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Schedule B

(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

OMB No 1545-0047

2013

Name of the organization

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

Department of the Treasury Information about Schedule B (Form 990, Porm 990-PF) and its instructions is at www.irs.gov/form990.

Employer identification number

| THE LAVIN FAMILY FOUNDATION, INC. | | 52-2284964 | |
|---|--|---|--|
| Organization type (check on . | е) | | |
| Filers of | Section: | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | |
| | 527 political organization | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private founda | tion | |
| • | 501(c)(3) taxable private foundation | | |
| | | | |
| | covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a | Special Rule See | |
| General Rule | | | |
| | n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II | or more (in money or | |
| Special Rules | | T. | |
| under sections 509 | c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support 9(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 55,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form nd II. | ne year, a contribution of | |
| during the year, to | tion 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, conal purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III | | |
| during the year, co not total to more the year for an exclusive | c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from ontributions for use exclusively for religious, charitable, etc., purposes, but the nan \$1,000. If this box is checked, enter here the total contributions that we welly religious, charitable, etc., purpose. Do not complete any of the parts unlead anization because it received nonexclusively religious, charitable, etc., contributions. | ese contributions did re received during the iss the General Rule | |
| Caution. An organization tha 990-EZ, or 990-PF), but it mi | it is not covered by the General Rule and/or the Special Rules does not file Sust answer "No" on Part IV, line 2, of its Form 990, or check the box on line to certify that it does not meet the filing requirements of Schedule B (Form 99) | H of its Form 990-EZ or on its | |

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization THE LAVIN FAMILY FOUNDATION, INC.

Employer Identification number 52-2284964

| (a) . No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|--------------|--|----------------------------|---|
| 1_ | FRANCIS AND JOANNE LAVIN 3030 K STREET NW APT 107 WASHINGTIN, DC 20007 | \$ \$ 303,473. | Person Payroll Noncash (Complete Part If for noncash confributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part If for noncash contributions) |
| (a) No | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |