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Form 990-PF

Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

For	cale	ndar year 2010, or tax year beginning		, and ending			
G	heck	call that apply: Initial return	Initial return of a fo	ormer public charity	Final return	1	
		Amended return	Address chan	ge $\square$	☐ Name change		
Nai	ne o	foundation			A Employer identification	number	
		STARK MARTIN CHARITAB	LE TRUST				
		C/O JAMES EHINGER			20-3446537	1	
Nur	nber a	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number		
		ONE EAST WASHINGTON S	T., STE #190	0	602-262-59	43	
City	or t	own, state, and ZIP code			C If exemption application is p	ending, check here	
		PHOENIX, AZ 85004-25	54		D 1. Foreign organizations		
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		Foreign organizations me check here and attach co		
	] Se		Other taxable private founds	ation	i		
I Fa	ur ma	arket value of all assets at end of year   J Accounting		Accrual	E If private foundation sta under section 507(b)(1	(A), check here	
(fi	om i	Part II, col. (c), line 16)	her (specify)		F If the foundation is in a	60-month termination	
_	\$	2 , 547 , 324 . (Part I, colu	mn (d) must be on cash i	basis.)	under section 507(b)(1)		
Pa	ırt l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements	
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for chantable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received			N/A		
	2	Check \ if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments		****			
	4	Dividends and interest from securities	86,772.	86,772		STATEMENT 1	
	5a	Gross rents			<u> </u>		
	b	Net rental income or (loss)		-			
a)	6a	Net gain or (loss) from sale of assets not on line 10	179,080.				
Ž	b	Gross sales price for all assets on line 6a 734,658.					
Revenue	7	Capital gain net income (from Part IV, line 2)		179,080			
ď	8	Net short-term capital gain			<del>                                     </del>		
	9	Income modifications DEOFNED					
	10a	Gross sales less returns RECEIVED					
	b	Less Cost of goods sold	950				
	C	Gross profit or (loss) NOV 1 4 2011	19				
	11	Other income	38				
	12		-1265,852.	265,852	,		
	13	Compensation of officers, directors trustees, etc	0.	0		0.	
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
Expenses	16a	Legal fees STMT 2	1,874.	0		0.	
Je.	b	Accounting fees STMT 3	3,500.	0		0.	
	C	Other professional fees					
<u>ĕ</u> .	17	Interest					
rat	18	Taxes STMT 4	2,381.	0.		0.	
nis	19	Depreciation and depletion					
Ë	20	Occupancy					
¥	21	Travel, conferences, and meetings					
aud	22	Printing and publications					
ĝ	23	Other expenses STMT 5	2,980.	0 .		0.	
Operating and Administrative	24	Total operating and administrative					
<u>P</u>		expenses. Add lines 13 through 23	10,735.	0 .	,	0.	
0	25	Contributions, gifts, grants paid	103,000.			103,000.	
	26	Total expenses and disbursements.					
		Add lines 24 and 25	113,735.	0 .	,	103,000.	
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	152,117.				
	b	Net investment income (if negative, enter -0-)		265,852	,		
_		Adjusted net income (if negative, enter -0-)		<del></del>	N/A		
0235	)1	LHA For Paperwork Reduction Act Notice, see	the instructions			Form 990-PF (2010)	

