

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



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.

Department of the Treasury

OMB No 1545-0052

2010

For calendar year 2010, or tax year beginning , and ending									
G C	G Check all that apply: Initial return Initial return of a former public charity Final return			1					
Amended return				Address change			Name change		
Name of foundation						A Employer identification	number		
	_	CLARKE C	HARITAE	LE FOU	NDATION			26-3561790)
Nun	ber ar	nd street (or P O box nur	nber if mail is not di	elivered to street	address)		Room/suite	B Telephone number	
L		1239 LAF	CEVIEW D	OCK				276-645-14	.06
City	or to	wn, state, and ZIP co	de					C if exemption application is p	
		BRISTOL		620				D 1. Foreign organization	
H C	_	type of organization:			empt private foundation			Foreign organizations me check here and attach co	omputation test,
	Sec	ction 4947(a)(1) none	exempt charitable	e trust 🔛	Other taxable private founda	ition		E If private foundation sta	itus was terminated
I Fa	ır ma	rket value of all asset	s at end of year	J Account	=	Accr	ual	under section 507(b)(1)(A), check here
		Part II, col (c), line		1	her (specify)	-		F If the foundation is in a	
			<u> 196,501.</u>		mn (d) must be on cash l	pasis)		under section 507(b)(1	1
Pa	<u>ırt I</u>	(The total of amounts in necessarily equal the a	n columns (b), (c), ar	nd (d) may not	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts,	grants, etc., rece	ived	143,700.			N/A	
	2		indation is not required t	to attach Sch B					
	3	Interest on savings and cash investments	temporary		458.		458.		STATEMENT 2
	4	Dividends and intere	st from securitie	S					
	5a	Gross rents							
	b	Net rental income or (los	s)						
e e	6a	Net gain or (loss) from sa			41,456.				STATEMENT 1
Ę	b	Gross sales price for all assets on line 6a	343	<u> 750.</u>					
Revenue	7	Capital gain net income	(from Part IV, line 2))		32	7,228.		IVED_O
<u> </u>	8	Net short-term capita	al gain					REC	16/
	9	Income modification Gross sales less returns							7 2011 10
	10a	and allowances		-				E AUG 1	7 2011
	l	Less Cost of goods sole				 		\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	C	Gross profit or (loss)					OGE	EN.UT
	11	Other income			105 614	2.0	T 606	UGL	
	12	Total Add lines 1 th			185,614.	32	<u>7,686.</u>		
	13	Compensation of officer		s, etc	0.		0.		0.
	14	Other employee sala	_					-	
ģ	ì	Pension plans, empl	•	n.m 2	616	-	616.		0.
nse		Legal fees		rmt 3	616. 600.		600.		0.
ĝ	b	Accounting fees		TMT 4	800.		000.		0.
Ш o	_ C	Other professional fe	ees						
Ě	17	Interest							-
ANNESSEATING and Administrative Expens	18 19	Taxes Depreciation and de	nletion						
	20	Occupancy	piction					<u> </u>	
~ <u>5</u>	21	Travel, conferences,	and meetings						
<u></u>	22	Printing and publica							
<u>a, a</u>	23	Other expenses		гмт 5	170.		170.		0.
=======================================	24	Total operating and							
ĕrā		expenses. Add lines			1,386.		1,386.		0.
G G	25	Contributions, gifts,			41,000.				41,000.
Z	26	Total expenses and							
Z		Add lines 24 and 25			42,386.		1,386.		41,000.
	27	Subtract line 26 from							
U	a	Excess of revenue over		ursements	143,228.				
	1	Net investment inco				32	6,300.		
	C	Adjusted net incom	e (if negative, enter	-0-)				N/A	<u> </u>
0235	n 1		ad Dadustion A	-4 N-4!	the instructions				Form 990-PF (2010)

