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990-PF

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

Open to Public Inspection

Fo	ог са	lendar year 2012 or tax year beginning			, 2012,	and ending	L		
		of foundation MICHAEL T. RIORDAN	FAMIL	Y FOUNDATI				Employer identifi	cation number
	C/0	MICHAEL T. RIORDAN, TRUSTEE					1	30-6000348	3
_		er and street (or P O box number if mail is not delivere	d to street	address)		Room/suite	В	Telephone numbe	er (see instructions)
								(92	0) 295-3365
	W35	63 MEREDITH LANE						·	,
_		town, state, and ZIP code		•					
	•						c	If exemption applica	tion is
	GREI	EN LAKE, WI 54941						pending, check here	
		ck all that apply Initial return		Initial return	of a former n	uiblic charity	┨_		
G	Cite	Final return	<u> </u>	Amended re	•	abile charley	P	1 Foreign organizat	
		Address change	-	 				2 Foreign organizat 85% test, check h	ere and attach
_	Cho	ck type of organization X Section 501	(0)(2) 0	Name change			+	computation .	
7	_	• =				hon	E	If private foundation	
÷		ection 4947(a)(1) nonexempt charitable trust		ther taxable pr		rual	\dashv	under section 507(b)	
ı		I [_		asn Acc	ruai	F		in a 60-month termination
		·		pecify)			-	under section 507(b)	(1)(B), check here
			1	(d) must be on	Casii basis)				(d) Disbursements
L	'art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(4)	Revenue and	(b) Net inve	estment	(c)	Adjusted net	for charitable
		may not necessarily equal the amounts in	ex	penses per books	incom	ne		ıncome	purposes
_		column (a) (see instructions))	ļ <u>.</u>	DOORS					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule). Check X If the foundation is not required to attach Sch. B							
1	2	Check ► X attach Sch B		1.60		1.62			
	3	Interest on savings and temporary cash investments		163.	0.5	163.			
	4	Dividends and interest from securities		255,860.	25	5,860.	(r	-	
	5 a	Gross rents	ļ					ممتاكأ	***
	b	Net rental income or (loss)				.	- 1		Mary 1
ne		Net gain or (loss) from sale of assets not on line 10		410,610.			1/ 6		- ():
Revenue	D	Gross sales price for all 2,310,905. assets on line 6a					14	<u> </u>	ביותי ביותי
è	7	Capital gain net income (from Part IV, line 2) .			41	0,610.	J	<u></u>	(A)
Ŀ	8	Net short-term capital gain					<u>_</u>	OGUL	10
	9	Income modifications - · · · · · · · · · ·	ļ						
	10 a	Gross sales less returns and allowances · · · · ·	<u> </u>						
	b	Less Cost of goods sold .	ļ						
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule) ATCH, 1		-896.		-896.			
_	12	Total. Add lines 1 through 11	<u> </u>	665,737.		5,737.			
	13	Compensation of officers, directors, trustees, etc	<u></u>	0					
es	14	Other employee salaries and wages	<u> </u>						
nse	15	Pension plans, employee benefits	<u> </u>						
be	16 a	Legal fees (attach schedule)							
ŭ	ь	Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions)ATCH. 2 Depreciation (attach schedule) and depletion. Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) ATCH. 3 Total operating and administrative expenses Add lines 13 through 23 Contributions, gifts, grants paid		6,619.		3,310.			3,309.
Š	С	Other professional fees (attach schedule)							
rat	17	Interest							
jst	18	Taxes (attach schedule) (see instructions) $ATCH\ .\ 2$.	L	35,413.		3,589.			
Ē	19	Depreciation (attach schedule) and depletion.							
Ad	20	Occupancy							
Þ	21	Travel, conferences, and meetings							
ē	22	Printing and publications							
ing	23	Other expenses (attach schedule) ATCH .3 .		46,109.	4	6,109.			
rat	24	Total operating and administrative expenses							
De	l	Add lines 13 through 23		88,141.	5	3,008.			3,309
J	25	Contributions, gifts, grants paid		450,105.					450,105.
	26	Total expenses and disbursements Add lines 24 and 25		538,246.	5	3,008.			453,414.
	27	Subtract line 26 from line 12							
		Excess of revenue over expenses and disbursements	1	127,491.					
	l	Net investment income (if negative, enter -0-)			61	2,729.			
	1	Adjusted net income (if negative, enter -0-).							
_							_		

JSA For Paperwork Reduction Act Notice, see instructions.
2E1410 1 000 2JV5DJ 1714 5/10/2013 1:02:52 PM V 12-4.6F

D	art II	Ralanca Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	En	End of year		
	artii	Datance Streets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bear	ing					
			cash investments	246,019.	361 , 91	4. 361,914.		
	3	Accounts receivable ▶						
		Less allowance for dou	btful accounts ▶					
	İ		btful accounts ▶					
	5							
	6		officers, directors, trustees, and other					
		disqualified persons (at	tach schedule) (see instructions)					
	7		eceivable (attach schedule)					
			btful accounts >					
ß	8		se					
ssets	9		leferred charges					
As	10 a		e government obligations (attach schedule)					
			e stock (attach schedule) ATCH 4	8,210,802.	8,179,33	3. 9,148,542.		
			e bonds (attach schedule)	, ,		<u> </u>		
	11	Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)	s, >					
	12	•	loans					
			ach schedule)					
	14	Land, buildings, and	•					
]	Less accumulated deprecia	ation]		
	15	Other assets (describe	>)					
	16		completed by all filers - see the			-		
			page 1, item I)	8,456,821.	8,541,24	7. 9,510,456.		
	17		accrued expenses		·			
	18							
Ś								
itie	20		ors, trustees, and other disqualified persons			\neg		
Liabilities	21		otes payable (attach schedule)					
Ë	22		e >)					
		other hashines (assume	~/			\neg		
	23	Total liabilities (add line	es 17 through 22)	o		d		
		Foundations that fol	low SFAS 117, check here ▶ 24 through 26 and lines 30 and 31.					
çe	24	· ·		1				
alances	25					_		
Ba	26	Permanently restricted						
ā	20		not follow SFAS 117,					
豆	ĺ		plete lines 27 through 31.					
Net Assets or Fund B	27		cipal, or current funds	8,456,821.	8,541,24	7.		
ets	28		r land, bldg , and equipment fund	0,100,000	3,512,22	'		
SS	29		ulated income, endowment, or other funds					
ž.	30	-	d balances (see instructions)	8,456,821.	8,541,24	7		
ž	31		net assets/fund balances (see	0,100,021.	0,011,21	' 		
]"		· · · · · · · · · · · · · · · · · · ·	8,456,821.	8,541,24	7		
ŀ) Part II		anges in Net Assets or Fund		0,541,24	, . 		
			palances at beginning of year - Part		must agree with			
٠			d on prior year's return)			8,456,821.		
2								
2	Cute	r amount from Part I, r increases not includ	· · · · · · · · · · · · · · · · · · ·					
			-43,065.					
4	Mad	mies I, Z, and 3	lino 2 (domino) B			8,541,247.		
		reases not included in		loo 5) Doet II column (5)		9 541 247		
0	rota	i net assets or fund ba	alances at end of year (line 4 minus	iine 5) - Paπ II, column (b), iine 30 (8,541,247.		