Part II Balance Sheets Attached schedules and amounts in the description		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Ľ	aπ	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	11,996.	8,503	8,503.
	2	Savings and temporary cash investments	48,035.	330,838.	330,838.
	3	Accounts receivable >			
		Less: allowance for doubtful accounts		***************************************	
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			<del></del>
As	10a	Investments - U.S. and state government obligations			
	l	Investments - corporate stock STMT 6	1,754,893.	1,627,700.	2,207,983.
		Investments - corporate bonds			
	١	Investments - land, buildings, and equipment basis			
	l''				
	12	Less accumulated depreciation Investments - mortgage loans	<u>-</u>		
	13	Investments - other			
		Land, buildings, and equipment; basis			
	'`	Less accumulated depreciation			
	15	Other assets (describe >		<u> </u>	
	'"	Other assets (describe		·	<del></del>
	16	Total assets (to be completed by all filers)	1,814,924.	1,967,041.	2,547,324.
_	17	Accounts payable and accrued expenses	1,014,524.	1,501,011.	2,317,3210
	18	Grants payable			
<b>"</b> A	19	Deferred revenue			
Liabilities	20				
ij	21	Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable			
Ë		Other liabilities (describe )			
	"	Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
S	۱,,	•	1,814,924.	1,967,041.	
uces		Unrestricted Temporarily restricted	1,014,524.	1,501,041.	
Sala		Permanently restricted			ì
P	20				
퉏					
2	0.7	and complete lines 27 through 31. Capital stock, trust principal, or current funds			
Net Assets or Fund Bala	27		ļ		
SSI	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
et A	29	Retained earnings, accumulated income, endowment, or other funds	1,814,924.	1,967,041.	
ž	30	Total net assets or fund balances	1,014,324.	1,307,041.	
	١.,	Table 11-b 11-b 11-b - and and annual Mond belowed	1,814,924.	1,967,041.	
_	131	Total liabilities and net assets/fund balances		<u></u>	
P	art	III Analysis of Changes in Net Assets or Fund B	Balances		
=	Tota	I not accete or fund halanage at hazinging of year. Dort II. column (a) line	30	<del></del>	<del></del>
ı		I net assets or fund balances at beginning of year - Part II, column (a), line st agree with end-of-year figure reported on prior year's return)	JU		1 814 924
^	•	r amount from Part I, line 27a		1	1,814,924.
		· · · · · · · · · · · · · · · · · · ·		2 3	152,117.
		r increases not included in line 2 (itemize)			1,967,041.
		lines 1, 2, and 3		4	1,967,041.
		eases not included in line 2 (itemize)	olumn (h) line 20	5	1,967,041.
0	rota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (u), iine 30		Form <b>990-PF</b> (2010)
					ruiii <b>330-FF</b> (2010)

	JAMES EHINGER					2	0-344	6537	Page 3
	ind Losses for Tax on I		t Income	75000	waseness I			<del>,</del>	
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			( <b>0</b> ) HO	w acquired Purchase Donation		acquired lay, yr.)	(d) Date (mo., da		
1a SEE STATEMENT 9		15. IVILO 00.)		D-1	Onation	VARI		VARIO	
b SEE STATEMENT						VARI		VARIO	
C C	<u></u>					VIIILI	000	V111(1)	
d							<del></del>		
e									
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				aın or (loss s (f) mınus		
a 71,971.			49,79					22	,178.
ь 662,687.		ļ	505,78	5.				156	,902.
C		-	_						
d e		<u> </u>		+					
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69	$\dashv$		(I) Gaine (C	Col. (h) gain	minue	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i)		cc	òl. (k), but r	not less tha (from col. (	n -0-) or	
a		†	***	<u> </u>				22	,178.
b								156	,902.
С									
d									
е		<u></u>		_					
2 Capital gain net income or (net cap	oital loss) { If gain, also enter-	er in Part I, line 0- in Part I, line	7 7	}	2			179	,080.
3 Net short-term capital gain or (loss		nd (6):		$\mathbf{I}$					
If gain, also enter in Part I, line 8, c	olumn (c).			١I			N/A		
If (loss), enter -0- in Part I, line 8  Part V   Qualification Ur	nder Section 4940(e) fo	r Reduced	Tax on Net	Inve	stment In	come	N/A	· · · · ·	
(For optional use by domestic private									
		1010(0) 000	THOSE WITH GOLD HOLD WAR	0011101,					
If section 4940(d)(2) applies, leave thi	is part blank.								
Was the foundation liable for the section	on 4942 tax on the distributable ai	mount of any ye	ear in the base per	ıod?				Yes	X No
If "Yes," the foundation does not qualif	y under section 4940(e). Do not c	omplete this pa	ırt.						
1 Enter the appropriate amount in ea		ructions before	making any entrie					(4)	
Base period years	(b) Adjusted qualifying di	stributions	Net value of no	(c) ncharita	hle-use asset		Distrit	(d) oution ratio /ided by col.	(0))
Calendar year (or tax year beginning 2009	9 "')   ' ' ' ' '	05,199.	1101 10100 01 1101		069,62		(cor. (b) un		50830
2008		94,193.	<del></del>		152,36				<u>43763</u>
2007		91,267.			317,76				39377
2006	(	56,500.			179,55			• 0 :	30511
2005									
								_	
2 Total of line 1, column (d)						2		.10	<u>64481</u>
3 Average distribution ratio for the 5-		on line 2 by 5,	or by the number	of years	5			0	41100
the foundation has been in existen	ce ir iess than 5 years					3	<u> </u>	• 04	41120
4 Enter the net value of noncharitable	e-use assets for 2010 from Part X	, line 5				4		2,363	,720.
								0.5	100
5 Multiply line 4 by line 3						5		97	,196.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6		2	<u>,659.</u>
7 Add lines 5 and 6						7		99	,855.
8 Enter qualifying distributions from		نافسم الألم		401	have water	8		T03	<u>,000.</u>
If line 8 is equal to or greater than I See the Part VI instructions.	ime 7, check the box in Part VI, lin	e 10, and comp	nete that part using	y a 1%	iax rate.				
								orm 000 E	NE (00 (0)

