Form **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

**2012**

Open to public inspection

**For calendar year 2012 or tax year beginning** , **and ending**

Name of foundation: SAINT LUKE'S FOUNDATION OF CLEVELAND, OH

A Employer identification number: 34-0714513

Number and street (or P O box number if mail is not delivered to street address): 4208 PROSPECT AVENUE

Room/suite:

B Telephone number: 216 431-8010

City or town, state, and ZIP code: CLEVELAND, OH 44103

C If exemption application is pending, check here ▶ [ ]

G Check all that apply: [ ] Initial return [ ] Initial return of a former public charity [ ] Final return [ ] Amended return [ ] Address change [ ] Name change

D 1 Foreign organizations, check here ▶ [ ]

2 Foreign organizations meeting the 85% test check here and attach computation ▶ [ ]

H Check type of organization: [X] Section 501(c)(3) exempt private foundation [ ] Section 4947(a)(1) nonexempt charitable trust [ ] Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ [ ]

I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶$ 173,547,118.

J Accounting method: [ ] Cash [X] Accrual [ ] Other (specify) (Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ [ ]

**Part I Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))

| | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---|---|---|---|---|---|
| Revenue | 1 Contributions, gifts, grants, etc, received | 135,995. | | | |
| | 2 Check ▶ [ ] if the foundation is not required to attach Sch B | | | | |
| | 3 Interest on savings and temporary cash investments | | | | |
| | 4 Dividends and interest from securities | 2,074,157. | 1,999,134. | | |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) | | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | 18,909,534. | | | |
| | b Gross sales price for all assets on line 6a 18,909,534. | | | | |
| | 7 Capital gain net income (from Part IV line 2) | | 18,909,534. | | |
| | 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 | 138. | 0. | 0. | STATEMENT 6 |
| | 12 **Total.** Add lines 1 through 11 | 21,119,824. | 20,908,668. | 0. | |
| Operating and Administrative Expenses | 13 Compensation of officers, directors trustees, etc | 418,658. | 0. | 0. | 402,679. |
| | 14 Other employee salaries and wages | 469,378. | 0. | 0. | 451,464. |
| | 15 Pension plans, employee benefits | 176,368. | 0. | 0. | 176,368. |
| | 16a Legal fees STMT 1 | 12,460. | 0. | 0. | 12,460. |
| | b Accounting fees STMT 2 | 84,496. | 0. | 0. | 84,496. |
| | c Other professional fees STMT 3 | 304,735. | 300,088. | 0. | 4,647. |
| | 17 Interest | | | | |
| | 18 Taxes STMT 4 | 279,924. | 0. | 0. | 0. |
| | 19 Depreciation and depletion | 33,055. | 0. | 0. | |
| | 20 Occupancy | 185,212. | 0. | 0. | 185,212. |
| | 21 Travel, conferences, and meetings | 19,525. | 0. | 0. | 19,525. |
| | 22 Printing and publications | 13,072. | 0. | 0. | 13,072. |
| | 23 Other expenses STMT 5 | 463,746. | 0. | 0. | 511,250. |
| | 24 **Total operating and administrative expenses.** Add lines 13 through 23 | 2,460,629. | 300,088. | 0. | 1,861,173. |
| | 25 Contributions, gifts, grants paid | 10,402,651. | | | 10,184,915. |
| | 26 **Total expenses and disbursements.** Add lines 24 and 25 | 12,863,280. | 300,088. | 0. | 12,046,088. |
| | 27 Subtract line 26 from line 12: | | | | |
| | a Excess of revenue over expenses and disbursements | 8,256,544. | | | |
| | b **Net investment income** (if negative, enter -0-) | | 20,608,580. | | |
| | c **Adjusted net income** (if negative, enter -0-) | | | 0. | |

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223501 12-05-12 LHA **For Paperwork Reduction Act Notice, see instructions.** Form **990-PF** (2012)

**Part II** **Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only

| | | Beginning of year | End of year | |
|---|---|---|---|---|
| | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 Cash - non-interest-bearing | 4,274,449. | 4,378,459. | 4,378,459. |
| | 2 Savings and temporary cash investments | 5,388,017. | 824,502. | 824,502. |
| | 3 Accounts receivable ▶ | | | |
| | Less: allowance for doubtful accounts ▶ | | | |
| | 4 Pledges receivable ▶ | | | |
| | Less: allowance for doubtful accounts ▶ | | | |
| | 5 Grants receivable | | | |
| | 6 Receivables due from officers, directors, trustees, and other disqualified persons | | | |
| | 7 Other notes and loans receivable ▶ | | | |
| | Less: allowance for doubtful accounts ▶ | | | |
| | 8 Inventories for sale or use | | | |
| | 9 Prepaid expenses and deferred charges | 38,351. | 7,609. | 7,609. |
| | 10a Investments - U.S. and state government obligations | | | |
| | b Investments - corporate stock STMT 9 | 109,162. | 123,183. | 123,183. |
| | c Investments - corporate bonds | | | |
| | 11 Investments - land, buildings, and equipment basis ▶ | | | |
| | Less accumulated depreciation ▶ | | | |
| | 12 Investments - mortgage loans | | | |
| | 13 Investments - other STMT 10 | 160,270,130. | 168,062,131. | 168,062,131. |
| | 14 Land, buildings, and equipment: basis ▶ 445,805. | | | |
| | Less accumulated depreciation STMT 8 ▶ 347,616. | 75,622. | 98,189. | 98,189. |
| | 15 Other assets (describe ▶ STATEMENT 11) | 461,210. | 53,045. | 53,045. |
| | 16 **Total assets** (to be completed by all filers) | 170,616,941. | 173,547,118. | 173,547,118. |
| Liabilities | 17 Accounts payable and accrued expenses | 360,033. | 423,067. | |
| | 18 Grants payable | 761. | | |
| | 19 Deferred revenue | | | |
| | 20 Loans from officers, directors, trustees, and other disqualified persons | | | |
| | 21 Mortgages and other notes payable | | | |
| | 22 Other liabilities (describe ▶ STATEMENT 12) | 20,000. | 25,000. | |
| | 23 **Total liabilities** (add lines 17 through 22) | 380,794. | 448,067. | |
| Net Assets or Fund Balances | **Foundations that follow SFAS 117, check here** ▶ [X] **and complete lines 24 through 26 and lines 30 and 31.** | | | |
| | 24 Unrestricted | 159,853,187. | 161,820,740. | |
| | 25 Temporarily restricted | 5,881,802. | 6,554,239. | |
| | 26 Permanently restricted | 4,501,158. | 4,724,072. | |
| | **Foundations that do not follow SFAS 117, check here** ▶ [ ] **and complete lines 27 through 31.** | | | |
| | 27 Capital stock, trust principal, or current funds | | | |
| | 28 Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| | 29 Retained earnings, accumulated income, endowment, or other funds | | | |
| | 30 **Total net assets or fund balances** | 170,236,147. | 173,099,051. | |
| | 31 **Total liabilities and net assets/fund balances** | 170,616,941. | 173,547,118. | |

**Part III** **Analysis of Changes in Net Assets or Fund Balances**

| | | |
|---|---|---|
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 1 | 170,236,147. |
| 2 Enter amount from Part I, line 27a | 2 | 8,256,544. |
| 3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 7 | 3 | 222,914. |
| 4 Add lines 1, 2, and 3 | 4 | 178,715,605. |
| 5 Decreases not included in line 2 (itemize) ▶ UNREALIZED LOSS ON INVESTMENTS | 5 | 5,616,554. |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 173,099,051. |

## Part IV Capital Gains and Losses for Tax on Investment Income

| | (a) List and describe the kind(s) of property sold (e g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co ) | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo , day, yr ) | (d) Date sold (mo , day, yr ) |
|---|---|---|---|---|
| 1a | | | | |
| b | SEE ATTACHED STATEMENTS | | | |
| c | | | | |
| d | | | | |
| e | | | | |

| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) |
|---|---|---|---|---|
| a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | 18,909,534. | | | 18,909,534. |

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

| | (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 | (l) Gains (Col. (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) |
|---|---|---|---|---|
| a | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | 18,909,534. |

| | | | |
|---|---|---|---|
| 2 Capital gain net income or (net capital loss) | If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 | 2 | 18,909,534. |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c).<br>If (loss), enter -0- in Part I, line 8 | | 3 | N/A |

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

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

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

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

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

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

| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio (col. (b) divided by col (c)) |
|---|---|---|---|
| 2011 | 11,361,267. | 182,423,908. | .062279 |
| 2010 | 9,595,571. | 173,325,447. | .055362 |
| 2009 | 9,453,877. | 156,253,391. | .060503 |
| 2008 | 11,100,177. | 194,801,575. | .056982 |
| 2007 | 11,122,838. | 223,558,783. | .049754 |

| | | |
|---|---|---|
| 2 **Total** of line 1, column (d) | 2 | .284880 |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | 3 | .056976 |
| 4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5 | 4 | 168,829,567. |
| 5 Multiply line 4 by line 3 | 5 | 9,619,233. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | 6 | 206,086. |
| 7 Add lines 5 and 6 | 7 | 9,825,319. |
| 8 Enter qualifying distributions from Part XII, line 4 | 8 | 12,046,088. |

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

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

| | | | | |
|---|---|---|---|---|
| 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) | | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☒ and enter 1% of Part I, line 27b | | | 1 | 206,086. |
| 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-) | | | 2 | 0. |
| 3 Add lines 1 and 2 | | | 3 | 206,086. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | 4 | 0. |
| 5 **Tax based on investment income** Subtract line 4 from line 3. If zero or less, enter -0- | | | 5 | 206,086. |
| 6 Credits/Payments: | | | | |
| a 2012 estimated tax payments and 2011 overpayment credited to 2012 | 6a | 238,226. | | |
| b Exempt foreign organizations - tax withheld at source | 6b | | | |
| c Tax paid with application for extension of time to file (Form 8868) | 6c | | | |
| d Backup withholding erroneously withheld | 6d | | | |
| 7 Total credits and payments. Add lines 6a through 6d | | | 7 | 238,226. |
| 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** ▶ | | | 9 | |
| 10 **Overpayment** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶ | | | 10 | 32,140. |
| 11 Enter the amount of line 10 to be: **Credited to 2013 estimated tax** ▶ | | 32,140. **Refunded** ▶ | 11 | 0. |

**Part VII-A Statements Regarding Activities**

| | | Yes | No |
|---|---|---|---|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | | X |
| b Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | 1b | | X |
| *If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities* | | | |
| 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 ▶ $ 0. | | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0. | | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | X |
| *If "Yes," attach a detailed description of the activities.* | | | |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes* | 3 | | X |
| 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 | X | |
| 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 • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 6 | X | |
| 7 Did the foundation have at least $5,000 in assets at any time during the year? | 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) ▶ OH | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G? If "No," attach explanation* | 8b | X | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? *If "Yes," complete Part XIV* | 9 | | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | 10 | | X |

**Part VII-A Statements Regarding Activities** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |

Website address ▶ WWW.SAINTLUKESFOUNDATION.ORG

14 The books are in care of ▶ DANIEL HARRINGTON Telephone no. ▶ (216)431-8010

Located at ▶ 4208 PROSPECT AVENUE, CLEVELAND, OH ZIP+4 ▶ 44103

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** - Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A

| | | | Yes | No |
|---|---|---|---|---|
| 16 | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign country ▶ | | | |

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

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

| | | | Yes | No |
|---|---|---|---|---|
| 1a | During the year did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No | | | |
| | (6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | X |
| | Organizations relying on a current notice regarding disaster assistance check here ▶ ☐ | | | |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| a | At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? ☐ Yes ☒ No | | | |
| | If "Yes," list the years ▶ ____, ____, ____, ____ | | | |
| b | Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions.) N/A | 2b | | |
| c | If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here. ▶ ____, ____, ____, ____ | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No | | | |
| b | If "Yes," did it have excess business holdings in 2012 as a result of (**1**) any purchase by the foundation or disqualified persons after May 26, 1969; (**2**) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (**3**) the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.)* N/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012? | 4b | | X |

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

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? N/A **5b**

Organizations relying on a current notice regarding disaster assistance check here ▶ ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A ☐ Yes ☐ No

*If "Yes," attach the statement required by Regulations section 53 4945-5(d)*

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** X (No)

*If "Yes" to 6b, file Form 8870*

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation.**

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|---|---|---|
| SEE STATEMENT 13 | | 418,658. | 63,469. | 0. |

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

| (a) Name and address of each employee paid more than $50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|---|---|---|
| LATIDA SMITH - 4208 PROSPECT AVENUE, CLEVELAND, OH 44103 | VP PROGRAMS-OUTCOMES & LEARNING 40.00 | 136,264. | 13,444. | 0. |
| SANDRA CHAPPELLE - 4208 PROSPECT AVENUE, CLEVELAND, OH 44103 | SR PROG OFF-STRONG COMMUNITIES 40.00 | 124,780. | 13,217. | 0. |
| KIMBERLY ST JOHN STEVENSON - 4208 PROSPECT AVENUE, CLEVELAND, OH 44103 | COMMUNICATIONS OFFICER 40.00 | 83,227. | 15,401. | 0. |
| BRIDGET DELEON - 4208 PROSPECT AVENUE, CLEVELAND, OH 44103 | GRANTS MANAGER 40.00 | 76,770. | 17,895. | 0. |
| HEATHER TOROK - 4208 PROSPECT AVENUE, CLEVELAND, OH 44103 | SR PROG OFF-HEALTHY PEOPLE 40.00 | 70,385. | 10,293. | 0. |

**Total** number of other employees paid over $50,000 ▶ 0

**Part VIII** **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

**3 Five highest-paid independent contractors for professional services. If none, enter "NONE."**

| (a) Name and address of each person paid more than $50,000 | (b) Type of service | (c) Compensation |
|---|---|---|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| **Total** number of others receiving over $50,000 for professional services ▶ | | 0 |

**Part IX-A** **Summary of Direct Charitable Activities**

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

**Part IX-B** **Summary of Program-Related Investments**

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

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

| | | | |
|---|---|---|---|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes: | | |
| a | Average monthly fair market value of securities | 1a | 166,932,773. |
| b | Average of monthly cash balances | 1b | 4,308,960. |
| c | Fair market value of all other assets | 1c | 158,843. |
| d | **Total** (add lines 1a, b, and c) | 1d | 171,400,576. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e: 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 171,400,576. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 2,571,009. |
| 5 | **Net value of noncharitable-use assets** Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 168,829,567. |
| 6 | **Minimum investment return** Enter 5% of line 5 | 6 | 8,441,478. |

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

| | | | |
|---|---|---|---|
| 1 | Minimum investment return from Part X, line 6 | 1 | 8,441,478. |
| 2a | Tax on investment income for 2012 from Part VI, line 5 — 2a: 206,086. | | |
| b | Income tax for 2012 (This does not include the tax from Part VI.) — 2b: | | |
| c | Add lines 2a and 2b | 2c | 206,086. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 8,235,392. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 138. |
| 5 | Add lines 3 and 4 | 5 | 8,235,530. |
| 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 | 8,235,530. |

## Part XII Qualifying Distributions (see instructions)

| | | | |
|---|---|---|---|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes: | | |
| a | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 | 1a | 12,046,088. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | **Qualifying distributions** Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 12,046,088. |
| 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 | 206,086. |
| 6 | **Adjusted qualifying distributions.** Subtract line 5 from line 4 | 6 | 11,840,002. |

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

**Part XIII Undistributed Income** (see instructions)

| | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
|---|---|---|---|---|
| 1 Distributable amount for 2012 from Part XI, line 7 | | | | 8,235,530. |
| 2 Undistributed income, if any as of the end of 2012 | | | | |
| a Enter amount for 2011 only | | | 0. | |
| b Total for prior years: ___ , ___ , ___ | | 0. | | |
| 3 Excess distributions carryover, if any, to 2012: | | | | |
| a From 2007 444,042. | | | | |
| b From 2008 1,464,768. | | | | |
| c From 2009 1,716,869. | | | | |
| d From 2010 1,141,419. | | | | |
| e From 2011 2,324,568. | | | | |
| f Total of lines 3a through e | 7,091,666. | | | |
| 4 Qualifying distributions for 2012 from Part XII, line 4: ▶$ 12,046,088. | | | | |
| a Applied to 2011, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus (Election required - see instructions) | 0. | | | |
| d Applied to 2012 distributable amount | | | | 8,235,530. |
| e Remaining amount distributed out of corpus | 3,810,558. | | | |
| 5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 10,902,224. | | | |
| b Prior years' undistributed income Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 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 | 444,042. | | | |
| 9 Excess distributions carryover to 2013 Subtract lines 7 and 8 from line 6a | 10,458,182. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2008 1,464,768. | | | | |
| b Excess from 2009 1,716,869. | | | | |
| c Excess from 2010 1,141,419. | | | | |
| d Excess from 2011 2,324,568. | | | | |
| e Excess from 2012 3,810,558. | | | | |

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

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

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

| | Tax year | Prior 3 years | | | |
|---|---|---|---|---|---|
| | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | (e) Total |
| 2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon. a "Assets" alternative test - enter: (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |

**Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year-see instructions.)**

1 **Information Regarding Foundation Managers:**

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

NONE

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

NONE

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

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

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

SEE STATEMENT 14

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

c Any submission deadlines:

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

**Part XV Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient<br>Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution ** | Amount |
|---|---|---|---|---|
| *a Paid during the year* | | | | |
| ADOPTION NETWORK CLEVELAND<br>4614 PROSPECT AVE SUITE 550<br>CLEVELAND, OH 44103 | N/A | 501(C)(3) | ADOPTION NETWORK CLEVELAND GENERAL OPERATING SUPPORT | 75,000. |
| AIDS TASK FORCE<br>4614 PROSPECT AVE<br>CLEVELAND, OH 44103 | N/A | 501(C)(3) | NEW OFFICE MOVING EXPENSES | 20,000. |
| AMERICAN RED CROSS<br>3747 EUCLID AVE<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | HURRICANE SANDY DISASTER RELIEF | 20,000. |
| BEECH BROOK<br>3737 LANDER RD<br>PEPPER PIKE, OH 44124 | N/A | 501(C)(3) | BEACH BROOK'S FAMILY DROP-IN CENTER & EMERGENCY FUNDING | 80,000. |
| BENEDICTINE HIGH SCHOOL<br>2900 MARTIN LUTHER KING JR DR<br>CLEVELAND, OH 44104 | N/A | 501(C)(3) | OPERATING SUPPORT | 100,000. |
| **Total** SEE CONTINUATION SHEET(S) | | | ▶ 3a | 10,184,154. |
| *b Approved for future payment*<br>NONE | | | | |
| | | | | |
| | | | | |
| **Total** | | | ▶ 3b | 0. |

Form **990-PF** (2012)

223611
12-05-12

** SEE PURPOSE OF GRANT CONTINUATIONS

## Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) |
|---|---|---|---|---|---|
| | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income |
| 1 Program service revenue | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| 4 Dividends and interest from securities | 523000 | 75,023. | 14 | 1,999,134. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | 18 | 18,909,534. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a REFUND OF PRIOR YEAR | | | | | |
| b GRANT | | | | | 138. |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 75,023. | | 20,908,668. | 138. |
| 13 Total Add line 12, columns (b), (d), and (e) | | | | 13 | 20,983,829. |

(See worksheet in line 13 instructions to verify calculations.)

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). |
|---|---|
| 11A | REFUND OF PRIOR YEAR GRANT |

223621
12-05-12

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

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | | |
| | (1) Cash | 1a(1) | | X |
| | (2) Other assets | 1a(2) | | X |
| b | Other transactions: | | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | | X |
| | (4) Reimbursement arrangements | 1b(4) | | X |
| | (5) Loans or loan guarantees | 1b(5) | | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | X |

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

| (a) Line no | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sharing arrangements |
|---|---|---|---|
| | | N/A | |

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|---|---|---|
| N/A | | |

**Sign Here**

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

Signature of officer or trustee: [signature] Date: 11-12-2013 Title: CEO

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

**Paid Preparer Use Only**

| Print/Type preparer's name | Preparer's signature | Date | Check ☐ if self-employed | PTIN |
|---|---|---|---|---|
| ZACK FORTSCH | [signature] | 11-10-13 | | P00052725 |

Firm's name ▶ MCGLADREY LLP — Firm's EIN ▶ 42-0714325

Firm's address ▶ 1001 LAKESIDE AVE., SUITE 200, CLEVELAND, OH 44114-1152 — Phone no. (216) 523-1900

**Schedule B**
**(Form 990, 990-EZ, or 990-PF)**
Department of the Treasury
Internal Revenue Service

# Schedule of Contributors

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

OMB No 1545-0047

**2012**

| **Name of the organization** | **Employer identification number** |
|---|---|
| SAINT LUKE'S FOUNDATION OF CLEVELAND, OH | 34-0714513 |

**Organization type** (check one)

| **Filers of:** | **Section:** |
|---|---|
| Form 990 or 990-EZ | ☐ 501(c)( ) (enter number) organization |
| | ☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation |
| | ☐ 527 political organization |
| Form 990-PF | ☒ 501(c)(3) exempt private foundation |
| | ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | ☐ 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule.**
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

**General Rule**

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

**Special Rules**

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not total to more than $1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc , contributions of $5,000 or more during the year ▶ $ ____________

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

| Name of organization | Employer identification number |
|---|---|
| SAINT LUKE'S FOUNDATION OF CLEVELAND, OH | 34-0714513 |

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---|---|---|---|
| 1 | MILDRED S TAYLOR CHARITABLE LEAD ANNUITY TRUST<br>3993 E ROYALTON RD<br>BROADVIEW HEIGHTS, OH 44147 | $ 135,995. | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution ) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution ) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution ) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution ) |

| Name of organization | Employer identification number |
|---|---|
| SAINT LUKE'S FOUNDATION OF CLEVELAND, OH | 34-0714513 |

**Part II** **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| Name of organization | Employer identification number |
|---|---|
| SAINT LUKE'S FOUNDATION OF CLEVELAND, OH | 34-0714513 |

**Part III** *Exclusively* religious, charitable, etc , individual contributions to section 501(c)(7), (8), or (10) organizations that total more than $1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year (Enter this information once) ▶ $

Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

**Part IV** Capital Gains and Losses for Tax on Investment Income

| | (a) List and describe the kind(s) of property sold, e g , real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr ) |
|---|---|---|---|---|
| 1a | CFI CORE EQUITY FUND | P | VARIOUS | 06/30/12 |
| b | STRATEGIC SOLUTIONS EQUITY FUND, LLC | P | VARIOUS | 06/30/12 |
| c | CFI ALL CAP FUND | P | VARIOUS | 06/30/12 |
| d | STRATEGIC SOLUTIONS GLOBAL EQUITY, LLC | P | VARIOUS | 06/30/12 |
| e | CFI INTERNATIONAL EQUITY FUND | P | VARIOUS | 06/30/12 |
| f | EMERGING MARKETS INVESTORS CO. B | P | VARIOUS | 06/30/12 |
| g | CF MULTI-STRATEGY BOND INVESTORS, LLC | P | VARIOUS | 06/30/12 |
| h | CFI MULTI-STRATEGY COMMODITIES FUND | P | VARIOUS | 06/30/12 |
| i | CFI REAL RETURN BOND FUND | P | VARIOUS | 06/30/12 |
| j | PRIVATE EQUITY PARTNERS VI | P | VARIOUS | 06/30/12 |
| k | PRIVATE EQUITY PARTNERS VII | P | VARIOUS | 06/30/12 |
| l | INT'L PRIVATE EQUITY PARTNERS V | P | VARIOUS | 06/30/12 |
| m | INT'L PRIVATE EQUITY PARTNERS IV | P | VARIOUS | 06/30/12 |
| n | VENTURE PARTNERS VII | P | VARIOUS | 06/30/12 |
| o | VENTURE PARTNERS VI | P | VARIOUS | 06/30/12 |

| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) |
|---|---|---|---|---|
| a | 1,695,503. | | | 1,695,503. |
| b | 112,706. | | | 112,706. |
| c | 7,282,009. | | | 7,282,009. |
| d | 1,875,037. | | | 1,875,037. |
| e | 1,189,947. | | | 1,189,947. |
| f | 841,654. | | | 841,654. |
| g | 637,483. | | | 637,483. |
| h | 141,228. | | | 141,228. |
| i | 135,223. | | | 135,223. |
| j | 77,862. | | | 77,862. |
| k | 311,681. | | | 311,681. |
| l | 85,009. | | | 85,009. |
| m | 186,796. | | | 186,796. |
| n | 35,287. | | | 35,287. |
| o | 351,192. | | | 351,192. |

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

| | (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 | (l) Losses (from col. (h)) Gains (excess of col. (h) gain over col (k), but not less than "-0-") |
|---|---|---|---|---|
| a | | | | 1,695,503. |
| b | | | | 112,706. |
| c | | | | 7,282,009. |
| d | | | | 1,875,037. |
| e | | | | 1,189,947. |
| f | | | | 841,654. |
| g | | | | 637,483. |
| h | | | | 141,228. |
| i | | | | 135,223. |
| j | | | | 77,862. |
| k | | | | 311,681. |
| l | | | | 85,009. |
| m | | | | 186,796. |
| n | | | | 35,287. |
| o | | | | 351,192. |

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter "-0-" in Part I, line 7 } | 2 |

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):
If gain, also enter in Part I, line 8, column (c)
If (loss), enter "-0-" in Part I, line 8 | 3 |

223591
05-01-12

**Part IV** Capital Gains and Losses for Tax on Investment Income

| | (a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|---|---|---|---|---|
| 1a | OAKTREE II | P | VARIOUS | 06/30/12 |
| b | FARRALLON | P | VARIOUS | 06/30/12 |
| c | OAKTREE III | P | VARIOUS | 06/30/12 |
| d | MCM CAPITAL | P | VARIOUS | 06/30/12 |
| e | KAYNE ANDERSON III | P | VARIOUS | 06/30/12 |
| f | KAYNE PRIVATE II | P | VARIOUS | 06/30/12 |
| g | NATURAL RESOURCES PARTNERS VIII | P | VARIOUS | 06/30/12 |
| h | PROTEGE | P | VARIOUS | 06/30/12 |
| i | PIMCO | P | VARIOUS | 06/30/12 |
| j | OTHER | P | VARIOUS | 06/30/12 |
| k | | | | |
| l | | | | |
| m | | | | |
| n | | | | |
| o | | | | |

| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) |
|---|---|---|---|---|
| a | 1,667,255. | | | 1,667,255. |
| b | 118,495. | | | 118,495. |
| c | 503,879. | | | 503,879. |
| d | 296,000. | | | 296,000. |
| e | 210,778. | | | 210,778. |
| f | 116,200. | | | 116,200. |
| g | 48,404. | | | 48,404. |
| h | 638. | | | 638. |
| i | 920,958. | | | 920,958. |
| j | 68,310. | | | 68,310. |
| k | | | | |
| l | | | | |
| m | | | | |
| n | | | | |
| o | | | | |

| | Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | (l) Losses (from col. (h)) Gains (excess of col (h) gain over col. (k), but not less than "-0-") |
|---|---|---|---|---|
| | (i) F M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col. (j), if any | |
| a | | | | 1,667,255. |
| b | | | | 118,495. |
| c | | | | 503,879. |
| d | | | | 296,000. |
| e | | | | 210,778. |
| f | | | | 116,200. |
| g | | | | 48,404. |
| h | | | | 638. |
| i | | | | 920,958. |
| j | | | | 68,310. |
| k | | | | |
| l | | | | |
| m | | | | |
| n | | | | |
| o | | | | |

| | | | |
|---|---|---|---|
| 2 | Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7; If (loss), enter "-0-" in Part I, line 7 } | 2 | 18,909,534. |
| 3 | Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 | 3 | N/A |

223591
05-01-12

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| 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 recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| BOYS AND GIRLS CLUBS OF CLEVELAND<br>6114 BROADWAY AVE<br>CLEVELAND, OH 44127 | N/A | 501(C)(3) | OPERATING SUPPORT | 75,000. |
| BUCKEYE AREA DEVELOPMENT<br>11802 BUCKEYE RD<br>CLEVELAND, OH 44120 | N/A | 501(C)(3) | STRATEGIC PLANNING | 20,000. |
| BUSINESS VOLUNTEERS UNLIMITED<br>1300 EAST NINTH STREET, SUITE 1805<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | CAPACITY BUILDING SERVICES TO NONPROFITS | 120,000. |
| CARE ALLIANCE<br>1530 ST CLAIR AVE<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | CARE ALLIANCE HEALTH CENTER GENERAL OPERATING SUPPORT | 150,000. |
| CLEVELAND BOTANICAL GARDENS<br>11030 EAST BLVD<br>CLEVELAND, OH 44106 | N/A | 501(C)(3) | OPERATING SUPPORT | 75,000. |
| CLEVELAND DEPARTMENT OF PUBLIC HEALTH<br>75 ERIEVIEW PLAZA 3RD FLOOR<br>CLEVELAND, OH 44114 | N/A | GOVERNMENT | LEAD-SAFE LIVING - 2012 | 350,000. |
| CLEVELAND FOODBANK, INC.<br>15500 S WATERLOO RD<br>CLEVELAND, OH 44110 | N/A | 501(C)(3) | GENERAL OPERATING - IMPLEMENTATION OF YEAR-THREE STRATEGIC PLAN | 334,000. |
| CLEVELAND FURNITURE BANK<br>13360 SMITH RD<br>MIDDLEBURG HTS, OH 44130-9315 | N/A | 501(C)(3) | BEDS FOR KIDS | 15,000. |
| CLEVELAND HOUSING NETWORK, INC.<br>2999 PAYNE AVE, SUITE 306<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | OPERATING SUPPORT | 100,000. |
| CLEVELAND LEADERSHIP CENTER<br>1375 E. 9TH ST, SUITE 2430<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | OPERATING SUPPORT | 3,000. |
| **Total from continuation sheets** | | | | 9,889,154. |

