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

		be able to use a copy of this		rting requirements.	Open to public inspection
Forc	alendar year 2012 or tax year beginning		, and ending	,	
Nan	e of foundation			A Employer identification	n number
				0.5.00.504.00	
	JSAN GREENSPUN FINE FAMIL			26-2869122	2
	ber and street (or P.O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
	275 CORPORATE CIRCLE		300	702-259-40	
-	or town, state, and ZIP code			C if exemption application is p	pending, check here
	ENDERSON, NV 89074	1 1			
G C	neck all that apply: Initial return		ormer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return		Foreign organizations me check here and attach co	eeting the 85% test.
	X Address change	Name change		check here and attach or	omputation
H C	neck type of organization: X Section 501(c)(3) ex		-1	E If private foundation sta	
<u></u>		Other taxable private found		under section 507(b)(1)(A), check here
	r market value of all assets at end of year J Accounting	7	Accrual	F If the foundation is in a	
	1 1	her (specify)	hacie I	under section 507(b)(1)(B), check here
De	rt Analysis of Revenue and Expenses		· · · · · ·		(d) Disbursements
Ра	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
		40,000.		N/A	(cash basis only)
	1 Contributions, gifts, grants, etc., received 2 Check it the foundation is not required to attach Sch. 8	=0,000.		11/11	
	Interest on savings and temporary	14.	14.	· · · - · · · · · · · · · · · · · · · ·	STATEMENT 1
	cash investments Dividends and interest from securities	11.			
	5a Gross rents				
	Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
Revenue	b Gross sales price for all assets on line 6a				
š	7 Capital gain net income (from Part IV, line 2)		0.		
œ"	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income .				
	12 Total. Add lines 1 through 11 .	40,014.	14.		
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
S	15 Pension plans, employee-benefits D			ļ	
ıses					
ibei	b Accounting fees c Other professional fees 2 9 2013				
Ē	c Other professional-fees				
Operating and Administrative Expens	17 Interest			 	
stra	18 Taxes OGDEN, UI				-
ini	19 Depreciation-and depletion		· · · · · · · · · · · · · · · · · · ·		
Δþ	20 Occupancy				
Į ρι	21 Travel, conferences, and meetings				
j ar	22 Printing and publications 23 Other expenses STMT 2	109.	59.		50.
ting	• • • • • • • • • • • • • • • • • • • •	107.	55.		50.
era	24 Total operating and administrative expenses. Add lines 13 through 23	109.	59.		50.
o	25 Contributions, gifts, grants paid	47,222.	5,	1	47,222.
	26 Total expenses and disbursements.	2.,222•		 	2.,,222.
	Add lines 24 and 25	47,331.	59.		47,272.
_	27 Subtract line 26 from line 12:				†
	Excess of revenue over expenses and disbursements	<7,317.	>	}	
	b Net investment income (if negative, enter -0-)		0.	<u> </u>	
		1		1	1
	c Adjusted net income (if negative, enter -0-)			N/A	

