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Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury

_		evenue Service Note: The Touridation That					04/20 0012
F		endar year 2012 or tax year beginning		01 ,2012,		A Employer identific	04/30, 20 13
		of foundation RUGGLES FAMILY FOUN	IDATION NORTHER	IN TRUST,	NA		
		CO-TRUSTEE 02-54420					6381931
	Numb	er and street (or PO box number if mail is not delivered	d to street address)		Room/suite	B Telephone numbe	r (see instructions)
_	P.0	. BOX 803878				31	2- 630-6000
	City oi	town, state, and ZIP code					
						C If exemption applicat pending, check here	ion is
	CHI	CAGO, IL 60680					
rG,	Che	ck all that apply Initial return	Initial return	of a former p	ublic charity	D 1 Foreign organizati	ons, check here
Ξ		Final return	Amended ref	turn		2 Foreign organizati	
\subseteq		Address change	Name chang	e		85% test, check he computation	
H	Che	ck type of organization: X Section 501	c)(3) exempt private f	oundation		E 16	
1		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr		ion	E If private foundation under section 507(b)	~
É			unting method: X C	ash Acc	rual	F If the foundation is in	
2			ther (specify)				(1)(B), check here .
	F1.6)		column (d) must be or	n cash basıs.)		-	
•		Analysis of Revenue and Expenses (The	(a) Revenue and				(d) Disbursements
	<u>.</u>	total of amounts in columns (b), (c), and (d)	expenses per	(b) Net inve		(c) Adjusted net	for charitable purposes
Ë		may not necessarily equal the amounts in column (a) (see instructions))	books	incom	ic	income	(cash basis only)
ť	4	Contributions, gifts, grants, etc., received (attach schedule) .	821,391.				
	NP(F)	if the foundation is not required to	021,001.				
	3	Interest on savings and temporary cash investments			1		
			50.		50.		STMT 1
	4	Dividends and interest from securities					
	1	Gross rents	· 				
	l	Net rental income or (loss)					
ne		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all					
Revenue	_	assets on line 6a					
æ	7	Capital gain net income (from Part IV, line 2) .		1			
	8	Net short-term capital gain					
	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·					
		and allowances · · · ·		<u> </u>			
	I	Less Cost of goods sold .					· · · · · · · · · · · · · · · · · · ·
	l	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	001 441	-	<u> </u>		
_	12	Total Add lines 1-through 11			50.		158
	13	Compensation of officers, directors, thustees, etc.	1,575.		1,417.	NONE	150
Š	14	Other employee salaries and wages			NONE	NONE	
nse	15	Pension plans, employee benefits	-		NONE	NONE	
g	16a	Legal fees (attach schedule)	2 000	<u> </u>	1 000	MONT	1 000
and Administrative Expenses	Ь	Accounting fees (attach schedule) STMT 2	2,000.		1,000.	NONE	1,000
<u>ĕ</u> .	C	Other professional fees (attach schedule)				·	
rat	17	Interest					
ist	18	Taxes (attach schedule) (see instructions)					
Ē	19	Depreciation (attach schedule) and depletion.					
Ad	20	Occupancy					
P	21	Travel, conferences, and meetings			NONE	NONE	
ē	22	Printing and publications			NONE	NONE	
Operating	23	Other expenses (attach schedule)					
3rai	24	Total operating and administrative expenses.					
ă	{	Add lines 13 through 23	3,575.		2,417.	NONE	
	25	Contributions, gifts, grants paid	652,500.				652,500
_	26	Total expenses and disbursements Add lines 24 and 25	656,075.		2,417.	NONE	653,658
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	165,366.				
	Ь	Net investment income (if negative, enter -0-)			-0-		
	c	Adjusted net income (If negative, enter -0-)					

JSA For Paperwork Reduction Act Notice, see instructions.