223631
05-01-12

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| 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 recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| CLEVELAND NEIGHBORHOOD DEVELOPMENT COALITION<br>3751 PROSPECT AVE 3RD FLOOR<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | OPERATING SUPPORT AND EXPLORING MERGER | 27,500. |
| CLEVELAND SOCIAL VENTURE PARTNERS<br>10819 MAGNOLIA DRIVE SUITE 200<br>CLEVELAND, OH 44106 | N/A | 501(C)(3) | SOCIAL INNOVATION SERIES | 34,820. |
| CUYAHOGA COMMUNITY COLLEGE FOUNDATION<br>700 CARNEGIE AVENUE<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | NURSING SCHOLARSHIPS | 100,000. |
| CUYAHOGA COUNTY BOARD OF HEALTH<br>5550 VENTURE DRIVE<br>CLEVELAND, OH 44130-9315 | N/A | GOVERNMENT | HEALTH IMPACT ASSESSMENT, PLACE MATTERS TEAM, HEALTH IMPROVEMENT PARTNERSHIP | 140,866. |
| CUYAHOGA COUNTY, OFFICE OF HEALTH AND HUMAN SERVICES<br>1276 WEST 3RD STREET SUITE 409<br>CLEVELAND, OH 44113 | N/A | GOVERNMENT | CUYAHOGA COUNTY FATHERHOOD INITIATIVE 7TH ANNUAL FATHERHOOD CONFERENCE | 20,000. |
| CUYAHOGA HEALTH ACCESS PARTNERSHIP<br>75 ERIEVIEW PLAZA 2ND FLOOR<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | OPERATING SUPPORT | 30,000. |
| CUYAHOGA COUNTY FORECLOSURE PREVENTION PROGRAM<br>5700 BROADWAY AVE<br>CLEVELAND, OH 44127 | N/A | 501(C)(3) | OPERATING SUPPORT | 100,000. |
| CWRU SCHOOL OF DENTAL MEDICINE<br>10900 EUCLID AVENUE<br>CLEVELAND, OH 44106 | N/A | 501(C)(3) | OPERATING BUDGET FOR THE HEALTHY SMILES PROGRAM | 608,750. |
| CWRU HORIZONS<br>10900 EUCLID AVENUE<br>CLEVELAND, OH 44106 | N/A | 501(C)(3) | OPERATING SUPPORT | 2,500. |
| CWRU<br>10900 EUCLID AVENUE<br>CLEVELAND, OH 44106 | N/A | 501(C)(3) | CUYAHOGA COMMUNITY HEALTH DATA SURVEILLANCE | 75,000. |
| **Total from continuation sheets** | | | | |

223631
05-01-12

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| CWRU<br>10900 EUCLID AVENUE<br>CLEVELAND, OH 44106 | N/A | 501(C)(3) | CUHYAHOGA COUNT HEALTH DATA DASHBOARD | 150,000. |
| DOMESTIC VIOLENCE AND CHILD ADVOCACY CENTER<br>PO BOX 5466<br>CLEVELAND, OH 44101 | N/A | 501(C)(3) | OPERATING SUPPORT FOR DOMESTIC VIOLENCE CENTER | 200,000. |
| ENTERPRISE COMMUNITY PARTNERS, INC.<br>3500 LORAIN AVENUE SUITE 300<br>CLEVELAND, OH 44113 | N/A | 501(C)(3) | CUYAHOGA COUNTY HOUSING FIRST INITIATIVE & ENTERPRISE ROSE ARCHITECTURAL | 85,000. |
| ENVIRONMENTAL HEALTH WATCH<br>3500 LORAIN AVENUE SUITE 302<br>CLEVELAND, OH 44113 | N/A | 501(C)(3) | EASY DOES IT COOKING CLASSES | 5,000. |
| ESPERANZA INCORPORATED<br>3104 W 25TH STREET 4TH FLOOR<br>CLEVELAND, OH 44109 | N/A | 501(C)(3) | FAMILY ENGAGEMENT PROJECT | 61,000. |
| FAIRHILL PARTNERS<br>12200 FAIRHILL ROAD SUITE 100<br>CLEVELAND, OH 44120 | N/A | 501(C)(3) | OPERATING SUPPORT | 10,000. |
| FAMILY PROMISE<br>3470 EAST 152ND STREET<br>CLEVELAND, OH 44120 | N/A | 501(C)(3) | OPERATING SUPPORT | 20,000. |
| FORCES 4 QUALITY<br>2500 METROHEALTH DRIVE<br>CLEVELAND, OH 44109 | N/A | 501(C)(3) | OPERATING SUPPORT | 78,716. |
| FRIENDS OF BREAKTHROUGH<br>1417 E 36TH ST<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | E PREP AND VILLAGE PREP EXPANSION FOR BRINGING EDUCATIONAL EXCELLENCE TO THE MT PLEASANT/WOODLAND | 300,000. |
| GRANTMAKERS FOR EFFECTIVE ORGANIZATIONS<br>1725 DESALES ST NW, SUITE 404<br>WASHINGTON , DC 20036 | N/A | 501(C)(3) | OPERATING SUPPORT | 20,000. |
| **Total from continuation sheets** | | | | |

223631
05-01-12

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| 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 recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| GRANTMAKERS IN AGING<br>2001 JEFFERSON DAVIS HIGHWAY, SUITE 504 ARLINGTON, VA 22202 | N/A | 501(C)(3) | OPERATING SUPPORT | 5,000. |
| GRANTMANAGERS NETWORK<br>1666 K STREET NW, SUITE 440<br>WASHINGTON , DC 20006 | N/A | 501(C)(3) | PROJECT STREAMLINE | 5,000. |
| GREATER CLEVELAND SPORTS COMMISSION<br>334 EUCLID AVE,SUITE 100<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | OPERATING SUPPORT | 20,000. |
| HEALTH POLICY INSTITUTE OF OHIO<br>37 W BROAD ST<br>COLUMBUS, OH 43215 | N/A | 501(C)(3) | OPERATING SUPPORT | 100,000. |
| JOINT CENTER FOR POLITICAL AND ECONOMIC STUDIES<br>805 15TH ST NW, 2ND FLOOR<br>WASHINGTON , DC 20005 | N/A | 501(C)(3) | PLACE MATTERS NATIONAL CONFERENCE | 3,500. |
| MENTAL HEALTH ADVOCACY COALITION<br>4500 EUCLID AVENUE<br>CLEVELAND, OH 44103 | N/A | 501(C)(3) | OPERATING SUPPORT | 100,000. |
| MENTAL HEALTH SERVICES FOR HOMELESS PERSONS, INC.<br>1744 PAYNE AVENUE<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | OPERATING SUPPORT | 225,000. |
| METRO HEALTH FOUNDATION<br>2500 METROHEALTH DRIVE<br>CLEVELAND, OH 44109 | N/A | 501(C)(3) | BUCKEYE HEALTH CENTER | 1,000,000. |
| METRO HEALTH FOUNDATION<br>2500 METROHEALTH DRIVE<br>CLEVELAND, OH 44109 | N/A | 501(C)(3) | 2012-2013 FRANCIS H BEAM FELLOWSHIP | 175,000. |
| MT PLEASANT COMMUNITY ZONE<br>11019 KINSMAN ROAD<br>CLEVELAND, OH 44104 | N/A | 501(C)(3) | 2012 OPERATING BUDGET | 305,000. |
| **Total from continuation sheets** | | | | |

