

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

Department of the Treasury Internal Revenue Service

Name of the organization

## Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

2012

The Romana Charit	able Foundation		46-1306732
Organization type (check one).	July 10 and a City		10 1300732
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation	
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt chantable trust treated as a private foundation	า	
	501(c)(3) taxable private foundation		
General Rule  For an organization filing F	orm 990, 990-EZ, or 990-PF that received, dunng the year, \$5,000 or mo		
from any one contributor. ( Special Rules	Complete Parts I and II.		
For a section 501(c)(3) org	anization filing Form 990 or 990-EZ that met the 33 1/3% support test of nd 170(b)(1)(A)(vi) and received from any one contributor, during the yeathe amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1	ar, a co	ntribution of the greater
during the year, total contri	, or (10) organization filing Form 990 or 990-EZ that received from any orbutions of more than \$1,000 for use exclusively for religious, charitable, sposes, or the prevention of cruelty to children or animals. Complete Parts	scientific	c,
the year, contributions for to more than \$1,000. If this religious, charitable, etc., p	, or (10) organization filing Form 990 or 990-EZ that received from any ouse exclusively for religious, chantable, etc., purposes, but these contributions is checked, enter here the total contributions that were received dulinguished. Do not complete any of the parts unless the <b>General Rule</b> appreciations, chantable, etc., contributions of \$5,000 or more during the year	ring the	lid not total? [1] 3
or 990-PF), but it must answer "N	ot covered by the General Rule and/or the Special Rules does not file So No" on Part IV, line 2 of its Form 990; or check the box on line H of its For s not meet the filing requirements of Schedule B (Form 990, 990-EZ, or	rm 990-	-EZ or on Part I, line 2, of its

Name of organization

Employer identification number

The Romana Charitable Foundation

46-1306732

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	Tracy Campbell  1350 Lake Shore Dr Chicago, IL 60610	\$ <u>174,000</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II of there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s RE	Person Payro(I) Noncash (Complete Rart II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) OGL	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

## 990 SCHEDULE OF SUBSTANTIAL CONTRIBUTORS

Attachment 1: page 1 - 990-PF Open to Public	Page 4, Part VII-A, Line 10
Inspection For calendar year 2012, or tax period be	
Name of Organization	Employer Identification Number
<u> The Romana Charitable Foundati</u>	
Name of Contributor	Address of Contributor
Tracy M Campbell	1350 North Lake Shore Drive
	Chicago, IL 60610
	-