Excise Tax Based on Investment Income (Section 4)	940(a), 4940(b), 4940(e), or	4948 - S	ee instru	Ction	15)
1a Exempt operating foundations described in section 4940(d)(2), check here  an	d enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if	necessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%				2,6	<u>59.</u>
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter					Ž
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	. Others enter -0-)	2		^ ~	<u>0.</u>
3 Add lines 1 and 2		3		2,6	<u>59.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	y. Others enter -0-)	4			<u> 0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		2,6	<u>59.</u>
6 Credits/Payments:					
a 2010 estimated tax payments and 2009 overpayment credited to 2010	6a 840				
<b>b</b> Exempt foreign organizations - tax withheld at source	6b				
c Tax paid with application for extension of time to file (Form 8868)	6c				
d Backup withholding erroneously withheld	6d			_	4.0
7 Total credits and payments. Add lines 6a through 6d		7		8	<u>40.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	attached	8		4 ^	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>•</b>	9		1,8	<u> 19.</u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax	Refunded ►	11			
Partivue Statements Regarding Activities			المنت ا	V1	NI.
1a During the tax year, did the foundation attempt to influence any national, state, or local le	egislation or did it participate or interven	e in		Yes	$\overline{}$
any political campaign?			1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political pur	·		1b		Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	and copies of any matenals publish	ed or			
distributed by the foundation in connection with the activities.					v
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	_				
(1) On the foundation. ► \$ 0 • (2) On foundation manage	/ · · / · · · · · · · · · · · · · · · ·	<u>-</u>			
e Enter the reimbursement (if any) paid by the foundation during the year for political experiments are supported by the foundation during the year for political experiments. ► \$ 0 •	enditure tax imposed on foundation				
· · · · · · · · · · · · · · · · · · ·	no IBS2		2		X
2 Has the foundation engaged in any activities that have not previously been reported to the	ie ino?				
If "Yes," attach a detailed description of the activities.	na instrument, articles of incorporation	05			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing bylaws, or other similar instruments? If "Yes," attach a conformed copy of the characteristics.		UI	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	<del>-</del>		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	year :	N/A			
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year.	22.2		5		X
If "Yes," attach the statement required by General Instruction T.	,ai :				
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfie	d either:				
By language in the governing instrument, or	d dittior.				
By state legislation that effectively amends the governing instrument so that no manda	atory directions that conflict with the sta	te law			
remain in the governing instrument?			6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
If "Yes," complete Part II, col. (c), and Part XV.					
8a Enter the states to which the foundation reports or with which it is registered (see instru	ctions) >				
AZ	· -				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	e Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation	, , , , , , , , , , , , , , , , , , , ,		8b	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning o	f section 4942(j)(3) or 4942(j)(5) for ca	lendar			
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV				Х
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a sci	•		10		Х
			Form <b>990</b>	-PF(	2010)

ID.	THIN Statements Degerding Activities (contract)	<del></del>		
	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	,,		v
10	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		_X_
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	10		х
10	August 17, 2008?	12	X	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   N/A	13		
14	The books are in care of ► JAMES EHINGER  Telephone no. ► 602-2	62-5	943	
17	Located at NONE EAST WASHINGTON ST., STE #1900, PHOENIX, AZ ZIP+4 N			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		$\overline{}$	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign country▶			
Pe	TittVIIEB Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available		:	
	for the benefit or use of a disqualified person)?			:
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2010?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):		1	
8	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?  Yes X No			
	If "Yes," list the years \( \sum_{\text{ordation}} \) Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
L	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	į		
	statement - see instructions.)  N/A	2b		
,	of the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	20		
٠	The provisions of section 4042(a/(2) are being applied to any or the years noted in 2a, list the years note.			
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ļ.		
•	during the year?			
b	of "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after		i	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2010.)  N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		Х
_		orm 990	DE	(2010)

