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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.

| For | calen | dar year 2012 or tax year beginning | | , and ending | | |
|------------------|--------------|---|------------------------------------|--|--|---|
| Na | me of | foundation | | | A Employer identificatio | n number |
| _I | GL: | EWSKI FAMILY FOUNDATION | 1 | | 36-6109490 |) |
| | | nd street (or P O box number if mail is not delivered to stree | t address) | Room/suite | B Telephone number | |
| | | 4 MAR LARGO CIRCLE | | | 239-466-18 | 371 |
| | | own, state, and ZIP code | | | C If exemption application is | pending, check here |
| _ <u>F</u> | <u>'OR'</u> | T MEYERS, FL 33919-731 | | ···· | _ | |
| G (| Check | all that apply: Initial return | Initial return of a fo | rmer public charity | D 1. Foreign organization | is, check here |
| | | Final return | Amended return | | 2. Foreign organizations m | eeting the 85% test. |
| | - | X Address change | Name change | | Foreign organizations m check here and attach c | omputation |
| H (| _ | type of organization: X Section 501(c)(3) e | | | E If private foundation st | |
| <u> </u> | | ction 4947(a)(1) nonexempt charitable trust | Other taxable private founda | | under section 507(b)(1 | • |
| | | arket value of all assets at end of year J Account | - | Accrual | F If the foundation is in a | |
| • | rom ⊦ -\$ | Part II, col (c), line 16) 943,554. (Part I, coli | other (specify) | 1200 | under section 507(b)(1 |)(B), check here |
| | art I | | | | (a) Adjusted not | (d) Disbursements |
| | 21 (1 | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | | | N/A | |
| | 2 | Check X If the foundation is not required to attach Sch B | · · · | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | 3 | Interest on savings and temporary cash investments | | | | |
| | 4 | Dividends and interest from securities | 39,755. | 39,755. | | STATEMENT 1 |
| | 5a | Gross rents | | | | |
| | Ь | Net rental income or (loss) | | | | |
| en en | 6a | Net gain or (loss) from sale of assets not on line 10 | | | RECEIVE | |
| ž | b | Gross sales price for all assets on line 6a | | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | POLIVED | 7 |
| Revenue | 7 | Capital gain net income (from Part IV, line 2) | | | 144 | 7 |
| E | 8 | Net short-term capital gain | | [2] | MAY 07 2013 / | \vec{\vec{\vec{\vec{\vec{\vec{\vec{ |
| | 9 | Income modifications Gross sales less returns | | 15 | | _1 <i>[</i> |
| | 10a | and allowances | | LU | DUEN 17-J | 4/ |
| | 1 | Less Cost of goods sold | | | 0 | - |
| CO) | | Gross profit or (loss) | | | | <u> </u> |
| \mathbb{Q} | 11 | Other income | 39,755. | 39,755. | | . |
| SCANNED | 12 | Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc. | 2,000. | 39,733. | | 2,000. |
| 2 | 14 | Other employee salaries and wages | 2,000. | 0. | ' | 2,000. |
| | | Pension plans, employee benefits | | | | |
| · o | 40- | Legal fees | | | | |
| I AWM Expense | Ь | Accounting fees STMT 2 | 2,650. | 0. | , | 2,650. |
| | - c | Other professional fees | | | | |
| | | Interest | | | | |
| √2 Tati | 18 | Taxes STMT 3 | 1,612. | 0. | , | 0. |
| \$103 inistra | 19 | Depreciation and depletion | | | | |
| <u> </u> | 20 | Occupancy | | | | |
| Ă | 21 | Travel, conferences, and meetings | | | | |
| anc | 22 | Printing and publications | | | | |
| ם יי | 23 | Other expenses STMT 4 | 49. | 0 | | 49. |
| Ĭ. | 24 | Total operating and administrative | 6 211 | 0 | | 4 600 |
| © 2002 0 | | expenses. Add lines 13 through 23 | 6,311. | 0. | • | 4,699. 45,500. |
| | 25 | Contributions, gifts, grants paid | 45,500. | | | 45,500. |
| | 26 | • | 51,811. | 0. | | 50,199. |
| _ | 07 | Add lines 24 and 25 Subtract line 26 from line 12: | 21,011 | | · | 50,133. |
| | | | -12,056. | | | |
| | ľ | Net investment income (if negative, enter -0-) | 12,000 | 39,755 | | <u> </u> |
| | " | Adjusted not income (if positive enter -0-) | | | N/A | |

5 Decreases not included in line 2 (itemize) ► PRIOR PERIOD COST ADJUSTMENT

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

| | art | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End o | f year |
|-----------------------------|------|--|-------------------|----------------|-----------------------|
| P | art | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 85,780. | 71,059. | 71,059. |
| | 2 | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable ► | | | |
| | | Less: allowance for doubtful accounts ▶ | | | <u> </u> |
| | 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 | | | |
| ts | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | |
| ∢ | 10a | Investments - U.S. and state government obligations | | | |
| | b | Investments - corporate stock STMT 5 | 326,862. | 324,925. | 745,746. |
| | C | Investments - corporate bonds | | | |
| | 11 | Investments - land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | 100 | | |
| | 12 | Investments - mortgage loans | | 12. | 106 510 |
| | 13 | Investments - other STMT 6 | 119,049. | 124,028. | 126,749. |
| | 14 | Land, buildings, and equipment: basis | | | |
| | | Less accumulated depreciation | 000 | 0 | |
| | 15 | Other assets (describe) | 802. | 0. | 0. |
| | | | F20 402 | E20 012 | 042 554 |
| _ | | Total assets (to be completed by all filers) | 532,493. | 520,012. | 943,554. |
| | | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| ties | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Ľ | 21 | Mortgages and other notes payable Other liabilities (describe) | | | |
| | 22 | Other nabilities (describe | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| _ | | Foundations that follow SFAS 117, check here | | | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ses | 24 | Unrestricted | | | |
| <u>a</u> | 25 | Temporarily restricted | | | |
| Ва | 26 | Permanently restricted | | | |
| pur | | Foundations that do not follow SFAS 117, check here | | | |
| Ţ | | and complete lines 27 through 31. | | | |
| S | 27 | Capital stock, trust principal, or current funds | 532,493. | 520,012. | |
| set | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| Net Assets or Fund Balances | 29 | Retained earnings, accumulated income, endowment, or other funds | 0. | 0. | |
| Š | 30 | Total net assets or fund balances | 532,493. | 520,012. | |
| | | | F22 402 | F20 012 | |
| _ | 31 | Total liabilities and net assets/fund balances | 532,493. | 520,012. | |
| P | art | III Analysis of Changes in Net Assets or Fund E | Balances | | |
| 1 | Tota | I net assets or fund balances at beginning of year - Part II, column (a), line | e 30 | | |
| • | | st agree with end-of-year figure reported on prior year's return) | | 1 | 532,493. |
| 2 | • | r amount from Part I, line 27a | | 2 | -12,056. |
| | | r increases not included in line 2 (itemize) | 1212 | 3 | 0. |
| 4 | Add | lines 1, 2, and 3 | | 4 | 520,437. |