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D	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	f year
	3114	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	721,665.	887,029.	887,029.
		Savings and temporary cash investments			
	3	Accounts receivable			
		Less [,] allowance for doubtful accounts ▶			
		Pledges receivable			
		Less: allowance for doubtful accounts ▶			
		Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts ▶NONE			
S		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations (attach schedule),			
		Investments - corporate stock (attach schedule)		-	
		Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings,			
		and equipment basis Less accumulated depreciation (attach schedule)			
	12	(attach schedule) Investments - mortgage loans			
		Investments - other (attach schedule)			
	14	Land, buildings, and			
		Less accumulated depreciation (attach schedule)			
	15	(attach schedule) Other assets (describe			
		Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	721,665.	887,029.	887,029.
\neg		Accounts payable and accrued expenses			
		Grants payable			
S		Deferred revenue			
itie		Loans from officers, directors, trustees, and other disqualified persons			
Liabilities		Mortgages and other notes payable (attach schedule)			
Ë		Other liabilities (describe			
		•		-	
	23	Total liabilities (add lines 17 through 22)		NONE	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			
Net Assets or Fund Balances		Temporarily restricted			
Ba		Permanently restricted			
Pu		Foundations that do not follow SFAS 117,			
Ŧ		check here and complete lines 27 through 31.			
ō		Capital stock, trust principal, or current funds	721,665.	887,029.	
ets		Paid-in or capital surplus, or land, bldg , and equipment fund			
155		Retained earnings, accumulated income, endowment, or other funds			
et /		Total net assets or fund balances (see instructions)	721,665.	887,029.	
ž		Total liabilities and net assets/fund balances (see	, , , , , , , , , , , , , , , , , , , ,		
		instructions)	721,665.	887,029.	
Р		Analysis of Changes in Net Assets or Fund		<u> </u>	
_		net assets or fund balances at beginning of year - Part		must agree with	
		f-year figure reported on prior year's return)			721,665.
2	Enter	amount from Part I, line 27a		2	165,366.
3	Other	increases not included in line 2 (itemize) ▶		3	
		ines 1, 2, and 3			887,031.
		ases not included in line 2 (itemize) ► COST ADJUSTMENT - 1	ROUNDING	5	2.
		net assets or fund balances at end of year (line 4 minus lin		line 30 6	887,029.
_					Form 990-PF (2012)

E	Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
	(a) List and	describe the kind(s) of property sold (e	e.g., real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
_	2-story bi	rick warehouse; or common stock, 200	shs MLC Co.)	P - Purchase D - Donation	(mo., day, yr.)	(mo , day, yr)
1	<u> </u>					
	b			ļ		
_	<u> </u>					
_	d					
_	e					<u> </u>
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
	a			ļ		
ᆜ	<u> </u>		· · · · · · · · · · · · · · · · · · ·			
	<u> </u>					
_	<u>d</u>					
_	e			 		
_	Complete only for assets s	howing gain in column (h) and owned			Gains (Col. (h) ga (k), but not less t	
_	(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	COI.	Losses (from co	
	a			ļ 		
_!	<u> </u>					
	<u> </u>					
_9	<u> </u>					
_	<u> </u>		<u> </u>	 		
2	Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
3		or (loss) as defined in sections 122				
	_	t I, line 8, column (c) (see instr				
		 		3		
F	art V Qualification U	nder Section 4940(e) for Redu	uced Tax on Net Investment li	ncome		
w		the section 4942 tax on the distrib		ase perio	d?	Yes X No
		ot qualify under section 4940(e). [ony ontri		
	Enter the appropriate amo	unt in each column for each year;		any entri	es.	
_	Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c))
_	2011	320,030.	300,132.			1.066297
_	2010	410,500.	216,720.			1.894149
_	2009	442,613.	206,236.	ļ		2.146148
	2008	150,750.	193,478.	ļ <u>.</u>		0.779158
_	2007		<u> </u>	 		
_						E 005750
2	lotal of line 1, column (d)			2	··········	5.885752
3	-	for the 5-year base period - divide t	•			1 451420
	number of years the found	lation has been in existence if less	than 5 years	3		1.471438
4	Enter the net value of non-	charitable-use assets for 2012 from	n Part X, line 5	4		481,153.
5	Multiply line 4 by line 3			5		707,987.
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)		6	·	
7	Add lines 5 and 6			7		707,987.
8		ns from Part XII, line 4		8 hat part	using a 1% tax	653,658. c rate. See the