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Rantivilles Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indire	ectly,		
any voter registration drive?		Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es 🗓 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i			
section 53.4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□ ▮	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ined		
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).	•	·	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b
Partiville Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly		
Faid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		LV-1 (On-money)	1.750	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other
	to position	`enter -0-)	and deferred compensation	allowances
	TRUSTEE			
11446 N. HWY 16	2 22	١ .	ا ا	
FREDERICKSBURG, TX 78624	0.00	0.	0.	0.
	TRUSTEE			
6909 NUBIAN LANE AUSTIN, TX 78739	0 00	۱ ,	ا م	•
	0.00 TRUSTEE	0.	0.	0.
4610 SHOALWOOD	TRUSTEE			
AUSTIN, TX 78756	0 00	ا م	ا م ا	^
AUSIIN, IX 70730	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		
	(b) Title, and average hours per week	1	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	dovoted to position		compensation	anovianoco
		1		
Total number of other employees paid over \$50,000				0
			Form S	990-PF (2010)

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	7	
	7	
	┨	
	╡.	
	┪	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities	<del></del>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	and information such as the	<del></del>
number of organizations and other beneficiaries served, conferences convened, research papers prod	uced, etc.	Expenses
1 N/A		
1 N/A		
2		
		· · · · · · · · · · · · · · · · · · ·
3		
	<u></u> -	
4		
Part IX-B Summary of Program-Related Investments		<u></u>
Describe the two largest program-related investments made by the foundation during the tax year on	ines 1 and 2.	Amount
1 N/A		
2		
the state of the s		
All other program-related investments. See instructions.	-	
Total. Add lines 1 through 3		0.
TOTAL ACCIONOS TUNIONYMO		Form <b>990-PF</b> (2010)

Form 990-PF (2010)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	2,236,693.
	Average of monthly cash balances	1b	163,023.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	2,399,716.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,399,716.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	35,996.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,363,720.
6	Minimum investment return. Enter 5% of line 5	6	118,186.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	118,186.
2a	Tax on investment income for 2010 from Part VI, line 5 2,659.		·
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2,659.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	115,527.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	115,527.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	115,527.
B	वतः आ। Qualifying Distributions (see instructions)	1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		102 000
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	103,000.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	· · · · · · · · · · · · · · · · ·	3a	
	Cash distribution test (attach the required schedule)	3b	102 000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	103,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	2 650
	Income. Enter 1% of Part I, line 27b	6	2,659. 100,341.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		<u>-</u>
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	quannes 10	or the section

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	( <b>d</b> ) 2010
1 Distributable amount for 2010 from Part XI,				115,527.
2 Undistributed income, if any, as of the end of 2010				113/32/1
a Enter amount for 2009 only			102,680.	
b Total for prior years:	<del></del>			
2008,		416.		
3 Excess distributions carryover, if any, to 2010:	***			
a From 2005				
<b>b</b> From 2006				
c From 2007				
dFrom 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 103,000.				
a Applied to 2009, but not more than line 2a			102,680.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				320.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		416.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		416.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see ınstr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				115,207.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	•			
section 170(b)(1)(F) or 4942(g)(3)	0.	······		
8 Excess distributions carryover from 2005	•			
not applied on line 5 or line 7		*****		
9 Excess distributions carryover to 2011.	0			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010	·		<u></u>	Form 000 DE (2010)

	ES EHINGER	atomatical part VIII	A 0\		1-3446537 Page 10
Part XIV Private Operating For	<del> </del>		A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		=	_     ▶ L	T. T	
<b>b</b> Check box to indicate whether the found		ng foundation described i		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	/F/ 3000	Prior 3 years (c) 2008		(e) Total
income from Part I or the minimum	(a) 2010	(b) 2009	(6) 2008	(d) 2007	(e) 10(21
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of		ļ			
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	-	ļ			
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter	<del>&gt;</del>				· · · · · · · · · · · · · · · · · · ·
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	<u>.</u>	· · · · ·			
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in				į	
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization			ļ. <u></u>		
(4) Gross investment income		<u> </u>	<u></u>		
Part XV Supplementary Info			if the founda	ation had \$5,000	or more in assets
at any time during t	he year-see the	instructions.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation wh year (but only if they have contributed n			ributions received	by the foundation before	the close of any tax
	iore man 45,000). (See S	section 507 (u)(2).)			
NONE	4004	····			
b List any managers of the foundation wh other entity) of which the foundation has			or an equally large	e portion of the ownersh	p or a partnership or
NONE					
	ion Cront Cift Loon	Cahalarahin ata Br			
		to preselected charitable		does not accept upsolici	ted requests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	<u>` ~ · · · · · · · · · · · · · · · · · · </u>			· · · · · · ·	
a The hame, address, and telephone ham	ber of the person to who	m apphoasons should be	audi obood.		
SEE STATEMENT 7					
<b>b</b> The form in which applications should b	e submitted and informa	ition and materials they st	nould include:		
c Any submission deadlines:		<del></del>			
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kınds of ınstitutioi	ns, or other factors:	<del></del>