223631
05-01-12

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| NATIONAL CENTER FOR HEALTHY HOUSING<br>10227 WINCOPIN CIRCLE, SUITE 200<br>COLUMBIA, MD 21044 | N/A | 501(C)(3) | OPERATING SUPPORT | 20,000. |
| NATIONAL URBAN FELLOWS<br>989 AVENUE OF THE AMERICAS, SUITE 400<br>NEW YORK, NY 10018 | N/A | 501(C)(3) | OPERATING SUPPORT | 13,000. |
| NEIGHBORHOOD FAMILY PRACTICE<br>3569 RIDGE ROAD<br>CLEVELAND, OH 44102 | N/A | 501(C)(3) | OPERATING SUPPORT | 150,000. |
| NEIGHBORHOOD LEADERSHIP INSTITUTE<br>5246 BROADWAY AVE<br>CLEVELAND, OH 44127 | N/A | 501(C)(3) | OPERATING SUPPORT | 18,000. |
| NEIGHBORHOOD PROGRESS, INC<br>1956 WEST 25TH STREET SUITE 200<br>CLEVELAND, OH 44113 | N/A | 501(C)(3) | SAINT LUKE'S POINT, ACCESSING MT. PLEASANT NEIGHBORHOOD, OPERATING NEIGHBORHOODS OF | 1,561,503. |
| NORTHEAST OHIO NEIGHBORHOOD HEALTH SERVICES<br>8300 HOUGH AVE<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | NEON OPERATING SUPPORT | 175,000. |
| NORTHEAST OHIO HEALTH SERVICES DBA CONNECTIONS<br>24200 CHAGRIN BLVD<br>BEACHWOOD, OH 44122 | N/A | 501(C)(3) | ELECTRONIC HEALTH RECORDS | 100,000. |
| NORTH COAST HEALTH MINISTRY<br>16110 DETROIT AVE<br>LAKEWOOD, OH 44107 | N/A | 501(C)(3) | OPERATING SUPPORT | 125,000. |
| OHIO GRANTMAKERS FORUM<br>37 WEST BROAD STREET, #800<br>COLUMBUS, OH 43215 | N/A | 501(C)(3) | OPERATING SUPPORT | 5,000. |
| OHIO STATE UNIVERSITY EXTENSION<br>9127 MILES AVENUE<br>CLEVELAND, OH 44105 | N/A | 501(C)(3) | EBT INCENTIVE PROGRAM FOR FARMERS MARKETS IN CUYAHOGA COUNTY | 50,000. |
| **Total from continuation sheets** | | | | |

223631
05-01-12

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| 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 recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| PARTNERSHIP FOR A SAFER CLEVELAND<br>2239 EAST 14TH ST<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | STANCE POLICE ASSISTED REFERRAL, OVER TWO YEARS | 38,789. |
| PLANNED PARENTHOOD OF NORTHEAST OHIO<br>3500 LORAIN AVENUE SUITE 400<br>CLEVELAND, OH 44113 | N/A | 501(C)(3) | PUTTING TEENS FIRST· INCREASING ACCESS FOR YOUTH IN CLEVELAND'S INNER RING SUBURBS | 16,430. |
| POLICYBRIDGE<br>850 EUCLID AVENUE SUITE 1100<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | GENERAL OPERATING SUPPORT | 75,000. |
| PROJECT: LEARN<br>2728 EUCLID AVENUE, SUITE 400<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | SUCCESSION PLANNING - FOR READING HEALTH AND FOR OHIO HEALTH LITERACY CONFERENCE | 87,000. |
| THE CENTER FOR COMMUNITY SOLUTIONS<br>1501 EUCLID AVE, SUITE 310<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | OPERATING SUPPORT, SUPPORT FOR HUMAN SERVICES INSTITUTE & AIDS FUNDING COLLABORATIVE | 155,000. |
| THE CENTERS FOR FAMILIES AND CHILDREN<br>4500 EUCLID AVENUE<br>CLEVELAND, OH 44103 | N/A | 501(C)(3) | OPERATING SUPPORT | 150,000. |
| THE CLEVELAND FOUNDATION<br>1422 EUCLID AVE SUITE 1300<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | MY COM OUT OF SCHOOL TIME QUALITY IMPROVEMENT | 75,000. |
| THE DIVERSITY CENTER OF NORTHEAST OHIO<br>3659 GREEN RD SUITE 220<br>BEACHWOOD, OH 44122 | N/A | 501(C)(3) | OPERATING SUPPORT | 20,000. |
| THE FOUNDATION CENTER - CLEVELAND<br>142 EUCLID AVENUE, SUITE 1600<br>CLEVELAND, OH 44115-2001 | N/A | 501(C)(3) | OPERATING SUPPORT | 10,000. |
| THE FREE MEDICAL CLINIC OF GREATER CLEVELAND<br>12201 EUCLID AVENUE<br>CLEVELAND, OH 44106 | N/A | 501(C)(3) | ELECTRONIC HEALTH RECORDS | 276,000. |
| **Total from continuation sheets** | | | | |

223631
05-01-12

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| 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 recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| THE FUND FOR OUR ECONOMIC FUTURE<br>1360 E NINTH ST SUITE 210<br>CLEVELAND, OH 44114 | N/A | 501(C)(3) | GENERAL OPERATING SUPPORT FOR THE FUND FOR OUR ECONOMIC FUTURE | 100,000. |
| THE LEGAL AID SOCIETY OF CLEVELAND<br>1223 WEST SIXTH STREET<br>CLEVELAND, OH 44113 | N/A | 501(C)(3) | COMMUNITY ADVOCACY PROGRAM | 150,000. |
| THE PEW CHARITABLE TRUSTS<br>901 E ST NW<br>WASHINGTON , DC 20004 | N/A | 501(C)(3) | OPERATING SUPPORT | 272,719. |
| THE SALVATION ARMY<br>2507 E 22ND STREET<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | THE ZELMA GEORGE EMERGENCY FAMILY SHELTER | 60,000. |
| THE VILLAGE NETWORK<br>3445 SOUTH MAIN ST<br>AKRON, OH 44319 | N/A | 501(C)(3) | OPERATING SUPPORT | 100,000. |
| TOWARDS EMPLOYMENT<br>1255 EUCLID AVENUE SUITE 300<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | ACHIEVE SERVICES FOR ENTRY LEVEL HEALTHCARE WORKERS | 59,855. |
| UHCAN OHIO<br>370 S 5TH STREET SUITE G3<br>COLUMBUS, OH 43215-7436 | N/A | 501(C)(3) | CREATING A CONSUMER-FRIENDLY HEALTH INSURANCE EXCHANGE | 85,000. |
| UNIVERSITY HOSPITALS OF CLEVELAND<br>11100 EUCLID AVENUE<br>CLEVELAND, OH 44106 | N/A | 501(C)(3) | TRAINNG A NEW GENERATION OF COMMUNITY BASED PHYSICIANS | 344,104. |
| VOICES FOR OHIO'S CHILDREN<br>3634 EUCLID AVENUE, SUITE 101<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | ADVOCACY FOR OHIO'S CHILDREN | 35,000. |
| WESTERN RESERVE HISTORICAL SOCIETY<br>10825 EAST BLVD<br>CLEVELAND, OH 44106 | N/A | 501(C)(3) | OPERATING SUPPORT | 19,102. |
| **Total from continuation sheets** | | | | |

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient<br>Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| WESTERN RESERVE LAND CONSERVATORY<br>3850 CHAGRIN RIVER RD<br>MORELAND HILLS, OH 44022 | N/A | 501(C)(3) | THRIVING COMMUNITIES INSTITUTE | 100,000. |
| WEST SIDE CATHOLIC CENTER<br>3135 LORAIN AVE<br>CLEVELAND, OH 44113 | N/A | 501(C)(3) | BASIC NEEDS PROGRAMS OF THE DROP-IN-CENTER AND ZACCHAEUS HOUSE | 100,000. |
| YWCA OF CLEVELAND<br>4019 PROSPECT AVE<br>CLEVELAND, OH 44103 | N/A | 501(C)(3) | GENERAL OPERATING SUPPORT FOR INDEPENDENCE PLACE | 18,000. |
| YMCA OF GREATER CLEVELAND<br>2200 PROSPECT AVE #900<br>CLEVELAND, OH 44115 | N/A | 501(C)(3) | CARF ACCREDITATION FOR Y-HAVEN TRANSITIONAL HOUSING PROGRAM | 75,000. |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| **Total from continuation sheets** | | | | |

223631
05-01-12

**Part XV | Supplementary Information**

3a. Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - ENTERPRISE COMMUNITY PARTNERS, INC.

