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 $_{\text{Form}}$ 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

OMB No 1545-0047

A F	or the 2	012 calendar year, or tax year beginning JUL 1, 2012 and 6	ending J	UN 30, 2013							
B c	heck if pplicable	C Name of organization MANDEL SUPPORTING FOUNDATIONS - JACK N.		D Employer identific	eation number						
	Address change	& LILYAN MANDEL FUND									
	Name change	Doing Business As		34-1350)566						
F	initial return		Room/suite	E Telephone number							
Ē	Termin-	25701 SCIENCE PARK DRIVE		1 '	593-2900						
\vdash	⊒ated ⊒Amended ⊒return										
	Applica-	CLEVELAND, OH 44122	44400								
	pending	F Name and address of principal officer.BARRY REIS		H(a) Is this a group re for affiliates?	Yes X No						
		25701 SCIENCE PARK DR., CLEVELAND, OH 44122		H(b) Are all affiliates inc							
$\overline{1}$	Tax-exen	npt status: X 501(c)(3) 501(c) ()	or 527	⊣ ` ′	list. (see instructions)						
		NONE		H(c) Group exemption	,						
		rganization: X Corporation Trust Association Other	L Year		State of legal domicile: OH						
		Summary		<u>-:</u>	· · · · · · · · · · · · · · · · · · ·						
-	1 B	riefly describe the organization's mission or most significant activities: MANDEL	SUPPORT	ING FOUNDATIONS -							
Governance		ACK N. & LILYAN MANDEL FUND IS A SUPPORTING FOUNDATION OF TR									
rua	2 C	heck this box if the organization discontinued its operations or dispose	sed of mor	e than 25% of its net as	ssets.						
ove.	3 N	umber of voting members of the governing body (Part VI, line 1a)		3	8						
Ğ	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		4	7						
SS	5 To	otal number of individuals employed in calendar year 2012 (Part V, line 2a)		5	0						
ξ	6 T	otal number of volunteers (estimate if necessary)		6	8						
Activities &	7 a To	otal unrelated business revenue from Part VIII, column (C), line 12		7a	676,361.						
٩	b N	et unrelated business taxable income from Form 990-T, line 34_		7b	0.						
		BECEIVED		Prior Year	Current Year						
Φ	8 c	ontributions and grants (Part VIII, line 1h)RECEIVED		17,492,188.	15,145,150.						
Revenue	9 P	rogram service revenue (Part VIII, line 2g)	0.	0.							
	10 In	vestment income (Part VIII, column (A), ines (A), argu 7d) 2014		52,872,345.	60,679,196.						
<u> </u>	11 0	ther revenue (Part VIII, column (A), Ines 5, 6d, 8c, 9c, 10c, and 11e)		<5,001,378.	<3,811,297.>						
		otal revenue - add lines 8 through 11 (must-equal Rant VIII, column (A), line 12)		65,363,155.	72,013,049.						
	13 G	rants and similar amounts paid (Part IX, column (A), lines 1,3)	8,882,159.	29,159,569.							
	14 B	enefits paid to or for members (Part IX, column (A), line 4)		0,	0.						
S	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.						
Expenses	16 a P	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.						
ď	ьΤ	otal fundraising expenses (Part IX, column (D), line 25)	<u> </u>								
ш	17 C	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	_	705,481.	1,573,591.						
	18 T	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	9,587,640.	30,733,160.						
	19 R	evenue less expenses. Subtract line 18 from line 12		55,775,515.							
SOF			LB	eginning of Current Year	End of Year						
Sset	20 ⊤	otal assets (Part X, line 16)	_	586,839,219.	655,398,970.						
Net Assets or	21 T	otal liabilities (Part X, line 26)	_	12,524,160.	27,092,357.						
급	22 N	et assets or fund balances. Subtract line 21 from line 20		574,315,059.	628,306,613.						
	art II	Signature Block									
	-	ies of perjury, I declare that I have examined this return, including accompanying schedule and complete. Declaration of preparer (other than officer) is based on all information of w			ly knowledge and belief, it is						
liut	5, 6017661,	and complete. Declaration of preparer (other than officer) is based on all information of w	men prepar	, , ,	5717						
C:-		Signature of officer		Date)/'/						
Here BARRY REIS, ASSISTANT TREASURER											
пе	re	Type or print name and title									
		,		Date Check	PTIN						
Pai		Print/Type preparer's name ATRICIA B. RUBIN Preparer's signature Date 2014 Patricia B. Rubin, CPA 14 37 25-0	05 14 4'00'	F /14 /14 I							
		Firm's name SS&G, INC.	, 00	Firm's EIN	34-1945695						
	· -	Firm's address 32125 SOLON ROAD		Tantorin							
	,	SOLON, OH 44139-2284		Phone no. (440) 248-8787						
Ma	v the IR	S discuss this return with the preparer shown above? (see instructions)		11 110110 110: 1	Yes No						
		and the property of the control of t									

232002 12-10-12

4e

Other program services (Describe in Schedule O.)

Total program service expenses

including grants of \$

29,174,388.

) (Revenue \$

Page 3

Form 990 (2012) & LILYAN MANDEL FU
Part IV Checklist of Required Schedules

 Is the organization required to complete Schedule 8, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f)(4) complete Schedule C, Part II Is the organization as exciton 501(c)(4), 501(c)(5), or 501(c)(8) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 89:197 If "Yes," complete Schedule C, Part III Did the organization maintain any donor advesed funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive in hold a conservation essement, including essements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization proof an amount in Part X, line 21, for escrive or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotation services? If "Yes," complete Schedule D, Part V If the organization is an existent or an amount in the following customs is "Yes," then complete Schedule D, Part V If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part V If the organization is an amount for investments - program related in Part X, line 107 If "Yes," complete Schedule D, Part V Did the organization report an amount for investments - program related in Part X, line 107 It has to 5% or more of its total assets reported in Part X,			!	Yes	No_
 3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5. Is the organization a section 501(c)(4), 501(c)(6), 601(c)(6), 601			1	x	
public office? // "Yes," complete Schedule C, Part I / Section 501(R) organizations. Dot the organization engage in lobbying activities, or have a section 501(R) election in effect during the tax year? // "Yes," complete Schedule C, Part I/ 1	1:	s the organization required to complete Schedule B, Schedule of Contributors?	2	х	
4. Section 501(c)(3) organizations. Dot the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(e)(h) 501(s), or 501(c)(s) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 84-19? If "Yes," complete Schedule C, Part II Io Did the organization maritian any door advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part I I Did the organization receive or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structures If "Yes," complete Schedule D, Part II I B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II I B Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part II I Did the organization, directly or through a related organization, hold assets in lemporarily restricted endowments, permanent endowments, or quase-redowments? If "Yes," complete Schedule D, Part V II If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, VII, VII, X or X as applicable. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI I If the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X I I Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reporte			3		x
during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III Obt the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization and the service of the service or services or services or services? If "Yes," complete Schedule D, Part VI If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part XI, III, III, III, III, III, III, III,	•		<u> </u>		
 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts III "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of air, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability; serve as a custodian for amounts not lated in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quase-redowments? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VV 11 If the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VV 12 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part XV 13 Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part XV 14 Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X 15 Did the organization orsport an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X 16 Did the organization orsp			4	х	
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 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization is answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII b Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X line 16? If "Yes," complete Schedule D, Part X d Did the organization is apparate or consolidated financial statements for the tax year include a footnote that addresses the organization is lability for uncertain tax postenous under III N aspecial Schedule D, Part X d Did the organization between		Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
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 If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in temporanily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X b Was the organization asset of the separate of the United States? f "Yes," complete Schedule D, Part X I and XII b Was the organization maintain an office, employees, or agents outside of the United States? f "Yes," complete Schedule F, Parts I		- · · · · · · · · · · · · · · · · · · ·			
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20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		· · · · · · · · · · · · · · · · · · ·			
			19		X
unites to line zoa, dio trie organization attach a copy of its addited financial statements to this fetum?		-	20a 20b	\vdash	+^-
•	D	it res to line zua, did the organization attach a copy of its audited financial statements to this return?	<u> 200</u>	- 000	(0010)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		1	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		x
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		ļ
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			l <u></u>
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	AF1.		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	25b		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		l x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	-20-		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			ł
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	 -		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	h	x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31	ļ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	_	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		x	
35a		34	x	1
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
J	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1000	1	1
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			T
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	х	
		_	000	/0010

Form 990 (2		34-1350566	Page
Part V	Statements Regarding Other IRS Filings and Tax Compliance		
	Check if Schedule O contains a response to any question in this Part V		

	Check if Schedule O contains a response to any question in this Part V			<u> </u>
	1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0		<u> </u>	1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0		i	1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		'	. !
	filed for the calendar year ending with or within the year covered by this return 2a 0			ıj
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		·	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	х	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	х	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		ļ	Í
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
þ	If "Yes," enter the name of the foreign country: ►			!!
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.		~	3
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			<u> </u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	·		j
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	1		
11	Section 501(c)(12) organizations. Enter			'
a	Gross income from members or shareholders Cross income from other courses (Do not not provide all a standard and a standard all a standard and a standard a	-		.
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
10-	amounts due or received from them.) Section 4047(eV4) non-exempt charitable trusts le the exempt to film 5 and 200 m km of 5 and 2014.			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	├─
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(20) qualified perpendit health incurrence issuers.	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	100	├	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	
L	Note. See the instructions for additional information the organization must report on Schedule O.	1 *	~ ~	T '
a	Enter the amount of reserves the organization is required to maintain by the states in which the	2000	2 - 2	2 - 97
_	organization is licensed to issue qualified health plans Inter the amount of reserves on hand	1		
1/1-2	Enter the amount of reserves on hand Did the organization receive any payments for indeer tanning services during the tay year?	14.	 	x
14a h	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b	 	+
	in 165, has it nies a form (20 to report these payments) in 140, provide an explanation in schedule of	_	1 990	(2012)

Form 990 (2012)

& LILYAN MANDEL FUND

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X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X				
Sect	ion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 8							
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			;				
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7		ľ	1				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			1				
	officer, director, trustee, or key employee?	2	x					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors, or trustees, or key employees to a management company or other person?							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х				
6	Did the organization have members or stockholders?	6	х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a	х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b	х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	X					
	Each committee with authority to act on behalf of the governing body?	8b	х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x				
Sect	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)							
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		х				
	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?							
	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			 ;				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	ın Schedule O how this was done	12c	х					
13	Did the organization have a written whistleblower policy?	13	х					
14	Did the organization have a written document retention and destruction policy?	14	х					
15	Did the process for determining compensation of the following persons include a review and approval by independent			1				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1				
а	The organization's CEO, Executive Director, or top management official	15a		X				
	Other officers or key employees of the organization	15b		х				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a	х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			i i				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			[
				X				
	exempt status with respect to such arrangements?	16b						
Sect		16b						
	exempt status with respect to such arrangements?	16b						
17	exempt status with respect to such arrangements? tion C. Disclosure		ole					
17 18	exempt status with respect to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed OH		ole					
17 18	exempt status with respect to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed OH Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)		ole					
17 18	exempt status with respect to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed OH Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) for public inspection. Indicate how you made these available. Check all that apply.	availat						
17 18	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed OH Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O)	availat						
17 18 19	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed OH Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and section 1.	availat	ncial					
17 18 19	Exampt status with respect to such arrangements? List the states with which a copy of this Form 990 is required to be filed OH Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X. Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, ar statements available to the public during the tax year.	availat	ncial					