Capital Gains and Losses for Tax on Investment Income

Part IV

>

Page 3

	e g , real estate, shs MLC Co)	(b) How acquired P-Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a SEE PART IV SCHE		313 M23 337	D - Donation	(, 42), j. /	-	
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 (lo (e) plus (f) mini		
a						
b					<u> </u>	
<u>c</u>						
d						
е						
Complete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69	(1)	Gains (Col (h) g	aın mınus	
(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	col	(k), but not less t Losses (from co		
<u>a</u>						
_b						
<u>c</u>						
<u>d</u>						
_e		<u> </u>		·		
2 Capital gain net income of	(net capital loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		410,610.	
	n or (loss) as defined in sections 12 rt I, line 8, column (c) (see inst					
Part I, line 8		<u></u> <u>J</u>	3		0	
Part V Qualification	Under Section 4940(e) for Re	duced Tax on Net Investment I	ncome			
	the section 4942 tax on the distrib not qualify under section 4940(e)		ase period	17	Yes X No	
1 Enter the appropriate am	ount in each column for each year	, see the instructions before making	any entri	es		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by		
2011	445,487.	9,485,020.			0.046967	
2010	405,598.	9,026,205.			0.044936	
2009	546,147.	8,148,643.			0.067023	
2008	628,429.	10,925,609.			0.057519	
2007	570,353.	12,827,348.			0.044464	
2 Total of line 1, column (d	• • • • • • • • • • • • • • • • •		2		0.260909	
	for the 5-year base period - divided dation has been in existence if less		3		0.052182	
4 Enter the net value of no	ncharitable-use assets for 2012 fro	m Part X, line 5	4	9,	379,833.	
5 Multiply line 4 by line 3			5		489,458.	
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6 6,127.			
7 Add lines 5 and 6	Add lines 5 and 6					
8 Enter qualifying distributions If line 8 is equal to or graph Part VI instructions	ons from Part XII, line 4 eater than line 7, check the box i	n Part VI, line 1b, and complete t	8 hat part i	using a 1% tax	453,414. c rate See the	

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

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

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

Form 990-PF (2012)

Х

8b

addresses

Х

Х

Par	t 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		Х
12	Did the	foundation make a distribution to a donor advised fund over which the foundation or a disqualified	i		
	person h	ad 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?	. 13	X	<u> </u>
	Website	address \blacktriangleright N/A			
14	The boo	ks are in care of ▶ MICHAEL T. RIORDAN Telephone no ▶ 920-29	5-33	55	
	Located	at ►W3563 MEREDITH LANE GREEN LAKE, WI ZIP+4 ► 54941		-	
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<i></i>		. 🔲
	and ente	er the amount of tax-exempt interest received or accrued during the year		,	
16		time during calendar year 2012, did the foundation have an interest in or a signature or other authority		Yes	No
	over a ba	ank, securities, or other financial account in a foreign country?	. 16		X
		instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			ŀ
		gn country ▶			<u> </u>
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required		· · · · · ·	
	File Fo	rm 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	-	he year did the foundation (either directly or indirectly)	ŀ		
	(1) Eng	age in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borr	ow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	dısq	ualified person?			
	(3) Furr	nish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay	compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Tran	sfer any income or assets to a disqualified person (or make any of either available for		}	
	the	benefit or use of a disqualified person)?	1		
		ee to pay money or property to a government official? (Exception. Check "No" if the			
		idation agreed to make a grant to or to employ the official for a period after			
		nination of government service, if terminating within 90 days)			
b	•	inswer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
		53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	· 1b	 	├
	-	ations relying on a current notice regarding disaster assistance check here			
C		foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		}	
		t corrected before the first day of the tax year beginning in 2012?	. <u>1c</u>	<u> </u>	X
2		on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	•	g foundation defined in section 4942(j)(3) or 4942(j)(5))			
а		end of tax year 2012, did the foundation have any undistributed income (lines 6d and XIII) for tax year(s) beginning before 2012?			
		Attivities tax year (c) beginning consists as 12			
	•	list the years			1
E.		are any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) to the provisions of section 4942(a)(2) to			
		to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to listed, answer "No" and attach statement - see instructions)	. 2b		
_		ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	. 20	+	-
	_				
3 -		foundation hold more than a 2% direct or indirect interest in any business enterprise			į
30		me during the year?			
,		" did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or			
1	•	fied persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	•	issioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
		-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		1	
		on had excess business holdings in 2012)	. 3b		x
4=		foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		1	Х
		foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	•	1	
-		ble purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	. 4b	1	х
			Form 9	90-PF	(2012)

MICHAEL T. RIORDAN FAMILY FOUNDATION

JSA

Fòrm	990-PF (2012) MICHAEL T. RIC				0-6000348	Page 6
Par	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	i red (continued)		
5 a	During the year did the foundation pay or incur any amou	nt to			.	
	(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	4945(e))?	. Yes X	No	
	(2) Influence the outcome of any specific public ele	ction (see section 4	955), or to carry o	n,	_	
	directly or indirectly, any voter registration drive?			Yes X	No	
	(3) Provide a grant to an individual for travel, study, or other				No	
	(4) Provide a grant to an organization other than a				' l l	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s				l _{No}	
	(5) Provide for any purpose other than religious, ch			. — —	'	
	purposes, or for the prevention of cruelty to children of			1 1 1	ING	
	If any answer is "Yes" to 5a(1)-(5), did any of the				4 10	
D					1 1	
	Regulations section 53 4945 or in a current notice regard	-			5b	
	Organizations relying on a current notice regarding disast					
C	If the answer is "Yes" to question 5a(4), does the				, l i	
	because it maintained expenditure responsibility for the gi	rant?		Yes	No	İ
	If "Yes," attach the statement required by Regulations section.	tion 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fund	ds, directly or indire	ctly, to pay premiun		, 1 1	İ
	on a personal benefit contract?			. Yes X	No	
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a p	personal benefit contra	ct?	6b	X
	If "Yes" to 6b, file Form 8870				.	
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction? .	. Yes X	No	
	If "Yes," did the foundation receive any proceeds or have					
Par	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers	Highly Paid En	nployees,	
1	and Contractors List all officers, directors, trustees, foundation in	nanagere and their	compensation (see	inetructions)		
				; iiisti uctions).		
		(b) Title, and average	(c) Compensation	(d) Contributions to		account
	(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plan and deferred compensar	s (e) Expense	account, wances
		hours per week	(If not paid,	employee benefit plan	s (e) Expense	account, wances
ATC	(a) Name and address	hours per week	(If not paid,	employee benefit plan	s (e) Expense	account, wances
ATC		hours per week	(If not paid,	employee benefit plan	s (e) Expense	wances
ATC		hours per week	(If not paid,	employee benefit plan	s (e) Expense	wances
ATC		hours per week	(If not paid,	employee benefit plan	s (e) Expense	wances
ATC		hours per week	(If not paid,	employee benefit plan	s (e) Expense	wances
ATC		hours per week	(If not paid,	employee benefit plan	s (e) Expense	wances
ATC		hours per week	(If not paid,	employee benefit plan	s (e) Expense	wances
	PH 6	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plan and deferred compensa	s other allo	C
ATC	Compensation of five highest-paid employees	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plan and deferred compensa	s other allo	C
	PH 6	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plan and deferred compensa e 1 - see instru (d) Contributions to	other allow	ne, enter
	Compensation of five highest-paid employees	(other than those by Title, and average hours per week	(If not paid, enter -0-)	e mployee benefit plan and deferred compensa e 1 - see instri (d) Contributions to employee benefit	uctions). If no	ne, enter
	Compensation of five highest-paid employees "NONE."	hours per week devoted to position (other than those)	enter-0-)	e 1 - see instru (d) Contributions to employee benefit	uctions). If no	ne, enter
	Compensation of five highest-paid employees "NONE.") Name and address of each employee paid more than \$50,000	(other than those by Title, and average hours per week	enter-0-)	e mployee benefit plan and deferred compensa e 1 - see instri (d) Contributions to employee benefit	uctions). If no	ne, enter
	Compensation of five highest-paid employees "NONE."	(other than those by Title, and average hours per week	enter-0-)	e mployee benefit plan and deferred compensar	uctions). If no	ne, enter
	Compensation of five highest-paid employees "NONE.") Name and address of each employee paid more than \$50,000	(other than those by Title, and average hours per week	enter-0-)	e mployee benefit plan and deferred compensar	uctions). If no	ne, enter
	Compensation of five highest-paid employees "NONE.") Name and address of each employee paid more than \$50,000	(other than those by Title, and average hours per week	enter-0-)	e mployee benefit plan and deferred compensar	uctions). If no	ne, enter
	Compensation of five highest-paid employees "NONE.") Name and address of each employee paid more than \$50,000	(other than those by Title, and average hours per week	enter-0-)	e mployee benefit plan and deferred compensar	uctions). If no	ne, enter
	Compensation of five highest-paid employees "NONE.") Name and address of each employee paid more than \$50,000	(other than those by Title, and average hours per week	enter-0-)	e mployee benefit plan and deferred compensar	uctions). If no	ne, enter
	Compensation of five highest-paid employees "NONE.") Name and address of each employee paid more than \$50,000	(other than those by Title, and average hours per week	enter-0-)	e mployee benefit plan and deferred compensar	uctions). If no	ne, enter
	Compensation of five highest-paid employees "NONE.") Name and address of each employee paid more than \$50,000	(other than those by Title, and average hours per week	enter-0-)	e mployee benefit plan and deferred compensar	uctions). If no	ne, enter

Form 990-PF (2012) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (b) Type of service (a) Name and address of each person paid more than \$50,000 (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 beneficianes served, conferences convened, research papers produced, etc. Expenses 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 All other program-related investments. See instructions 3 NONE

Form 990-PF (2012)

Total. Add lines 1 through 3...........

Pa	Minimum Investment Return (All domestic foundations must complete this part Forei see instructions.)	gn foundat	ions,
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	9,168,521.
b	Average of monthly cash balances	1b	354,152.
С	Fair market value of all other assets (see instructions)	1c	
d		1d	9,522,673.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	9,522,673.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
		4	142,840.
5	instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	9,379,833.
6	Minimum investment return. Enter 5% of line 5	6	468,992.
Pa	Int XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	<u>-</u>	· · · · · · · · · · · · · · · · · · ·
	foundations and certain foreign organizations check here and do not complete this	part)	
1	Minimum investment return from Part X, line 6	1	468,992.
	Tax on investment income for 2012 from Part VI, line 5 2a 12,255.		
	Income tax for 2012 (This does not include the tax from Part VI) 2b	1	
	• • • • • • • • • • • • • • • • • • • •	2c	12,255.
3	Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1	3	456,737.
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	456,737.
6		6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	456,737.
_		1 - 1	
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	453,414.
b		1b	
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	453,414.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		<u> </u>
-	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	453,414.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years		

Forn	n 990-PF (2012)				Page 9
Pa	rt XIII Undistributed Income (see instru	uctions)			
1	Distributable amount for 2012 from Part XI,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
•	line 7				456,737.
2	Undistributed income, if any, as of the end of 2012			-	<u> </u>
	Enter amount for 2011 only			443,635.	
	Total for prior years 20 10 20 09 20 08				
3	Excess distributions carryover, if any, to 2012	-		-	•
а	From 2007				
	From 2008				
С	From 2009				
d	From 2010				
е	From 2011				
	Total of lines 3a through e				
4	Qualifying distributions for 2012 from Part XII,				
	line 4 ▶ \$ 453,414.				
а	Applied to 2011, but not more than line 2a			443,635.	
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
А	Applied to 2012 distributable amount				9,779.
	Remaining amount distributed out of corpus				·
5	Excess distributions carryover applied to 2012				
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				
	line 4b from line 2b 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				446,958.
-	Amounts treated as distributions out of corpus				440,000.
7	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2013.			"	
•	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
	Excess from 2008				
b	Excess from 2009				
С	Excess from 2010				
	Excess from 2011				
<u>e</u>	Excess from 2012		<u> </u>		

Pa	rt XIV Private Oper	rating Foundations	(see instructions and	d Part VII-A, questioi	า 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or o	letermination letter tha	t it is a private opera	ating	
	foundation, and the rulin	g is effective for 2012, e	nter the date of the ruling		•	
b	Check box to indicate wh				4942((3) or 4942(J)(5)
٥.	F-4 0 1 1 0 1	Tax year		Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	I or the minimum investment					<u> </u>
	return from Part X for each year listed					
_						
D	85% of line 2a					
С	• •					
d	XII, line 4 for each year listed . Amounts included in line 2c not	-				-
•	used directly for active conduct	•				
_	of exempt activities				 	_
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line			ļ		
3	2d from line 2c Complete 3a, b, or c for the		= = .			
•	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
Đ	"Endowment" alternative test- enter 2/3 of minimum invest-			}		
	ment return shown in Part X,					
	line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends, rents,	1				
	payments on secunties loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization					
	(4) Gross investment income	1.5 1.7 (6	1 4 41 4		<u> </u>	<u> </u>
Pa		ary information (C during the year - se		only if the found	ation had \$5,000	or more in assets
1	Information Regardin					
' a	List any managers of	•		e than 2% of the tota	L contributions receiv	ed by the foundation
u	before the close of any					
	MICHAEL T.	מאַממאָמ	·			
- <u>b</u>	List any managers of		own 10% or more of	f the stock of a corpo	oration (or an equally	large portion of the
_	ownership of a partne					, large pertion of the
				· ·		
	NONE					
	Information Regardin	g Contribution, Gran	, Gift, Loan, Scholarsi	nip, etc., Programs:		
	Check here ► X if	=			table organizations s	and does not accept
	unsolicited requests f	or funds if the found	ation makes difts ara	ents etc (see instruct	ions) to individuals o	r organizations under
	other conditions, com			(555	iono, to marriagaio o	. organizationo ando:
a	The name, address, a			on to whom applications	s should be addressed	
	,	•	, , , , , , , , , , , , , , , , , , , ,		• • • • • • • • • • • • • • • • • • • •	
р	The form in which app	olications should be su	bmitted and informati	on and materials they	should include	
	A	·				
С	Any submission deadl	lines:				
d	Any restrictions or I	imitations on awards	, such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other
	factors:		- -			

Page 11

	990-PF (2012)	n (continued)			Page 11
3	Supplementary Informatio	n (continued)		internal December 1	
	Grants and Contributions Paid De Recipient Name and address (home or business)	If recipient is an individual.	Foundation	uture Payment	
	Name and address (home as business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	Name and address (nome or business)	or substantial contributor	recipient	35.1.1.1.2.1.1.1.1	
а	Paid during the year				
ΑТ	PCH 7				
•••]		
			1		
			i I		
			1		
			1		
			i		
			İ		
			1		
		L.			
		 		▶ 3a	450,105.
D	Approved for future payment				
			ŀ		
	Total		1	.	
	Total	<u> </u>		▶ 3b	

Page **12**

	amounts unless otherwise indicated	Unreia	ated business income	Excluded by	section 512, 513, or 514	(e)
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a	Sol vice revenue					(OCC INSERCCIONS)
f						
g Fees	and contracts from government agencies					
	ship dues and assessments					-
	n savings and temporary cash investments			14	17.	
Dividend	s and interest from securities			14	255,860.	
	al income or (loss) from real estate					
	financed property				_	
	lebt-financed property					
	I income or (loss) from personal property					
Other in	vestment income			18	-750.	
	oss) from sales of assets other than inventory			18	410,610.	
Net inco	me or (loss) from special events					
	ofit or (loss) from sales of inventory					
Other re	venue a					
ь						
	· · · · · · · · · · · · · · · · · · ·				-	
d						
e					CCE 727	
	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)				665,737.	665,73
	neet in line 13 instructions to verify calc					
	B Relationship of Activities				-	
ne No. ▼	B Relationship of Activities Explain below how each activit accomplishment of the foundation	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•
ne No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•
ne No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•
ne No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•
e No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	
e No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•
e No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•
e No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•
e No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•
e No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	
e No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•
e No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contrib	•

Part >	(VII	Information Re Exempt Organ	_	ansfers To and	Transacti	ons ar	nd Relation	nships W	ith Non	chari	table	•
ın	section ganiza	organization direct on 501(c) of the Co ations?	ly or indirectly de (other than	engage in any of the section 501(c)(3) of	organizations	s) or in :	section 527,				Yes	No
		•	•	a noncharitable ex								v
										1a(1)		X
•	•	er assets ansactions			• • • • • •				• • • • •	1a(2)	_	
			ncharitable exe	mpt organization						1b(1)		х
				able exempt organiza						1b(2)		X
	-			assets						1b(3)		X
										1b(4)		<u>X</u>
										1b(5)		<u>X</u>
				hip or fundraising so						1b(6)	<u> </u>	X
				sts, other assets, or es," complete the f						1c	fair m	
				ices given by the re								
				gement, show in co								
(a) Line		(b) Amount involved		noncharitable exempt org			scription of tran					
			N/A			N/A						
												
-											-	
							·					
				-								
	+		-									
	\dashv											
de	escrib		of the Code (d	ffiliated with, or rel other than section 50						Y	es X	No No
		(a) Name of organizatio		(b) Type of	organization			(c) Descripti	on of relation	ship		
N/A				N/A			N/A					
									 			
						+						
	Under	penalties of penury I declar	are that I have exam	Inned this return, including	accompanying so	hedules an	d statements, and	to the best o	f my knowled	oe and	belief. it	is true.
Sign Here	correct	and complete Declaration	preparer (offer than	taxpayer) is based on all infor	2013	preparer has	s any knowledge		May the IR	S discus	ss this	retum
	Sign	ature of officer or trustee		Date/ /		Title			(see instruction	ns)? <u>X</u>	Yes	No.
	Ь	Print/Type preparer's	name	Preparer's signat	ture		Date	Che	eck If	PTIN		
Paid		ANDREW BASNEY		ANDREW BAS				/2013 self	~~ □ ''	P000	7119	90
Prepa	ırer		PEL FORMAN		w Basnev	Pnnaa			→ 36-2			-
Use C	nly	Firm's address > 500 NORTH MICHIGAN AVE, SUITE 17					····			-		
		CF	HICAGO, II			60611 Phone no 312-642-000				006		

SCHEDULE D (Form 1041)

Capital Gains and Losses

OMB No 1545-0092

2012

Department of the Treasury Internal Revenue Service

► Attach to Form 1041, Form 5227, or Form 990-T.

► Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

C/O MICHAEL T. RIORDAN, TRUSTEE 30-60						0348		
	: Form 5227 filers need to complete only P			_				
Par		· · ·	Held One Ye	ar or Less			(f) Gain or (loss) for	
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other (see instruction		the entire year	
1a		1 , , , , , ,	. , ,,,				Subtract (e) from (d)	
		-	-					
						l l	7 000	
b	Enter the short-term gain or (loss), if any,	from Schedule D	-1, line 1b	· · · · · · · · · · · · · · · ·		1b	7,032.	
2	Short-term capital gain or (loss) from For	ms 4684, 6252.	6781, and 882	4		2		
_			o. o., a					
3	Net short-term gain or (loss) from partner	rships, S corpora	tions, and other	estates or trusts .	<i>.</i>	3		
4	Short-term capital loss carryover Enter	•		,				
_	Carryover Worksheet					4	()	
5						5	-7,032.	
Par	column (3) on the back	osses - Assets	Held More T	han One Year	·····	<u> </u>	7,032.	
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired	(c) Date sold	(d) Sales price	(e) Cost or other		(f) Gain or (loss) for the entire year	
	(Example 100 shares 7% preferred of "Z" Co)	(mo , day, yr)	(mo , day, yr)	(u) Gales price	(see instructio	ns)	Subtract (e) from (d)	
6a								
				-				
b	Enter the long-term gain or (loss), if any,	from Schedule D-	1, line 6b			6b	319,501.	
_								
7	Long-term capital gain or (loss) from For	ms 2439, 4684, (6252, 6781, an	id 8824		7		
8	Net long-term gain or (loss) from partners	ships S corporat	ions and other	estates or trusts		8		
	The long term gam or (1000) from parallely	opo, o oo.po.a.	iono, una outor			۳		
9	Capital gain distributions					9	98,141.	
10	Gain from Form 4797, Part I					10		
11	Long-term capital loss carryover Enter	the amount, if	any, from lin	e 14 of the 2011	Capital Loss	ا مر ا	,	
12	Carryover Worksheet	lines 6a through				11	<u>, </u>	
-	column (3) on the back	•		**	•	12	417,642.	
For F	aperwork Reduction Act Notice, see the Insti					_	e D (Form 1041) 2012	

Commons of Dordo Land II		(4) Daniel	(2) F-4-4-1:	Page
Summary of Parts I and II Caution: Read the instructions before completing this parts.	art	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
· · · · · · · · · · · · · · · · · · ·	13	(See man)	Of trusts	-7,032
Net long-term gain or (loss):	13			1,7032
	14a			417,642
b Unrecaptured section 1250 gain (see line 18 of the wrksht)			<u> </u>	
c 28% rate gain				
Total net gain or (loss). Combine lines 13 and 14a				410,610
te: If line 15 column (3) is a net gain, enter the gain on Form 1041, line 4 (c	r Fon	m 990-T, Part I, line	4a) If lines 14a and	1 15, column (2), are i
ns, go to Part V, and do not complete Part IV If line 15, column (3), is a net essary	loss,	complete Part IV a	and the Capital Loss	Carryover Worksheet,
art IV Capital Loss Limitation				
Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Pa	rt I, lin	ne 4c, if a trust), the s	smaller of	
a The loss on line 15, column (3) or b \$3,000 te: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pa				
te: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pa s Carryover Worksheet in the instructions to figure your capital loss carryover	age 1	, line 22 (or Form 9	90-T, line 34), is a k	oss, complete the Cap
Tax Computation Using Maximum Capital Gains Rates				
rm 1041 filers. Complete this part only if both lines 14a and 15 in colui		2) are gains, or an	amount is entered	in Part I or Part II a
re is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more				
ution: Skip this part and complete the Schedule D Tax Worksheet in the in-				
Either line 14b, col (2) or line 14c, col (2) is more than zero, or				
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
r <mark>m 990-T trusts.</mark> Complete this part only if both lines 14a and 15 are Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part a	e gair	ns, or qualified div	idends are include	ed in income in Pai
rorm 990-1, and Form 990-1, line 34, is more than zero. Skip this part a ither line 14b, col. (2) or line 14c, col. (2) is more than zero.	na cc	ompiete the Sched	idle D Tax Works	ieet iii the instructio
	 	47		 -
Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	. 17		
Enter the smaller of line 14a or 15 in column (2)				
but not less than zero		_		
Enter the estate's or trust's qualified dividends				
from Form 1041, line 2b(2) (or enter the qualified				
dividends included in income in Part I of Form 990-T) . 19 Add lines 18 and 19		 	i :	
If the estate or trust is filing Form 4952, enter the				
amount from line 4g, otherwise, enter -0		_ 22		
Subtract line 21 from line 20. If zero or less, enter -0 Subtract line 22 from line 17 If zero or less, enter -0-		23		
Subtract line 22 from line 17 If zero or less, enter -0-	• • •	23		
Enter the smaller of the amount on line 17 or \$2,400		24		
Is the amount on line 23 equal to or more than the amount on line 24?		· ·	 	
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box.				
No. Enter the amount from line 23		25		
Subtract line 25 from line 24		26		
Are the amounts on lines 22 and 26 the same?				
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	22	27		
Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
Subtract line 28 from line 27		29		
Multiply line 29 by 15% (15)			30	
Figure the tax on the amount on line 23 Use the 2012 Tax Rate	Sch	edule for Estates	and Trusts	
(see the Schedule Ginstructions in the instructions for Form 1041)			31	
Add lines 30 and 31			32	
Add lines 30 and 31 Figure the tax on the amount on line 17 Use the 2012 Tax Rate (see the Schedule Ginstructions in the instructions for Form 1041)	Sche	edule for Estates	and Trusts	

JSA 2F1220 2 000

G, line 1a (or Form 990-T, line 36) .

Schedule D (Form 1041) 2012

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

▶ Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

Name of estate or trust MICUARI T

Employer identification number 30-6000348

MICHAEL T. RIORDAN FAMILY F	א א די דע מאנוטי			30-6000348	n number
Part I Short-Term Capital Gains an		ts Held One Year		30 0000340	
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1a STATE STREET # AR0234 -	(, ==), , ,				
SEE ATTACHED	VARIOUS	VARIOUS	39,471.	25,793.	13,678.
0.334 SHS - LIBERTY					
VENTURES RTS 12/31/49	08/10/2012	09/24/2012	4.		4.
STATE STREET # AR0235 -					
SEE ATTACHED	VARIOUS	11/13/2012	106,926.	102,835.	4,091.
STATE STREET # AR0235 -					
SEE ATTACHED	VARIOUS	VARIOUS	30,397.	28,530.	1,867.
STATE STREET # AR0237 -					
SEE ATTACHED	VARIOUS	VARIOUS	65,260.	67,896.	-2,632.
STATE STREET # AR0238 -					
SEE ATTACHED	VARIOUS	VARIOUS	40,699.	43,153.	-1,809.
STATE STREET # AR0241 -					
SEE ATTACHED	VARIOUS	VARIOUS	82,649.	84,206.	-1,557.
				00.610	00.674
PUT ON SPX 12/22/12 @ 1100	VARIOUS	09/13/2012	1,939.	22,613.	-20,674.
			···		
			 	-	
				-	
	<u> </u>	<u> </u>		<u> </u>	

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2012

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b

-7,032.