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		nd of y	/ear
	ar ı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing	9.	1,18	2.	1,182.
	2	Savings and temporary cash investments		28,19		28,196.
		Accounts receivable ►			-	20/1501
	٦	Less: allowance for doubtful accounts	183.			
	١.	_	103.		-+	
	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				
"		Inventories for sale or use			-	
Assets	-	l l			-+	
155	9	Prepaid expenses and deferred charges			+	
•		Investments - U.S. and state government obligations	4.70.000		+	
	b	Investments - corporate stock STMT 6	152,393.	204,12	4.	204,774.
	C	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment basis			İ	
		Less accumulated depreciation				
	12	Investments - mortgage loans				·
	13	Investments - other STMT 7	0.	62,45	6.	62,349.
	1	Land, buildings, and equipment; basis		02,12	- 	02/347.
	14					
		Less accumulated depreciation			+	
	15	Other assets (describe)			$-\!\!\!+$	
	16	Total assets (to be completed by all filers)	152,585.	295,95	8.	<u>296,501.</u>
	17	Accounts payable and accrued expenses				
	18	Grants payable				
Ŋ	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
뎙	21	Mortgages and other notes payable			\neg	
<u>:</u> "		Other liabilities (describe)			\dashv	
		Other Habilities (describe			\dashv	
	-	Tatal liabilities (add lines 17 through 20)	0.		0.	
_	23	Total liabilities (add lines 17 through 22)	<u> </u>			
		Foundations that follow SFAS 117, check here			İ	
w		and complete lines 24 through 26 and lines 30 and 31.				
ĕ	24	Unrestricted				
lan	25	Temporarily restricted				
Ва	26	Permanently restricted				
or Fund Balance		Foundations that do not follow SFAS 117, check here		, , ,		
Ŧ		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds	0.		0.	
Net Assets	I	Paid-in or capital surplus, or land, bldg., and equipment fund	0.		0.	
SSI	28	· · · · · · · · · · · · · · · · · · ·	152,585.	295,95		
ž.	29	Retained earnings, accumulated income, endowment, or other funds				
ž	30	Total net assets or fund balances	152,585.	295,95	•	
			450 505	225 25		
	31	Total liabilities and net assets/fund balances	<u> 152,585.</u>	295,95	8.	
	art	Analysis of Changes in Net Assets or Fund B	alances			
<u></u>	ait					
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30			
	(mu	at agree with end-of-year figure reported on prior year's return)			1	152,585.
	•	amount from Part I, line 27a			2	143,228.
		r increases not included in line 2 (itemize) ADJUSTMENT	TO BEGINNING	BOOK VALUE	3	145.
_		lines 1, 2, and 3			4	295,958.
		eases not included in line 2 (itemize)			5	0.
5			Jumn (h) line 30		6	295,958.
<u>6</u>	1 ota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	marring (D), linie 30	<u>.</u>	<u> </u>	Form 990-PF (2010)
						FUITH 230-1 1 (2010)

15,862.

3,263.

19,125.

41,000.

5

6

7

Multiply line 4 by line 3

See the Part VI instructions.

Add lines 5 and 6

Enter 1% of net investment income (1% of Part I, line 27b)

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

	1990-PF (2010) CLARKE CHARITABLE FOUNDATION		<u>3561</u>			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see i	nstru	ictio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		i			
	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 X and enter 1%	1			3,2	63.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			3,2	63.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5			3.2	63.
6	Credits/Payments;				- , _	-
_	2010 estimated tax payments and 2009 overpayment credited to 2010 6a					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached					89.
8		8			3,3	
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 		3,3	<u> 54.</u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be; Credited to 2011 estimated tax ▶ Refunded ▶ Int VII-A Statements Regarding Activities	11				
				· · · ·	Yes	No
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver any political campaign?	ie in			163	
	,, , , , , , , , , , , , , , , , , , ,			1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ea or				
	distributed by the foundation in connection with the activities.			١.		7.7
	Did the foundation file Form 1120-POL for this year?			10		_X_
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \triangleright \$ 0 . (2) On foundation managers. \triangleright \$	<u>•</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
_	managers. ▶ \$ 0.					٠.,
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			_ 2		X
_	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or		_		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3.7	. / 3	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		_X_
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the statement of the second of the s	te iaw				3.5
_	remain in the governing instrument?			6	37	<u> X</u>
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 instructions)					
	TN					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			۸.	·	
_	of each state as required by General Instruction G? If "No," attach explanation			8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	iendar		_		v
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		Λ