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week	box	not c	Pos heck ss pe	rson	than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Indiwdual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) HENRY J. GOODMAN	0,30									
TRUSTEE, VP & TREASURER	3.20	х		Х	<u> </u>	_		0.	0.	0
(2) STEPHEN H. HOFFMAN	5.00	1								
TRUSTEE	40.00	х	<u> </u>	_	<u> </u>	_		0.	716,617.	22,717
(3) SALLY H. WERTHEIM	0.30	۱								
TRUSTEE	1.20	Х	├	_	┡			0.	0.	0
(4) CHARLES RATNER TRUSTEE	0.30	ļ.,			1			,		
(5) MORTON L. MANDEL	3.20 5.00	Х	├	├	_			0.	0.	0
TRUSTEE, PRESIDENT	0.50	x		x]				0.	
(6) BARBARA MANDEL	0.30	Ĥ	┢┈	<u> </u>		-		0.	· · · · · · · · · · · · · · · · · · ·	0
TRUSTEE	0.50	x	ļ					0.	0.	0
(7) HARLEY GROSS	0.30	 ^	┢	<u> </u>				· · · · · · · · · · · · · · · · · · ·	0.	
TRUSTEE	1.20	x	l	ŀ		1		0.	0.	0
(8) PENNI WEINBERG	0.30	 				\vdash	┝╌		<u> </u>	
TRUSTEE	0.00	x						0.	0.	0
(9) BARRY REIS	2.00		├─	-	t	\vdash				
ASSISTANT TREASURER	40.00	1	ļ	x	İ			0.	250,764.	34,907
(10) HEDY MILGROM	2.00				<u> </u>	\vdash			<u> </u>	
SECRETARY	40.00	1		x	1			0.	162,497.	13,232
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		T	T	t	\vdash	1-		 		
	<u> </u>	1	1	1	1	1				

MANDEL SUPPORT NG FOUNDA

Part VII Section A. Officers, Directors, Trus		ploy	ees,			ghe	st C	ompensated Employe	es (continued)			
(A)						(E)		(F)				
Name and title	Average		not cl		more	than		Reportable	Reportable	1	tımate	
	hours per week					is bot or/trus		compensation	compensation		ount o	of
	(list any	├	Π		Γ	Γ	ΓŤ	from the	from related organizations		other	tion
	hours for	direct				ē		organization	(W-2/1099-MISC)		pensa om the	
	related	tee or	ıstee			nsate	 	(W-2/1099-MISC)	(** = *********************************	1	anızatı	
	organizations	ıl trus	nal tri		oyee	ошо				an	d relate	ed
	below line)	individual trustee or director	institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former			orga	anızatı	ons
	in ie,	Ē	lis	JJ0	\$	운동	퍊			-		
		1		ļ	1							
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		1			i		1					
				L	<u> </u>					<u> </u>		
1b Sub-total								0.	1,129,878	_	70	,856.
c Total from continuation sheets to Part V	II, Section A							0.	0	<u> </u>		0.
d Total (add lines 1b and 1c)						<u> </u>		0.	1,129,878	Ч	70	,856.
2 Total number of individuals (including but r	not limited to ti	nose	liste	ed a	bov	/e) w	ho r	eceived more than \$100	0,000 of reportable			0
compensation from the organization											Yes	No
3 Did the organization list any former officer	director or tr	ueto	۰ k		mnl	01/00		highest compensated s	umpleves on		163	
line 1a? If "Yes," complete Schedule J for s			e, Re	ey e	прі	oyee	, or	nignest compensated e	imployee on	3		X
4 For any individual listed on line 1a, is the si			omn	one	atio	n an	d 0t	har companyation from	the organization	1	-	
and related organizations greater than \$15									the organization	4		
5 Did any person listed on line 1a receive or	•								adual for services	 		-
rendered to the organization? If "Yes," con						-	· Oiu	toa organization or man		5		X
Section B. Independent Contractors					μυ.	00					ı	<u>. </u>
Complete this table for your five highest co	ompensated in	dep	ende	ent o	con	tract	ors	that received more than	\$100,000 of comper	sation	from	
the organization Report compensation for	the calendar	/ear	end	ıng ı	with	or v	vithi	n the organization's tax	year.			
(A)								(B)		(C)	
Name and business								Description of	services	Compe	ensatio	on
PARKWOOD TRUST COMPANY, 919 NORTH MA								INVESTMENT MANAGEN	ENT			
STREET, SUITE 429, WILMINGTON, DE 19	801							CONSULTING		1	,550	,096.
					_			<u></u>				
									i			

Form **990** (2012)

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

34-1350566

& LILYAN MANDEL FUND

NG FOUNDATIONS - JACK N.

		Check if Schedule O conta	ains a response i	o any dijestion ii	n this Part VIII			
1		Check if Conteduc O Conte	ans a response	S any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grants) similar amounts not included above the contributions included in lines Total. Add lines 1a-1f	s, and /e 1f	15,145,150. 15,145,150.	15,145,150.			
\neg	-			Business Code	, ,			
Program Service Revenue	2 a b c d							
<u>۾</u> ا	e	All other program convec reve						
ļ	ī	All other program service reve Total. Add lines 2a-2f	ilue			 		
	3	Investment income (including other similar amounts) Income from investment of tax		•	14,936,088.			14,936,088.
	5	Royalties	x-exempt bond p	oroceeas				···
ļ	3	noyanies	(i) Real	(II) Personal				<u> 1</u>
	6 a b c		, , , , , , , , , , , , , , , , , , ,	(1)				
		Net rental income or (loss)		•		**************************************		
		Gross amount from sales of assets other than inventory	(i) Securities 15,907,812.	(II) Other 45,558,210.				
		Less: cost or other basis and sales expenses Gain or (loss)	15,722,914. 184,898.					
		Net gain or (loss)		•	45,743,108.		455,986.	45,287,122.
enne		Gross income from fundraisin including \$	-			:	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Other Reve	b	contributions reported on line Part IV, line 18 Less: direct expenses	1c). See a b				,	
٦		Net income or (loss) from fund		>				
		Gross income from gaming ac Part IV, line 19	а		<u>.</u>			_
		Less: direct expenses	b			A TANK IT HOLD THE COMMON INCOME.	la may e terminate and as esse	
		Net income or (loss) from game Gross sales of inventory, less		<u> </u>		-		
	io a	and allowances	returns a					
	b	Less: cost of goods sold	b					
	c	Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenu	ıe	Business Code		w 2	سيجي آآ ڀُنس ،	
		OTHER PARTNERSHIP INCO		900099	<3,811,297.	. >	220,375.	<4,031,672.
	b					 		
	d				 			
	ų e	Total. Add lines 11a-11d			<3,811,297.	• > -		
	12	Total revenue. See instructions.			72,013,049.	0.	676,361.	56,191,538.
23200 12-10					<u> </u>			Form 990 (2012)

34-1350566

& LILYAN MANDEL FUND

Form 990 (2012) & LILYAN MANDEL FUND Part IX Statement of Functional Expenses

2001/1	On 50 (C)(3) and 50 (C)(4) organizations must comp			трыс соштт (лу.	
	Check if Schedule O contains a response	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	24,242,569.	24,242,569.		
2	Grants and other assistance to individuals in				Ì
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,			!	
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	4,917,000.	4,917,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	Ì			
-	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		ļ		
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
_	Management				
b	Legal	6,497.		6,497.	
		0,43/.	<u> </u>	0,43/.	
đ	Lobbying Professional fundraising services See Part IV line 17				
e	Professional fundraising services. See Part IV, line 17	1,550,096.		1,550,096.	
f		1,330,030.	_	1,550,036.	
g	column (A) amount, list line 11g expenses on Sch O.)				
10	· · · · · · · · · · · · · · · · · · ·				
12 13	Advertising and promotion Office expenses		'	-	
14	Information technology				
15	Royalties				
16	Occupancy	·			
17	Travel	6,486.	6,486.		
18	Payments of travel or entertainment expenses	-,,	-,		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	· · ·			
24	Other expenses. Itemize expenses not covered	· · · · · · · · · · · · · · · · · · ·			
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)	_			
	amount, list line 24e expenses on Schedule O.)				
а	LOBBYING EXPENSE	8,333.	8,333.		
b	MISC.	2,678.		2,678.	
С	CUSTODIAL FEES	1,531.		1,531.	
d	TAX REFUNDS/FILING FEES	<2,030.		<2,030,	>
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	30,733,160.	29,174,388.	1,558,772.	0
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)		<u> </u>		

232010 12-10-12

Form 990 (2012)

& LILYAN MANDEL FUND

Part X | Balance Sheet Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year Cash - non-interest-bearing 2 4,706,284 2 8,948,194. Savings and temporary cash investments 3 Pledges and grants receivable, net 3 174,313. 4 77,586. 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D 10b b Less. accumulated depreciation 10c 21,413,155. 21,676,862 11 11 Investments - publicly traded securities 624,960,035. 560,281,760. 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 586,839,219. 655,398,970. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 370.018 409,636. 17 17 Accounts payable and accrued expenses 12,154,142. 26,682,721. 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 27,092,357. 12,524,160. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 574,315,059 628,306,613. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 574,315,059 628,306,613. Total net assets or fund balances 33 586,839,219. 655,398,970. Total liabilities and net assets/fund balances

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	72	,013,	049.
2	Total expenses (must equal Part IX, column (A), line 25)	2	30	,733,	160.
3	Revenue less expenses Subtract line 2 from line 1	3	41	,279,	889.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	574	,315,	059.
5	Net unrealized gains (losses) on investments	5	18	,035,	633.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<5	,323,	968.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	628	,306,	613.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	: O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x 1
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				,
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both	·			
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit.			j
	review, or compilation of its financial statements and selection of an independent accountant?	•	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			<u> </u>
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S] i
	Act and OMB Circular A-133?	3	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit			
_	or audite explain why in School is 0 and describe any stope taken to undergo use he audite		امدا	1	

Form **990** (2012)

34-1350566

Page **12**

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

MANDEL SUPPORTING FOUNDATIONS - JACK N.

Employer identification number

& LILYAN MANDEL FUND 34-1350566 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(IV). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III - Functionally integrated d Type III - Non-functionally integrated a X Type i **b** Type II e X By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No Х the governing body of the supported organization? 11g(i) х (ii) A family member of a person described in (i) above? 11g(ii) 11g(iii) X (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) Is the organization (vin col. (i) listed in your of governing document?		n (v) Did you notify the organization in col.? (i) of your support?		(vi) Is organizatio (i) organiz U.S	the on in col. ed in the .?	(vii) Amount of monetary support
		(see instructions))	Yes	No	Yes	No	Yes	No	
JEWISH FEDERATION									
OF CLEVELAND	34-0714445	7	х					1	29,174,388.
	_				-				
				 			ļ <u>-</u>		
Total 1			 						29,174,388.

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

Schedule A (Form 990 or 990-EZ) 2012

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support		· · · · · · · · · · · · · · · · · · ·				
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and		(47 = 111	(-/	1-7	7-7	(1)
	membership fees received (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf					·	
3	The value of services or facilities		·		·		
	furnished by a governmental unit to	<u> </u>		ļ		i	
	the organization without charge	 -					
4	Total. Add lines 1 through 3						
	The portion of total contributions						
	by each person (other than a	 -					
	governmental unit or publicly	,					
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)					1	
6	Public support. Subtract line 5 from line 4		ı				
	ction B. Total Support				-		
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						<u></u>
9	Net income from unrelated business						
	activities, whether or not the				1	}	
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)			<u> </u>			
11	Total support. Add lines 7 through 10					<u></u>	
12	Gross receipts from related activities	, etc (see instruct	ions)			12	
13	First five years. If the Form 990 is fo	r the organization'	's first, second, th	ird, fourth, or fifth	tax year as a secti	on 501(c)(3)	
_	organization, check this box and stor	here		·			
	ction C. Computation of Publ						
	Public support percentage for 2012 (column (f))		14	
	Public support percentage from 201	· ·			44 . 00 4/00/	15	<u>%</u>
16a	a 33 1/3% support test - 2012. If the	_			e 14 is 33 1/3% or	more, check this b	ox and
	stop here. The organization qualifies				d (m = 45 to 00 1/0))/ au maya abaak t	bia bay
ľ	o 33 1/3% support test - 2011. If the	_			d line 15 is 33 1/3	% or more, check	I IIS DOX
47	and stop here. The organization qua				20 12 160 or 16h	and line 14 is 100	or more
1/8	a 10% -facts-and-circumstances tes						
	and if the organization meets the "factoring and sirely meets and sirely					ait iv now the orga	I IIZALIOTI
	meets the "facts-and-circumstances"					17a and line 15 :	10% or
1	10% -facts-and-circumstances tes		=				
	more, and if the organization meets to organization meets the "facts-and-cir						.
10	Private foundation. If the organization		_				ns 📘
-10	r mate roundation. If the organization	ALL GIOL CHECK C	A DOM OUT HITO TO, I	Ju, 100, 114, 01 1			0 or 990-E7) 2012