20-3446537 Page 11

Granta and Contributions Paid During the Year or Approved for Future Payment Recopent Recopent Interdept and address (home or business)   See STATEMENT 8   Total   Paproved for future payment Recopent Interdept and address (home or business)   Purpose of grant or substantial centributor or substantial centributor   See STATEMENT 8   Total   Purpose of grant or substantial centributor   See STATEMENT 8   103,000.	Rant XV Supplementary Information			·	
SEE STATEMENT 8  Total  NONE  Total  Total	3 Grants and Contributions Paid During the Ye	ar or Approved for Future	Payment		
SEE STATEMENT 8  Total  NONE  Total  Total		If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
SEE STATEMENT 8  Total  NONE  Total  Total	Name and address (home or business)	or substantial contributor	recipient	dona ibation	
Total  Description  Descriptio	a Paid during the year	or substantial contributor	recipient		
NONE  Total			L.,		103 000
NONE  Total			<u> </u>	<u>▶ 3a</u>	103,000.
	NONE			<b>▶</b> 3b	0.
023611 12-07-10	023611 12-07-10	<del></del>			orm <b>990-PF</b> (2010)

Part XVI-A	Analysis of Income-Producing Activities
. w /\ t   -/\	Andress of incomic-frequently Activities

Enter gross amounts unless otherwise indicated.	Unrelati	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
C					
d					
e			<del>                                     </del>		·
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			ļ		
4 Dividends and interest from securities			14	86,772.	<del>-</del>
5 Net rental income or (loss) from real estate:	matters of the	September 1958	* 172	F 1.188 W. W	
a Debt-financed property					Worden Solden Market Land of Control
b Not debt-financed property			<del> </del>		
6 Net rental income or (loss) from personal			<del> </del>		
property					
7 Other investment income					
			<del> </del>		
8 Gain or (loss) from sales of assets other	i		18	179,080.	
than inventory	-		10	1/3,000.	
9 Net income or (loss) from special events	-		<del>                                     </del>		
10 Gross profit or (loss) from sales of inventory			<u> </u>		
11 Other revenue:	1	1			
<u> </u>		]			
b			<u> </u>		
<u> </u>			<u> </u>		
d			_		
6 40 Ocharl Add colores (A) (A) cod (A)	2.972.47603869	-	4	265 052	
12 Subtotal. Add columns (b), (d), and (e)	经过的	0.	3.5.	265,852.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	265,852.
(See worksheet in line 13 instructions to verify calculations.)					<del></del>
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	cemp	t Purposes	
Line No. Explain below how each activity for which incor	me is reported	in column (e) of Part XVI-A	contri	outed importantly to the accord	nnlishment of
the foundation's exempt purposes (other than I			COILLI	outed importantly to the accord	inplianment of
	-,,,				
					<del></del>
		<del> </del>	-		<del></del>
		<del> </del>			
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					···
		<del></del>		<del></del>	
023621					5
023621 12-07-10					Form <b>990-PF</b> (2010)

•	DIM	CIC PIETC	TIA CITALLY	TADDE TROOT	
Form 990-PF (2010	) C/O	<b>JAMES</b>	EHINGER	20-3446537	Page 13
Part XVII	Information	Regardin	g Transfers T	o and Transactions and Relationships With Noncharitable	
	<b>Exempt Org</b>			·	

1 Did th	e organization directly or indi	rectly engage in any of the following	ng with any other organization	described in section 501(c) of	Yes No
the Co	ode (other than section 501(c)	)(3) organizations) or in section 52	27, relating to political organiz	ations?	
a Trans	fers from the reporting founda	ation to a noncharitable exempt or	ganization of:		
(1) 0	eash	·			1a(1) X
	Other assets				1a(2) X
	transactions:				
(1) S	ales of assets to a noncharita	ble exempt organization			1b(1) X
		ncharitable exempt organization			1b(2) X
	tental of facilities, equipment,	. •			1b(3) X
٠,	teimbursement arrangements				1b(4) X
	oans or loan guarantees				1b(5) X
٠,	•	mbership or fundraising solicitation	ons		1b(6) X
		uling lists, other assets, or paid em			1c X
		"Yes," complete the following sch		ave show the fair market value o	
		oundation. If the foundation receiv			
		other assets, or services received.		in any nanoaction of snaring a	nangement, snow in
(a)Line no	(b) Amount involved	(c) Name of noncharitable		(d) Department of transform tra	ansactions, and sharing arrangements
(4)2110110	(b) runodne involvod	N/A	o exempt organization	(v) Description of transiers, tra	ansactions, and snaring arangements
		N/A		<del></del>	
		·····		ļ	
			·	·	
2a Is the	foundation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organiza	ations described	
in sec	tion 501(c) of the Code (other	r than section 501(c)(3)) or in sec	tion 527?		Yes X No
b If "Yes	s," complete the following sch	edule.			
	(a) Name of org	ganızation	(b) Type of organization	(c) Description	on of relationship
	N/A				
			1		
				· · · · · · · · · · · · · · · · · · ·	
		·			
		e that I have examined this return, include			owledge and belief, it is true, correct,
Sign	and complete Declaration of prepa	arer (other than texpayer or fiduciary) is b	ased on all information of which pr	reparer has any knowledge	• •
Here	1-0		11/9	11 Trust	Administration
	Signature of officer or tru	ıstee	Date	Title	7.0
	Pript/Type preparer's na			Date Check	if IPTIN
/				self- employ	<b>-</b>
Paid (	ALAN R. MA	SSEY ALAN F	R. MASSEY	1/03/11	
Prepar	/ <del> </del>		& CO., P.C.	Firm's EIN	
Use Or		POEL - TISCHNEK	a CO., F.C.	FIIII S EIN	
Joe Of		7 HILL COUNTRY	DOTTE CITTURE	118	<del></del>
				*	830-257 5220
	I KE	RRVILLE, TX 780	740	Phone no.	830-257-5330
					Form <b>990-PF</b> (2010)

023622 04-26-11

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT	)
SCOTTRADE INC	-		86,772.		0.	86,7	72.
TOTAL TO FM 990-PF, PART I, L	.N 4		86,772.		0.	86,7	72.
FORM 990-PF		LEGAL	FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC	EST-	(C) ADJUSTED NET INCOM		
LEGAL FEES		1,874.		0.			0.
TO FM 990-PF, PG 1, LN 16A =		1,874.		0.			0.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		3,500.		0.			0.
TO FORM 990-PF, PG 1, LN 16B		3,500.		0.			0.
FORM 990-PF		TAX	ES	<u> </u>		STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
FOREIGN TAX WITHHELD TAXES		2,221.	<u>. , ,</u>	0.			0.
<del>-</del>							

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME					
BANK CHARGES OFFICE EXPENSES	63. 2,917.	0		0.			
TO FORM 990-PF, PG 1, LN 23	2,980.	0	•	0.			
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6			
DESCRIPTION -		В	OOK VALUE	FAIR MARKET VALUE			
MARKETABLE SECURITIES AND CD	'S		1,627,700.	2,207,983.			
TOTAL TO FORM 990-PF, PART I			2,207,983.				

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JAMES ENHINGER 201 E. WASHINGTON ST. 11TH FLOOR PHOENIX, AZ 850042385

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

STARK MARTIN CHARITABLE TRUST

FORM AND CONTENT OF APPLICATIONS

A CHARITABLE ORGANIZATION REQUESTING A GRANT SHOULD SUBMIT THE FOLLOWING:

- 1)A WRITTEN DESCRIPTION OF THE ORGANIZATION (INCLUDING EIN, ITS CHARITABLE ACTIVITIES AND BENEFICIARIES.
- 2)LIST OF ORGANIZATIONS PRINCIPAL OFFICERS, BOARD MEMBERS, AND TRUSTEES (INCLUDING CONTACT INFORMATION FOR EACH)
- 3) INCOME AND EXPENSE STATEMENTS FOR THREE YEARS (INCLUDING THE CURRENT FISCAL YEAR AND A FORCAST OF THE COMING YEAR)
- 4) AMOUNT OF GRANT REQUESTED
- 5) DESCRIPTION OF HOW GRANT WOULD BE USED