<u>425.</u>

520,012.

5

7

51,500.

50,199.

Add lines 5 and 6

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

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.

| | 990-PF (2012) IGLEWSKI FAMILY FOUNDATION rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4 | | 6109 | | | Page 4 |
|----|--|------|------|-------------|----------|----------|
| | | | | | | , |
| 18 | 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) Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | 1 | | | 7 | 95. |
| D | | _'- | | | | 90. |
| _ | of Part I, line 27b All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | | | 0. |
| | The state of the s | 3 | | | 7 | 95. |
| - | Add lines 1 and 2 Subtitle A (magnetic specifier 4947/a)(1) trusts and toyable foundations only. Others gates 49.4 | 4 | | | | 0. |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | - | | 7 | 95. |
| _ | Credits/Payments: | | | | | <u> </u> |
| | | | | | | |
| | 2012 estimated tax payments and 2011 overpayment credited to 2012 Exempt foreign organizations - tax withheld at source 6a 1,020. | | | | | |
| | Tax paid with application for extension of time to file (Form 8868) 6c | | | | | |
| | | | | | | |
| | Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d | 7 | | | 1 0 | 20. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | | <u> </u> | 20. |
| | | 9 | | | | |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 10 | | | 2 | 25. |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2013 estimated tax | 11 | | | | 0. |
| | rt VII-A Statements Regarding Activities | | | | | <u> </u> |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene | ın | | <u> </u> | Yes | No |
| ıα | any political campaign? | ••• | | 1a | | Х |
| h | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | | | 1b | | X |
| U | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published | d or | | " | | |
| | distributed by the foundation in connection with the activities | | | | | |
| | Did the foundation file Form 1120-POL for this year? | | | 1c | | x |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | -"- | | |
| u | (1) On the foundation. > \$ 0. (2) On foundation managers. > \$ 0. | | | | | |
| ٥ | 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. | | | | | <u> </u> |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o | r | | | | |
| J | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | - | | 3 | | x |
| Δa | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | N | /A | 4b | | |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | -• | | 5 | - | Х |
| • | 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 | | | | | |
| 88 | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | |
| | IL | | | | | |
| t | 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 | | | 8ь | Х | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale | ndar | | | | |
| | year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9 | | X |
| 40 | Did any paragraph become substantial contributors during the tay year? | | | 10 | | x |

| | 990-PF (2012) IGLEWSKI FAMILY FOUNDATION 36-6109 | 490 | | Page 5 |
|----|--|-----|-------------|--------------|
| | irt 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 | | _ <u>X</u> _ |
| 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 | | <u>X</u> |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ▶ DOROTHY JURS Telephone no. ▶ 239 - 46 | 6-1 | 871 | |
| | Located at ▶9764 MAR LARGO CIRCLE, FORT MEYERS, FL ZIP+4 ▶33 | 919 | <u>-73</u> | 19_ |
| 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 | N | /A | |
| 16 | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | 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 | | | |
| Pa | irt 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 |
| 1. | During the year did the foundation (either directly or indirectly): | | | |
| ıa | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | | | | |
| | | | | |
| | | | | |
| | (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)? | | | |
| | (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.) | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | l l | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | |
| | 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 | | <u>X</u> |
| 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)): | | | |
| а | 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 X No | | | |
| | If "Yes," list the years \blacktriangleright | | | |
| 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? | | | |
| b | olf "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after | 1 | | |
| | 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 | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| | 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 I | ON Form 4720 May Re I | Required (control | 36-61094 | 90 | Page 6 | |
|--|---|-----------------------------|---|---------------------------------------|-------------------------------|--|
| | Onn Travillay De I | ioquireu (contini | 100) | Т- | | |
| 5a During the year did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section) | n 4945(a)\2 | | es X No | | | |
| (1) Carry on propagatida, or otherwise attempt to influence registation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, | | | | | | |
| • • | or to carry on, unecting or main | cony, | es X No | | | |
| any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes | 2 | | es X No | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | | 16 | S LALINO | | | |
| · · · · · · · · · · · · · · · · · · · | ii described iii section | | es X No | | | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? | ar adventional auropeas or | | S LALINO | ľ | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | , or educational purposes, or | | s X No | } | | |
| the prevention of cruelty to children or animals? | dar the avecations described | | S LALINO | | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit | • | in Regulations | NT / A | 5 b | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | • | | N/A | JU | | |
| Organizations relying on a current notice regarding disaster assistance check h | | unad | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f | | | | | | |
| expenditure responsibility for the grant? | | I/A ∐ Ye | es L No | | | |
| If "Yes," attach the statement required by Regulations section 53.494 | | | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | Г 1 | ् च्टीः | | | |
| a personal benefit contract? | anannal harrett and a 10 | <u>نــا</u> ۲۰ | es X No | , | v | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | personal penetit contract? | | <u> </u> | 6b | <u> </u> | |
| If "Yes" to 6b, file Form 8870 | | | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | | Ye | es X No | 76 | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attributions and the second of the seco | | anagana Uinda | | 7b | ٠ | |
| Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors | ees, roundation ivid | anagers, nigniy | y | | | |
| List all officers, directors, trustees, foundation managers and their | compensation. | | m | | | |
| Table all officers and octors a decrease, real address was larger to a first and | | (c) Compensation | (d) Contributions to | (e) E | xpense | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deterred compensation | ačcou | xpense nt, other vances | |
| DOROTHY JURS | PRESIDENT | enter-0-) | Compensation | anov | 1411003 | |
| 9764 MAR LARGO CIRCLE | FKEDIDENI | | | | | |
| FORT MEYERS, FL 33919 | 5.00 | 2,000. | 0. | | 0. | |
| ROSEMARY IGLEWSKI | SECRETARY | 2,000. | - 0. | | | |
| 6537 N. MINNETONKA | DECKLIAKI | | | | | |
| CHICAGO, IL 60646 | 0.00 | 0. | 0. | | 0. | |
| CHICAGO, III 00040 | 0.00 | 1 | 0. | | | |
| | - | | | | | |
| | 1 | | | | | |
| | · · | | | | | |
| | 1 | | | | | |
| | 1 | | | | | |
| 2 Compensation of five highest-paid employees (other than those inc | cluded on line 1). If none, | , enter "NONE." | · · · · · · · · · · · · · · · · · · · | | | |
| | (b) Title, and average | | (d) Contributions to employee benefit plans | (e) E | xpense nt, other | |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deferred compensation | accou allov | nt, other vances | |
| NONE | | | | | | |
| | 1 | | | | | |
| | | | | | | |
| | 1 | | | | | |
| | | 1 | | | | |
| | 1 | | | | | |
| | | | | | | |
| | 1 | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | |
| | 1 | | | | | |
| Total number of other employees paid over \$50,000 | | | • | | 0 | |
| | | | | | _ | |

| Form 990-PF (2012) IGLEWSKI FAMILY FOUNDATION | 36-6 | 109490 Page 7 |
|--|---------------------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundat 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 statistic number of organizations and other beneficiaries served, conferences convened, research papers produced. | cal information such as the ced, etc. | Expenses |
| 1N/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 li | nes 1 and 2. | Amount |
| 1 N/A | | |
| 2 | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| Total. Add lines 1 through 3 | > | |

0 . Form **990-PF** (2012)

| Р | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations, | see instructions) |
|----|---|--------------|-------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 915,334. |
| | Average of monthly cash balances | 1b | 85,270. |
| | Fair market value of all other assets | 1c_ | |
| | Total (add lines 1a, b, and c) | 1d | 1,000,604. |
| | 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 | 1,000,604. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 15,009. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | <u>985,595.</u> |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 49,280. |
| Р | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.) | d certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 49,280. |
| 2a | Tax on investment income for 2012 from Part VI, line 5 | | |
| | Income tax for 2012. (This does not include the tax from Part VI.) | | |
| | Add lines 2a and 2b | 2c | 795. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 48,485. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 48,485. |
| 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 | 48,485. |
| _ | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | EO 100 |
| a | · · · · · · · · · · · · · · · · · · · | 1a | 50,199. |
| 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: | | |
| а | | 3a | |
| b | · | 3b | FO 100 |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 50,199. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | _ | ^ |
| | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 50,199. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years. | qualities fo | r the section |

Form **990-PF** (2012)

36-6109490 Form 990-PF (2012) IGLEWSKI FAMILY FOUNDATION Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Years prior to 2011 Corpus 2011 2012 1 Distributable amount for 2012 from Part XI, 48,485. line 7 2 Undistributed income, if any, as of the end of 2012 0 a Enter amount for 2011 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2012: a From 2007 **b** From 2008 c From 2009 d From 2010 2,286. e From 2011 2,286. f Total of lines 3a through e 4 Qualifying distributions for 2012 from 50,199. Part XII, line 4: ► \$ 0 a Applied to 2011, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 48,485. d Applied to 2012 distributable amount 1,714. e Remaining amount distributed out of corpus Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount 0. must be shown in column (a)) Enter the net total of each column as indicated below: 4,000. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b 0 c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which 0

| | 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 instr. |
| f | Undistributed income for 2012. Subtract |
| | lines 4d and 5 from line 1. This amount must |
| | be distributed in 2013 |
| 7 | Amounts treated as distributions out of |
| | corpus to satisfy requirements imposed by |
| | section 170(b)(1)(F) or 4942(g)(3) |

| 8 | Excess distributions carryover from 2007 |
|----|--|
| | not applied on line 5 or line 7 |
| 9 | Excess distributions carryover to 2013. |
| | Subtract lines 7 and 8 from line 6a |
| 10 | Analysis of line 9: |

| Analysis of line 9: | |
|---------------------------|---|
| a Excess from 2008 | |
| b Excess from 2009 | |
| c Excess from 2010 | |
| d Excess from 2011 | 2 |
| e Excess from 2012 | 1 |
| | |

286.

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|----|----|--------|
| | 0. | |
| | | |
| 0. | | |
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Form **990-PF** (2012)

| | I FAMILY FO | | | | L09490 Page 10 |
|--|---------------------------------------|-------------------------------|--------------------------------|----------------------------|--------------------|
| Part XIV Private Operating F | | | I-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | | | | | |
| foundation, and the ruling is effective for | | | un continu | 14042(1)(2) or 14 | 042(1)(5) |
| b Check box to indicate whether the found | | ng tournoation described T | Prior 3 years | 4942(j)(3) or4 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | (e) Total |
| income from Part I or the minimum | (4) 20 12 | (0) 2011 | (6) 2010 | (0) 2003 | (6) 10(8) |
| investment return from Part X for | | | | | |
| each year listed | | | <u> </u> | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | <u> </u> | <u> </u> |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | ļ. <u>.</u> | | |
| 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 | | | <u> </u> | | |
| 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 | | ļ | | | |
| securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | | | | 1. |
| (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 Info | | | if the foundation | n had \$5,000 or m | ore in assets |
| at any time during | the year-see inst | ructions.) | | | |
| 1 Information Regarding Foundation | on Managers: | | | | |
| a List any managers of the foundation wl | | than 2% of the total con | tributions received by th | e foundation before the cl | ose of any tax |
| year (but only if they have contributed | | | • | | • |
| NONE | | | | | |
| b List any managers of the foundation wi | no own 10% or more of t | he stock of a corporation | (or an equally large port | tion of the ownership of a | partnership or |
| other entity) of which the foundation ha | | | (or any oquality language part | | |
| NONE | | | | | |
| | ion Grant Gift Loar | Scholarchin etc. D | rograme: | | |
| 2 Information Regarding Contribute Check here ▶ ☐ If the foundation | | | | not accept uncollected rec | weste for funde If |
| the foundation makes gifts, grants, etc. | | | | | |
| a The name, address, and telephone nun | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | Siloulu de adulessed. | | |
| DOROTHY JURS, IGLEWS | | | 010 7210 | | |
| 9764 MAR LARGO CIRCI | | YERS, FL 339 | | | |
| b The form in which applications should | | | snoula include: | | |
| WRITTEN STATEMENT OF | CHARTTABLI | E PURPOSE | | | |
| c Any submission deadlines: NONE | | | | | |
| d Any restrictions or limitations on award | ls, such as by geographic | cal areas, charitable fields | kinds of institutions of | other factors: | |
| NONE | o, sadir as by goograping | ou. al out, character holds | ., 51 1110110110110, 01 | | |
| 1101111 | | | | | |

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient or substantial contributor a Paid during the year ALS ASSOCIATION - NATIONAL OFFICE N/A CHARITABLE SUPPORT 1275 K STREET, SUITE 1050 WASHINGTON, DC 20005 1,000. N/A CHARITABLE SUPPORT ALS ASSOCIATION - ST LOUIS CHAPTER 2258 WELDON PARKWAY 500. ST LOUIS, MO 63146 AMERICAN HEART ASSOCIATION N/A CHARITABLE SUPPORT 7272 GREENVILLE AVE 500. DALLAS TX 75231 CHARITABLE SUPPORT CARINGBRIDGE N/A 1715 YANKEE DOODLE RD, STE 301 500, EAGEN, MN 55121 CHARITABLE SUPPORT CHILDREN'S MEMORIAL HOSPITAL N/A 2300 CHILDREN'S PLAZA 1,000. CHICAGO IL 60614-3363 CONTINUATION SHEET(S) **▶** 3a 45 500. Total **b** Approved for future payment NONE Total

| Part XVI-A | Anal | roin of | Incomo | Droducino | Activities |
|------------|-------|---------|-------------------------|-----------|------------|
| Parl Avi-A | Allal | 7313 01 | IIICOIII c - | rioducing | ACLIVILIES |

| | Unrelated | business income | Evelude | ed by section 512, 513, or 514 | |
|---|--------------------|---------------------------------------|--|---|---------------------------------------|
| Enter gross amounts unless otherwise indicated. | (a) Business | (b) Amount | (C) Exclu- sion code | (d) Amount | (e) Related or exempt function income |
| 1 Program service revenue: | code | | code | | |
| 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 | | | 14 | 39,755. | |
| 5 Net rental income or (loss) from real estate: | | · · · · · · · · · · · · · · · · · · · | - | | |
| a Debt-financed property | | | | | <u> </u> |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | i | | | | |
| 9 Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue: | | | | | |
| a | | | | | |
| b | | · ·· | | | |
| C | | | | | |
| d | | | | | |
| e | | | | 20 555 | |
| 12 Subtotal. Add columns (b), (d), and (e) | <u> </u> | 0. | 11 | 39,755. | |
| 13 Total Add line 12, columns (b), (d), and (e) | | | | 13 | 39,733. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities | to the Accoi | nplishment of Ex | kempt | Purposes | |
| Line No. Explain below how each activity for which inco | ome is reported in | column (e) of Part XVI-A | \ contribi | uted importantly to the accom | plishment of |
| the foundation's exempt purposes (other than | | | | , | • |
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2) IGLEWSKI FAMILY FOUNDATION 36-6109490 Page 13
Information Regarding Transfers To and Transactions and Relationships With Noncharitable

| | | Exempt Organi | izations | | | | · · · · · · · · · · · · · · · · · · · | | | |
|---------|-----------------|------------------------------------|------------------------------|------------------|--|------------------------|---|------------------------|----------|------------|
| | old the org | anization directly or indir | ectly engage in any of | the following | g with any other organizatio | n described in section | on 501(c) of | | Yes | No |
| ti | he Code (d | other than section 501(c) | (3) organizations) or in | n section 527 | 7, relating to political organi | ızatıons? | | 1 | | |
| a T | ransfers f | rom the reporting founda | ition to a noncharitable | e exempt org | anization of: | | | | | |
| (| 1) Cash | | | | | | | 1a(1) | | X |
| - | 2) Other | assets | | | | | | 1a(2) | | X |
| |) ther trans | | | | | | | | | |
| | | of assets to a noncharitat | ble exempt organization | n | | | | 1b(1) | | X |
| • | • | ases of assets from a nor | | | | | | 1b(2) | | X |
| | • | of facilities, equipment, o | | | | | | 1b(3) | | X |
| • | • | ursement arrangements | | | | | | 1b(4) | | X |
| | • | or loan guarantees | | | | | | 1b(5) | | X |
| | • | mance of services or mei | mbership or fundraisin | ig solicitation | าร | | | 1b(6) | | X |
| | • | facilities, equipment, mai | | | | | | 1c | | X |
| | _ | | - | | dule. Column (b) should alv | vays show the fair m | arket value of the goods, o | ther ass | sets, | |
| | | | | | d less than fair market valu | | | | | |
| C | olumn (d) | the value of the goods, o | other assets, or service | es received. | | | | | | |
| a) Line | e no | (b) Amount involved | (c) Name of no | oncharitable | exempt organization | (d) Description | of transfers, transactions, and | sharing ar | rangeme | ints |
| | | | | N/A | • | | W.C. 11 - 11 - 11 - 11 - 11 - 11 - 11 - 1 | | | |
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| 2a | s the foun | idation directly or indirect | tly affiliated with, or rela | ated to, one | or more tax-exempt organi | zations described | · <u>-</u> | | | |
| | | 501(c) of the Code (other | | | | | | Yes | X | □No |
| ь | f "Yes," co | mplete the following sch | edule. | | | | | | | |
| | | (a) Name of org | | | (b) Type of organization | (| c) Description of relations | пр | | |
| - | | N/A | | | | | | | | |
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| | | | | | · | | | | | |
| | Under | penalties of perjury, I declare | that I have examined this re | eturn, includin | g accompanying schedules and n taxpayer) is based on all inform | statements, and to the | Ma' | the IRS | discuss | this |
| Sig | n 🛌 | nier, it is true, correct, and nor | inplete Declaration of prepa | ater (otner than | Taxpayer) is based off all fillions | Pare | | rn with th wn below | | |
| Hei | e 上 | $\chi \qquad p \sim$ | pers | | 1 7 / 16/ | 3 | ·/ L | X Yes | ; | J No |
| | Sign | ature of officer or trustee | | | Date | Title | | | | |
| | | Print/Type preparer's na | ame F | Preparer's si | gnature | Date | Check I If PTIN | | | |
| _ | _ | | | / 1 | | 3/16/13 | self- employed | | . | |
| Pai | | ROY RAEMER | | roy | Kaemer | 116/13 | | 0030 | | |
| | parer | Firm's name ► STE | INBERG ADV | /I S ORS | , LTD. | | Firm's EIN ► 36-4 | 3201 | 68 | |
| Use | Only | | | | | | | | | |
| | | Fırm's address ▶ 5 | | | | | | _ | _ | |
| | | NO. | RTHBROOK, | <u>IL 60</u> | 062 | | Phone no. (847 | 20 | 5-4 | <u>700</u> |
| | | | | | | | r. | no/ | | (DA4A) |

