federal Tax Payment System). See in:		with this form, if requ	ired, by using EFTPS	8c \$	
	Signature and Veri		·	-		
	enalties of perjury, I declare that I have examine and belief, it is true, correct, and complete, and				nts, and to the	best of my
Signature I	•	Title ►	TRUSTEE	Da	ate ►	
					Form 8868	(Rev 1-2013)