<u> </u>	Attached schedules and amounts in the description	Beginning of year	End of	year rage 2
Par	til Balance Sheets Altached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
T	1 Cash - non-interest-bearing	20,085.	11,867.	11,867.
	2 Savings and temporary cash investments			
- :	3 Accounts receivable ►			
	Less: allowance for doubtful accounts			
4	4 Pledges receivable ►			
- [Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other			
	disqualified persons			
	7 Other notes and loans receivable			
\mathbf{H}	Less: allowance for doubtful accounts			
ايو	B Inventories for sale or use			
Assets	9 Prepaid expenses and deferred charges			
& ₁،	Da Investments - U.S. and state government obligations			· <u>-</u> .
	b Investments - corporate stock			
	c Investments - corporate bonds			
1	1 Investments - land, buildings, and equipment basis			
'	Less accumulated depreciation			
1	2 Investments - mortgage loans			
1:				
	4 Land, buildings, and equipment basis			
- 1 "	Less accumulated depreciation			
1	5 Other assets (describe ►)			
'		<u>"</u>		
1	6 Total assets (to be completed by all filers)	20,085.	11,867.	11,867.
$\overline{}$	7 Accounts payable and accrued expenses	.,	•	<u> </u>
. ا	The state of the s			
<u>i</u> <u>i i</u> 2	· · · · · · · · · · · · · · · · · · ·			
Liabilities 5 2 5	. I. i i i i i i i i i i i i i i i i i i		,	
رُ ا ٿ	2 Other liabilities (describe ► STATEMENT 3)	26.	26.	`
۲	2 Other machines (describe >			F
,	3 Total liabilities (add lines 17 through 22)	26.	26.	· t
- -	Foundations that follow SFAS 117, check here			•
	and complete lines 24 through 26 and lines 30 and 31.			-
8 .	4 Unrestricted			
ğ 2	5 Temporarily restricted			
ㅠ I	6 Permanently restricted			
풀 *	Foundations that do not follow SFAS 117, check here		**	
ᇤᅵ	and complete lines 27 through 31.			
٦ ٥	· · · · · · · · · · · · · · · · · · ·	0.	0.	
\$ 2	7 Capital stock, trust principal, or current funds 8 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ŭΙ	· · · · · · · · · · · · · · · · · · ·	20,059.	12,742.	
# 12	9 Retained earnings, accumulated income, endowment, or other funds	20,059.	12,742.	
\tilde{z} 3	O Total net assets or fund balances	20,033.	24,124	
_	1. Total liabilities and not assats/fund belongs	20,085.	12,768.	
3	1 Total liabilities and net assets/fund balances		12,700	
Pa	t III Analysis of Changes in Net Assets or Fund Ba	alances		
1 Tr	otal net assets or fund balances at beginning of year - Part II, column (a), line 3	 30	- 	<u> </u>
		. .	1	20,059.
•	nust agree with end-of-year figure reported on prior year's return)	•		<7,317.
		•	2	0.
	ther increases not included in line 2 (itemize)			12,742.
	id lines 1, 2, and 3		4	12,742.
	ecreases not included in line 2 (itemize) Note: The property of the property	luma (h) luca 20	5 6	12,742.
6 To	nai net accete or fund halances at end of year fline 4 miniis line 5) - Pari II. Co	mma (O) IINE 3(I	101	14.144.

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(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) D	How ac - Purc - Dona	mase i	c) Date a (mo., da		(d) Date sold (mo., day, yr.)	
1a										
b NC	NE									
C			. 							
<u>d</u>					-					
e	1 (0	Danie allamad	(=\ C==	44b b	<u> </u>			/h) Ca	(()	
(e) Gross sales price	(1)	Oepreciation allowed (or allowable)		t or other basis xpense of sale					un or (loss) (f) minus (
<u>a</u>										· · · · · · · · · · · · · · · · · · ·
b c										
- d			-							
e										
Complete only for assets shows	ng gain in	column (h) and owned by t	the foundation	on 12/31/69			(1)	Gains (Co	ol. (h) gaın	minus
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			col. (k), but n Losses (ot less thar (from col. (I	1 -0-) or h))
a		- :								
b										
C										
d		=								
<u>e</u>	L									
2 Capital gain net income or (net c	apıtal loss	$\begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases}$			}	2				
3 Net short-term capital gain or (lo	, column (od (6):		}	,				
If (loss), enter -0- in Part I, line 8 Rart V& Qualification U	Inder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inco	me		
If section 4940(d)(2) applies, leave Was the foundation liable for the set If "Yes," the foundation does not qua Tenter the appropriate amount in	ction 4942 alify under	2 tax on the distributable am section 4940(e). Do not co	mplete this pa	rt						Yes X No
(a) Base period years Calendar year (or tax year beginn		(b) Adjusted qualifying dis		Net value of no	(c)	use assets		Distrib	(d) ution ratio ided by col. (c))
2011	g,	3	6,004.			2	3,417		(-)	1.537515
2010		3	9,580.	=,			9,433		•	2.036742
2009		8	4,960.			8	9,039			.954189
2008			12.			1	8,467			.000650
2007								ļ ,		
2 Total of line 1, column (d)								2		4.529096
3 Average distribution ratio for the the foundation has been in exist.			on line 2 by 5,	or by the number	r of ye	ears		3		1.132274
4 Enter the net value of noncharita	ble-use as	ssets for 2012 from Part X,	line 5					4		17,140.
5 Multiply line 4 by line 3								5		19,407.
6 Enter 1% of net investment inco	me (1% o	f Part I, line 27b)						6		0.
7 Add lines 5 and 6	,	· · ·		- • • •		-	•	7		19,407.
8 Enter qualifying distributions fro	 m Dart VII		••		•			8		47,272.
If line 8 is equal to or greater tha		- "	 1b, and comp	lete that part usir	ng a 1	 % tax	 rate.	<u> </u>		31,414.
See the Part VI instructions.				<u>-</u>						

Form 990-PF (2012), SUSAN GREENSPUN FINE FAMILY FOUNDATION 26-28691 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in		Page 4
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 here X and enter 1%		0.
of Part I, line 27b		t
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-)		0.
3 Add lines 1 and 2		0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		0.
6 Credits/Payments:		
a 2012 estimated tax payments and 2011 overpayment credited to 2012	•	1
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 6d		
7 Total credits and payments. Add lines 6a through 6d	,	0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0.
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 ▶ Refunded ▶ 11		
Part VII-A Statements Regarding Activities		
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	Yes	s No
any political campaign?	1a	Х
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		1
distributed by the foundation in connection with the activities.		-
c 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. ▶ \$ 0 • (2) On foundation managers. ▶ \$	C : Secure	
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	, ,	1 ;
managers.▶\$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
		1
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		1 '
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
If "Yes," attach the statement required by General Instruction T.		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
By language in the governing instrument, or	'	1
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	- 1	
remain in the governing instrument?	6 X	
7 Did the foundation have at least \$5,000 in assets at any time during the year?	7 X	
If "Yes," complete Part II, col. (c), and Part XV.	- -	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		
NV		
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)		
	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	х
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 4	10 X	+==
	990-PF	(2012)

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orm 990-PF (2012) SUSAN GREENSPUN FINE FAM			26-28691	. 4 4	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
* 5a During, the year did the foundation pay or incur any amount to:				- 1	1
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	L Y	es 🗶 No	- 1	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir				;
any voter registration drive?		Y	es X No		Ι,
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	🗀 Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		1	İ	1 1
509(a)(1), (2), or (3), or section 4940(d)(2)?		🔲 Y	es X No	1.	1 :
(5) Provide for any purpose other than religious, charitable, scientific, literary,				. [,	1 1
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations			1 1
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	~ ~ ~
Organizations relying on a current notice regarding disaster assistance check h	ara		▶ [· #	+
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi				-	1 :
		_ , _	es 🗀 No 📗		1
expenditure responsibility for the grant?	• •	'/.♣ □ ''	E2 NO		
If "Yes," attach the statement required by Regulations section 53.494],	-2 & 	1: 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No	• •	1 !
a personal benefit contract?		L ¥0	es LALINO	<u></u>	$\mathbf{\bar{x}}^{\perp}$
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		· -	6b	 ^
If "Yes" to 6b, file Form 8870.			[]	ŝ	1 :
7a At any time during the tax year, was the foundation a party to a prohibited tax s		الـــا Yi	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu		···	N/A	7b	<u></u>
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	У		
List all officers, directors, trustees, foundation managers and their	componention				
List all Officers, directors, dustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) Ev	nanca
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex	t, other
(-)	to position	enter -0-)	compensation	allowa	ances
				1	
				İ	•
SEE STATEMENT 5		0.	0.		0.
				į	
			ļ	l	
				<u> </u>	
				ŀ	
			1	ł	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	1.7.K		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ex	pense t. other
(a) Name and address of each employee paid more than 400,000	devoted to position	(C) compensation	and deferred compensation	allowa	inces
NONE					
			i	ļ	
				1	
				T	
			1		
	-		<u> </u>	 	
			ł	1	
	-			 	
Total number of other employees paid over \$50,000	<u> </u>	<u> </u>		<u> </u>	0
ו מנמן אניווטפו טו טווינו פווואוטאַכבא אמונו טענו שָטט,טטט	<u> </u>	<u>.</u>	Form	990-PF	
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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	-
3 Five highest-paid independent contractors for professional services. If none, enter "		
(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		▶ 0
RartIX:A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistics	al information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produc	cea, etc.	
1 NONE		
		0.
2		
		
3		
4		
Port IV'P Comment of December Deleted Investments		
Part IXEB Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2.	Amount
1 NONE		<u></u>
		_
		0.
2		
All other program-related investments. See instructions.		
3		
Tabel Add by a 1 through 2	•	0.
Total. Add lines 1 through 3		· · · · · · · · · · · · · · · · · · ·