Schedule A (Form 990 or 990-EZ) 2012 | Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	· — · — ·					
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not				1		
include any "unusual grants ")						
2 Gross receipts from admissions,			·			
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose			1			1
3 Gross receipts from activities that						
are not an unrelated trade or bus-				ŀ		
iness under section 513		l				
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf				}		
'			<u> </u>	 		
5 The value of services or facilities				1		
furnished by a governmental unit to						
the organization without charge		 	-	 		
6 Total. Add lines 1 through 5	<u> </u>	 	-			
7a Amounts included on lines 1, 2, and	1					
3 received from disqualified persons	 	 		 	-	
b Amounts included on lines 2 and 3 received from other than disqualified persons that	I					
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year		<u> </u>			 	
c Add lines 7a and 7b	ļ 					<u> </u>
8 Public support (Subtract line 7c from line 6)		<u>.</u>		_!		
Section B. Total Support		r -		 	, .	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	<u></u>			1		
10a Gross income from interest,		ļ			İ	
dividends, payments received on securities loans, rents, royalties			1			
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is regularly carried on						
12 Other income Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is fo	r the organization	's first, second, the	rd. fourth. or fifth	tax vear as a sect	on 501(c)(3) organi	zation.
check this box and stop here	0.94.11241011	, 5555114, 011	,, 51 11101	,	(-)(-) - 94111	>
Section C. Computation of Publ	ic Support Pe	ercentage				
15 Public support percentage for 2012 (column (fi)	· · · · · · · · · · · · · · · · · · ·	15	%
16 Public support percentage from 201			001011111 (1))		16	%
Section D. Computation of Inve					1 10 1	
17 Investment income percentage for 20				\	17	%
18 Investment income percentage for 20	•		10, column (I),	,	18	%
19a 33 1/3% support tests - 2012. If the			on line 14 and h	ne 15 is more than	<u> </u>	
						15 1101
more than 33 1/3%, check this box a b 33 1/3% support tests - 2011. If the						and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization	<u>an ala not check a</u>	a box on line 14, 19	a, or 190, check	u iis box and see i	113111111111111111111111111111111111111	

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Sec	ction 501(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name o	of organization MANDEL SUPI	PORTING FOUNDATIONS - JA	CK N.	Em	ployer identification number
	& LILYAN M				34-1350566
Part	I-A Complete if the org	ganization is exempt und	der section 501(c) or is a section 527	organization.
2 Po	ovide a description of the organization organization of the organization organization organization organization organization o	zation's direct and indirect politi	cal campaign activities		\$
Part	I-B Complete if the org	ganization is exempt und	der section 501(c)(3).	
1 Er	nter the amount of any excise tax	incurred by the organization un	der section 4955	•	\$
2 Er	iter the amount of any excise tax	incurred by organization manag	gers under section 495	55	\$
3 If	the organization incurred a section	on 4955 tax, did it file Form 4720) for this year?		Yes No
4a W	as a correction made?				Yes No
	"Yes," describe in Part IV.				
Part		ganization is exempt und			1(c)(3).
	ter the amount directly expended		•		\$
	iter the amount of the filing organ	nization's funds contributed to o	ther organizations for	section 527	
	empt function activities			•	\$
	tal exempt function expenditures	s Add lines 1 and 2. Enter here	and on Form 1120-PO	L,	
	e 17b				\$
	d the filing organization file Form	•	***		Yes No
O EI	nter the names, addresses and er ade payments For each organiza	riployer identification number (E	un) of all section 527 p	political organizations to wh	sich the filing organization
CC	ontributions received that were pr	comptly and directly delivered to	id from the filling organ is separate political or	nzation's lunus. Also enter	rate segregated fund or a
	plitical action committee (PAC). If				rate segregated fund of a
	(a) Name	(b) Address	(c) EIN		(a) Amount of political
	(a) Name	(b) Address	(C) LIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
		[funds. If none, enter -0	promptly and directly
					delivered to a separate political organization
					If none, enter -0
		1			
					
				1	

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

Schedule C (Form 990 or 990-EZ) 2012

LHA

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Schedule C (Form 990 or 990-EZ) 2012 &	LILYAN	MANDEL F	UND		34-13	50566	Page 2		
Part II-A Complete if the org	anizatio	n is exen	npt under sectior	1 501(c)(3) and file	ed Form 5768				
(election under sec	tion 501	(h)).							
Check Lul if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,									
expenses, and shar			•						
B Check Lifthe filing organizat	tion checke	ed box A an	d "limited control" pro	visions apply.	· · · · · · · · · · · · · · · · · · ·				
		ying Exper eans amou	nditures nts paid or incurred.)		(a) Filing organization's totals		ated group otals		
1s. Total labburns expanditures to unflu	ianaa niibl		reas reate labburs.						
1a Total lobbying expenditures to influb Total lobbying expenditures to influ			,			 			
c Total lobbying expenditures (add li	_		iy (dilect lobbyling)			1			
d Other exempt purpose expenditure		1 10)							
e Total exempt purpose expenditure		s 1c and 1d	١		· · · · ·				
f Lobbying nontaxable amount. Enter			•	n columns		+			
If the amount on line 1e, column (a) o			bying nontaxable ame	·					
Not over \$500,000	` ' ' '		the amount on line 1e.			ļ	1		
Over \$500,000 but not over \$1,000	0.000		0 plus 15% of the exc				Ì		
Over \$1,000,000 but not over \$1,5			0 plus 10% of the exc				ŀ		
Over \$1,500,000 but not over \$17,	000,000		0 plus 5% of the exce	_			,		
Over \$17,000,000		\$1,000,0	000.				•		
						_			
g Grassroots nontaxable amount (en	ter 25% o	f line 1f)							
h Subtract line 1g from line 1a. If zer	o or less, e	nter -0-							
i Subtract line 1f from line 1c. If zero	or less, e	nter -0-							
j If there is an amount other than ze	ro on eithe	r line 1h or	line 11, did the organiza	ation file Form 4720					
reporting section 4911 tax for this	year?					Yes	No		
· · · · · · · · · · · · · · · · · · ·	ations tha	it made a s	eraging Period Under ection 501(h) election e instructions for line	n do not have to com					
	Lobb	ying Exper	nditures During 4-Yea	ar Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2	2009	(b) 2010	(c) 2011	(d) 2012	(e	e) Total		
,									
2a Lobbying nontaxable amount									
b Lobbying ceiling amount									
(150% of line 2a, column(e))	· · · · · · · · · · · · · · · · · · ·								
c Total lobbying expenditures						-			
d Grassroots nontaxable amount						-			
e Grassroots ceiling amount (150% of line 2d, column (e))									
(10070 of fill 2 Ed, coldinit (c))				L	L				

Schedule C (Form 990 or 990-EZ) 2012

f Grassroots lobbying expenditures



Schedule C (Form 990 or 990-EZ) 2012 & LILYAN MANDEL FUND 34-1350566 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(b)	
of the lobbying activity	Yes	No	Amo	unt
1 During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of		<u></u>		
a Volunteers?		Х		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		х		
c Media advertisements?		х		
d Mailings to members, legislators, or the public?		х		
e Publications, or published or broadcast statements?		х		
f Grants to other organizations for lobbying purposes?		х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		Х		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i Other activities?	Х	<u> </u>		8,333
j Total. Add lines 1c through 1i			•	8,333
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		х		
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c)(5), or se	ection	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Part III-B Complete if the organization is exempt under section 501(c)(4), sec	•			
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer	ed "No," C	R (b) Par	t III-A, lir	ne 3, is
answered "Yes."			,	
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of po	litical			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	excess	l		
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying ar	nd political			
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5	; Part II-A (aff	llated group	list); Part il	-A, line 2;
and Part II-B, line 1. Also, complete this part for any additional information.				
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
CONTRIBUTIONS TO CITIZENS FOR OUR CHILDREN'S FUTURE - SCHOOL LEVY				
TO STITUTE TO STITUTE TON OUR STREETING DE TOTONS DELLOS D	<u> </u>	•		

Schedule C (Form 990 or 990-EZ) 2012

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Inspection

Name of the organization

MANDEL SUPPORTING FOUNDATIONS - JACK N.

Employer identification number

Par	t I Organizations Maintaining Donor Advised	Fundo or Other Circiles Fund	34-1350566
rai			is of Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in wri	ting that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's ex	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor adv	isors in writing that grant funds can b	e used only
	for charitable purposes and not for the benefit of the donor or o	lonor advisor, or for any other purpos	e conferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the organ	nization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or edu		nistorically important land area
	Protection of natural habitat		ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the for	m of a conservation easement on the last
_	day of the tax year.		or a conservation casement on the last
	day of the tax your.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	- ·	tura maludad m (a)	
ب 0	Number of conservation easements on a certified historic structure of conservation easements included in (a) converted at	• •	2c
d	Number of conservation easements included in (c) acquired aft	er 8/17/06, and not on a historic struc	
_	listed in the National Register		_ 2d
3	Number of conservation easements modified, transferred, release	isea, extinguishea, or terminated by t	the organization during the tax
	year -		
4	Number of states where property subject to conservation ease		-,
5	Does the organization have a written policy regarding the period	U . 1	
_	violations, and enforcement of the conservation easements it h		└ Yes
6	Staff and volunteer hours devoted to monitoring, inspecting, an		
7	Amount of expenses incurred in monitoring, inspecting, and en	-	
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 1.	
_	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization.	n's financial statements that describe	es the organization's accounting for
Da	conservation easements.	Art Historical Transcures or	Other Cimiler Accets
Га	rt III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" to Form 99	*****	
1a	If the organization elected, as permitted under SFAS 116 (ASC	·	
	historical treasures, or other similar assets held for public exhib		erance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		
b	If the organization elected, as permitted under SFAS 116 (ASC	•	
	treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of p	oublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical treas	ures, or other similar assets for financ	
	the following amounts required to be reported under SFAS 116	(ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$
			

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Schedule D (Form 990) 2012

	dule D (Form 990) 2012 & LILYAN MAI						34-13505		Page 2	
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	rical Tre	easures, or Ot	her Sir	nilar Asset	S (continu	ed)	
3	Using the organization's acquisition, accession	on, and other record	s, check a	any of the f	following that are	a significa	ant use of its o	collection	ıtems	
	(check all that apply):									
а	Public exhibition	d	Lo	an or excl	nange programs					
b										
С	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain	n how the	y further th	ne organization's e	exempt pi	urpose in Part	XIII.		
5	During the year, did the organization solicit or									
	to be sold to raise funds rather than to be ma							Yes	☐ No	
Par						to Form	990, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par			J						
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for co	ontribution	s or other assets	not includ	ded	-		
	on Form 990, Part X?		•					Yes	No No	
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	flowing ta	ble:						
	, 1	'	3					Amount		
С	Beginning balance						lc			
	Additions during the year						ld			
	Distributions during the year					_	le			
f	Ending balance					⊢ ⊢	1f			
	Did the organization include an amount on Fe	orm 990 Part X line	212			<u> </u>		Yes	□ No	
	If "Yes," explain the arrangement in Part XIII.			has heen	provided in Part)	KIII	<u></u>	00		
Par										
		(a) Current year	ĭ	or year	(c) Two years bac		ree years back	(e) Four	years back	
1a	Beginning of year balance	(a) Carrent year	\2/	or your	(c) me youre suc	\G/ \	roo you.o buon	(0) 1 50.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
b	Contributions	•								
	Net investment earnings, gains, and losses				-	+				
			-		-	+				
d	Grants or scholarships		<u> </u>				 	 		
е	Other expenditures for facilities									
	and programs		 					-		
	Administrative expenses					_				
g	End of year balance					<u> </u>		L	~	
2	Provide the estimated percentage of the cur	rent year end baland		, column (a	a)) neid as:					
a	Board designated or quasi-endowment		_%							
	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages in lines 2a, 2b, and 2c shou	•								
За	Are there endowment funds not in the posse	ession of the organiz	ation that	are held a	ind administered t	or the or	ganization	г		
	by								Yes No	
	(i) unrelated organizations							3a(ı)		
	(ii) related organizations							3a(ii)	_	
þ	If "Yes" to 3a(II), are the related organization:	· ·						3b		
4	Describe in Part XIII the intended uses of the									
Pa	rt VI Land, Buildings, and Equipm									
	Description of property	(a) Cost or obasis (invest			t or other (o (other)	c) Accum deprecia		(d) Book	(value	
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
	Other									
	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Par	t X, colum	n (B), line	10(c))				0.	