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (o
STATE STREET # AR0234 -					
SEE ATTACHED	VARIOUS	VARIOUS	69,428.	78,149.	-8,72
STATE STREET # AR0234 -	1				25.40
SEE ATTACHED	VARIOUS	VARIOUS	108,426.	71,232.	37,19
STATE STREET # AR0235 -			1 004 407	0.60.004	155 14
SEE ATTACHED	VARIOUS	VARIOUS	1,024,437.	869,294.	155,14
STATE STREET # AR0237 -	III D TOUG	LIADTOUG	24 067	10 513	4 55
SEE ATTACHED	VARIOUS	VARIOUS	24,067.	19,513.	4,55
STATE STREET # AR0237 -	MADIOUC	LAND TOLIC	011 415	122 410	70 00
SEE ATTACHED STATE STREET # AR0238 -	VARIOUS	VARIOUS	211,415.	132,418.	78,99
	VARIOUS	VARIOUS	14 000	14 015	7
SEE ATTACHED STATE STREET # AR0238 -	VARIOUS	VARIOUS	14,990.	14,915.	
SEE ATTACHED	VARIOUS	MADIONE	75,080.	60,398.	14,68
STATE STREET # ARO241 -	VARIOUS	VARIOUS	73,000.	00,390.	14,00
SEE ATTACHED	VARIOUS	VARIOUS	43,296.	54,279.	-10,98
STATE STREET # ARO241 -	VAKIOOS	VAKIOUS	43,290.	34,279.	-10,90
SEE ATTACHED	VARIOUS	VARIOUS	271,371.	191,803.	79,56
SEE ATTACHED	VARIOUS	VARIOUS	211,311.	171,003.	15,30
PUT ON SPX 12/22/12 @ 1100	VARIOUS	09/13/2012	2,909.	33,919.	-31,01
	 		 		
			 		
			_		
-					
	-				

MICHAEL T. RIORDAN FAMILY FOUNDATION 30-6000348
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Depreciation allowed/ allowable	Cost or					ını	acquired	
UIIOTTUDIO	other basis	FMV as of 12/31/69	Adj bas as of 12/31/6	F۱	cess of AV over Ij basis		Gain or (loss)	
	TOTAL CAPITA	L GAIN DIS	TRIBUTIO	ons			98,141.	
				TTACHED)	P	VARIOUS	VARIOUS
	25,793.	E. SECORII	165				13,678.	
				TTACHED)	Р	VARIOUS	VARIOUS
	78,149.						-8,721.	
	1			TS 12/3	31/4	P	08/10/2012	09/24/2012
	PROPERTY TYP			TTACHE)	Р	VARIOUS	VARIOUS
	71,232.						37,194.	
	PROPERTY TYP			TTACHE)	Ρ	VARIOUS	11/13/2012
	102,835.						4,091.	
				TTACHEL)	Р	VARIOUS	VARIOUS
	28,530.						1,867.	
	PROPERTY TYP	==		TTACHE)	Ρ	VARIOUS	VARIOUS
		' # ARO237	- SEE A	TTACHE)	P		VARIOUS
				•			-2,632.	
	1			TTACHE)	Ρ	VARIOUS	VARIOUS
	PROPERTY TYP 19,513.	PE: SECURIT	IES				4,554.	
				TTACHE		P	VARIOUS	VARIOUS
	132,418.	E: SECURIT	IES				78,997.	
				TTACHE)	P	VARIOUS	VARIOUS
	43,153.	'Ŀ: SECURIT	TE2				-1,809.	
	STATE STREET	# AR0238	- SEE A	TTACHE)	Р	VARIOUS	VARIOUS
		PROPERTY TYP 25,793. STATE STREET PROPERTY TYP 78,149. 0.334 SHS - PROPERTY TYP 71,232. STATE STREET PROPERTY TYP 102,835. STATE STREET PROPERTY TYP 28,530. STATE STREET PROPERTY TYP 869,294. STATE STREET PROPERTY TYP 869,294. STATE STREET PROPERTY TYP 67,896. STATE STREET PROPERTY TYP 19,513. STATE STREET PROPERTY TYP 19,513.	PROPERTY TYPE: SECURIT 25,793. STATE STREET # AR0234 PROPERTY TYPE: SECURIT 78,149. 0.334 SHS - LIBERTY VER PROPERTY TYPE: SECURIT 71,232. STATE STREET # AR0234 PROPERTY TYPE: SECURIT 71,232. STATE STREET # AR0235 PROPERTY TYPE: SECURIT 102,835. STATE STREET # AR0235 PROPERTY TYPE: SECURIT 28,530. STATE STREET # AR0235 PROPERTY TYPE: SECURIT 869,294. STATE STREET # AR0237 PROPERTY TYPE: SECURIT 67,896. STATE STREET # AR0237 PROPERTY TYPE: SECURIT 19,513. STATE STREET # AR0237 PROPERTY TYPE: SECURIT 19,513. STATE STREET # AR0237 PROPERTY TYPE: SECURIT 132,418. STATE STREET # AR0238 PROPERTY TYPE: SECURIT 132,418.	PROPERTY TYPE: SECURITIES 25,793. 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FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

C/	<u>APITAL GAI</u>	M9 AND FO	SSES FUI	R IAX UN	INAE211		ENT INCOM	
Kınd of	Property		Desc	ription		ρī	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
14,990.		PROPERTY TYPE 14,915.	PE: SECURIT	IES			75.	
75,080.		STATE STREET 60,398.	# AR0238	- SEE ATTAC	CHED		VARIOUS 14,682.	VARIOUS
82,649.		STATE STREET PROPERTY TYPE 84,206.			CHED	Р	VARIOUS	VARIOUS
43,296.		STATE STREET PROPERTY TYPE 54,279.			CHED	Р	VARIOUS -10,981.	VARIOUS
071 071		STATE STREET			CHED	Ρ		VARIOUS
271,371.		191,803. PUT ON SPX 1	12/22/12 @ :	1100		P	79,568. VARIOUS	09/13/2012
1,939.		PROPERTY TYI					-20,674.	
		PUT ON SPX 1				Р	VARIOUS	09/13/2012
2,909.		33,919.	.2. 5200.11				-31,010.	
TOTAL GAIN(L	oss)						410,610.	

PART I - OTHER INCOME FORM 990PF, <u>DESCRIPTION</u>
US COMMODITY INDEX FUND - PTP K-1 LOSS

TOTALS

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT INCOME

-896.