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P	art X. Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	17,401.
	Fair market value of all other assets	1c	<u>.</u>
	Total (add lines 1a, b, and c)	1d	17,401.
	Reduction claimed for blockage or other factors reported on lines 1a and		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	17,401.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	261.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	17,140.
6	Minimum investment return. Enter 5% of line 5	6	857.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	857.
2a	Tax on investment income for 2012 from Part VI, line 5	建	
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	857.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	857.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	857.
P	art·XII Qualifying Distributions (see instructions)	1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	<u>##</u>	45 050
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	47,272.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
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:	1	
а	Suitability test (prior IRS approval required)	3a	
þ	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	47,272.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	47,272.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940/e) reduction of tay 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,		-		857.
line 7				037.
2 Undistributed income, if any, as of the end of 2012			0.	
a Enter amount for 2011 only			0.	
b Total for prior years:		0.		i
3 Excess distributions carryover, if any, to 2012:				
a From 2007				
b From 2008			, ,	* '
2 From 2000 79 968	·			
dFrom 2010 38,610.				
eFrom 2011 34,833.				
f Total of lines 3a through e	153,411.		٠,	
4 Qualifying distributions for 2012 from				
Part XII, line 4: ►\$ 47, 272.				. 1
a Applied to 2011, but not more than line 2a		,	ō .	,
b Applied to undistributed income of prior				. 1
years (Election required - see instructions)	`	0.	•	*
c Treated as distributions out of corpus		-		
(Election required - see instructions)	0.		•	*
d Applied to 2012 distributable amount		*	, .	857.
e Remaining amount distributed out of corpus	46,415.			
5 Excess distributions carryover applied to 2012	0.	- · · · 		0.
(If an amount appears in column (d), the same amount must be shown in column (a))		, ,	λ	
6 Enter the net total of each column as indicated below:		•		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	199,826.			
b Prior years' undistributed income. Subtract	155,020.	· · · · · · · · · · · · · · · · · · ·		
line 4b from line 2b		0.	·	
c Enter the amount of prior years'	·			
undistributed income for which a notice of	,		6 11 - 4 -	
deficiency has been issued, or on which	•			,
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line		· · · · · ·		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must	'			
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	199,826.			
10 Analysis of line 9:				
a Excess from 2008				
b Excess from 2009 79,968.			}	
c Excess from 2010 38,610.				
d Excess from 2011 34,833.				
e Excess from 2012 46,415.				Form 990-PF (2012)

		NE FAMILY F			69122 Page IU
Part XIV Private Operating Fo			A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	2012, enter the date of t	the ruling	▶ └		
b Check box to indicate whether the found	ation is a private operatir	ng foundation described in		4942(j)(3) or49	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	(1) 0000	4.5
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
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	
(1) Value of all assets					<u> </u>
(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	·			_	<u> </u>
and 5 or more exempt	ļ				
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income				-	
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation			W		
a List any managers of the foundation wh		than 2% of the total cont	ributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed in			,		•
SUSAN GREENSPUN FINE		_			
b List any managers of the foundation wh			(or an equally large port	ion of the ownership of a p	partnership or
other entity) of which the foundation ha	s a 10% or greater intere	st			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., Pr	rograms:		
				not accept unsolicited requ	
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations u	inder other conditions, c	omplete items 2a, b, c, an	d d
a The name, address, and telephone num	ber or e-mail of the perso	on to whom applications s	should be addressed:		
SEE STATEMENT 6					
b The form in which applications should be	oe submitted and informa	ation and materials they sl	hould include:		
c Any submission deadlines:			, -,-,		
d Any restrictions or limitations on award	s such as hy geographic	al areas, charitable fields	kinds of institutions or	other factors:	
a Any resultations of inflications of award	o, caon ao oy goograpino	,			