CUYAHOGA COUNTY HOUSING FIRST INITIATIVE & ENTERPRISE ROSE ARCHITECTURAL FELLOWSHIP

NAME OF RECIPIENT - FRIENDS OF BREAKTHROUGH

E PREP AND VILLAGE PREP EXPANSION FOR BRINGING EDUCATIONAL EXCELLENCE TO THE MT PLEASANT/WOODLAND HILLS NEIGHBORHOODS, OVER TWO YEARS

NAME OF RECIPIENT - NEIGHBORHOOD PROGRESS, INC

SAINT LUKE'S POINT, ACCESSING MT. PLEASANT NEIGHBORHOOD, OPERATING NEIGHBORHOODS OF CHOICE IN THE BUCKEYE SHAKER SQUARE AREA

FORM 990-PF LEGAL FEES STATEMENT 1

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST-MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|---|---|---|---|---|
| MISCELLANEOUS LEGAL FEES | 12,460. | 0. | 0. | 12,460. |
| TO FM 990-PF, PG 1, LN 16A | 12,460. | 0. | 0. | 12,460. |

FORM 990-PF ACCOUNTING FEES STATEMENT 2

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST-MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|---|---|---|---|---|
| ACCOUNTING/AUDIT/TAX FEES | 84,496. | 0. | 0. | 84,496. |
| TO FORM 990-PF, PG 1, LN 16B | 84,496. | 0. | 0. | 84,496. |

FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 3

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST-MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|---|---|---|---|---|
| INVESTMENT MANAGEMENT FEES | 300,088. | 300,088. | 0. | 0. |
| PENSION FEES | 1,168. | 0. | 0. | 1,168. |
| PAYROLL PROCESSING FEES | 3,479. | 0. | 0. | 3,479. |
| TO FORM 990-PF, PG 1, LN 16C | 304,735. | 300,088. | 0. | 4,647. |

FORM 990-PF TAXES STATEMENT 4

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST-MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|---|---|---|---|---|
| FEDERAL EXCISE TAX | 228,046. | 0. | 0. | 0. |
| EMPLOYMENT TAXES | 51,878. | 0. | 0. | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 279,924. | 0. | 0. | 0. |

FORM 990-PF — OTHER EXPENSES — STATEMENT 5

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|---|---|---|---|---|
| FOUNDATION DEVELOPMENT | 400,429. | 0. | 0. | 400,429. |
| BANK FEES | 10,405. | 0. | 0. | 10,405. |
| SUPPLIES | 8,486. | 0. | 0. | 8,486. |
| TELEPHONE | 5,353. | 0. | 0. | 5,353. |
| INSURANCE | 15,461. | 0. | 0. | 15,461. |
| DUES & PUBLICATIONS | 366. | 0. | 0. | 366. |
| MISCELLANEOUS EXPENSES | 23,246. | 0. | 0. | 70,750. |
| TO FORM 990-PF, PG 1, LN 23 | 463,746. | 0. | 0. | 511,250. |

FORM 990-PF — OTHER INCOME — STATEMENT 6

| DESCRIPTION | (A) REVENUE PER BOOKS |
|---|---|
| REFUND OF PRIOR YEAR GRANT | 138. |
| TOTAL TO FORM 990-PF, PART I, LINE 11, COLUMN A | 138. |

FORM 990-PF — OTHER INCREASES IN NET ASSETS OR FUND BALANCES — STATEMENT 7

| DESCRIPTION | AMOUNT |
|---|---|
| CHANGE IN FMV OF TRUST HELD BY OTHERS | 222,914. |
| TOTAL TO FORM 990-PF, PART III, LINE 3 | 222,914. |

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 8

| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE | FAIR MARKET VALUE |
|---|---|---|---|---|
| LEASEHOLD IMPROVEMENTS | 79,864. | 56,346. | 23,518. | 23,518. |
| FURNITURE | 151,811. | 127,555. | 24,256. | 24,256. |
| OFFICE EQUIPMENT | 33,757. | 30,131. | 3,626. | 3,626. |
| COMPUTER HARDWARE | 120,449. | 95,309. | 25,140. | 25,140. |
| COMPUTER SOFTWARE | 59,924. | 38,275. | 21,649. | 21,649. |
| TO 990-PF, PART II, LN 14 | 445,805. | 347,616. | 98,189. | 98,189. |

FORM 990-PF CORPORATE STOCK STATEMENT 9

| DESCRIPTION | BOOK VALUE | FAIR MARKET VALUE |
|---|---|---|
| CORPORATE STOCK | 123,183. | 123,183. |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 123,183. | 123,183. |

FORM 990-PF OTHER INVESTMENTS STATEMENT 10

| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
|---|---|---|---|
| EQUITY MUTUAL FUNDS | COST | 97,415,204. | 97,415,204. |
| LIMITED PARTNERSHIPS | COST | 33,362,272. | 33,362,272. |
| ACCRUED INCOME | COST | 122,556. | 122,556. |
| FIXED MUTUAL FUNDS | COST | 26,404,432. | 26,404,432. |
| COMMODITIES | COST | 7,753,270. | 7,753,270. |
| INVESTMENTS HELD IN TRUST | COST | 3,004,397. | 3,004,397. |
| TOTAL TO FORM 990-PF, PART II, LINE 13 | | 168,062,131. | 168,062,131. |

FORM 990-PF OTHER ASSETS STATEMENT 11

| DESCRIPTION | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET VALUE |
|---|---|---|---|
| DEFERRED COMPENSATION DEPOSITS | 20,000. | 25,000. | 25,000. |
| DEFERRED TAX ASSET | 41,210. | 28,045. | 28,045. |
| PROGRAM RELATED INVESTMENT | 400,000. | 0. | 0. |
| TO FORM 990-PF, PART II, LINE 15 | 461,210. | 53,045. | 53,045. |

FORM 990-PF OTHER LIABILITIES STATEMENT 12

| DESCRIPTION | BOY AMOUNT | EOY AMOUNT |
|---|---|---|
| LIABILITY FOR DEFERRED COMPENSATION | 20,000. | 25,000. |
| TOTAL TO FORM 990-PF, PART II, LINE 22 | 20,000. | 25,000. |