orm 990-PF (2010) CLARKE CHARITABLE FOUNDA			<u> 26-35617</u>	90 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be F	sequirea (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	` ''		s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?	_		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X 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?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	ib
Organizations relying on a current notice regarding disaster assistance check h	еге			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				
expenditure responsibility for the grant?	N	「/A	s L No	
If "Yes," attach the statement required by Regulations section 53 4945	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 🗶 No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		_ (b 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?	Ye	es 🗶 No 📙	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				<u>'b </u>
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	<i>1</i>	
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) Evnance
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
OTC A CLADVE	to position PRESIDENT	enter-0-)	compensation	allowalices
OIS A. CLARKE 239 LAKEVIEW DOCK ROAD	LKESIDENI			
	3.50	0.	0.	0.
	SECRETARY/TRE		· ·	<u></u>
239 LAKEVIEW DOCK ROAD	SECKETARI/IKE	ASUKEK		
BRISTOL, TN 37620	1.00	0.	0.	0.
	DIRECTOR	0.	<u>_</u> .	<u> </u>
P.O. BOX 725	DIRECTOR			
BLOUNTVILLE, TN 37617	1.00	0.	0.	0.
SHOUNIVILLE, IN 37017	1.00	•	•	<u> </u>
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
	(b) Title and average		(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				
				~
				. ——
			<u> </u>	
otal number of other employees paid over \$50,000		·		0
			Form S	990-PF (2010)

-orm s	90-PF (2010) CLARKE CHARITABLE FOUNDATION	26-	<u> 3561790</u>	Page 7
Par	Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly		
3 Fiv	re highest-paid independent contractors for professional services. If none, enter "N	ONE."		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) C	ompensation
	NONE	(-)		
	310314			
		•		
				
				
				
Total	number of others receiving over \$50,000 for professional services			0
	X-A Summary of Direct Charitable Activities			
Liet th	ne foundation's four largest direct charitable activities during the tax year. Include relevant statistical	information cuch ac the		·
	er of organizations and other beneficiaries served, conferences convened, research papers produce(Expen	ses
1	N/A			
' —	AT / AA		1	
			1	
			1	
			1	
3				
			1	
			1	
4				
·			1	
	· · · · · · · · · · · · · · · · · · ·		1	
Par	IX-B Summary of Program-Related Investments		<u> </u>	
Descr	ibe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amou	nt
1	N/A			
-			1	
			1	
2				
			1	
			1	
All oth	ner program-related investments. See instructions.	·	-	
3				
			1	
			1	
 Total	Add lines 1 through 3	•		η.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	ee 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	163,298.
b	Average of monthly cash balances	1b	1,065.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	164,363.
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	164,363.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,465.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	161,898.
6	Minimum investment return Enter 5% of line 5	6	8,095.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	8,095.
2a	Tax on investment income for 2010 from Part VI, line 5 2a 3, 263.		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	3,263.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,832.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,832.
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	4,832.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	41,000.
b	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	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	41,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	3,263.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	37,737.
	Note: The amount on line 6 will be used in Part V. column (h) in subsequent years when calculating whether the foundation (uualifiae for t	ha caction