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 & LILYAN MANDEL F		· 	34-1	350566 Page 3
Part VII Investments - Other Securities. See	Form 990, Part X, line 1	2		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation. Cost or end-	of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) MAF INVESTMENTS LTD	67,911,519	. END-OF-YEAR	MARKET VALUE	
(B) COLONY INVESTORS IV, LP	329,600	. END-OF-YEAR	MARKET VALUE	
(C) FRANCISCO PARTNERS	1,551,422	. END-OF-YEAR	MARKET VALUE	
(D) GREENHILL CAPITAL PARTNERS (CAYMAN),		·		
(E) LP	122,005	. END-OF-YEAR	MARKET VALUE	
(F) LANDMARK PARTNERS IX	535,017	. END-OF-YEAR	MARKET VALUE	
(G) FMVP II, L.P.	35,415	END-OF-YEAR	MARKET VALUE	
(H) SPIRE CAPITAL PARTNERS, LP	392,985		MARKET VALUE	
(I) TPG PARTNERS III, LP	404,544		MARKET VALUE	
Total. (Col (b) must equal Form 990, Part X, col. (B) line 12)	624,960,035			
Part VIII Investments - Program Related. Se				
(a) Description of investment type	(b) Book value		aluation: Cost or end	of-year market value
	(2) 20011 12:00	(5)		
(1)		<u> </u>		
(2)				
(3)		 		
(4)				· <u> </u>
(5)				·
(6)		-		
(7)				
(8)	· ·	+		
(9)		-		
(10)	<u> </u>			·
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13)				·
Part IX Other Assets. See Form 990, Part X, line				
(a)	Description		<u>.</u>	(b) Book value
(1)				
(2)				
(3)				
(4)				 _
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15)		•	
Part X Other Liabilities. See Form 990, Part X,	line 25.			
1. (a) Description of liability		(b) Book value	-	
(1) Federal income taxes]	
(2)			1	
(3)			1	
(4)	·	· · · · · · · · · · · · · · · · · · ·	1 .	
(5)	·	 	1	
(6)			†∙	
(7)			· ·	1
(8)			1	
				
(9)				
(10)			┪	

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) 2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

34-1350566 & LILYAN MANDEL FUND Schedule D (Form 990) 2012 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a a Net unrealized gains on investments Donated services and use of facilities 2b 2c Recoveries of prior year grants d Other (Describe in Part XIII.) 2d Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b b Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a a Donated services and use of facilities **b** Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) 2d 2e e Add lines 2a through 2d 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4h **b** Other (Describe in Part XIII) c Add lines 4a and 4b 4c 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X. line 2; Part XI. lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. INCOME TAXES - THE FOUNDATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, EXCEPT ON INCOME DERIVED FROM UNRELATED BUSINESS ACTIVITIES. THE FOUNDATION FOLLOWS THE AUTHORITATIVE GUIDANCE ON ACCOUNTING FOR AND DISCLOSURE OF UNCERTAINTY IN INCOME TAXES WHICH PRESCRIBES THE MINIMUM RECOGNITION THRESHOLD A TAX POSITION MUST MEET IN CONNECTION WITH ACCOUNTING FOR UNCERTAINTIES IN

Schedule D (Form 990) 2012

NO INCOME TAX

INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN BY AN ENTITY BEFORE

BEING MEASURED AND RECOGNIZED IN THE FINANCIAL STATEMENTS.

Part XIII | Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line	e 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
OZ OVERSEAS FUND. LTD.	457,475.	FMV
OX PAINE CAPITAL PARTNERS II/INTERNATIONAL	1,468,102.	FMV
RONTENAC VIII LIMITED PARTNERSHIP	472,850.	FMV
IDTOWN FUND III, LP (FORMERLY FIRSTMARK III, LP)	490,772.	FMV
EIMON CHARITABLE PUBLIC LLC	334,092,268.	FMV
MSF PRIVATE EQUITY FUND LLC	121,928,304.	FMV
MSF REAL ESTATE FUND LLC	66,776,325.	FMV
CHESTER CAPITAL LP	23,972,903.	FMV
PARKWOOD LLC	4,018,529.	FMV
· · · · · · · · · · · · · · · · · · ·		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 14b, 15, or 16.

Attach to Form 990. See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MANDEL SUPPORTING FOUNDATIONS - JACK N.

Employer identification number

& LILYAN MANDEL FUND				34-1350566	
Part I General Infor	mation on A	ctivities Out	tside the United States. Comple	ete if the organization answered "Ye	es"
to Form 990, Part	: IV, line 14b				
1 For grantmakers. Does	the organization	maintain record	ds to substantiate the amount of its gra	ants and other assistance,	
the grantees' eligibility fo	or the grants or a	assistance, and	the selection criteria used to award the	grants or assistance?	∕es ∐ No
2 For grantmakers. Desc United States	ribe in Part V the	organization's	procedures for monitoring the use of its	s grants and other assistance outsi	de the
	ne following Part	I, line 3 table ca	an be duplicated if additional space is r	needed)	
(a) Region	(b) Number of offices in the region		(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
MIDDLE EAST AND	0	0	GRANTMAKING		4,917,000.
TOTAL TRACE					
CENTRAL AMERICA AND					
THE CARIBBEAN	0	0	INVESTMENTS		2,047,584.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	OVERSIGHT OF GRANT RECIPIENTS	6,123.
					_
3 a Sub-total	C	0			6,970,707.
b Total from continuation sheets to Part I	(0	and the second s	grafie ama argrett in 1808 in 18	0.
c Totals (add lines 3a and 3b)		0			6,970,707.
I HA For Paperwork Reduct	ion Act Notice	see the Instru	ctions for Form 990.	Schedule F (Form 990) 2012

MANDEL SUPPORTING FOUNDATIONS - JACK N.

Schedule F (Form 990) 2012 & LILYAN MANDEL FUND

| Part II | Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed

Page 2

(i) Method of valuation (book, FMV, appraisal, other)								9	0 2000 0000
(h) Description of non-cash assistance									
(g) Amount of non-cash assistance	0	0	0	0	0	0	-	xempt by	•
(f) Manner of cash disbursement	WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER	225,368 WIRE TRANSFER	WIRE TRANSFER	WIRE TRANSFER		recognized as tax-e:	
(e) Amount of cash grant	464,157.	1,154,505.	2,230,572.	225,368.	833,334.	9,064.		foreign country,	
(d) Purpose of grant	OPERATING SUPPORT	RENOVATIONS		Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IDS or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	(-)(-)				
(c) Region	MIDDLE EAST AND NORTH AFRICA	MIDDLE EAST AND NORTH AFRICA	MIDDLE EAST AND NORTH AFRICA	MIDDLE EAST AND NORTH AFRICA	MIDDLE EAST AND NORTH AFRICA	MIDDLE EAST AND NORTH AFRICA		Isted above that are legal as section	or entities
(b) IRS code section and EIN (if applicable)								recipient organization	other organizations c
1 (a) Name of organization								2 Enter total number of	3 Enter total number of other organizations or entitles

Schedule F (Form 990) 2012

MANDEL SUPPORTING FOUNDATIONS - JACK N.

Page 3

34-1350566

& LILYAN MANDEL FUND

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Schedule F (Form 990) 2012

Schedule F (Form 990) 2012 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (c) Number of (d) Amount of recipients cash grant Part III can be duplicated if additional space is needed (b) Region (a) Type of grant or assistance

Part			90
-			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,	" the	
	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Corporation (see Instructions for Form 926)	X Yes N	1 0
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With		
	a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes X	1 0
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect 7		
	Certain Foreign Corporations (see Instructions for Form 5471)	X Yes 1	Vο
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621	ı	
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fu	and	
	(see Instructions for Form 8621)	X Yes L	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain		
	Foreign Partnerships. (see Instructions for Form 8865)	X Yes !	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year?	? If	
	"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instruction		
	for Form 5713)	Yes X	No

Schedule F (Form 990) 2012

Schedule F (Form 990) 2012

Part V Supplemental Information
Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method;
amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column
(c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information
SCHEDULE F, PART I, LINE 2: ALL GRANTEES ARE REQUIRED TO SIGN AND SUBMIT
GRANT BUDGETS THAT STIPULATE THE TERMS AND CONDITIONS OF THE GRANT
INCLUDING HOW THE DOLLARS ARE TO BE SPENT AND OVER WHAT PERIOD OF TIME.
THE ORGANIZATION REQUIRES MONTHLY BUDGET TO ACTUAL REPORTS AND ANNUAL
AUDITED FINANCIAL STATEMENTS FOR MAJOR GRANTS. THESE GRANTEES SUBMIT
MONTHLY PROGRAMMATIC UPDATES. PERIODIC SITE VISITS ARE GENERALLY
CONDUCTED BY CERTAIN TRUSTEES TO MONITOR THE PROGRESS OF FUNDED PROGRAMS.
AMOUNTS FOR FOREIGN GRANTS ARE PRESENTED ON THE ACCRUAL BASIS WHICH IS
CONSISTENT WITH THE TREATMENT USED FOR THE FINANCIAL STATEMENTS.
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Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Inspection

Name	Name of the organization MANDEL SUPPORTING FOUNDATIONS - JACK N.	Employer identification number
	& LILYAN MANDEL FUND	34-1350566
Part	Part I General Information on Grants and Assistance	
<u>-</u>	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
ð	autoria und to mund the grante or securional	X Yes No

Does the organization maintain fectures to substantiate the amount of the grants of assistance the organization maintain fectures of substantial fectu	criteria used to award the grants or assistance?	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	Boot 11 for the properties of the Height State Complete of the properties of the Form 990 Part IV line 21 for
2	crit	2 De	1170

any recomment that received more than \$5,000. Part II can be duplicated if additional space is needed Grants and Other Assistance

recipient that received more than \$5,000. Part it can be duplicated it additional space is needed	55,000 Part II car	n be duplicated it addit	olidi space is liced		(f) Method of	4	Action of constant
1 (a) Name and address of organization or government	(p)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount ot non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	or assistance
AMERICAN FRIENDS OF THE HEBREW							MANDEL SCHOOL FOR
UNIVERSITY INC NATIONAL							ADVANCED STUDIES IN THE
HEADOUARTERS ONE BATTERY PARK							HUMANITIES: CONSTRUCTION
PLAZA, 25TH FLOOR - NEW YORK, NY	13-1568923	501 (C) (3)	4,710,035.	0.			OF NEW BUILDING
TIME II COMMISSION OF THE PERSON							
AMERICAN FRIENDS OF THE ISRAEL MISETIM - 500 FIFTH AVENUE SUITE							
2540 - NEW YORK, NY 10110	23-7182582	501 (C) (3)	33,333.	0			OPERATING SUPPORT
BEVERLY FARM FOUNDATION							
6301 HUMBERT RD.							
GODFREY IL 62035	37-0765971	501 (C) (3)	33,334.	.0			SHELDON MANDEL PLACE
CASE WESTERN RESERVE UNIVERSITY							MANDEL SCHOOL OF APPLIED
OFFICE OF DEVELOPMENT 10900 EUCLID	_						SOCIAL SCIENCES, JACK,
CINA TOTAL DA ACT MENER TO TOTAL CONTINUES							JOSEPH & MORTON MANDEL
AVENUE, ADEDBERT 124 - Chevenary,	0000101	701 (7) (3)	2 666 667	0			DEAN CHAIR, JACK, JOSEPH
OH 4410	34-TOTO337	-	,,00,,000,				
CLEVELAND CLINIC FOUNDATION							2012 SCOTT HAMILTON CARES
P.O. BOX 931517				•			
CLEVELAND, OH 44193	34-0714585	501 (C) (3)	50,000.	0.			INITIALIVE
CLEVELAND MUSEUM OF ART							TNA HOSEDH ANN
11150 EAST BOULEVARD							THE OPEN, CONTRACTOR
CLEVELAND OH 44106	34-0714336	501 (C) (3)	833,334.	0.			MORTON MANDEL ARMOR COURT
(0)(-) FOG	o tagardiga ba		sted in the line 1 table				16.
	ilia governiment	2					••
3 Enter total number of other organizations listed in the line I table	s listed in the line	l table					Schodule I (Form 990) (2012)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2012)

232101 12-18-12

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Schedule I (Form 990) & LILYAN MANDEL FUND	IL FUND					34	34-1350566 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 990), Part II)	Assistance to Go	overnments and Organ	nizations in the Ur	nted States (Sche	dule I (Form 990), Pa	1 II)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CUYAHOGA COMMUNITY COLLEGE FOINDATION - 700 CARNEGIE AVENUE -							MANDEL LEADERSHIP
OH 44115	23-7320719	501 (C) (3)	33,334.	.0			DEVELOPMENT PROGRAM
Ι.							END OF YEAR EXHIBITION
AND DESIGNS INC - 370 LEXINGTON							AND JACK, JOSEPH AND
AVE, SUITE 1612 - NEW YORK, NY		į		c			MORTON MANDEL BUILDING
	13-2952614	5UI (C) (3)	9,300,000,	>			NOTION 3 HORSOL WALL
HEBREW UNION COLLEGE - JEWISH							
- OTNOTNA							MANDEL FELLOWS
, , , , , , , , , , , , , , , , , , , ,	31-0537067	501 (C) (3)	1,312,803.	0			RABBI/EDUCATOR LEADERSHIP
JEWISH COMMUNITY CENTERS							MANDEL CENTER FOR JEWISH
ASSOCIATION OF NORTH AMERICA - 520							EDUCATION, MANDEL CENTER
X							FOR EXCELLENCE IN
	13-5599486	501 (C) (3)	299,999.	0.			LEADERSHIP AND MANAGEMENT
JEWISH FEDERATION OF CLEVELAND							
NCE		į		c			AMPAIGN FOR JEWISH NEEDS
CLEVELAND, OH 44122	34-0714445	501 (C) (3)	361,383.	0			
METON 1				,			6 6 6
ROAD - BEACHWOOD, OH 44122	34-0714439	501 (C) (3)	24,815.	0			LSKAEL STAFF SEMINAR
MIDTOWN CLEVELAND 3634 FICTID AVENUE SHITTE 215							JACK, JOSEPH & MORTON
5	34-1381334	501 (C) (3)	100,000.	0.			MANDEL BUSINESS CENTER
THE TEMPLE-TIFERETH ISRAEL							
26000 SHAKER BOULEVARD							CAPITAL & ENDOWMENT
BEACHWOOD, OH 44122	34-0714713	501 (C) (3)	5,333,333.	0.			CAMPAIGN
LOM HARTMAN MERICA - ON							
FLAZA, SULTE 1000 - NEW 1056, NI	13-3014387	501 (C) (3)	50,000.	0			ANNUAL SUPPORT
							Schedule I (Form 990)

34-1350566

MANDEL SUPPORTING FOUNDATIONS - JACK N. & LILYAN MANDEL FUND Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Par	t)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD CONFEDERATION OF JEWISH COMMUNITY CENTERS INC 711 THIRD AVE., 10TH FL NEW YORK, NY 10017	20-0812055	501 (C) (3)	33,333.	0			RESOURCE DEVELOPMENT
							Schedule I (Form 990)

MANDEL SUPPORTING FOUNDATIONS - JACK N.

& LILYAN MANDEL FUND

Schedule I (Form 990) (2012)

Part III

Page 2

34-1350566

Schedule I (Form 990) (2012) (f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance (c) Amount of cash grant JOSEPH & MORTON MANDEL DEAN CHAIR, JACK, JOSEPH & MORTON (H) PURPOSE OF GRANT OR ASSISTANCE: JACK, JOSEPH & MORTON MANDEL PROVOST NAME OF ORGANIZATION OR GOVERNMENT: CASE WESTERN RESERVE UNIVERSITY (H) PURPOSE OF GRANT OR ASSISTANCE. MANDEL SCHOOL OF APPLIED SOCIAL (b) Number of recipients HEBREW UNION COLLEGE - JEWISH INSTITUTE OF RELIGION (a) Type of grant or assistance NAME OF ORGANIZATION OR GOVERNMENT: PART II, LINE 1, COLUMN (H): MANDEL CAPITAL CAMPAIGN SCIENCES, JACK, 232102 12-18-12 Part IV

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

2012
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

Name of the organization

Attach to Form 990. See separate instructions.

MANDEL SUPPORTING FOUNDATIONS - JACK N.

& LILYAN MANDEL FUND

Employer identification number

34-1350566

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			, }
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use	İ		1
	Travel for companions Payments for business use of personal residence	,		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees	l l	ŀ	
	Discretionary spending account Personal services (e.g , maid, chauffeur, chef)	İ		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		ļ	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	,	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		<u> </u>
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to	ŀ		
	establish compensation of the CEO/Executive Director, but explain in Part III.	1		
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			'
	Form 990 of other organizations Approval by the board or compensation committee.	ee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			•
4	organization or a related organization:			
_	Receive a severance payment or change-of-control payment?	4a	^ ~ ~~	×
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	x	 -
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	 -	х
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	T	.	` .
	Tes to any of lines 4a c, list the persons and provide the applicable amounts for each termina art in.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	_		
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a	<u> </u>	X
b	Any related organization?	5b		X
	if "Yes" to line 5a or 5b, describe in Part III.			1
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		1	
	contingent on the net earnings of:	- Selempe or		
а	The organization?	6a	↓	X
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	1	X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		1	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	ļ	X
9	if "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		1	
	Regulations section 53 4958-6(c)?	9	<u> </u>	<u> </u>
LHA	A For Paperwork Reduction Act Notice, see the Instructions for Form 990.	chedule J (For	m 990) 201:

232111 12-10-12 34-1350566

Page 2

Schedule J (Form 990) 2012 & LILYAN MANDEL FUND

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of W-2	W-2 and/or 1099-MI	and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(D)·(I)(B)	reported as deferred in prior Form 990
(1) STEPHEN H. HOFFMAN	[5	0	O	0	0	0	0	0
STEE	9	511 46		205 152	12 500	10 217	739 334	
(2) BARRY REIS	19			0.			~ I	
ASSISTANT TREASURER	<u> </u>	245,23		5,534.	12,500.	22,407,	285, 671.	0
(3) HEDY MILGROM	Ξ	0	0	0	0	0	0	
SECRETARY	Ξ	160,335.	0	2,162.	8,194.	5,038.	175,729.	0
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JACK	
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SUPPORTING	
MANDEL	

Schedule J (Form 990) 2012 & LILYAN MANDEL FUND	34-1350566 Page 3	33
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information	art II Also complete this part for any	1
PART I, LINE 4B: STEPHEN H HOFFMAN HAD WAGES FROM THE SUPPORTED		1 1
ORGANIZATION, NONE OF WHICH WERE PAID BY THIS ORGANIZATION, WHICH WERE		ļ
INCLUDED IN W-2 WAGES FROM A RELATED ORGANIZATION IN SCHEDULE J PART II,		
COLUMN B(III) OTHER REPORTABLE COMPENSATION. INCLUDED IN THE \$205,152 OF		
OTHER REPORTABLE COMPENSATION IS \$191,686 RELATED TO A CONTRIBUTION TO A		.
NON-QUALIFIED, VESTED SUPPLEMENTAL RETIREMENT PLAN, THIS WAS NOT PAID BY		
THE REPORTING ORGANIZATION.		
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		}
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	Schedule J (Form 990) 2012	212

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

Open To Public Inspection

Name of the organization M	ANDEL SUPP	ORTING FOUNDAT	ions	- JAC	K N.			Emp	loyer	ıdentı	ficatio	n nui	nber
	LILYAN MA							34-	13505	66			
					ection 501(c)(4) orga								
					art IV, line 25a or 25b	o, or	Form 990-EZ, P	art V, I	ine 40	b	1		
(a) Name of disqualified	person (b) Relationship be			ified (c) De	scription of tran	sactio	n			Correc	
· · · · · · · · · · · · · · · · · · ·		person and o	organiza	ation							Ye	s	No
											+-	-+-	
											 	$\neg +$	
2 Enter the amount of tax	incurred by the	he organization ma	nagers	or disc	qualified persons du	rıng	the year under						
section 4958									S		<u>.</u>		
3 Enter the amount of tax	, if any, on line	e 2, above, reimbui	sed by	the or	ganization				> \$				
Part II Loans to an	d/or From	Interested Pe	rsons		· · · · · · · · · · · · · · · · · · ·			-					
	organization a	answered "Yes" or	Form	990-EZ	, Part V, line 38a or l	Form	n 990. Part IV. lir	ne 26:	or if th	ne oraz	ınızatı	on	
		990, Part X, line 5,			, , , , , , , , , , , , , , , , , , , ,			,					
(a) Name of	(b) Relations with	ship (c) Purpose	(d) Lo	oan to or	(e) Original	(f) Balance due	(g)	ln	(h) Ap	proved ard or	(i) W	ritten
interested person	organization	on of loan		ization?	principal amount			defa	ult?	comm	uttee?	agree	ment?
			То	From		<u> </u>		Yes	No	Yes	No	Yes	No
<u> </u>	+					_							
	 		+	-		 		<u> </u>	<u> </u>				
			 -										
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						<u> </u>							
							·						
	1			<u> </u>	<u> </u>					ļ		ļ	<u> </u>
Total Part III Grants or A	colotopoo	Benefiting Inte	roote	a Da	<u>▶</u> \$			·				<u> </u>	
		•											
		answered "Yes" or			(c) Amount of		(d) Type	of) Durn	000.0	
(a) Name of interested	person	(b) Relationshij interested pe	o betwe rson ar	een nd	assistance		(d) Type assistar) Purp assist		ı
		the organi											
						-			\dashv				
		 					<u> </u>			_			
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2012

UPPORTING FOUNDATIONS - JACK N.

Schedule L (Form 990 or 990-EZ) 2012 & LILYAN	MANDEL FUND		34-1350566		Page 2
Part IV Business Transactions Involv	ing Interested Persons.	- -	-	_	
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	8b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	zation's
				Yes	No
ARKWOOD TRUST COMPANY	THE ORGANIZATION AN	1,550,096.	FINANCIAL,		х
		- "'			
				 	
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			<u> </u>	<u></u>	
Part V Supplemental Information					
Complete this part to provide additional	al information for responses to question	s on Schedule L (see	instructions)		
Complete the part to provide additions	arminimation for topolitors to quotien	0 0.1. 00.1.000.10 = \0000			
CH L, PART IV, BUSINESS TRANSACTIONS	INVOLVING INTERESTED PERSONS:				
CII II, IIMI IV, BOOTMIDD IIIIIIOITOND .	THE THE THE PARTY OF THE PARTY				
A) NAME OF DEDGOM, DARWOOD MOTION COM	DANU				
A) NAME OF PERSON: PARKWOOD TRUST COM	PANI		- · · · · ·		
B) RELATIONSHIP BETWEEN INTERESTED PER	RSON AND ORGANIZATION:				
HE ORGANIZATION AND ITS RELATED ORGAN	IZATIONS INDIRECTLY OWN 65% OF	ENTITY			
(D) DESCRIPTION OF TRANSACTION: FINANC	IAL TRUST AND INVESTMENT SERV	ICES			
					
					
· · · · · · · · · · · · · · · · · · ·	···				
				-	
			_ 		
		-	· · · · · · ·		
			· -		
					

232132 12-03-12

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

2012

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury internal Revenue Service

Name of the organization

Attach to Form 990.

MANDEL SUPPORTING FOUNDATIONS - JACK N.

& LILYAN MANDEL FUND

Employer identification number

Par	t I Types of Property					
		(a)	(b)	(c)	(d)	
		Check if	Number of	Noncash contribution	Method of de	
		applicable	contributions or	amounts reported on	noncash contrib	
4	Art - Works of art	 	items contributed	Form 990, Part VIII, line 1g	<u> </u>	
			 		<u> </u>	
	Art - Historical treasures			· - · - ·		
	Art · Fractional interests		 			
	Books and publications				-	
	Clothing and household goods					
6	Cars and other vehicles					
7	Boats and planes		_			
	Intellectual property			45 445 450		-
9	Securities - Publicly traded	Х	17	15,145,150.	FAIR MARKET VALU	<u> </u>
10	Securities - Closely held stock					
11	Securities - Partnership, LLC, or					
	trust interests					
12	Securities - Miscellaneous					
13	Qualified conservation contribution -					
	Historic structures					
14	Qualified conservation contribution - Other					
15	Real estate - Residential					
16	Real estate - Commercial					
17	Real estate - Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies	_				
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts		ļ			
25	Other ()		L			
26	Other () Other ()					
27	Other ()					
28	Other (<u> </u>				
29	Number of Forms 8283 received by the organ	nization durir	ng the tax year for o	contributions		
	for which the organization completed Form 8	283, Part IV,	Donee Acknowled	gement 29		0
						Yes No
30a	During the year, did the organization receive	by contributi	on any property re	ported in Part I, lines 1-28 th	at it must hold for	
	at least three years from the date of the initia	I contribution	n, and which is not	required to be used for exer	npt purposes for	
	the entire holding period?					30a X
b	If "Yes," describe the arrangement in Part II					
31	Does the organization have a gift acceptance	policy that i	requires the review	of any non-standard contrib	outions?	31 X
32a	Does the organization hire or use third parties	s or related o	organizations to sol	icit, process, or sell noncash	1	
	contributions?					32a X
b	If "Yes," describe in Part II.					, m grn
33	If the organization did not report an amount i	n column (c)	for a type of prope	erty for which column (a) is c	hecked,	
	describe in Part II					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2012)

232142 12-20-12

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012
Open to Public Inspection

MANDEL SUPPORTING FOUNDATIONS - JACK N. Name of the organization Employer identification number & LILYAN MANDEL FUND 34-1350566 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: JEWISH FEDERATION OF CLEVELAND AND AS SUCH, IS ORGANIZED AND OPERATED EXCLUSIVELY FOR CHARITABLE, EDUCATIONAL OR RELIGIOUS PURPOSES BY CONDUCTING OR SUPPORTING ACTIVITIES FOR THE BENEFIT OF, OR TO CARRY OUT IT WAS ESTABLISHED TO MEET IDENTIFIED THE PURPOSES OF, THE FEDERATION. NEEDS OF THE JEWISH AND GENERAL COMMUNITIES. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ACTIVITIES FOR THE BENEFIT OF, OR TO CARRY OUT THE PURPOSES OF, THE IT WAS ESTABLISHED TO MEET IDENTIFIED NEEDS OF THE JEWISH FEDERATION. AND GENERAL COMMUNITIES FORM 990, PART VI, SECTION A, LINE 2: THE FOLLOWING TRUSTEES/OFFICERS HAVE A FAMILY RELATIONSHIP: 1. MORTON L. MANDEL AND BARBARA A. MANDEL THE FOLLOWING TRUSTEES/OFFICERS HAVE A BUSINESS RELATIONSHIP: 1. MORTON L. MANDEL AND STEPHEN H. HOFFMAN STEPHEN H. HOFFMAN, BARRY REIS, AND HEDY MILGROM HAVE A BUSINESS THEY ARE OFFICERS OR EMPLOYEES OF THE FEDERATION, THE RELATIONSHIP. SUPPORTED ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 6: TWO CLASSES OF VOTING

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

Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 990-EZ) (2012) Name of the organization MANDEL SUPPORTING FOUNDATIONS - JACK N.	Employer identification number
& LILYAN MANDEL FUND	34~1350566
EMBERS (A)THE FEDERATION MEMBER WHICH HAS A MAJORITY OF THE MEMBER VOTING	
OWER AND IS THE JEWISH FEDERATION OF CLEVELAND (FEDERATION), THE SUPPORTED	
RGANIZATION (HEREAFTER "SUPPORTED ORGANIZATION"), AND (B)DONOR MEMBER(S) -	
INDIVIDUALS WHO HAVE IN THE AGGREGATE A MINORITY OF THE MEMBER VOTING	
OWER.	
	<u>-</u>
ORM 990, PART VI, SECTION A, LINE 7A: THE FEDERATION MEMBER ELECTS A	
AJORITY OF THE BOARD OF TRUSTEES; THE DONOR MEMBER(S) ELECT A MINORITY OF	
THE BOARD OF TRUSTEES.	
FORM 990, PART VI, SECTION A, LINE 7B: UNDER STATE LAW, MEMBERS MUST	
PPROVE ANY DISSOLUTION ACTION ADOPTED BY THE BOARD AND ANY BOARD APPROVED	
SALE OR OTHER DISPOSITION OF SUBSTANTIALLY ALL OF THE FOUNDATION'S ASSETS	
AS WELL AS MERGER OR CONSOLIDATION.	
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS EMAILED TO EACH	
OFFICER/TRUSTEE FOR REVIEW BEFORE FILING. FORM 990 IS PREPARED BY THE	
SUPPORTED ORGANIZATION'S STAFF AND THEN, BEFORE FILING, IS REVIEWED BY THE	
COUNDATION'S OUTSIDE AUDITORS AND BY THE FOUNDATION'S ASSISTANT TREASURER	
(WHO ALSO IS THE SUPPORTED ORGANIZATION'S CFO). THE CIRCULATED COPY DOES	
OT INCLUDE SCHEDULE B CONTRIBUTORS, IF ANY, OR COMPENSATION PAID BY THE	
RELATED ORGANIZATION. THIS INFORMATION IS MADE AVAILABLE UPON REQUEST.	
FORM 990, PART VI, SECTION B, LINE 12C: EVERY TRUSTEE, OFFICER, COMMITTEE	
MEMBER AND EMPLOYEE IN A POSITION TO INFLUENCE, PROVIDE NON-PUBLIC	
INFORMATION OR VOTE ON FOUNDATION POLICIES OR EXPENDITURES, (A KEY	
INDIVIDUAL) IS REQUIRED TO SIGN A STATEMENT ACKNOWLEDGING AND AGREEING TO	
IE TERMS OF THE CONFLICT OF INTEREST POLICY PRIOR TO EMPLOYMENT OR SERVING	Schodulo O (Form 990 or 990-F7)

Schedule O (Form 990 or 990-EZ) (2012) Name of the organization MANDEL SUPPORTING FOUNDATIONS - JACK N.	Page 2 Employer identification number
& LILYAN MANDEL FUND	34-1350566
ON THE FOUNDATION BOARD OR KEY COMMITTEE. IN ADDITION, ANY NEW KEY	
INDIVIDUAL IS PROVIDED A COPY OF THE POLICY UPON COMMENCEMENT OF HIS OR HER	
POSITION AS A KEY INDIVIDUAL AND IS REQUIRED TO SIGN AND DELIVER TO THE	
FOUNDATION A STATEMENT ACKNOWLEDGING AND AGREEING TO THE TERMS OF THE	
POLICY. THE FEDERATION (SUPPORTED ORGANIZATION) ENDOWMENT DEPARTMENT	
PERSONNEL ARE RESPONSIBLE FOR MAINTAINING COPIES OF SIGNED STATEMENTS AND	
FOLLOWING UP TO ENSURE THAT A STATEMENT IS OBTAINED FROM EACH KEY	·
INDIVIDUAL. THE ASSISTANT TREASURER OF THE FOUNDATION (WHO IS ALSO CFO OF	
THE SUPPORTED ORGANIZATION) IS RESPONSIBLE FOR MONITORING CONFLICT	
SITUATIONS, IF ANY.	
FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF	
INTEREST POLICY AND FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE	
PUBLIC.	-
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PARTNERSHIP INCOME NOT RECORDED ON BOOKS -10,097,980.	
CANCELLATION/RETURN OF GRANT FROM PRIOR YEAR 4,774,012.	
TOTAL TO FORM 990, PART XI, LINE 9 -5,323,968.	
FORM 990, PART VI, LINE 16B	
PROCEDURE REGARDING JOINT VENTURES	
THE ORGANIZATION'S INVESTMENT COMMITTEE APPROVES ALL NEW INVESTMENTS	
AND EVALUATES THESE INVESTMENTS ON AN ONGOING BASIS. DOCUMENTS RELATED	
TO THESE INVESTMENTS GO THROUGH A LEGAL REVIEW AND A REVIEW BY THE	
SUPPORTED ORGANIZATION'S STAFF. ATTENTION IS GIVEN TO THE	
ORGANIZATION'S EXEMPT STATUS IN THAT REVIEW PROCESS. THERE IS NO	
ACTIVE PARTICIPATION IN THE OPERATIONS OF THESE INVESTMENTS AS THEY ARE	

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization MANDEL SUPPORTING FOUNDATIONS - JACK N. & LILYAN MANDEL FUND	Employer identification number 34-1350566
HELD FOR INVESTMENT PURPOSES ONLY.	
FORM 990, PART VI, SECTION B, LINE 15A & 15B	
NO COMPENSATION IS PAID BY THE ORGANIZATION. THE COMPENSATION PAID ON	
SCHEDULE J WAS PAID BY THE FEDERATION FOR SERVICES RENDERED TO THE	
FEDERATION BY FULL TIME FEDERATION EMPLOYEES.	
·	
	

SCHEDULE R Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

MANDEL SUPPORTING FOUNDATIONS - JACK N.

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990.

➤ See separate instructions.

2012 Open to Public Inspection

OMB No 1545-0047

Employer identification number

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) 34-1350566 End-of-year assets e Total income ਉ Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or foreign country) Primary activity 1 & LILYAN MANDEL FUND Name, address, and EIN (if applicable) of disregarded entity Part Part

(a)	(q)	(0)	Ð	(e)	(j)	(6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b) controlled	Z(b)(13) lled
of related organization		foreign country)	section	status (if section	entity	entity?	1,2
		·		501(c)(3))		Yes	No
JEWISH FEDERATION OF CLEVELAND - 34-0714445	GRANTS & ALLOCATIONS FOR						
25701 SCIENCE PARK DRIVE	CHARITABLE, EDUCATIONAL						
CLEVELAND, OH 44122-7302	AND RELIGIOUS PURPOSES	опно	501(C)(3)	7	N/A		×
ADLER FAMILY FOUNDATION - 34-1858749	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
MILDRED & MARTIN BECKER FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1711965, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
THE SEMI J. AND RUTH W. BEGUN FOUNDATION -	SUPPORT CHARITABLE,						
34-1594565, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ns for Form 990.				Schedule R (Form 990) 2012	orm 990) 2012

232161 12-10-12 LHA

& LILYAN MANDEL FUND

34-1350566

Part II Continuation of Identification of Related Tax-Exempt Organizations

Schedule R (Form 990)