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Part		struc	tions)
	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		N	IONE
C	here and enter 1% of Part I, line 27b			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2		3.	TONIE
	Add lines 1 and 2			IONE
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			IONE
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			IONE
	Credits/Payments:			
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
	Backup withholding erroneously withheld		N.	IONE
	Total credits and payments Add lines 6a through 6d		P	AOME
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			IONE
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1	NOINE
	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 ► Refunded ► 11 VII-A Statements Regarding Activities			
			Yes	No
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	1a	163	X
L	or intervene in any political campaign?			
Ь		1b		x
	definition)?			
	distributed by the foundation in connection with the activities			
С	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:			
	(1) On the foundation \$ (2) On foundation managers \$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers. ▶ \$	İ		
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		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict		37	
	with the state law remain in the governing instrument?	6	X	ļ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) FL IL			
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		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and		х	
	addresses	10	Λ	1

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c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

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4a

X

	NONE	
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NONE

compensation

NONE

NONE

NONE

Total number of other employees paid over \$50,000 . . .

(a) Name and address of each person paid more than \$50,000 NONE NONE NONE	3 Five highest-paid independent contractors for professional services (see in	nstructions). If none, enter "NONE	*
NONE NONE NONE			(c) Compensation
otel number of others receiving over \$50,000 for professional services			NONE
otal number of others receiving over \$50,000 for professional services	ONE		NONE
otal number of others receiving over \$50,000 for professional services			
Part IXA 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. 1 NONE 2			
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. 1 NONE 2			
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. 1 NONE 2			
List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 NONE 2	otal number of others receiving over \$50,000 for professional services	<u> </u>	NONI
TNONE All other program-related investments See instructions All other program-related investments See instructions	Part IX-A Summary of Direct Charitable Activities		
2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions All other program-related investments See instructions	List the foundation's four largest direct charitable activities during the tax year. Include relevant stati organizations and other beneficiaries served, conferences convened, research papers produced, etc.	istical information such as the number of	Expenses
3	1NONE		
3 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions ANONE All other program-related investments See instructions			
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions ANONE ANONE			
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions	²		
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2 All other program-related investments See instructions			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE 2	3		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE 2			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE 2	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1NONE 2 Amount All other program-related investments See instructions	"		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE 2			
1 NONE All other program-related investments See instructions			Amount
All other program-related investments See instructions		es 1 and 2	Amount
All other program-related investments See instructions	INONE		
ANONE	2		
OMONE			
3NONE			
	3 NONE		

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Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn founda	tions,
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	488,480.
	Average of monthly cash balances		NONE
C	Fair market value of all other assets (see instructions)	1c	NONE
ď	Total (add lines 1a, b, and c)	1d	488,480.
е	Total (add lines 1a, b, and c)		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	488,480.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
		4	7,327.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	481,153.
	Minimum investment return. Enter 5% of line 5	6	24,058.
	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		
1	Minimum investment return from Part X, line 6	1	24,058.
2 a	Tax on investment income for 2012 from Part VI, line 5 2a NON		
b	Income tax for 2012. (This does not include the tax from Part VI.) 2b	1	
-	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	24,058.
4	Recoveries of amounts treated as qualifying distributions		NONE
5	Add lines 3 and 4	5	24,058.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1 · · · · · · · · · · · · · · · · · ·	7	24,058.
Par	t XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	T I	
' a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	653,658.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
2		2	NONE
3	purposes Amounts set aside for specific charitable projects that satisfy the:		HOND
э a	Suitability test (prior IRS approval required)	3a	NONE
a b	Cash distribution test (attach the required schedule)		NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		653,658.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		055,050.
IJ	Enter 1% of Part I, line 27b (see instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	653,658.
0	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	ļ., <u> </u>	
	qualifies for the section 4940(e) reduction of tax in those years.	iodiating W	monici dio logituadoli

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		(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012
	line 7				24,058
?	Undistributed income, if any, as of the end of 2012:			NONE	
a	Enter amount for 2011 only		NONE	NONE	
	Total for prior years: 20, 20, 20		NONE		
3	Excess distributions carryover, if any, to 2012:				
a	From 2007 NONE From 2008 141,117.				
b					
C	· · · · · · · · · · · · · · · · · · ·				
d	From 2010				
f	Total of lines 3a through e	1,278,105.			
	Qualifying distributions for 2012 from Part XII,	1,270,103.	• • •		
	line 4: ▶ \$653,658.			NONE	
а	Applied to 2011, but not more than line 2a			NONE	-
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		····
c	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
d	Applied to 2012 distributable amount				24,058
е	Remaining amount distributed out of corpus	629,600.	-		170177
5	Excess distributions carryover applied to 2012 . (If an amount appears in column (d), the same amount must be shown in column (a))	NONB			NON
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,907,705.			· · · -
b	Prior years' undistributed income. Subtract line 4b from line 2b		NONE		
С	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		NONE		
	been previously assessed		NONE		
d	Subtract line 6c from line 6b. Taxable		NONE		
е	amount - see instructions		1101115		
	4a from line 2a Taxable amount - see instructions			NONE	
f	Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2013				NONE
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	NONE			
3	Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	NONE			
)	Excess distributions carryover to 2013.				·
	Subtract lines 7 and 8 from line 6a	1,907,705.			
0	Analysis of line 9:				
а	Excess from 2008 141, 117.				
b	Excess from 2009 432,301.				
C	Excess from 2010 399, 664.				
d	Excess from 2011 305, 023.				
е	Excess from 2012 629,600.				Form 990-PF (201

Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets 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 The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: Form 990-PF (2012) JSA 2E1490 1 000 CLB201 549D 05/16/2013 16:50:40 02-54420 12

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Part 3	Grants and Contributions Paid Durin	g the Year or Appro	oved for F	uture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or	A
i	Name and address (home or business)	any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
а	Paid during the year				
	SEE STATEMENT 14				652,500.
	Total		<u> </u>	<u> </u>	652,500.
	Approved for future payment				
	Total			▶ 3b	

	ysis of Income-Produ					
er gross amounts unle	ess otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program service reve	enue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a						
f						
g Fees and contracts	from government agencies					
Membership dues an	d assessments					
Interest on savings and	temporary cash investments					
Dividends and interes	st from securities			14	50.	
	(loss) from real estate:					
	operty	_				
b Not debt-financed	I property					
	ss) from personal property .					
Other investment inc	ome					
	s of assets other than inventory		<u> </u>			
	from special events		· · · · · · · · · · · · · · · · · · ·			
•	from sales of inventory	- <u>-</u>		-		
	· · · · · · · · · · · · · · · · · · ·					
				_		
С	·					
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Form 990-PF (2	2012)				26-638193	1		Pa	ge 13
Part XVII	Information R Exempt Orga	nizations	nsfers To and Trai		<u> </u>		chari	table	;
ın sect			ngage in any of the fo ection 501(c)(3) organ					Yes	No
•		g foundation to a	noncharitable exempt	organizatio	on of:				
	•	_					1a(1)		X
(2) Oth	her assets						1a(2)		X
	transactions:								ł
			ot organization				1b(1)		X
			e exempt organization				1b(2)		X
			essets				1b(3) 1b(4)		X
							1b(5)		X
			or fundraising solicitat				1b(6)	r	X
			, other assets, or paid				1c		X
d If the value	answer to any of the of the goods, other	he above is "Yes assets, or servic	," complete the follow es given by the repor ement, show in colum	ving schedu ting founda	ule. Column (b) sition. If the founda	hould always show ation received less	than	fair m	narket
(a) Line no	(b) Amount involved	(c) Name of no	ncharitable exempt organizat	ion (c	d) Description of transfe	rs, transactions, and shar	ing arra	ngeme	nts
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describ	•) of the Code (oth	hated with, or related ner than section 501(c)				Y	es 📝	 ☑ No
D II TES	(a) Name of organization		(b) Type of organi	zation	(6	Description of relations	ship		
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Sign Correct	r penaities of perjury, I deci ct, and complete Declaration o	are that I have examine of preparer (other than tax	ed this return, including accomp (payer) is based on all information	of which prepare	es and statements, and to er has any knowledge	the best of my knowledg	je ano i	Jener, It	is true,
Here	1-1	Bull	05/16/2013	V	ICE PRESIDEN	m • ·	discus		return
177	nature of officer or trustee	una z	Date	Title	TCD TRUDIDAR	with the pr	eparer	Yes	below No
-	HE NORTHERN TR	RUST COMPAN				,555 ,151 5510		ـا "⁻- لــ	
Paid Paid	Print/Type preparer's		Preparer's signature		Date	Check if	PTIN		
						self-employed			
Preparer	Firm's name					Fırm's EIN ▶			
Use Only	Firm's address								
						Phone no			
						F	orm 99	10-PF	(2012)