Page 11

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual.		Durpage of grant or	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	-	
a Paid during the year				
ASSISTANCE LEAGUE OF LAS VEGAS		501(C)(3) NONPROFIT ORG.	DONATIONS	
6446 WEST CHARLESTON BLVD LAS VEGAS, NV 89146		NONPROFIT ORG.		30
BEST BUDDIES NEVADA		501(C)(3)	DONATIONS	
500 N. RAINBOW BLVD, STE 314		NONPROFIT ORG.		
LAS VEGAS, NV 89107				80
			İ	
PHASE ONE		501(C)(3)	DONATIONS	
256 26TH STREET		NONPROFIT ORG.		
SANTA MONICA, CA 90402				1,00
GLOBAL DOWN SYNDROME		501(C)(3)	DONATIONS	
3300 E. FIRST AVENUE, SUITE 390 DENVER, CO 80206		NONPROFIT ORG.		1,00
DENVER, CO 30200				1,00
KNPR NEVADA PUBLIC RADIO		501(C)(3)	DONATIONS	
1289 S. TORREY PINES DRIVE		NONPROFIT ORG.		
LAS VEGAS, NV 89146				2,00
	ONTINUATION SHE	et(s)	. ▶ 3a	47,22
b Approved for future payment			ŀ	
NONE				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated,	Unitelati	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b			<u> </u>		
c			<u> </u>		
d		<u> </u>	<u></u>		
e			 		
f			↓		
g Fees and contracts from government agencies			├	· · · · · · · · · · · · · · · · · · ·	
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			1	1.4	
investments			14	14.	
4 Dividends and interest from securities			 -		
5 Net rental income or (loss) from real estate:		<u> </u>	↓ -ٰ-	·	<u>-</u> .
a Debt-financed property			—		
b Not debt-financed property			├		
6 Net rental income or (loss) from personal	1				
property			├ ┈─	-	
7 Other investment income			₩		
8 Gain or (loss) from sales of assets other					
than inventory			<u> </u>		
9 Net income or (loss) from special events			├ ─		
10 Gross profit or (loss) from sales of inventory			⊢ —		
11 Other revenue:	1		ĺ		
a	-		 		
b			<u> </u>		
C			├ ─		
d			├		
e			↓ —		
12 Subtotal. Add columns (b), (d), and (e)		0.	<u>·</u>	14.	0 . 14 .
13 Total. Add line 12, columns (b), (d), and (e)					14.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Acc	omplishment of E	xemp	t Purposes	
Part XVI-B Relationship of Activities t					plishment of
Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the second section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the section of the sectio	me is reported	ın column (e) of Part XVI-			plishment of
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Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which income	me is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which income	me is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which income	me is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which income	me is reported	ın column (e) of Part XVI-			plishment of
Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which income	me is reported	ın column (e) of Part XVI-			plishment of

Page 13

SUSAN GREENSPUN FINE FAMILY FOUNDATION

Part XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	hips With Noncl	haritabl	е	
1 Did the ord			of the followin	g with any other organizati	on described in secti	on 501(c) of		Yes	No
	•			7, relating to political orga		• •	1 1	- 1 ·	333
•	rom the reporting founda						75 % 5 %	100	*
(1) Cash							1a(1)		X
• •	assets						1a(2)		Х
b Other trans							1,1-7	4924	. علقس
	of assets to a noncharital	hle exempt organizat	tion				1b(1)		X
	ases of assets from a no			•• •• ••			1b(2)	_	Х
	of facilities, equipment,						1b(3)		Х
	oursement arrangements			• • • •	• •		1b(4)		X
	or loan guarantees	- •					1b(5)	 	X
	mance of services or me	mborobin or fundrais	eina colicitatio				1b(6)	_	X
• •		·	-	• •		-	10(0)	-	X
	facilities, equipment, ma				huana aham tha fair m				
				dule. Column (b) should a				sets,	
				ed less than fair market val	ue in any transaction	or snaring arrangemen	it, snow in		
) the value of the goods,				1 (4) -				
(a)Line no	(b) Amount involved	(c) Name of		exempt organization	(u) Description	of transfers, transactions, a	and sharing ar	rangeme	រានេ
			N/A						
							···		
	<u> </u>								
							·		
		,							
ın section	501(c) of the Code (othe	r than section 501(c)		or more tax-exempt organion 527?	izations described	-	Yes	X] No
D II Yes, co	mplete the following sch (a) Name of org			(b) Type of organization	1	(c) Description of relation	nehin		
	N/A	Janization		(b) Type of organization	·	(c) Description of relation	лізіпр		
	IN/A			·					
									
									
									