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,		<u>.</u>		
line 7	,			4,832.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:		•		
3 Excess distributions carryover, if any, to 2010:		0.		
a From 2005				
b From 2006				
c From 2007				
d From 2008 3,055.				
e From 2009 4, 382.				
f Total of lines 3a through e	7,437.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 41,000.				
a Applied to 2009, but not more than line 2a			0.	
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				4,832.
e Remaining amount distributed out of corpus	36,168.			
5 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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	43,605.			
b Prior years' undistributed income. Subtract	•			-
line 4b from line 2b		0.		
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		0.		
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 instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011		-		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0			
section 170(b)(1)(F) or 4942(g)(3)	0.	· · · · · · · · · · · · · · · · · · ·		
8 Excess distributions carryover from 2005	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	43,605.			
10 Analysis of line 9:	43,003.	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
a Excess from 2006				
b Excess from 2007				
c Excess from 2008 3,055.				
d Excess from 2009 4, 382.				
e Excess from 2010 36, 168.				
				Form 990-PF (2010)

Form 990-PF (2010) CLARKE	CHARITABLE	FOUNDATION		26-3!	561790 Page 10
Part XIV Private Operating I	Foundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	t it is a private operating			
foundation, and the ruling is effective f	or 2010, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the four	idation is a private operati	ng foundation described i	n section	4942(J)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
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					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					1
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					-
(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 section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	ete this part only	if the foundation	on had \$5,000 or m	ore in assets
at any time during				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1 Information Regarding Foundati					
a List any managers of the foundation w	-	than 2% of the total conti	ributions received by t	the foundation before the cli	ose of any tax
year (but only if they have contributed	more than \$5,000). (See s	section 507(d)(2).)	induition of the control of the	and reality and the six	Job of any tax
SEE STATEMENT 8					
b List any managers of the foundation w other entity) of which the foundation h			or an equally large po	rtion of the ownership of a	partnership or
NONE		-			
	tion Grant Ciff I	Scholarchin etc. D-	ograme		
2 Information Regarding Contribu Check here ▶ If the foundation		• • • • •	_	s not accept unsolicited req	weete for funde If
the foundation makes gifts, grants, etc	•	•	-	•	
a The name, address, and telephone nur				,, -, -, -, -, -, -, -, -, -, -, -,	
SEE STATEMENT 9					
b The form in which applications should	be submitted and informa	ition and materials they sh	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	ds, such as by geographic	al areas, charitable fields,	kinds of institutions,	or other factors:	

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient	001111001011			
a Paid duning the year	or substantial contributor	recipient				
SEE STATEMENT 10			20	41,000.		
b Approved for future payment NONE			▶ 3a	41,000.		
Total			▶ 3b	0.		

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e)	
1 Program service revenue:	Business Amount s		Exclu- sion code	(d) Amount	Related or exempt function income	
	Code		10000			
å	 					
b			-			
C		<u> </u>				
d			<u> </u>			
e			<u> </u>			
f	•		<u> </u>			
g Fees and contracts from government agencies			ļ			
2 Membership dues and assessments					- ·	
3 Interest on savings and temporary cash						
investments			14	458.		
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate:						
a Debt-financed property			<u>L.</u>			
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	41,456.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory			 			
11 Other revenue:						
a						
b						
<u> </u>	-		+			
d						
e				41 014	•	
12 Subtotal. Add columns (b), (d), and (e)	0. 41,914.					
13 Total. Add line 12, columns (b), (d), and (e)				13	41,914.	
(See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	cemp	t Purposes		
Fig. 1. In the last the same and the same shows the same and the same shows the s		in column (a) of Dort VIII A	. aanteil	outed importantly to the secon	naliahment of	
Line No Explain below how each activity for which incore the foundation's exempt purposes (other than the foundation's exempt purposes (other than the foundation's exempt purposes).			Contri	buted importantly to the accor	nplishment of	
the foundation's exempt purposes (other than t	by providing it	inus for such purposes).				
		···········				
				<u> </u>	···	
		<u> </u>				
					· · ·	
		<u> </u>				
		-				
				-		

Part >	(VII Information R Exempt Organ		fers To and Transactions a	nd Relationships With Nonch	naritable)
1 Did			f the following with any other organization	 n described in section 501(c) of		Yes No
			in section 527, relating to political organi			
a Tran	nsfers from the reporting found	ation to a noncharitab	le exempt organization of:			
(1)	Cash				1a(1)	X
(2)	Other assets				1a(2)	X
b Other	er transactions:					i l
	Sales of assets to a noncharita				1b(1)	X
٠,,	Purchases of assets from a no	•	ganization		1b(2)	X
	Rental of facilities, equipment,				1b(3)	X
٠,,	Reimbursement arrangements	3			1b(4)	X
	Loans or loan guarantees Performance of services or me	amharchin ar fundraici	ing solicitations		1b(5) 1b(6)	X X
	ring of facilities, equipment, ma	•	-		10(0)	X
			· · ·	yays show the fair market value of the good		
	-			e in any transaction or sharing arrangemen		,
	ımn (d) the value of the goods,				•	
(a) Line no	(b) Amount involved	(c) Name of r	noncharitable exempt organization	(d) Description of transfers, transactions, a	ınd sharıng arı	angements
		<u> </u>	N/A			

					· · · · · · · · · · · · · · · · · · ·	
	·		elated to, one or more tax-exempt organiz	ations described		 -
	ection 501(c) of the Code (other		3)) or in section 527?		Yes	X No
b If "Y	es," complete the following sch	-	(b) Type of organization	(a) Description of relation	nehin	_
	(a) Name of or N/A	yanızatıdır	(b) Type of organization	(c) Description of relation	лізпір	
	N/A_				···	
				·		
_						
_				statements, and to the best of my knowledge and	belief, it is tru	e, correct,
Sign	and complete bedlaration of prep	arer (other than taxpayer or	r fiduciary) is based on all information of which p	reparer has any knowledge		
Here	Sow a	larke	9/11/1	// Irustee		
	Signature of officer or tr	us tee	Ďate	Title		

(276) 669-6171 Phone no. Form **990-PF** (2010)

Firm's EIN ▶

Paid

Preparer

Use Only

NITA F. VOLLMER

Firm's address ▶ P.O. BOX 129

Firm's name DENT K. BURK ASSOC.

BRISTOL, VA 24203-0129

Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Name of the organizatio	Employer identification number		
C	LARKE CHARITABLE FOUNDATION	26-3561790	
Organization type (check			
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 foundation		
	501(c)(3) taxable private foundation		
	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule See instructions	
General Rule			
<u>-</u>	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in maplete Parts I and II.	noney or property) from any one	
Special Rules			
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg 0(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II		
aggregate contr	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, for cruelty to children or animals. Complete Parts I, II, and III		
contributions for If this box is che purpose Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions did not agree exclusively for religious, charitable, etc., purposes, but these contributions did not agreed, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because ble, etc., contributions of \$5,000 or more during the year.	ggregate to more than \$1,000 <i>ely</i> religious, charitable, etc ,	
but it must answer "No" that it does not meet the	that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	2 of its Form 990-PF, to certify	
LHA For Paperwork Re	duction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule	B (Form 990, 990-EZ, or 990-PF) (2010)	

Page	1	-6	1	-4 D-4 I
rage	Т	Οï		of Part I

Name of organization

Employer identification number

CLARKE CHARITABLE FOUNDATION

26-3561790

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	LARRY A. & LOIS A. CLARKE 1239 LAKEVIEW DOCK ROAD BRISTOL, TN 37620	\$ <u>141,700.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	LARRY A. & LOIS A. CLARKE 1239 LAKEVIEW DOCK ROAD BRISTOL, TN 37620	\$2,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Page 1 of 1 of Part II
Employer identification number