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

FORM 990-PF

STATEMENT

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
CAPITAL AREA FOOD BANK OF TEXAS 8201 S. CONGRESS AUSTIN, TX 78745	NONE BENEFIT LOCAL COMMUNITY	OPERATING FOUNDATION	15,000.
CARITAS OF AUSTIN P.O. BOX 1947 AUSTIN, TX 78767-1947	NONE BENEFIT LOCAL COMMUNITY	PUBLIC CHARITY	15,000.
140 INDUSTRIAL LOOP RD	NONE BENEFIT LOCAL COMMUNITY	PUBLIC CHARITY	10,000.
HILL COUNTRY COMMUNITY NEEDS COUNCIL 209 S. ACORN FREDERICKSBURG, TX 78624	NONE BENEFIT LOCAL COMMUNITY	PUBLIC CHARITY	5,000.
HILL COUNTRY MEMORIAL HOSPITAL FOUNDATION P.O. BOX 1339 FREDERICKSBURG, TX 78624	NONE BENEFIT LOCAL COMMUNITY	PUBLIC CHARITY	15,000.
NORTHEASTERN PENNSYLVANIA PHILHARMONIC 4101 BIRNEY AVENUE MOOSIC, PA 18507-1323	NONE ARTS & EDUCATION	PUBLIC CHARITY	5,000.
PARKSIDE COMMUNITY SCHOOL 1701 TOOMEY RD AUSTIN, TX 78704	NONE YOUTH EDUCATION	PUBLIC CHARITY	5,000.
BALLET AUSTIN ACADEMY 501 WEST 3RD STREET AUSTIN, TX 78701	NONE ARTS & EDUCATION	PUBLIC CHARITY	3,000.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

STARK MARTIN CHARITABLE TRUST C	/O JAMES		20-3446537
CHILDREN IN NATURE COLLABORATIVE 24814 HAMILTON POOL RD ROUND MOUNTAIN, TX 78663	NONE YOUTH EDUCATION	PUBLIC CHARITY	6,000.
FREDERICKSBURG CHORALE P.O. BOX 2724 FREDERICKSBURG, TX 78624	NONE ARTS & EDUCATION	PUBLIC CHARITY	5,000.
KOMEN FOUNDATION 5005 LBJ FREEWAY, SUITE 250 DALLAS, TX 75244	NONE MEDICAL RESEARCH	PUBLIC CHARITY	14,000.
PANZI FOUNDATION USA P.O. BOX 732 HOLLIDAYSBURG, PA 16648	NONE BENEFIT LOCAL COMMUNITY	PUBLIC CHARITY	5,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		103,000.

## Form **8868**

(Rev January 2011)

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.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

OMB No. 1545-1709

Form 8868 (Rev 1-2011)

 $\triangleright \mathbf{X}$ 

• II you a	are illing for an Additional (Not Automatic) 3-Month Ex	xtension,	complete only Part II (on page 2 or this	s iomi	)	
Do not c	omplete Part II unless you have already been granted	an automa	atic 3-month extension on a previously t	filed F	orm 8868.	
	c filing (e-file). You can electronically file Form 8868 if					oration
	o file Form 990-T), or an additional (not automatic) 3-mo	-			•	
	file any of the forms listed in Part I or Part II with the ex					
	Benefit Contracts, which must be sent to the IRS in page		(see instructions) For more details on	the ele	ectronic filing of this f	orm,
	rs gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time				<del> </del>	
	tion required to file Form 990-T and requesting an autor	matic 6-m	onth extension - check this box and cor	nplete		
Part I only	•	•			•	
	corporations (including 1120-C filers), partnerships, REN ome tax returns.	IICs, and t	trusts must use Form 7004 to request a	n exte	nsion of time	
Type or	Name of exempt organization			Em	oloyer identification	number
print	STARK MARTIN CHARITABLE TR	UST				
	C/O JAMES EHINGER			2	20-3446 <u>537</u>	
File by the due date for	Number, street, and room or suite no If a P.O. box, s	see instruc	tions			
iling your	ONE EAST WASHINGTON ST., S'					
eturn See nstructions	City, town or post office, state, and ZIP code. For a fo					
	PHOENIX, AZ 85004-2554					
Inter the	Return code for the return that this application is for (file	e a senara	te application for each return)			0 4
	totally bodd for the retain that this application is the	o a copaia	application for each return,		•	
Application		Return	Application			Return
s For	,,,	Code	Is For			Code
orm 990		01	Form 990-T (corporation)		<del></del> _	07
orm 990-		02	Form 1041-A		·	08
		03				09
orm 990		1	Form 4720			10
orm 990-		04	Form 5227			11
	T (sec 401(a) or 408(a) trust)	05	Form 6069			12
orm 990-	T (trust other than above)	06	Form 8870			12
	JAMES EHINGER	11037 CF	n 11mu ri ood dior	NTT W	37 05004	
	oks are in the care of $\triangleright$ 201 E. WASHINGS	TON S.		11 T 5	., AZ 65004	
	one No ► 602-262-5943		FAX No.			$\overline{}$
	ganization does not have an office or place of business					Ll
_	for a Group Return, enter the organization's four digit (		· · · · · · · · · · · · · · · · · · ·			
ox ► L	If it is for part of the group, check this box				ers the extension is	for.
	uest an automatic 3-month (6 months for a corporation					
	$rac{ ext{AUGUST} \;\; 15$ , $\; 2011$ , to file the exempt	t organızat	tion return for the organization named a	bove.	The extension	
_	the organization's return for:					
▶₽	K calendar year 2010 or					
▶∟	tax year beginning	, and	d ending			
2 If the	tax year entered in line 1 is for less than 12 months, ch	neck reaso	on Initial return Fina	l retur	n	
	Change in accounting period					
3a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, er	nter the tentative tax, less any			
nonre	efundable credits. See instructions.			3a	\$	<u> </u>
<b>b</b> If this	application is for Form 990-PF, 990-T, 4720, or 6069,	enter any r	refundable credits and			
	nated tax payments made Include any prior year overpa			3b	\$	840.
	nce due. Subtract line 3b from line 3a. Include your pay					
	sing EFTPS (Electronic Federal Tax Payment System). S			3с	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA

For Paperwork Reduction Act Notice, see Instructions.

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• If you are filing for an Additional (Not Automatic) 3-Mo	onth Extension,	complete only Part II and check this b	ox	<b>&gt;</b>	X
NoteOnly complete Part II if you have already been grant	ted an automatic	3-month extension on a previously file	d Form	n 8868.	
<ul> <li>If you are filing for an Automatic 3-Month Extension, or</li> </ul>					
Part II Additional (Not Automatic) 3-Mo	nth Extension	on of Time. Only file the original (no	opies	needed).	
Name of exempt organization  Type or GMADY MADMIN GUADINADIR			Em	ployer identification	number
STARK MARTIN CHARITABLE	TRUST				
File by the				20-3446537	
extended Number, street, and room or suite no. If a P.O.					
filing your OND EADT WADITINGTON BI.,					
return See City, town or post office, state, and ZIP code. INSTRUCTIONS PHOENIX, AZ 85004-2554	For a foreign add	dress, see instructions.			
PHOENIX, AZ 65004-2554					
Catanata Datuma and Santa and and the Adria and back and					0 4
Enter the Return code for the return that this application is	for (file a separa	ate application for each return)	••••		
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990	01	10.0.			1 3 3 3 3
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already g	ranted an autor	natic 3-month extension on a previou	ısly fil	ed Form 8868.	
JAMES EHING					
<ul> <li>The books are in the care of</li></ul>	INGTON S	T, 11TH FLOOR - PHOE	XIN:	, AZ 85004	
Telephone No. ► 602-262-5943		FAX No. ▶			
<ul> <li>If the organization does not have an office or place of be</li> </ul>				<b>&gt;</b>	
If this is for a Group Return, enter the organization's fou					
box L. If it is for part of the group, check this box		nch a list with the names and EINs of all	memb	pers the extension is	for.
4 I request an additional 3-month extension of time unt		BER 15, 2011.			
5 For calendar year 2010, or other tax year beginni		, and ending	<b>.</b>		<del></del> '
6 If the tax year entered in line 5 is for less than 12 mor	ntns, cneck reas	on: L Initial return L	Final	return	
Change in accounting period  State in detail why you need the extension					
7 State in detail why you need the extension STILL GATHERING INFORMATION	NEEDED	TO FILE A COMPLETE	AND	ACCURATE	TAX
RETURN.	NEEDED	10 1111 11 00111 11111			
					<del></del>
8a If this application is for Form 990-BL, 990-PF, 990-T,	4720. or 6069. e	nter the tentative tax, less any	1		
nonrefundable credits. See instructions.	,,	,	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or	6069, enter any	refundable credits and estimated			
tax payments made. Include any prior year overpaym					
previously with Form 8868.		•	8b	\$	840.
c Balance due. Subtract line 8b from line 8a. Include ye	our payment with	h this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See			8c	\$	0.
		d Verification			
Inder penalties of perjury, I declare that I have examined this form,	including accompa	anying schedules and statements, and to the	best o	f my knowledge and bel	ief,
is true, correct, and complete, and that I am authorized to prepare		1		0	
ignature ► Allica K Maryer Title		4	Date	N-29-1	
				Form <b>8868</b> (Rev	/ <b>.</b> 1-2011)