| ENVIRONMENT OF PEOPLE FD 11846 VENTURA BLVD, STE 208 FIUDIO CITY, CA 91604 7.1.S.H. OF SANIBEL 1.630 PERIWINKLE WAY, UNIT B 1.630 PERIWINKLE WAY, UNIT B 1.631 PERIWINKLE WAY, UNIT B 1.631 PERIWINKLE WAY, UNIT B 1.631 PERIWINKLE WAY, UNIT B 1.64 CHARITABLE 1.65 SUPPORT 1.65 SANIBEL, FL 33957 2.0 FISHER HOUSE FOUNDATION 1.11 NOCKVILLE PIKE STE 201 1.0 FOUNDATION SKATE MINISTRY 1.0 CHARITABLE 1.0 | Part XV Supplementary Information | | | | |
|--|------------------------------------|--|--------------|----------------------------------|----------|
| NAME AND ADDRESS (NOME OF DUSINESS) Show any restancish to a surpression of real of contribution of contribut | | | | | _ |
| CONTRIBUTION TO COMMANDOS N/A CHARITABLE SUPPORT COUNT PLEASANT, SC 29464 3,0 HERINCH WORLD SERVICE CROP HUNGER ALK REGGE PHILLIPS STREET LEMBART, IN 46514 1,0 ROVIRONMENT OF PROPLE FD 1,46 VI.S.H. OF SANIBEL 630 PERINININIA HUTD, STE 208 TUDIO CITY, CA 21504 1,0 VI.S.H. OF SANIBEL 630 PERINININIA HAY, UNIT B GOVER PARK, IL 61132 TIRST LOVE INTERNATIONAL O. BOX 15836 GOVER PARK, IL 61132 TIRST HOUSE FOUNDATION 11 ROCKVILLE PIKE STE 201 COCKVILLE, MD 20850 A.0 COUNDATION SKATE MINISTRY OCCOMBISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 5. SUPPORT THARTABLE SUPPORT CHARITABLE SUPPORT COUNDATION SKATE MINISTRY OCCOMBISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 5. SUPPORT CHARITABLE CHARITABLE CHARITABLE SUPPORT CHARITABLE CHARITABLE CHARITABLE CHARITABLE CHARIT | | show any relationship to any foundation manager | status of | Purpose of grant or contribution | Amount |
| O.D. BOX 2131 OUNT FLEASANT, SC 29464 HRUNCH WORLD SERVICE CROP HUNGER ALK ALK 18606 PHILLIPS STREET LEHART, IN 46514 1.0 NVIRONMENT OF PEOPLE FD 1846 VENTURA BLVD, STE 208 TUDIO CITY, CA 91604 1.0 1.1.S.H. OF SANIBEL 630 PERTWINKLE WAY, UNIT B ANAIDER, FL 33957 ANAIDER, FL 33957 ANAIDER, FL 33957 ANAIDER, FL 33957 1.0 THARITABLE SUPPORT THARITABLE SUPPORT 1.0 CHARITABLE SUPPORT CHARITABLE SUPPORT 1.0 CHARITABLE SUPPORT CHARITABLE CHARITABLE | | or substantial contributor | recipient | | |
| OUNT FLEASANT, SC 23464 3.0 HAURCH WORLD SERVICE CROP HUNGER ALK 8606 PHILLIPS STREET LEHART, IN 46514 1.0 NVIRONMENT OF PEOPLE PD 1846 VERTURA BLVD, STE 208 TUDIO CITY, CA 91604 1.0 I.S.H. OF SANIBEL 630 PERINTHKLE WAY, UNIT B ANIBEL, PL 33957 2.0 IRST LOVE INTERNATIONAL O. SOX 15836 OVES PARK, IL 51332 1.0 TEHER HOUSE FOUNDATION 11 ROCKVILLE PIKE STE 201 OCKVILLE, NO 80856 1.0 CHARITABLE SUPPORT CHARITABLE SUPPORT 1.0 CHARITABLE SUPPORT CHARITABLE SUPPORT 1.0 CHARITABLE SUPPORT CHARITABLE C | | | | | |
| SUPPORT SUP | | N/A | CHARITABLE | SUPPORT | |
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| 1846 VENTURA BLVD, STE 208 TUDIO CITY, CA 91604 1,0 1,1.S.H. OF SANIBEL 630 PERIWINKLE WAY, UNIT B 630 PERIWINKLE WAY, UNIT B 631 PERIWINKLE WAY, UNIT B 631 PERIWINKLE WAY, UNIT B 632 PERIWINKLE WAY, UNIT B 633 PERIWINKLE WAY, UNIT B 641 PERIWINKLE WAY, UNIT B 653 PERIWINKLE WAY, UNIT B 654 PERIWINKLE WAY, UNIT B 655 PERIWINKLE WAY, UNIT B 656 PERIWINKLE WAY, UNIT B 657 PERIWINKLE WAY, UNIT B 658 PERIWINKLE WAY, UNIT B 658 PERIWINKLE WAY, UNIT B 659 PERIWINKE WAY, UNIT B 659 PERIWIN | | | | | 1,00 |
| 1846 VENTURA BLVD, STE 208 TUDIO CITY, CA 91604 1,0 1,1.S.H. OF SANIBEL 630 PERIWINKLE WAY, UNIT B 630 PERIWINKLE WAY, UNIT B 631 PERIWINKLE WAY, UNIT B 631 PERIWINKLE WAY, UNIT B 632 PERIWINKLE WAY, UNIT B 633 PERIWINKLE WAY, UNIT B 641 PERIWINKLE WAY, UNIT B 653 PERIWINKLE WAY, UNIT B 654 PERIWINKLE WAY, UNIT B 655 PERIWINKLE WAY, UNIT B 656 PERIWINKLE WAY, UNIT B 657 PERIWINKLE WAY, UNIT B 658 PERIWINKLE WAY, UNIT B 658 PERIWINKLE WAY, UNIT B 659 PERIWINKE WAY, UNIT B 659 PERIWIN | | | | | |
| 1.046 VENTURA BLVD, STE 208 TITUIO CITY, CA 91604 1,0 1,1.S.H. OF SANIBEL 1.610 PERIMINKLE WAY, UNIT B SANIBEL, FL 33957 2,0 PIRST LOVE INTERNATIONAL 1.0. BOX 15336 COVES PARK, IL 61132 1.0 PISHER HOUSE FOUNDATION 1.1 ROCKVILLE PIKE STE 201 COCKVILLE, MD 20850 1.0 POUNDATION SKATE MINISTRY 1.0 POUNDATION SKATE MINISTRY 1.0 POUNDATION SKATE MINISTRY 1.0 POUNDATION SKATE MINISTRY 1.0 POUNDATION SKATE WORLD VILLAGE 1.0 POUNDATION BASS ROAD 1.0 POUNDATION SKATE WORLD VILLAGE 1.0 POUNDATION BASS ROAD 1.0 POUNDATION BASS ROAD 1.0 POUNDATION SKATE WORLD VILLAGE 1.0 POUNDATION BASS ROAD 1.0 POUNDATION BASS ROA | NAVIDONA/NA OD DDODI I DO | | | din non m | |
| FILIDIO CITY, CA 91604 1.0 F.I.S.H. OF SANIBEL 1630 PERIWINKLE WAY, UNIT B SANIBEL, FL 33957 2.0 FIRST LOVE INTERNATIONAL 1.0. BOX 15836 LOVES PARK, IL 61132 1.0 FISHER HOUSE FOUNDATION 1.11 ROCKVILLE PIKE STE 201 1.0 FOUNDATION SKATE MINISTRY 1.00 COMMISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 31VE THE KIDS THE WORLD VILLAGE 1.0 SILVE THE KIDS THE WORLD VILLAGE 1.0 SILVE THE KIDS THE WORLD VILLAGE 1.0 CARRITABLE SUPPORT CHARITABLE SUPPORT | | N/A | CHARITABLE | SUPPORT | |
| CARITABLE SUPPORT CARTABLE SUPPORT CONCESS PARK, IL 61132 CHARITABLE SUPPORT COCKVILLE PINE STE 201 COCKVILLE, MD 20850 COUNDATION SKATE MINISTRY COCKVILLE, MD 20850 COUNDATION SKATE MINISTRY COCKVILLE, TX 78029 COUNDATION SKATE MINISTRY COCKVILLE, TX 78029 CHARITABLE SUPPORT | • | | | | 1 00 |
| AND PERIMINKLE WAY, UNIT B AND PERIMINKLE WAY, UNIT B AND STREET LOVE INTERNATIONAL POOL SON 15836 AND 158 | 30510 CITT, CR 71004 | | | | 1,00 |
| ANNIBEL, FL 33957 2.0 CRIST LOVE INTERNATIONAL A.O., BOX 15836 COVES PARK, IL 61132 1.0 CISHER HOUSE FOUNDATION 11 ROCKVILLE PIKE STE 201 COUNDATION SKATE MINISTRY COCOMMISSION TO EVERY NATION, PO BOX 291307 KERRVILLE, TX 78029 3.0 CHARITABLE SUPPORT | | | | | |
| PARTIBEL, FL 33957 PARTITION INTERNATIONAL P.O. BOX 15836 POURS PARK, IL 61132 POURS PARK, IL 61132 POURDATION POUNDATION POUNDATION SKATE MINISTRY POUNDATION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 POUNDATION SKATE WORLD VILLAGE POUNDATION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 POUNDATION SKATE WORLD VILLAGE POUNDATION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 POUND | I.S.H. OF SANIBEL | N/A | CHARITABLE | SUPPORT | |
| CHARITABLE SUPPORT C.O. BOX 15836 COVES PARK, IL 61132 1.0 VISHER HOUSE FOUNDATION 1.1 ROCKVILLE PIKE STE 201 COCKVILLE, MD 20850 1.0 COUNDATION SKATE MINISTRY 1.70 COMMISSION TO EVERY NATION, PO 1.80X 291307 KEERVILLE, TX 78029 31VE THE KIDS THE WORLD VILLAGE 1.0 CHARITABLE SUPPORT CHARITABLE SUPPORT 1.0 CHARITABLE SUPPORT 1.0 CHARITABLE SUPPORT 1.0 CHARITABLE SUPPORT | .630 PERIWINKLE WAY, UNIT B | ļ | | | |
| P.O. BOX 15836 POWES PARK, IL 61132 TISHER HOUSE FOUNDATION N/A CHARITABLE SUPPORT 1, 0 POUNDATION SKATE MINISTRY POUNDATION SKATE MINISTRY POUNDATION SKATE MINISTRY POWERY NATION, PO BOX 291307 KEERVILLE, TX 78029 TO COMMISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 SOLIVE THE KIDS THE WORLD VILLAGE N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT ALSE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 ALSE MEMORIAL HEALTH SYSTEM, PO BOX CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT | SANIBEL FL 33957 | | | | 2,00 |
| P.O. BOX 15836 OVES PARK, IL 61132 PISHER HOUSE FOUNDATION N/A CHARITABLE SUPPORT 1, 0 POUNDATION SKATE MINISTRY POUNDATION POUNDATION, PO SOX 291307 KEERVILLE, TX 78029 SOURCE THE KIDS THE WORLD VILLAGE N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT SOLISANO CHILDREN'S HOSPITAL LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 MISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT CHARITABLE SUPPORT | | | | | , |
| P.O. BOX 15836 LOVES PARK, IL 61132 PISHER HOUSE FOUNDATION N/A CHARITABLE SUPPORT 1.0 POUNDATION SKATE MINISTRY COMMISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 SIVE THE KIDS THE WORLD VILLAGE ALISSIMMEE, FL 34746 N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT ALISSIMMEE, FL 34746 1.0 CHARITABLE SUPPORT | FIRST LOVE INTERNATIONAL | N/A | CHARITABLE | SUPPORT | |
| COVES PARK, IL 61132 1,0 FISHER HOUSE FOUNDATION N/A CHARITABLE SUPPORT | | ,, | | | |
| ROCKVILLE PIKE STE 201 ROCKVILLE, MD 20850 1,0 POUNDATION SKATE MINISTRY DO COMMISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 5 SIVE THE KIDS THE WORLD VILLAGE RISSIMMEE, FL 34746 1,0 SOLISANO CHILDREN'S HOSPITAL LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT | LOVES PARK IL 61132 | | | | 1,00 |
| ACCEVILLE PIKE STE 201 ACCEVILLE, MD 20850 1,0 COUNDATION SKATE MINISTRY CO COMMISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 5 SIVE THE KIDS THE WORLD VILLAGE ALIO SOUTH BASS ROAD CISSIMMEE, FL 34746 1,0 CHARITABLE SUPPORT | | | | | |
| ROCKVILLE PIKE STE 201 ROCKVILLE, MD 20850 1,0 POUNDATION SKATE MINISTRY DO COMMISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 5 SIVE THE KIDS THE WORLD VILLAGE RISSIMMEE, FL 34746 1,0 SOLISANO CHILDREN'S HOSPITAL LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT | | | | | |
| ROCKVILLE, MD 20850 1,0 FOUNDATION SKATE MINISTRY C/O COMMISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 5 SIVE THE KIDS THE WORLD VILLAGE RISSIMMEE, FL 34746 1,0 GOLISANO CHILDREN'S HOSPITAL LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT CHARITABLE SUPPORT SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT | | N/A | CHARITABLE | SUPPORT | |
| FOUNDATION SKATE MINISTRY N/A CHARITABLE SUPPORT CHARITABLE SUPPORT SIVE THE KIDS THE WORLD VILLAGE N/A CHARITABLE SUPPORT | | | | | 1 00 |
| C/O COMMISSION TO EVERY NATION, PO SOX 291307 KEERVILLE, TX 78029 SIVE THE KIDS THE WORLD VILLAGE AND CHARITABLE SUPPORT | COCKVIEDE MD 20030 | | | | 1,00 |
| C/O COMMISSION TO EVERY NATION, PO BOX 291307 KEERVILLE, TX 78029 SIVE THE KIDS THE WORLD VILLAGE AND CHARITABLE SUPPORT | | | | · | |
| SOX 291307 KEERVILLE, TX 78029 GIVE THE KIDS THE WORLD VILLAGE N/A CHARITABLE SUPPORT HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT | COUNDATION SKATE MINISTRY | N/A | CHARITABLE | SUPPORT | |
| GIVE THE KIDS THE WORLD VILLAGE N/A CHARITABLE SUPPORT 210 SOUTH BASS ROAD KISSIMMEE, FL 34746 1,0 GOLISANO CHILDREN'S HOSPITAL LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT 5,0 | C/O COMMISSION TO EVERY NATION, PO | | | | |
| CISSIMMEE, FL 34746 COLISANO CHILDREN'S HOSPITAL LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT CHARITABLE SUPPORT | 30X 291307 KEERVILLE, TX 78029 | | | | 50 |
| CISSIMMEE, FL 34746 COLISANO CHILDREN'S HOSPITAL LEE MEMORIAL HEALTH SYSTEM, PO BOX CISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT | | | | | |
| CISSIMMEE, FL 34746 COLISANO CHILDREN'S HOSPITAL LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT CHARITABLE SUPPORT | GIVE THE KIDS THE WORLD VILLAGE | N/A | CHARITABLE | SUPPORT | |
| GOLISANO CHILDREN'S HOSPITAL LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT CHARITABLE SUPPORT | | [| | | |
| LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT 332 NORTH BROADWAY | CISSIMMEE, FL 34746 | | | | 1,00 |
| LEE MEMORIAL HEALTH SYSTEM, PO BOX (218 FORT MEYERS, FL 33902 SISTIOCYTOSIS ASSO OF AMERICA (32 NORTH BROADWAY) SOME MEMORIAL HEALTH SYSTEM, PO BOX (5,0) CHARITABLE SUPPORT | | | | | |
| LEE MEMORIAL HEALTH SYSTEM, PO BOX 1218 FORT MEYERS, FL 33902 SISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT 32 NORTH BROADWAY | | | | | |
| 2218 FORT MEYERS, FL 33902 5,0 MISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT 32 NORTH BROADWAY | | N/A | CHARITABLE | SUPPORT | |
| HISTIOCYTOSIS ASSO OF AMERICA N/A CHARITABLE SUPPORT | • | | | | |
| 332 NORTH BROADWAY | 2210 FORT MEYERS, FL 33902 | | | | 5,00 |
| 332 NORTH BROADWAY | | | | | |
| | HISTIOCYTOSIS ASSO OF AMERICA | N/A | CHARITABLE | SUPPORT | |
| PITMAN, NJ 08071 2.0 | 332 NORTH BROADWAY | | | | |
| Total from continuation sheets 42.0 | | <u> </u> | .l | <u> </u> | 2,00 |