CLARKE CHARITABLE FOUNDATION

26-3561790

art II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	10000 SH KING PHARMACEUTICALS INC		
		s141,700.	11/01/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

of Part III

Name of organization Employer identification number CLARKE CHARITABLE FOUNDATION 26-3561790 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 99	0-PF G	AIN OR (LOSS) FI	ROM SALE	OF A	ASSETS		STA	TEMENT	1
DESCRIP'	(A) TION OF PROPERTY				MANNER CQUIRED	DA ACQU	TE IRED	DATE S	OLD
20000 SI	H KING PHARMACEU	TICALS INC		DO	ONATED	VARI	ous	VARIO	US
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E)	c.	GAIN	(F)	s
-	277,466.	243,800.		0.		0.		33,6	66.
DESCRIP'	(A) TION OF PROPERTY				MANNER CQUIRED	DA ACQU	TE IRED	DATE SO	OLD
4119 SH	KING PHARMACEUT	ICALS INC		D	ONATED	12/2	8/09	12/02	/10
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F) OR LOS	s
<u>.</u>	58,323.	50,293.		0.		0.		8,0	30.
DESCRIP	(A) TION OF PROPERTY				MANNER CQUIRED	DA ACQU	TE IRED	DATE S	OLD
200 SH	TECK RESOURCES L	TD CL B ORD CAD		PUI	RCHASED	03/2	4/10	09/28	/10
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E)	c.	GAIN	(F)	S
-	7,961.	8,201.		0.		0.		-2	40.
CAPITAL	GAINS DIVIDENDS	FROM PART IV							0.

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH II	NVESTMENTS	STATEMENT	2
SOURCE				AMOUNT	
TRISUMMIT BANK UBS			-		13. 45.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	4	58.
FORM 990-PF	LEGAL	FEES	· · · · · · · · · · · · · · · · · · ·	STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA E PURPOS	
LEGAL FEES	616.	616.			0.
TO FM 990-PF, PG 1, LN 16A =	616.	616.			0.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA E PURPOSI	
TAX RETURN PREPARATION	600.	600.		<u> </u>	0.
TO FORM 990-PF, PG 1, LN 16B	600.	600.			0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
BANK FEES	150.	150.			0.
TENNESSEE ANNUAL REPORT FILING FEE	20.	20.			0.
TO FORM 990-PF, PG 1, LN 23	170.	170.			0.

FORM 990-PF	CORPORATE STOCK		STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
14119 SH KING PHARMACEUTICALS I 300 SH ALLSTATE CORP 300 SH AMER ELECTRIC POWER C 400 SH AMERICAN CAPITAL AGENCY 400 SH AT&T INC 1000 SH BGC PARTNERS INC CL A 400 SH BRISTOL MYERS SQUIBB CO 100 SH CHEVRON CORP 300 SH GENL MILLS INC 150 SH KIMBERLY CLARK CORP 400 SH LEGGETT & PLATT INC 300 SH LILLY ELI & CO 150 SH MCDONALDS CORP 300 SH MERCK & CO INC NEW COM 500 SH NEW YORK CMNTY BANCORP 150 SH NORFOLK STHN CORP 200 SH NRG ENERGY INC NEW 500 SH PFIZER INC 250 SH PINNACE WEST CAP CORP 300 SH SOUTHERN CO 1000 SH SYNOVUS FINANCIAL CORP 100 SH TECK RESOURCES LTD CL B 500 SH TECO ENERGY INC	CORP	0. 9,649. 10,903. 11,918. 11,766. 8,555. 10,695. 9,172. 10,720. 9,562. 9,259. 10,570. 11,534. 10,936. 8,295. 9,476. 4,319. 8,899. 10,512. 11,575. 2,765. 4,100. 8,944.	0. 9,564. 10,794. 11,496. 11,752. 8,310. 10,592. 9,125. 10,677. 9,456. 9,104. 10,512. 11,514. 10,812. 9,425. 9,423. 3,908. 8,755. 10,363. 11,469. 2,640. 6,183. 8,900.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
500 SH RYDEX ETF TRUST S&P 500 EQUAL WEIGHTED INDEX FUND INC 200 SH SPDR S&P 500 ETF TR 150 SH ISHARES IBOXX HIGH YIELD CORP BOND	COST COST COST	23,705. 25,229. 13,522.	23,655. 25,150. 13,544.
TOTAL TO FORM 990-PF, PART II,	LINE 13	62,456.	62,349.