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

Employer identification number Name of the organization RUGGLES FAMILY FOUNDATION NORTHERN TRUST, NA 26-6381931 Organization type (check one): Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 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 X 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 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

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

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
RUGGLES FAMILY FOUNDATION NORTHERN TRUST, NA

Employer identification number 26-6381931

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

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1_	RUTH C RUGGLES CLAT A THE NORTHERN TRUST COMPANY BOCA RATON, FL 33431	\$315,303.	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2_	RUTH C RUGGLES CLAT B THE NORTHERN TRUST COMPANY BOCA RATON, FL 33431	\$ <u>198,655.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3_	RUTH C RUGGLES CLAT C THE NORTHERN TRUST COMPANY BOCA RATON, FL 33431	\$307,433.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

NET INVESTMENT INCOME	50.
REVENUE AND EXPENSES PER BOOKS	50.
	TOTAL
No.	DIVIDENDS AND INTEREST
DESCRIPTION	DIVIDENDS

STATEMENT

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1,000.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	1,000.
REVENUE AND EXPENSES PER BOOKS	2,000.
	TOTALS
DESCRIPTION	TAX PREPARATION FEE

STATEMENT

RECIPIENT NAME: SCARBOROUGH LAND TRUST ADDRESS: PO BOX 1237 SCARBOROUGH, ME 04070 RELATIONSHIP: N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: 5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: PREBLE STREET ADDRESS: PO BOX 1459 PORTLAND, ME 04104 RELATIONSHIP: N/APURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 10,000. AMOUNT OF GRANT PAID RECIPIENT NAME: THE CENTER FOR GRIEVING CHILDREN ADDRESS: 555 FOREST AVE PORTLAND, ME 04101 **RELATIONSHIP:** N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC

AMOUNT OF GRANT PAID

3

5,000.

RECIPIENT NAME:

BELMONT HILL SCHOOL INC

ADDRESS:

350 PROSPECT ST BELMONT, MA 02478

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

THE HOME FOR LITTLE WANDERERS

ADDRESS:

271 HUNTINGTON AVE BOSTON, MA 02115

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

PLUMMER HOME FOR BOYS

ADDRESS:

37 WINTER ISLAND RD

SALEM, MA 01970

N/A

PURPOSE OF GRANT:

GENERAL

RELATIONSHIP:

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

21

26-6381931 RUGGLES FAMILY FOUNDATION NORTHERN TRUST, NA FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: VINCENT CLUB ADDRESS: 71 BRIMMER STREET BOSTON, MA 02108 RELATIONSHIP: N/APURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 25,000. AMOUNT OF GRANT PAID RECIPIENT NAME: THE WINSOR SCHOOL ADDRESS: 103 PILGRIM RD BOSTON, MA 02215 RELATIONSHIP: N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 25,000. AMOUNT OF GRANT PAID RECIPIENT NAME: CHILDREN'S HOSPITAL TRUST ADDRESS: 1 AUTUMN STREET BOSTON, MA 02215 RELATIONSHIP:

AMOUNT OF GRANT PAID

STATEMENT

N/A

GENERAL

PUBLIC

PURPOSE OF GRANT:

FOUNDATION STATUS OF RECIPIENT:

5

35,000.