-896.

-896.

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FORM 990PF, PART I - TAXES

NET INVESTMENT INCOME	3,589.	3,589.
REVENUE AND EXPENSES PER BOOKS	3,589. 11,424. 20,400.	35, 413.
		TOTALS
DESCRIPTION	FOREIGN TAXES FEDERAL EXCISE TAX FEDERAL ESTIMATES	

FORM 990PF, PART I - OTHER EXPENSES

NET INVESTMENT	INCOME 46,094. 15.	46,109.
REVENUE AND EXPENSES	<u>PER BOOKS</u> 46,094.	46,109.
		TOTALS
	FEES	
	DESCRIPTION INVESTMENT ADVISORY FEES BANK FEES	

- CORPORATE STOCK PART II FORM 990PE,

DESCRIPTION

HARRIS STATE

SANDS ADVISORY MUTUAL FUND EAGLE STREET STREET STREET STATE STATE STATE STATE

STREET STREET

TOTALS

BOOK VALUE ENDING

ENDING FMV

653,680. 490,328. 327,692. 6,178,604. 529,029.

886,778. 910,431. 428,492. 6,341,247. 581,594.

9,148,542.

8,179,333.

ATTACHMENT 4 PAGE 20

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

ADJUSTMENT FOR BOOK TO TAX DIFFERENCES

-43,065.

TOTAL

-43,065.

ATTACHMENT 6	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	0	0
	COMPENSATION	0	0
PEICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	MICHAEL T. RIORDAN 16127 FOREST OAKS DRIVE FORT MYERS, FL 33908	

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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
EMERGING HUMANITY, INC , 32 ERIK ST MERRIMACK, NH 03054	NONE	TO FURTHER PROGRAM SERVICES	20,000.
ST AGNES CHURCH 1501 CHICAGO ROAD CHICAGO HEIGHTS, IL 60411	NONE PUBLIC	TO FURTHER PROGRAM SERVICES	6, 000
ST. JAMES HOSPITAL 1423 CHICAGO ROAD CHICAGO HEIGHTS, IL 60411	NONE PUBLIC	TO FURTHER PROGRAM SERVICES	4,500
COMMONWEALTH MAGAZINE 476 RIVERSIDE DRIVE ROOM 405 NEW YORK, NY 10115	NONE PUBLIC	TO FURTHER PROGRAM SERVICES	250.
CATHOLIC CHARITIES OF CHICAGO 721 NORTH LASALLE CHICAGO, IL 60654	NONE	TO FURTHER PROGRAM SERVICES	1,500.
CATHOLIC CHARITIES, DIOCESE OF VENICE PO BOX 2116 1000 PINEBROOK ROAD VENICE, FL 34285	NONE PUBLIC	TO FURTHER PROGRAM SERVICES	1,000.

MICHAEL T. RIORDAN FAMILY FOUNDATION

FORM 390DE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.	DURING THE YEAR		ATTACHMENT 7 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DOMNTOWN GREEN LAKE RENEWAL PROJECT	NON	TO FURTHER PROGRAM SERVICES	25,000
PO BOX 302	PUBLIC		
GREEN LAKE, WI 54941			
OUR LADY OF LOURDES PARISH	S NO N	TO FURTHER PROGRAM SERVICES	3,000.
PARISH OFFICE	PUBLIC		
1307 LOURDES AVENUE			
DEPERE, WI 54115			
HOUSE OF HOPE	NONE	TO FURTHER PROGRAM SERVICES	15,000
1660 CHRISTIANA STREET	PUBLIC		
GREEN BAY, WI 54303			
FREEDOM HOUSE MINISTRIES	NONE	TO FURTHER PROGRAM SERVICES	15,000
FAMILY LIFE ADVANCEMENT CENTER	PUBLIC		
2997 ST ANTHONY DRIVE			
GREEN BAY, WI 54311			
CHILDREN'S HOSPITAL LOS ANGELES	NONE	TO FURTHER PROGRAM SERVICES	20,000
4650 SUNSET BLVD, #29	PUBLIC		
LOS ANGELES, CA 90027			
GREEN LAKE ASSOCIATION	NONE	TO FURTHER PROGRAM SERVICES	.08
510 MILL STREET	PUBLIC		
PO BOX 364			
GREEN LAKE, WI 54941			

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ATTACHMENT 7 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ST. JOHN THE EVANCILIST PARISH CATHOLIC DIOCESE OF GREEN BAY, INC 1825 RIVERSIDE DRIVE GREEN BAY, WI 54305	NONE	TO FURTHER PROGRAM SERVICES	10,000.
RIPON AREA UNITED WAY PO BOX 71 RIPON, WI 54971	NONE	TO FURTHER PROGRAM SERVICES	5,000.
BROWN COUNTY UNITED WAY PO BOX 1593 GREEN BAY, WI 54305	NONE PUBLIC	TO FURTHER PROGRAM SERVICES	10,000.
HOPE HOSPICE 9470 HEALTH PARK CIRCLE FORT MYERS, FL 33908	NONE PUBLIC	TO FURTHER PROGRAM SERVICES	5,000
ENCOMPASS/RUTH HELF FAMILY CENTER H&K PARTNERS LLC 7840 W HICKS STREET MILWAUKEE, WI 53219-1122	NONE	TO FURTHER PROGRAM SERVICES	5, 000
CHILDREN'S HOSPITAL & HEALTH SYSTEMS FOUNDATION MS 3050 PO BOX 1997 MILWAUKEE, WI 53201	NONE	TO FURTHER PROGRAM SERVICES	5,000.

ATTACHMENT 7 (CONT'D)

AMOUNT	5,000.	15,000.	5,000.	5,000	3,000	10,000
PURPOSE OF GRANT OR CONTRIBUTION	IO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE PUBLIC	NONE	NONE PUBLIC	NONE PUBLIC	NONE PUBLIC
RECIPIENT NAME AND ADDRESS	UNITY HOSPICE & PALLIATIVE CARE 2366 OAK RIDGE CIRCLE DE PERE, WI 54115	NEW COMMUNITY CLINIC 622 BODART STREET GREEN BAY, WI 54301	MARIAN CATHOLIC HIGH SCHOOL 700 ASHLAND AVENUE CHICAGO HEIGHTS, IL 60411	ST. CECILIA CHURCH 5632 SUNRISE DRIVE FORT MYERS, FL 33919	CENTER FOR CHILDHOOD SAFETY 1870 CONFRIN DR GREEN BAY, WI 54302	PATH 340 N MADISON AVENUE LOS ANGELES, CA 90004