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of show any relationship to Purpose of grant or Amount contribution any foundation manager Name and address (home or business) or substantial contributor recipient INTERNATIONAL ESSENTIAL TREMOR FD N/A CHARITABLE SUPPORT PO BOX 14005 1,000. LENEXA KS 66285 LEE MEMORIAL HEALTH SYSTEMS N/A CHARITABLE SUPPORT P.O. BOX 2218 1,000, FORT MYERS, FL 33902 N/A SUPPORT LET'S TALK ABOUT CHILDREN CHARITABLE FORT MYERS FL 1,000. LURIE CHILDREN'S HOSPITAL OF CHICAGO N/A CHARITABLE SUPPORT 225 E CHICAGO 5,000, CHICAGO, IL 6011 CHARITABLE SUPPORT MELODEERS CHORUS N/A P.O. BOX 2112 1,000, NORTHBROOK, IL 60065 N/A CHARITABLE SUPPORT NEW KINGDOM TRAILRIDERS 4343 16TH STREET 1,000. MOLINE, IL 61265 OASIS FOR ORPHANS N/A CHARITABLE SUPPORT P.O. BOX 524 1,000. WADSWORTH, IL 60083 CHARITABLE SUPPORT P-H-M EDUCATIONAL FOUNDATION N/A 55900 BITTERSWEET RD 1,000. MISHAWAKA IN 46545 SUPPORT PARKINSON'S ACTION NETWORK N/A CHARITABLE 1025 VERMONT AVE. NW, SUITE 1120 1,000. WASHINGTON DC 20005 PEDIATRIC BRAIN TUMOR FOUNDATION N/A CHARITABLE SUPPORT 302 RIDGEFIELD COURT 1,000. ASHEVILLE NC 28806 Total from continuation sheets

IGLEWSKI FAMILY FOUNDATION

Part XV | Supplementary Information

| 3 Grants and Contributions Paid During the Y | | | | |
|--|--|----------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| | | | | |
| PIZZA 4 PATRIOTS | N/A | CHARITABLE | SUPPORT | |
| P.O. BOX 542 | | | | 1 00 |
| ELK GROVE VILLAGE, IL 60009 | | | | 1,000 |
| RONALD MCDONALD HOUSE CHICAGOLAND AND | N/A | CHARITABLE | SUPPORT | |
| NORTHWEST INDIANA | | | | |
| 1900 SPRING ROAD, SUITE 300 DAK BROOK, IL 60523 | | | | 1,000 |
| DAK BROOK, IL 80323 | | | | 1,000 |
| | | | | |
| SACRED HEART SCHOOL 1095 GAGE STREET | N/A | CHARITABLE | SUPPORT | |
| WINNETKA IL 60093 | | | | 5,000 |
| | | | | |
| CURAL FOUNDATION | 7.73 | CUADITA DI E | GIID DOD W | |
| SEDOL FOUNDATION 18160 GAGES LAKE ROAD | N/A | CHARITABLE | SUPPORT | |
| GAGES LAKE, IL 60030 | | | | 2,500 |
| | | | | |
| UNIVERSITY OF FLORIDA | N/A | CHARITABLE | SUPPORT | |
| P.O. BOX 14425 | N/A | | | |
| GAINSEVILLE FL 32604 | | | | 1,000 |
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| Total from continuation sheets | | | | |

| FORM 990-PF DIVIDEN | NDS AND | INTER | EST | FROM | SECUE | RITIES | STATEMENT | 1 |
|---|---------|---------------------|-------|-----------------------|--------------|------------------------------|-----------|------------|
| SOURCE | | GROSS | AMO | UNT | | TAL GAINS | COLUMN (A | 7) |
| MORGAN STANLEY SMITH BARNEY | • | | 39, | 755. | | 0. | 39,7 | 55. |
| TOTAL TO FM 990-PF, PART I, | LN 4 | | 39, | 755. | | 0. | 39,7 | 55. |
| FORM 990-PF | AC | COUNTI | NG E | EES | | | STATEMENT | 2 |
| DESCRIPTION | EXPE | A) NSES BOOKS | | | EST- COME | (C) ADJUSTED NET INCOM | | |
| STEINBERG ADVISORS | | 2,650. | | | 0. | | 2,6 | 50. |
| TO FORM 990-PF, PG 1, LN 16E | 3 | 2,650. | | | 0. | | 2,6 | 50. |
| FORM 990-PF | | TAX | ES | | - | | STATEMENT | 3 |
| DESCRIPTION | EXPE | A) NSES BOOKS | | (B) INVI IT INC | EST- COME | (C) ADJUSTED NET INCOM | | |
| FEDERAL EXCISE TAX ESTIMATED TAX PAYMENTS | | 592. 1,020. | | | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | | 1,612. | : === | | 0. | | | 0. |
| FORM 990-PF | 0 | THER E | XPEN | ISES | | | STATEMENT | 4 |
| DESCRIPTION | EXPE | A) NSES BOOKS | | (B) INVI IT INC | | (C) ADJUSTED NET INCOM | | |
| FILING FEES BANK FEES | | 28. 21. | | | 0. | | | 28. 21. |
| TO FORM 990-PF, PG 1, LN 23 | - | 49. | | | 0. | | | 49. |

| FORM 990-PF CO | RPORATE STOCK | | STATEMENT 5 |
|---|---------------------|--|---|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| VERIZON AMEREN DUKE ENERGY SPECTRA ENERGY DNP SELECT INCOME FUND INC PACIFIC GAS & ELECTRIC AT&T EXELON HEALTH CARE PROPERTY INVESTORS INC FRONTIER COMMUNICATIONS CORP AGL RESOURCES INC | - | 10,000. 63,076. 34,087. 24,571. 17,085. 17,777. 18,991. 22,511. 55,350. 373. 61,104. | 61,184. 68,690. 82,940. 53,391. 19,234. 80,360. 124,356. 52,045. 101,610. 1,451. 100,485. |
| TOTAL TO FORM 990 II, IIMI II, BIN | : | | |
| FORM 990-PF OTH | ER INVESTMENTS | | STATEMENT |
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| PRUDENTIAL SHORT-TERM CORPORATE BOND PIMCO TOTAL RETURN FUND CL C | COST | 60,065. 63,963. | 60,670 66,079 |
| TOTAL TO FORM 990-PF, PART II, LIN | JE 13 | 124,028. | 126,749 |