26-6381931 RUGGLES FAMILY FOUNDATION NORTHERN TRUST, NA FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: MENTOR GROUP ADDRESS: 160 COMMONWEALTH AVE. BOSTON, MA 02116 **RELATIONSHIP:** N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 35,000. AMOUNT OF GRANT PAID RECIPIENT NAME: BEVERLY BOOTSTRAPS FOOD PANTRY ADDRESS: 371 CABOT STREET BEVERLY, MA 01915 RELATIONSHIP: N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 8,000. AMOUNT OF GRANT PAID RECIPIENT NAME: CHILDREN'S ROOM - CENTER FOR

STATEMENT

ADDRESS:

N/A

RELATIONSHIP:

GENERAL

PUBLIC

PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

GRIEVING CHILDREN & TEENAGERS, INC

1210 MASSACHUSETTS AVE ARLINGTON, MA 02476

FOUNDATION STATUS OF RECIPIENT:

4,000.

RECIPIENT NAME:

THE WOMEN'S FUND OF ESSEX COUNTY

ADDRESS:

15 CHERRY STREET DANVERS, MA 01923

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

RIDGEFIELD LIBRARY ASSOCIATION INC

ADDRESS:

472 MAIN ST.

RIDGEFIELD, CT 06877

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

WOMEN'S SUPPORT SERVICES, INC

ADDRESS:

158 GAY STREET

SHARON, CT 06069

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

7

26-6381931 RUGGLES FAMILY FOUNDATION NORTHERN TRUST, NA FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______

RECIPIENT NAME: GRACE CHURCH SCHOOL ADDRESS: 86 FOURTH AVE NEW YORK, NY 10003 **RELATIONSHIP:** N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 25,000. AMOUNT OF GRANT PAID RECIPIENT NAME: THE CHILDREN'S STOREFORNT SCHOOL ADDRESS: 61 E. 129TH STREET NEW YORK, NY 10035 RELATIONSHIP: N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 15,000. AMOUNT OF GRANT PAID RECIPIENT NAME:

GVSHP ADDRESS:

232 EAST 11TH ST NEW YORK, NY 10003 RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

5,000. AMOUNT OF GRANT PAID

RECIPIENT NAME:

FOOD BANK FOR NEW YORK CITY

ADDRESS:

39 BROADWAY, 10TH FLOOR

NEW YORK, NY 10006

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

DREAMYARD PROJECT INC

ADDRESS:

872 GERARD AVE. #2

BRONX,, NY 10452

RELATIONSHIP: N/A

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

ROOM TO GROW NATIONAL, INC.

ADDRESS:

142 BERKELEY STREET

BOSTON, MA 02116

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

9

RECIPIENT NAME: NEW YORK TIMES NEEDIEST CASES FUND ADDRESS: 620 8TH AVE, STE 18TH FL TAX DEPT. NEW YORK, NY 10018 RELATIONSHIP: N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: VISITING ORPHANS, INC ADDRESS: 449 METROPLEX DR NASHVILLE, TN 37211 RELATIONSHIP: N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC RECIPIENT NAME: HARLEM CHILDREN'S ZONE, INC ADDRESS: 35 EAST 125TH STREET NEW YORK, NY 10035 RELATIONSHIP: N/APURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC

RECIPIENT NAME: WESTERN CT HEALTH NETWORK FOUNDATION ADDRESS: 24 HOSPITAL AVE DANBURY, CT 06810 RELATIONSHIP: N/APURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 100,000. RECIPIENT NAME: THE GO PROJECT, INC ADDRESS: 86 4TH AVE NEW YORK, NY 10003 **RELATIONSHIP:** N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 10,000. AMOUNT OF GRANT PAID RECIPIENT NAME: THE NORTHSHORE UNIVERSITY HEALTHSYSTEM FOUNDATION ADDRESS: 1033 UNIVERSITY PLACE, SUITE 450 EVANSTON, IL 60201 RELATIONSHIP: N/A PURPOSE OF GRANT: J.D KHANDEKAR CHAIR OF MOLECULAR MEDICINE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 75,000. AMOUNT OF GRANT PAID