115-4		45-416			d atatamanta and to the	bast of any transition			
Sign Here		mplete Declaration of pr		ng accompanying schedules and n taxpayer) is based on all infor	mation of which preparer	baa any kaoviladaa	May the IRS return with the shown below Yes	ne prepar (see ins	er
			Drenarer's s	Date		Check If PTI	IN .		
	Print/Type preparer's na	anıc	Preparer's s	iynatur e	Date	self- employed	114		
Poid			1] [sen- employed			
Paid		<u>-</u>			<u> </u>				
Preparer Use Only	Firm's name					Firm's EIN			
	Firm's address 🕨								

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

Schedule of Contributors

OMB No 1545-0047

2012

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

GUCAN ODDENGDIN ETNE BANTI V BOUNDAUTON

	SUSAN GREENSPUN FINE FAMILY FOUNDATION	26-2869122
Organization type (che	eck one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
-	ation is covered by the General Rule or a Special Rule. 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.
General Rule		
•	ization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in m Complete Parts I and II.	oney or property) from any one
Special Rules		
509(a)(1) and	s 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg of 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the ont on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contribu	n 501(c)(7), (8), or (10) organization filing Form 990 or 990·EZ that received from any one contruitions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or ed on of cruelty to children or animals. Complete Parts I, II, and III.	
contributions If this box is o purpose. Do	a 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one control is for use exclusively for religious, charitable, etc., purposes, but these contributions did not to checked, enter here the total contributions that were received during the year for an exclusive not complete any of the parts unless the General Rule applies to this organization because antable, etc., contributions of \$5,000 or more during the year	otal to more than \$1,000. ely religious, chantable, etc.,
but it must answer "N	ition that is not covered by the General Rule and/or the Special Rules does not file Schedule Io" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	·

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

SUSAN	GREENSPUN	FINE	FAMILY	FOUNDATION
-------	-----------	------	--------	------------

26-2869122

			0 2007122
Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SUSAN GREENSPUN FINE 2275 CORPORATE CIRCLE, SUITE 300 HENDERSON, NV 89074	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
223452 12-21		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

SUSAN GREENSPUN FINE FAMILY FOUNDATION

26-2869122

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art 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	
		 s		
(a) No. from	(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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
			·	
		s		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	

Name of org	ganization	· · · · · · · · · · · · · · · · · · ·	Employer identification number
SIISAN	GREENSPUN FINE FAMILY	FOUNDATTON	26-2869122
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional additional actions.	ridual contributions to section 501(c) ne following line entry. For organization , contributions of \$1,000 or less for t	7), (8), or (10) organizations that total more than \$1,000 for the s completing Part III, enter he year. (Enter this information once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
•		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(a) Transfer of rife	
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
}		(e) Transfer of gift	
	Transferee's name, address, ar	_	Relationship of transferor to transferee

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
USO		501(C)(3)	DONATIONS	
PO BOX 96322		NONPROFIT ORG.		20
WASHINGTON, DC 20090		<u> </u>		
THE JEWISH FEDERATION OF LAS VEGAS		501(C)(3)	DONATIONS	
2317 RENAISSANCE DRIVE		NONPROFIT ORG.		
LAS VEGAS, NV 89119			:	10,000
ANN IN HOURTON		501(0)(3)	DONATIONS	
UNLV FOUNDATION 4505 S. MARYLAND PARKWAY, BOX 451006		501(C)(3) NONPROFIT ORG.	DOMNITONS	
LAS VEGAS, NV 89154		MONTHOT IT ONG.		6,250
THE JEWISH MUSEUM		501(C)(3)	DONATIONS	
1109 5TH AVE AT 92ND STREET		NONPROFIT ORG.		
NEW YORK, NY 10128				250
THE SIMON WIESENTHAL CENTER		501(C)(3)	DONATIONS	
1399 SOUTH ROXBURY DRIVE		NONPROFIT ORG.		
LAS ANGELES, CA 90035				3,600
		501 (3) (2)	DOWN THE COME	
BISHOP GROMAN HIGH SCHOOL 5959 S HUALAPAI WAY		501(C)(3) NONPROFIT ORG.	DONATIONS	
LAS VEGAS, NV 89148		NONFROTTI ORG.		500
PUBLIC EDUCATION FOUNDATION		501(C)(3)	DONATIONS	
3360 WEST SAHARA STE 160 LAS VEGAS, NV 89102		NONPROFIT ORG.		500
YOUTH CHARITIES OF SOUTHERN NEVADA		501(C)(3)	DONATIONS	
PO BOX 46232		NONPROFIT ORG.		
LAS VEGAS, NV 89114	-			250
ADI.		501(C)(3)	DONATIONS	
ADL 8965 S EASTERN AVENUE #375		NONPROFIT ORG.	POMRITORS	:
LAS VEGAS, NV 89123				10,000
CONGREGATION NER TAMID		501(C)(3)	DONATIONS	
55 NORTH VALLE VERDE DRIVE		NONPROFIT ORG.		
Total from continuation sheets .	<u> </u>			10,07:

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear (Continuation)	T		_
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome or obsidess)	or substantial contributor	recipient		
		501/01/21	Down Troys	
DOWN SYNDROME ORGANIZATION OF		501(C)(3) NONPROFIT ORG.	DONATIONS	
SOUTHERN NEVADA		NONPROFIT ORG.		
5300 VEGAS DRIVE LAS VEGAS, NV 89108				500.
DAS VEGAS, NV 05100		·		+
	ļ			
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			1	
		-		
			1	
		<u> </u>	-	
			ļ	
	1			
		 		
Total from continuation sheets				

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
INTEREST INCOME				14.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	LUMIN A		14.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 2
DESCRIPTION		(B) NET INVEST MENT INCOM	- ADJUSTEI	
FILING FEES BANK FEES	50. 59.		0. 9.	50. 0.
TO FORM 990-PF, PG 1, LN 23	109.	5	9.	50.
FORM 990-PF	OTHER LIA	BILITIES		STATEMENT 3
DESCRIPTION			BOY AMOUNT	EOY AMOUNT
DUE TO RELATED PARTY			26.	26.
TOTAL TO FORM 990-PF, PART I	I, LINE 22		26.	26.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	4
NAME OF CONTRIBUTOR	ADDRESS		
SUSAN GREENSPUN FINE	2275 CORPORATE CIRCLE SUITE HENDERSON, NV 89074	300	

FORM 990-PF PART VIII - LIST TRUSTEES AND	T OF OFFICERS, D FOUNDATION MANA	STATEMENT 5		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
SUSAN GREENSPUN FINE 2275 CORPORATE CIRCLE SUITE 300 HENDERSON, NV 89074	PRESIDENT 0.50	0.	0.	0.
KATHRYN A. FINE 2275 CORPORATE CIRCLE SUITE 300 HENDERSON, NV 89074	SECRETARY 0.50	0.	0.	0.
ALYSON FINE-MARMUR 2275 CORPORATE CIRCLE SUITE 300 HENDERSON, NV 89074	TREASURER 1.00	0.	0.	0.
JEFFREY ARON FINE 2275 CORPORATE CIRCLE SUITE 300 HENDERSON, NV 89074	DIRECTOR 0.50	0.	0.	0.
SUSAN GREENSPUN FINE 2275 CORPORATE CIRCLE SUITE 300 HENDERSON, NV 89074	DIRECTOR 0.50	0.	0.	0.
JONATHAN M FINE 2275 CORPORATE CIRCLE SUITE 300 HENDERSON, NV 89074	DIRECTOR 0.50	0.	0.	0.
ALYSON FINE-MARMUR 2275 CORPORATE CIRCLE SUITE 300 HENDERSON, NV 89074	DIRECTOR 0.50	0.	0.	0.
KATHRYN A. FINE 2275 CORPORATE CIRCLE SUITE 300 HENDERSON, NV 89074	DIRECTOR 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

6

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SCREENING COMMITTEE, SUSAN GREENSPUN FINE FAMILY FOUNDATION SAME AS ON PAGE 1

TELEPHONE NUMBER

702-259-4023

FORM AND CONTENT OF APPLICATIONS

NO PRESCRIBED FORM

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE NONPROFIT CORPORATION WAS ORGANIZED FOR THE PUBLIC BENEFIT SOLEY FOR GENERAL ELEEMOSYNARY PURPOSES, MORE SPECIFICALLY FOR THE PURPOSE OF DONATING FUNDS PRIMARILY TO OTHER ESTABLISHED 501(C)(3) ORGANIZATIONS WHICH BENEFIT EDUCATIONAL AND CHARTIBLE OPPORTUNITIES FOR THE ADVANCEMENT OF RELIGION, SCIENCE, AND THE ARTS.