ATTACHMENT 7 (CONT.D)

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GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR
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PART XV
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PURPOSE OF GRANT OR CONTRIBUTION AMOUNT	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES 500.	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES 10,000	TO FURTHER PROGRAM SERVICES 10,000.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT PURPOSE OF	NONE TO FURTHER PUBLIC	NONE TO FURTHER PUBLIC	NONE TO FURTHER PUBLIC	NONE TO FURTHER PUBLIC	NONE TO FURTHER PUBLIC	NONE TO FURTHER PUBLIC
RECIPIENT NAME AND ADDRESS	CATHOLIC MEDICAL MISSION BOARD 10 WEST 17TH STREET NEW YORK, NY 10011-5765	CHICAGO PUBLIC RADIO NAVY PIER 848 EAST GRAND AVENUE CHICAGO, IL 60611	DOCTORS WITHOUT BORDERS 333 SEVENTH AVE, 2ND FLOOR NEW YORK, NY 10001	WGCU PUBLIC MEDIA 10501 FGCU BLVD SOUTH FORT MYERS, FL 33965-6565	GOLDEN HOUSE PO BOX 727 GREEN BAY, WI 54305	MARION HOUSE 840 N. TAYLOR ST P.O. BOX 10782

MICHAEL T RIORDAN FAMILY FOUNDATION

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	DURING THE YEAR		ATTACHMENT 7 (CONT.D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
LIFELINE FAMILY CENTER, INC	NONE	TO FURTHER PROGRAM SERVICES	10,000
907 SE 5TH AVENUE	PUBLIC		
CAPE CORAL, FL 33990			
NAMI FL	NONE	TO FURTHER PROGRAM SERVICES	10,000.
6216 TRAIL BOULEVARD, BUILDING C	PUBLIC		
NAPLES, FL 34108			
NAMI OSHKOSH	NONE	TO FURTHER PROGRAM SERVICES	10,000.
PO BOX 3303	PUBLIC		
OSHKOSH, WI 54903			
SPECIAL OPERATIONS WARRIOR FOUNDATION	NONE	TO FURTHER PROGRAM SERVICES	10,000
PO BOX 13483	PUBLIC		
TAMPA, FL 33681			
LAKOTA LANGUAGE CONSORTIUM	NONE	TO FURTHER PROGRAM SERVICES	5,000
2620 N. WALNUT ST, STE 1280	PUBLIC		
BLOOMINGTON, IN 47404			
COMMUNITY PREGNANCY CLINICS	NONE	TO FURTHER PROGRAM SERVICES	7,500
PO BOX 7608	PUBLIC		
NAPLES, FL 34101			

MICHAEL T RIORDAN FAMILY FOUNDATION

FORM GOOPE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	IRING THE YEAR		ATTACHMENT 7 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
STORYCORPS	NONE	TO FURTHER PROGRAM SERVICES	2,000
80 GHANSON PLAVE, 2ND FLOOR	PUBLIC		
BROOKLIN, NY 1121/			
COOPER RIIS	NONE	TO FURTHER PROGRAM SERVICES	4,000.
101 HEALING FARM LANE	PUBLIC		
MILL SPRING, NC 28756			
ROMERO INSTITUTE	NONE	TO FURTHER PROGRAM SERVICES	5,000
740 FRONT ST., SUITE 265	PUBLIC		
SANTA CRUZ, CA 95060			
CWIS	NONE	TO FURTHER PROGRAM SERVICES	5,000.
PMB 214	PUBLIC		
1001 COOPER POINT RD SW #140 OLYMPIA, WA 98502			
GREEN LAKE COUNTY AREA UNITED FUND	NONE	TO FURTHER PROGRAM SERVICES	10,000.
PO BOX 203 BERLIN, WI 54923	PUBLIC		
HARRY CHAPIN FOOD BANK	NONE	TO FURTHER PROGRAM SERVICES	7,500
3760 FOWLER STREET	PUBLIC		

FORT MYERS, FL 33901

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FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 7 (CONT'D)		AMOUNT	5,000.	25.	25,000.	5,000.	10,000.	10,000
ATTACHM		PURPOSE OF GRANT OR CONTRIBUTION	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES	TO FURTHER PROGRAM SERVICES
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	NONE	NONE PUBLIC	NONE	NONE	NONE PUBLIC	NONE
		RECIPIENT NAME AND ADDRESS	CHILDREN'S HOSPITAL FOUNDATION MS 3050 PO BOX 1997 MILMAUKEE, WI 53201	USGA PO BOX 708 FAR HILLS, NJ 07931	COOPER RIIS HEALING FARM 101 HEALING FARM LANE MILL SPRING, NC 28756	ST JOHN THE BAPTIST 1211 WEST MAIN STREET PRINCETON, WI 54115	MERCY CORPS P.O. BOX 2669 RALEIGH, NC 27658	HAWKWING, INC 306 CAVAN LANE GLASTONBURY, CT 06033

MICHAEL T. RIORDAN FAMILY FOUNDATION

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DUBING THE YEAR	DURING, THE YEAR		ATTACHMENT 7 (CONT.D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ı		AND THE PROPERTY OF TAXABLE PROPERTY.	000
EDAR	NONE	10 FORTHER ENGINEER SERVICES	
1015 GAYLEY AVE, STE 357	PUBLIC		
LOS ANGELES, CA 90004			
ACTURN DO INCREMENTAL PARK	MANIP	TO FIRTHER PROGRAM SERVICES	5,000.
DAZZ FUUNDALIUN UF AMBRICA			
322 WEST 48TH STREET, 6TH FLOOR	PUBLIC		
NEW YORK, NY 10036			
NC INDIAN ECONOMIC DEVELOPMENT INITIATIVE	NONE	TO FURTHER PROGRAM SERVICES	2,000.
P.O BOX 58096	PUBLIC		
RALEIGH, NC 27658			
	!	And the second of the second o	600
OUR LADY OF LOURDES SCHOOL	NONE	TO FURTHER PROGRAM SERVICES	.,000.
1305 LOURDES AVENUE	PUBLIC		
DE PERE, WI 54115			
NOTRE DAME / OUR LADY OF LOURDES KEY CLUB	NONE	TO FURTHER PROGRAM SERVICES	3,000.
P.O BOX 5391	PUBLIC		
DE PERE, WI 54115			
CHILDREN'S HOSPITAL OF SW FLORIDA	NONE	TO FURTHER PROGRAM SERVICES	10,000
P O BOX 2218	PUBLIC		
FORT MEYERS, FL 33902			

TOTAL CONTRIBUTIONS PAID

450,105

ATTACHMENT 7 PAGE 31

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