RECIPIENT NAME: NEWBERRY LIBRARY ADDRESS: 60 W WALTON STREET CHICAGO, IL 60610 RELATIONSHIP: N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: 50,000. AMOUNT OF GRANT PAID RECIPIENT NAME: SHORE COUNTY DAY SCHOOL ADDRESS: 310 GREEN BAY RD WINNETKA, IL 60093 RELATIONSHIP: N/APURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: COMMON SENSE MEDIA ADDRESS: 650 TOWNSEND, SUITE 375 SAN FRANCISCO, CA 94103 RELATIONSHIP: N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC

AMOUNT OF GRANT PAID

5,000.

RECIPIENT NAME: SEEDS OF PEACE, INC ADDRESS: 370 LEXINGTON AVE NEW YORK, NY 10017 **RELATIONSHIP:** N/A PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: ORGANIZATION FOR TROPICAL STUDIES INC ADDRESS: 410 SWIFT AVE. DURHAM, NC 27705 **RELATIONSHIP:** N/APURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: FAMILY-TO-FAMILY, INC ADDRESS: 6 CIRCLE DR HASTINGS-ON-HUDSON, NY 10706 **RELATIONSHIP:** N/APURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC

AMOUNT OF GRANT PAID

5,000.

RECIPIENT NAME: ESPERANZA ACADEMY ADDRESS: 198 GARDEN STREET LAWRENCE, MA 01840 RELATIONSHIP: N/APURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 2,500. AMOUNT OF GRANT PAID RECIPIENT NAME: EAGLE MOUNT - BOZEMAN ADDRESS: 6901 GOLDENSTEIN LN BOZEMAN, MA 59715 RELATIONSHIP: N/APURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC 10,000. AMOUNT OF GRANT PAID RECIPIENT NAME: TIDES CENTER ADDRESS: THE PRESIDIO SAN FRANCISCO, CA 94129 RELATIONSHIP: N/A

TOTAL GRANTS PAID: 652,500.

AMOUNT OF GRANT PAID

PURPOSE OF GRANT:

FOUNDATION STATUS OF RECIPIENT:

CLB201 549D 05/16/2013 16:50:40

GENERAL

PUBLIC

2,500.

Page 1 of 1

Custom Reporting

31 DEC 12

Asset Detail - Base Currency

	escription / Asset ID							
local market price	estment Mgr ID	Exchange rate/	Accrued				Unrealized gain/loss	
	hares/PAR value	local market price	income/expense	Market Value	Cost	Market	Translation	Total

Cash and Short Term Investments

Short term

USD - United States dollar

	1 00	1 80	136,472 75	136,472 75	000	00 0	00 0
Total short term - all currencies		180	136,472 75	136,472 75	00 0	00 0	00 0
Total short term - all countries		180	136,472 75	136,472 75	00 0	00 0	00 0
Total Short Term 136,472.750		1.80	136,472.75	136,472.75	0.00	0.00	0.00
Total Cash and Short Term Investments							
136,472.750		1.80	136,472.75	136,472.75	0.00	0.00	0.00
Total 136,472,750		1.80	136,472,75 × × × × × × × × × × × × × × × × × × ×	136,472,75 % 136,472,75	0,00	0,00	0.00

consequences of investment decisions made in reliance on information contained in this report 1f you have questions regarding third party data or direction as it relates to this report please contact your Northern Trust relationship Please note that this report has been prepared using best available data. This report may also contain information provided by third parties, derived by third parties or derived from third party data and/or data that may have been categonzed or otherwise reported based upon client direction - Northern Trust assumes no responsibility for the accuracy, timeliness or completeness of any such information. Northern Trust assumes no responsibility for the

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