							1
(a)	(q)	(0)	(q)	(e)	€	(g)	(713)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlled	<u> </u>
of related organization		foreign country)	section	status (if section 501(c)(3))	entity	ves No	رة کو
BLUMENTHAL FAMILY FOUNDATION - 34-1832963	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	_	
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	OHIO	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
CHELM FAMILY FOUNDATION - 30-0226826	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
CLEVELAND HEBREW SCHOOLS EDUCATIONAL	SUPPORT CHARITABLE,						
FOUNDATION - 34-0714599, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	DHIO	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
ELLEN E, & VICTOR J, COHN SUPPORTING	SUPPORT CHARITABLE,						
FOUNDATION - 31-1606939, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS			-	JEWISH FEDERATION		
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
COMMISSION ON CEMETERY PRESERVATION -	SUPPORT CHARITABLE,				_		
34-1771506, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	DHIO	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
FEDERATION HOLDINGS, INC 23-7133908							
25701 SCIENCE PARK DRIVE	HOLDS LEGAL TITLE TO				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	63	онго	501(C)(2)	N/A	OF CLEVELAND	×	
RINA & SAMUEL M. FRANKEL FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
31-1502121, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	-	
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
PEGGY AND JOHN GARSON FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1916905, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
NATHAN L. & REGINA HERMAN CHARITABLE FUND -	SUPPORT CHARITABLE,						
34-1344368, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS			-	JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
ROBERT AND SUSAN R. HURWITZ FAMILY	SUPPORT CHARITABLE,			_			
FOUNDATION - 34-1916908, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS						
DRIVE, CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	оніо	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
THE IMMERMAN FOUNDATION - 34-1533181	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	OHIO	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	
JEWISH COMMUNITY HOUSING INC 34-1276120	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	-	
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	рніо	501(C)(3)	11A TYPE 1	OF CLEVELAND	×	

34-1350566

& LILYAN MANDEL FUND

Part II Continuation of Identification of Related Tax-Exempt Organizations Schedule R (Form 990)

Name, address, and EIN of related organization (FOUNDATION - 31-1566160 E PARK DRIVE NI 44122-7302 AI HEALTH CARE FOUNDATION -						Cartion 512(h)
	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 3 (20) (3)
1		foreign country)	section	status (if section 501(c)(3))	entity	ves No
-	SUPPORT CHARITABLE,					-
	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
-	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND	X
	SUPPORT CHARITABLE,					
34-1777878, 11000 EUCLID AVE, CLEVELAND, OH EDUCATI	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
44106 PURPOSE	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
MADAV IX FOUNDATION - 34-1638258 SUPPORT	SUPPORT CHARITABLE,					
25701 SCIENCE PARK DRIVE EDUCATI	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
CLEVELAND, OH 44122-7302 PURPOSE	PURPOSES OF FEDERATION	orno	501(c)(3)	11A TYPE 1	OF CLEVELAND	×
MADAV XVII FOUNDATION - 34-1827879 SUPPORT	SUPPORT CHARITABLE,					
25701 SCIENCE PARK DRIVE EDUCATI	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
CLEVELAND, OH 44122-7302 PURPOSE	PURPOSES OF FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
MADAV XVIII FOUNDATION - 34-1827878 SUPPORT	SUPPORT CHARITABLE,					
25701 SCIENCE PARK DRIVE EDUCATI	EDUCATIONAL AND RELIGIOUS			•	JEWISH FEDERATION	
CLEVELAND, OH 44122-7302 PURPOSE	PURPOSES OF FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
MALTZ FAMILY FOUNDATION - 31-1566163 SUPPORT	SUPPORT CHARITABLE,					
25701 SCIENCE PARK DRIVE EDUCATI	EDUCATIONAL AND RELIGIOUS			••4	JEWISH FEDERATION	-
CLEVELAND, OH 44122-7302 PURPOSE	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
MANDEL SPPRTING FDINS-JOSEPH C. AND FLORENCE SUPPORT CHARITABLE	T CHARITABLE,					
MANDEL FUND - 34-1350568, 25701 SCIENCE PARK EDUCATIONAL AND RELIGIOUS	TIONAL AND RELIGIOUS			,,	JEWISH FEDERATION	
DRIVE, CLEVELAND, OH 44122-7302 PURPOSE	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
TON L. AND BARBARA	SUPPORT CHARITABLE,					 -
1350570, 25701 SCIENCE PARK	EDUCATIONAL AND RELIGIOUS			-7_	JEWISH FEDERATION	
DRIVE, CLEVELAND, OH 44122-7302 PURPOSE	PURPOSES OF FEDERATION	OHIO	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
FAMILY CHARITABLE FOUNDATION -	SUPPORT CHARITABLE,					
, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS		•		JEWISH FEDERATION	
CLEVELAND, OH 44122-7302 PURPOSE	PURPOSES OF FEDERATION D	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
MILLER FAMILY CHARITABLE FUND -	SUPPORT CHARITABLE,			l		
31-1204735, 25701 SCIENCE PARK DRIVE, EDUCATION	EDUCATIONAL AND RELIGIOUS			<u> </u>	JEWISH FEDERATION	
CLEVELAND, OH 44122-7302 PURPOSE	PURPOSES OF FEDERATION	оню	501(c)(3)	11A TYPE 1	OF CLEVELAND	×
ALLEN & RUTH MILLER FAMILY FOUNDATION - SUPPORT	SUPPORT CHARITABLE,					
, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS			<u> </u>	JEWISH FEDERATION	_
CLEVELAND, OH 44122-7302 PURPOSE	PURPOSES OF FEDERATION D	онто	501(C)(3)	11A TYPE 1 C	OF CLEVELAND	×
MEISEL FAMILY FOUNDATION - 31-1583883 SUPPORT	SUPPORT CHARITABLE,					
INCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS			<u>r</u>	JEWISH FEDERATION	
CLEVELAND, OH 44122-7302 PURPOSES OF	FEDERATION	онго	501(C)(3)	11A TYPE 1 C	OF CLEVELAND	×

ATTONS - JACK N.

34-1350566

Schedule R (Form 990) & LILYAN MANDEL FUND

Part II Continuation of Identification of Related Tax-Exempt Organizations

	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13) controlled
		foreign country)	section	status (if section 501(c)(3))	entity	Yes No
POR	SUPPORT CHARITABLE,					┞
CATI	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
POSE	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
PORT	SUPPORT CHARITABLE,					
CATIO	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
POSES	PURPOSES OF FEDERATION	оніо	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
PORT (SUPPORT CHARITABLE,					_
CATION	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	-
POSES O	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
SUPPORT CHARITABLE	RITABLE,					
CATIONAL	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
POSES OF	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
SUPPORT CHARITABLE	RITABLE,					
CATIONAL	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
POSES OF	PURPOSES OF FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
SUPPORT CHARITABLE	ITABLE,					
CATIONAL	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	<u></u>
POSES OF	PURPOSES OF FEDERATION	оню	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
SUPPORT CHARITABLE	RITABLE,					-
CATIONAL	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
POSES OF	PURPOSES OF FEDERATION	оіно	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
SUPPORT CHARITABLE	ARITABLE,					
CATIONAL	EDUCATIONAL AND RELIGIOUS					_
POSES OF	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
SUPPORT CHARITABLE	RITABLE,					
CATIONAL	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
POSES OF	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
SUPPORT CHARITABLE	NITABLE,					
CATIONAL	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
POSES OF	PURPOSES OF FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
SUPPORT CHARITABLE	ITABLE,					
CATIONAL	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
POSES O	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND	×
PORT C	SUPPORT CHARITABLE,					-
CATION	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION	
PURPOSES OF	OF FEDERATION	отно	501(C)(3)	11A TYPE 1	OF CLEVELAND	×

MANDEL SUPPORTING FOUNDATIONS - JACK N. & LILYAN MANDEL FUND

34-1350566

Part II Continuation of Identification of Related Tax-Exempt Organizations Schedule R (Form 990)

(a)	(9)	(5)	P	(a)	€)	وا	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 572(b)(13)	2(b)(13)
of related organization	·	foreign country)	section	status (if section	entity	organization?	thon?
				501(c)(3))		Yes	٩ N
SIEGAL CLG JU	PROMOTION OF HIGH QUALITY						
	LIFE-LONG JEWISH LEARNING				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	OPPORTUNITIES	OHIO	501(C)(3)	4	OF CLEVELAND		×
NORMA AND ERNIE SIEGLER FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
34-1546349, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS		_		JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
SIMON FAMILY FOUNDATION - 34-1808584	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS			• •	JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	ОНІО	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
NAOMI G. & EDWIN Z. SINGER FAMILY FUND -	SUPPORT CHARITABLE,						
34-1638257, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
DAVID AND ROBERT STEIN FOUNDATION -	SUPPORT CHARITABLE,						
34-1466318, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
IRVING I, STONE SUPPORT FOUNDATION -	SUPPORT CHARITABLE,						
34-1476465, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	OHIO	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
NINA & NORMAN WAIN FAMILY FOUNDATION -	SUPPORT CHARITABLE,						
31-1502119, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
WOLF FAMILY FOUNDATION - 34-1638259	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS			.,	JEWISH FEDERATION	 -	
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
BENNETT & DONNA YANOWITZ FAMILY FOUNDATION -	℃						_
34-1562999, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
ZILBER FAMILY FOUNDATION - 34-1711966	SUPPORT CHARITABLE,						
25701 SCIENCE PARK DRIVE	EDUCATIONAL AND RELIGIOUS				JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
DAN AND ELLEN ZELMAN FAMIILY FOUNDATION -	SUPPORT CHARITABLE,						
38-3876650, 25701 SCIENCE PARK DRIVE,	EDUCATIONAL AND RELIGIOUS			<u> </u>	JEWISH FEDERATION		
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онто	501(C)(3)	11A TYPE 1	OF CLEVELAND		×
ROBERT AND EILEEN SILL FAMILY FOUNDATION -	SUPPORT CHARITABLE,				_	_	
PARK DRIVE,	EDUCATIONAL AND RELIGIOUS		-	<u> </u>	JEWISH FEDERATION	_	
CLEVELAND, OH 44122-7302	PURPOSES OF FEDERATION	онго	501(C)(3)	11A TYPE 1 C	OF CLEVELAND		×

& LILYAN MANDEL FUND Schedule R (Form 990) 2012

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

Page 2

34-1350566

[Part IV] Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) (b)	(q)	(0)	Ð	(e)	(£)	(6)	(F)	()	١ .
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct	Type of entity (C corp, S corp,	Share of total income	Share of end-of-year	Percentage ownership	512(b)(13) controlled entity?	- g 3.
		toreign country)		or trust)		assets		Yes	2
PARKWOOD TRUST COMPANY - 34-1851693									
919 N. MARKET ST., SUITE 429	FINANCIAL, TRUST AND					6			,
WILMINGTON, DE 19801	INVESTMENT SERVICES	DE	PARKWOOD LLC	C CORP	54,678.	1,200,991.	21.0/8	1	↓
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232162 12-10-12

34-1350566

Schedule R (Form 990)

& LILYAN MANDEL FUND

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

									-	3	130
(a)	(a)	(c) Legal	(d) Dispot controlling	(e) Predominant income	(f) Share of total	(g) Share of	(n) Disproportion-		(i) Code V-UBI	U) Seneral o	(n) Percentage
Name, address, and EiN of related organization	Primary activity	domicile (state or foreign country)	entity	(related, unrelated, excluded from tax under sections 512-514)	1	end-of-year assets	ate allocations?	No K	amount in box 20 of Schedule K-1 (Form 1065)	managing partner? Yes No	managing ownership partner?
										-	
PARKWOOD LLC - 37-1665471	FINANCIAL AND			(D) REVENITE		•					
CLEVELAND OH 44114	INVESTMENT SERVICES	DE	N/A	EXCLUDED	354,858,	5,634,579.	<u>×</u>		8,589.	<u>×</u>	21.67%
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Page 3

Yes

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& LILYAN MANDEL FUND Schedule R (Form 990) 2012 Part V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

e related organizations listed in Parts II-IV?
y of the following transactions with one or more related or
During the tax year, did the organization engage in any of t

- Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
 - b Gift, grant, or capital contribution to related organization(s)
 - c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
 - e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- 1 Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

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- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

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(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) MSF PRIVATE EQUITY FUND LLC	В	8,154,000.	
(2) MAF INVESTMENTS LTD	S	20,400,000.	
(3) SIMON CHARITABLE PUBLIC LLC	В	24,171,150.	
(4) SIMON CHARITABLE PUBLIC LLC	w	6,441,000.	
(5) MSF REAL ESTATE FUND LLC	В	572,000.	
(6) MSF REAL ESTATE FUND LLC	ഗ	2,244,000.	
232163 12-10-12	58		Schedule R (Form 990) 2012