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 13

| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN-SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
|---|---|---|---|---|
| FRANCIS AFRAM-GYENING<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| FRANCIS H. BEAM, JR.<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | FOUNDING CHAIR<br>1.00 | 0. | 0. | 0. |
| JANET E BURNEY<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | VICE CHAIR<br>1.00 | 0. | 0. | 0. |
| GERALDINE H BURNS<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| JOHN R CORLETT<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| COLLEEN M. COTTER<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| CLAUDIA J COULTON<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| EDGAR B JACKSON JR MD<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| SANDRA KIELY KOLB<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| ARTHUR LAVIN MD<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| J CHRISTOPHER MANNERS<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |

| | | | | |
|---|---|---|---|---|
| GEORGE MATEYO<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| ROBERT MONITELLO<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| JOHN P O'BRIEN<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TREASURER<br>1.00 | 0. | 0. | 0. |
| ASHLEY BASILE OEKEN<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| KENNETH L OKESON<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| THOMAS A RATHBONE<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| SALLY J STALEY<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| BELVA DENMARK TIBBS<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | SECRETARY<br>1.00 | 0. | 0. | 0. |
| DOUGLAS WANG<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | CHAIR<br>1.00 | 0. | 0. | 0. |
| MARGARET S WHEELER<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | TRUSTEE<br>1.00 | 0. | 0. | 0. |
| DENISE SAN ANTONIO ZEMAN<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | PRESIDENT AND CEO<br>38.00 | 247,381. | 52,329. | 0. |
| DANIEL J HARRINGTON<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | CFO/ASST TREASURER<br>38.00 | 125,885. | 0. | 0. |
| KIMBERLY FIELDS<br>4208 PROSPECT AVENUE<br>CLEVELAND, OH 44103 | ASSISTANT SECRETARY<br>38.00 | 45,392. | 11,140. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII | | 418,658. | 63,469. | 0. |

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 14
PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

FOR QUESTIONS, CONTACT LATIDA SMITH 216-431-8010

NAME OF GRANT PROGRAM

COMMUNITY GRANTS

EMAIL ADDRESS

WWW.SAINTLUKESFOUNDATION.ORG

FORM AND CONTENT OF APPLICATIONS

ALL APPLICATIONS ARE ACCEPTED VIA ONLINE APPLICATION FOUND AT WWW.SAINTLUKESFOUNDATION.ORG. PAPER COPIES ARE NOT ACCEPTED.

SEE ATTACHED STATEMENT 15

ANY SUBMISSION DEADLINES

APRIL 1, JULY 1, AND OCTOBER 1

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION DOES NOT FUND:
- INDIVIDUALS
- RELIGIOUS ORGANIZATIONS FOR RELIGIOUS OR EVANGELICAL PURPOSES
- PROJECTS OUTSIDE CUYAHOGA COUNTY THAT DO NOT DIRECTLY BENEFIT CUYAHOGA COUNTY RESIDENTS
- FUNDRAISING EVENTS
- ENDOWMENT FUNDS
- BIOMEDICAL RESEARCH
- DEBT RETIREMENT
- LOBBYING
- PRIVATE FOUNDATIONS OR PUBLIC CHARITIES WITH A 509(A)(3), TYPE III., NON-FUNCTIONALLY INTEGRATED DESIGNATED WITH THE IRS.

SAINT LUKE'S FOUNDATION OF CLEVELAND, OHIO

## FORM AND CONTENT OF APPLICATIONS

Grants are awarded three times per year in response to requests from qualifying organizations. Qualifying organizations are those that advance the three strategies set forth by the foundation:

1. Healthy People
2. Strong Communities
3. Resilient Families

In addition to these three program areas, the Foundation allocates resources to strengthen the nonprofit and philanthropic sectors. These investments address the broad capacity building needs of Cuyahoga County's nonprofit sector and improve the impact and effectiveness of philanthropy. Applicable organizations must serve the nonprofit or philanthropic sectors in general. Capacity building grants for individual organizations must be submitted through the Healthy People, Strong Communities or Resilient Families program area.

The Foundation encourages applicant to request a Get Acquainted meeting with staff prior to the submission of an application. Get Acquainted meetings often help an organization determine which of its funding priorities/proposed projects is the strongest match with the Foundation's mission. Organizations may submit only one proposal per grant cycle, so while this step is not required, it may be helpful in the application process.

The proposal is submitted though the foundation's online application system according to the detailed instructions listed in the Apply section of the Foundation's website (at www.saintlukesfoundation.org ). As a function of the partnership between the Foundation and the applicant organization, Foundation staff members are available to offer support and guidance through the application process.

Funding recommendations are made by the respective Program Strategy Committees and grant decisions are made by the entire Foundation Board of Trustees.

Staff Discretionary Grants: Foundation staff has the authority to make grant awards of up to $20,000 for smaller, time-sensitive projects that meet the application guidelines as well as advance one of the three program strategy portfolios. An online discretionary grant application must be completed. Discretionary grant applications are accepted and approved on a rolling basis.

### Notification

Board-approved grant applicants will be notified of the status of their request within four weeks of their approval. Discretionary grant applicants will be notified of the status of their request within two to three weeks of their submission.

### Who Can Apply?

Applicants must be either an organization designated as a public charity under Section 501(c)(3) of the Internal Revenue Code with a non-private foundation status with the IRS, or a governmental unit or agency.

The Foundation provides grants to organizations supporting Cuyahoga County's underserved communities.

Form **8868**
(Rev January 2013)
Department of the Treasury
Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box . ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

***Do not complete Part II unless*** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (*e-file*).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits*.

**Part I** **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ [ ]

*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

| Type or print | Name of exempt organization or other filer, see instructions. | Employer identification number (EIN) or |
|---|---|---|
| File by the due date for filing your return See instructions | SAINT LUKE'S FOUNDATION OF CLEVELAND, OH | 34-0714513 |
| | Number, street, and room or suite no. If a P.O. box, see instructions. 4208 PROSPECT AVENUE | Social security number (SSN) |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. CLEVELAND, OH 44103 | |

Enter the Return code for the return that this application is for (file a separate application for each return) [0][4]

| Application Is For | Return Code | Application Is For | Return Code |
|---|---|---|---|
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

- The books are in the care of ▶ DANIEL HARRINGTON - 4208 PROSPECT AVENUE - CLEVELAND, OH 44103

  Telephone No. ▶ (216)431-8010 FAX No. ▶
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ▶ [ ] . If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶ [X] calendar year 2012 or

▶ [ ] tax year beginning __________ , and ending __________ .

2 If the tax year entered in line 1 is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

| | | | |
|---|---|---|---|
| 3a | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | $ |
| b | If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit. | 3b | $ |
| c | **Balance due.** Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | $ |

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1)

**Part II** **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

**Enter filer's identifying number, see instructions**

| **Type or print** File by the due date for filing your return See instructions | Name of exempt organization or other filer, see instructions<br>SAINT LUKE'S FOUNDATION OF CLEVELAND, OH | Employer identification number (EIN) or<br>34-0714513 |
|---|---|---|
| | Number, street, and room or suite no If a P O box, see instructions<br>4208 PROSPECT AVENUE | Social security number (SSN) |
| | City, town or post office, state, and ZIP code For a foreign address, see instructions<br>CLEVELAND, OH 44103 | |

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

| **Application Is For** | **Return Code** | **Application Is For** | **Return Code** |
|---|---|---|---|
| Form 990 or Form 990-EZ | 01 | | |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of ▶ DANIEL HARRINGTON 4208 PROSPECT AVENUE - CLEVELAND, OH 44103

Telephone No. ▶ (216)431-8010 FAX No ▶

- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ [ ] . If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until NOVEMBER 15, 2013.

5 For calendar year 2012 , or other tax year beginning ______ , and ending ______

6 If the tax year entered in line 5 is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO ENSURE ALL QUESTIONS ON THE FORM 990-PF ARE COMPLETE AND ACCURATE AND ALL REQUIRED SCHEDULES ARE INCLUDED.

| | | | |
|---|---|---|---|
| **8a** | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | **8a** | $ 0. |
| **b** | If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 | **8b** | $ |
| **c** | **Balance due.** Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | **8c** | $ 0. |

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ Darlene M. Davis Title ▶ Tax Manager, CPA Date ▶ 8-7-13



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01-21-13