34-1350566

& LILYAN MANDEL FUND

Schedule R (Form 990)

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7)PARKWOOD TRUST COMPANY	×	1,550,096.	
(8)			
(5)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(12)			
(18)			
(19)			
(20)			
(21)			
(22)			
(An)			
(54)			

& LILYAN MANDEL FUND Schedule R (Form 990) 2012 Part VI | Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

Page 4

34-1350566

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

es I	`	1	1			1
(k) ercentage ownership						Schedule R (Form 990) 2012
(j) General or pmanaging partner? Yes No		 				Form
Gen 1 par Yes			 			e B.
Code V-UBI General or Percentage amount in box 20 managing over Schedule K-1 Percentage (Form 1065) Yes No						Schedul
Disproportionate allocations?						
Disp alloci			 			
(g) Share of end-of-year assets						
(f) Share of total Income						
(e) Are all partners sec 501(c)(3) 01957 4) Yes No			 			
Partin 501 010 1) Yes			 		-	
(d) Predominant income related, unrelated, excluded from tax under section 512-514) y						
(c) Legal domicile (state or foreign country)						
(b) Primary activity						
Primar				ļ, 		
(a) Name, address, and EIN of entity						

Form 8868

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extens are filing for an Additional (Not Automatic) omplete Part II unless you have already be	3-Month B	Extension, complete only Part II (on page 2 of	this t	form).	► X 8868.		
a corpora 8868 to re Return for	c filing (e-file). You can electronically file Fition required to file Form 990-T), or an additiquest an extension of time to file any of the Transfers Associated With Certain Personals). For more details on the electronic filing of	ional (not a forms liste al Benefit C	automatic) 3-month extension of tim d in Part I or Part II with the except Contracts, which must be sent to the	ne You can e non of Form 8 e IRS in pape	lectro 870, r fort	onically Informa mat (see	file Form ation		
Part I	Automatic 3-Month Extension of	Time. Onl	v submit original (no copies nee	ded).		-			
	tion required to file Form 990-T and request				omp	lete			
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	corporations (including 1120-C filers), partne				t an e	extensio	n of		
	income tax returns.	, o.i., p. o,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-				
griic to m	THOUSE LEX FOLUTION.		Enter filer	s identifying n	umb	er, see it	nstructions		
Type or	Name of exempt organization or other filer, se	e instruction		Employer ident					
print	MANDEL SUPPORTING FOUNDATIONS			34-1350566					
File by the	Number, street, and room or suite no. If a P.C			Social securi	tv nu	mber (SS	SN)		
due date for	25701 SCIENCE PARK DRIVE	.,,							
filing your	City, town or post office, state, and ZIP code.	For a foreig	n address, see instructions	·					
return See	return See Instructions. CLEVELAND OH 44122-7302								
Enter the Return code for the return that this application is for (file a separate application for each return)									
Application Return Application Return									
	ls For Code Is For Code								
	Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08								
		03	Form 4720				09		
	0 (individual)	03	Form 5227				10		
Form 990		1	Form 6069				11		
	-T (sec. 401(a) or 408(a) trust)	05	Form 8870				12		
Form 990	0-T (trust other than above)	06	Politi 8670				12		
Teleph If the o If this if for the whist with the outing is for the whole out in the control of	one No. (216) 593-2900 rganization does not have an office or places for a Group Return, enter the organization ole group, check this box. e names and EINs of all members the exterquest an automatic 3-month (6 months for a 2/15/2014 to file the or the organization's return for: calendar year or Tax year beginning 7/11/2 e tax year entered in line 1 is for less than 1 Change in accounting period	of busines s four digit If it is for p sion is for. corporatio exempt or	FAX No. ► (216) 593-2901 ss in the United States, check this is Group Exemption Number (GEN) part of the group, check this box. In required to file Form 990-T) exteganization return for the organization, and ending	nsion of time on named abo	ove.	If the and	nis is I attach a		
3a If th	is application is for Form 990-BL, 990-PF, 9	90-T, 4720), or 6069, enter the tentative tax, l	ess any	3a	•			
b If th	refundable credits. See instructions. is application is for Form 990-PF, 990-T, 47	20. or 606	9 enter any refundable credits and		-va	T			
	mated tax payments made. Include any prio				3b	\$	0		
c Bal	ance due. Subtract line 3b from line 3a. Inc	lude your p	payment with this form, if required,	by using					
EF	PS (Electronic Federal Tax Payment System	m). See ins	structions.		3c	\$	0		
Caution. If	you are going to make an electronic fund withdra	wal with this	Form 8868, see Form 8453-EO and F	orm 8879-EO f	ог ра	yment ins	structions.		
	y Act and Paperwork Reduction Act Notice, se			-			(Rev. 1-2013)		
HTA	-								

CL C. ALDY INLAA					Page 2
i are filing for an Additional (Not Automatic) 3-Month Ex	ctension, c	complete only Part II and check th	. xod e		> 🗓
only complete Part II if you have already been granted an	automatic	3-month extension on a previously:	filed Form	8868.	
are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I (on page 1)			
Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no c	opies nee	ded).
		Enter filer's	s identifyi	ng number,	see instructions
pe or Name of exempt organization or other filer, see instructions				Employer identification number (EIN) or	
MANDEL SUPPORTING FOUNDATIONS - JACK N.					
y the & LILYAN MANDEL FUND			34-1350566		
Number, street, and room or suite no. If a P.O. box, see instructions.			Social security number (SSN)		
your n See 25701 SCIENCE PARK DRIVE					
City, town or post office, state, and ZIP code. For a f	oreign add	ress, see instructions.	-		
CLEVELAND, OH 44122					
e Return code for the return that this application is for (fil	e a separa	te application for each return)			[0 1
tion	Return	Application			Return
	Code	Is For			Code
90 or Form 990-EZ	01			v 1 v 2	****
	02	Form 1041-A			08
720 (Individual)	03	Form 4720			09
90-PF	04	Form 5227			10
90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
90-T (trust other than above)	06	Form 8870			12
Do not complete Part II if you were not already granted	an auton	natic 3-month extension on a pre-	viously file	d Form 886	8.
BARRY REIS					
books are in the care of > 25701 SCIENCE PARK DR	IVE - CL	EVELAND, OH 44122			
phone No. ► 216~593-2900		FAX No. ► 216-593-2901			
e organization does not have an office or place of busines	s in the Ur	ited States, check this box			. ▶ 🔲
s is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole g	roup, check this
. If it is for part of the group, check this box	and atta	ch a list with the names and EINs o	of all memb	ers the exte	nsion is for.
request an additional 3-month extension of time until	MAY 15	2014			
or calendar year, or other tax year beginning	JUL 1, 2	012 , and endir	ng JUN	30, 2013	·
the tax year entered in line 5 is for less than 12 months, o	check reas	on: 🔲 Initıal return [Final :	eturn	
Change in accounting period					
tate in detail why you need the extension					
HE INFORMATION REQUIRED FOR A COMPLETE FILE	NG IS NO	T YET AVAILABLE.			
					
this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any	1		
onrefundable credits. See instructions.			8a	\$	0.
this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
x payments made. Include any prior year overpayment a	llowed as a	a credit and any amount paid			
reviously with Form 8868.			8b	\$	0.
alance due. Subtract line 8b from line 8a. Include your pa	ayment wit	h this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See Instructions.			8c	_\$	0.
nalties of perjury, I declare that I have examined this form, includ correct, and com <u>pl</u> ete, and that I am authorized to prepare this f	ling accomp orm.	panying schedules and statements, and			_
20 E-		m mnradinen	Data	× 2/11	114
e ▶ ØSF Title ▶	assistan	T TREASURER			868 (Rev. 1-2013)
	Name of exempt organization or other filer, see instruMANDEL SUPPORTING FOUNDATIONS - JACK N. LILYAN MANDEL FUND Number, street, and room or suite no. If a P.O. box, see instructions City, town or post office, state, and ZIP code. For a feature code for the return that this application is for (file attion) Return code for the return that this application is for (file attion) The return code for the return that this application is for (file attion) The return code for the return that this application is for (file attion) The return code for the return that this application is for (file attion) The return code for the return that this application is for (file attion) The return code for the return that this application is for (file attion) The return code for the return that this application is for (file attion) The return code for the return that this application is for (file attion) The return code for the return that this application is for form 990-BL, 990-PF, 990-T, 4720, one organization does not have an office or place of business is for a Group Return, enter the organization's four digit in the start of the group, check this box request an additional 3-month extension of time until or calendar year, or other tax year beginning in the tax year entered in line 5 is for less than 12 months, or calendar year, or other tax year beginning in the tax year entered in line 5 is for less than 12 months, or calendar year, or other tax year beginning in the tax pear entered in line 5 is for less than 12 months, or calendar year, or other tax year beginning in the tax pear entered in line 5 is for less than 12 months, or other tax year beginning in the tax pear entered in line 5 is for less than 12 months, or other tax year beginning in the tax pear entered in line 5 is for less than 12 months, or other tax year beginning in the tax year entered in line 5 is for less than 12 months, or other tax year beginning in the tax year entered in line 5 is for less than 12 months, or other t	Name of exempt organization or other filer, see instructions **RANDEL SUPPORTING FOUNDATIONS - JACK N.** **LILYAN KANDEL FUND* Number, street, and room or suite no. If a P.O. box, see instructions **CALCELENCE PARK DRIVE* City, town or post office, state, and ZIP code. For a foreign add cleveLAND, OH 44122 The Return code for the return that this application is for (file a separa action **Return code for the return that this application is for (file a separa action **Return code for the return that this application is for (file a separa action **Return code for the return that this application is for (file a separa action) **Return code for the return that this application is for (file a separa action) **Return code for the return that this application is for (file a separa action) **Return code for the return that this application is for (file a separa action) **Return code for the return that this application is for (file a separa action) **Return code for the return that this application is for (file a separa action) **Return code for the return that this application is for 408(a) trust) **Depart (sec. 401(a) or 408(a) trust) *	Name of exempt organization or other filer, see instructions MANDEL SUPPORTING POUNDATIONS – JACK N. LILYAM MANDEL FUND Number, street, and room or suite no. If a P.O. box, see instructions. 27701 SCIENCE PARK DRIVE City, town or post office, state, and ZIP code. For a foreign address, see instructions. City town or post office, state, and ZIP code. For a foreign address, see instructions. CIEVELAND, OH 44122 The Return code for the return that this application is for (file a separate application for each return) Station Return Code for the return that this application is for (file a separate application for each return) Poor Form 990-EZ O1 O2 Form 1041-A Poplication Gode Is For 990 or Form 990-EZ O1 O3 Form 4720 O34 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 6069 POT (trust other than above) D5 Form 8870 D6 Form 8870 D7 Intrust other than above) D8 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 5227 POD 1 Form 6069 POD 1 Form 8870 POD	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no c Enter filer's identifyir Name of exempt organization or other filer, see instructions Number street, and room or suite no. If a P.O. box, see instructions. Social see 25701 SCIENCE PARK DRIVE CLEVELAND, OH 44122 Be Return code for the return that this application is for (file a separate application for each return) Strion Return Code Is For 101 Social see 25701 SCIENCE PARK DRIVE Outomatical Strip Science	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies nee Enter filer's identifying number, In Name of exempt organization or other filer, see instructions ANDEL SUPPORTING FOUNDATIONS - JACK N. Employer identification Number, street, and room or suite no. If a P.O. box, see instructions. 24-13505 Number, street, and room or suite no. If a P.O. box, see instructions. 25701 SCIENCE PARK DRIVE City town or post office, state, and ZIP code. For a foreign address, see instructions. CIEVELAND, OH 44122 The Return code for the return that this application is for (file a separate application for each return) Strion Return Code Is Form Application Secolal security number of the foliation of the return of the return of the second of the return of the return of the second of the return of the return of the second of the return of the second of the return of the second of the return of the second of the return of the second of the return of the second of the return of the second of the return of the second of t

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