FORM 990-PF PART XV - LINE 1A STATEMENT LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

LOIS A. CLARKE LARRY A. CLARKE

FORM 990-PF

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

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LOIS A. CLARKE 1239 LAKEVIEW DOCK ROAD BRISTOL, TN 37620

TELEPHONE NUMBER

276-645-1406

FORM AND CONTENT OF APPLICATIONS

THE FOUNDATION DOES NOT CURRENTLY HAVE A FORM FOR GRANT APPLICATIONS BUT MAY DEVELOP SUCH A FORM IN THE FUTURE.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION MAKES CHARITABLE DISTRIBUTIONS SOLELY TO ENTITIES EXEMPT FROM TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE FOUNDATION WILL REQUEST AND RETAIN A COPY OF EACH ORGANIZATION'S TAX DETERMINATION LETTER TO ENSURE THE RECIPIENT IS TAX-EXEMPT.

FORM 990-PF GRANTS PAID	STATI	EMENT 10	
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ACP AND ASL 169 EDGEWATER DRIVE GRUNDY, VA 24614	EDUCATIONAL		5,000.
BIRTHPLACE OF COUNTRY MUSIC P.O. BOX 216 BRISTOL, TN 37620	CHARITABLE		1,000.
BOYS & GIRLS CLUB 35 REBECCA STREET BRISTOL, VA 24201	CHARITABLE		1,000.
BRISTOL HUMANE SOCIETY 16222 LEE HIGHWAY BRISTOL, VA 24202	CHARITABLE		100.
BRISTOL VIRGINIA PUBLIC SCHOOLS 222 OAK STREET BRISTOL, VA 24201	EDUCATIONAL		50.
CENTRAL PRESBYTERIAN 301 EUCLID AVENUE BRISTOL, VA 24201	RELIGIOUS		200.
CHILDREN'S CANCER SOCIETY P.O. BOX 66970, DEPARTMENT 20007 SAINT LOUIS, MO 63166-6970	CHARITABLE		50.
CHILDRENS ADVOCACY CENTER LEE HIGHWAY BRISTOL, VA 24202	CHARITABLE		500.

CLARKE CHARITABLE FOUNDATION		26-3561790
EAST TENNESSEE STATE UNIVERSITY BOX 70721 JOHNSON CITY, TN 37614-1710	EDUCATIONAL	250.
FOUR CORNERS NATIVE AMERICAN MINISTRY P.O. BOX 400 SHIPROCK, NM 87420	RELIGIOUS	500.
GIRLS INC. 613 HIGHLAND AVENUE BRISTOL, VA 24201	CHARITABLE	100.
GRANDFATHER HOME FOR CHILDREN P.O. BOX 98 BANNER ELK, NC 28604	CHARITABLE	200.
HAVEN OF REST 624 ANDERSON STREET BRISTOL, TN 37620	CHARITABLE	1,400.
HEALING HANDS HEALTH CENTER 210 MEMORIAL DRIVE BRISTOL, TN 37620	CHARITABLE	1,375.
HOLLY HELP SPAY CLINIC P.O. BOX 1264 BRISTOL, VA 24203	CHARITABLE	200.
KING COLLEGE 1350 KING COLLEGE ROAD BRISTOL, TN 37620-2699	EDUCATIONAL	15,000.
KINGSPORT FIRE FIGHTERS ASSOCIATION P.O. BOX 7462 KINGSPORT, TN 37664-7462	CHARITABLE	50.
MARGARET B. MITCHELL NEUTER CLINIC 16222 LEE HIGHWAY BRISTOL, VA 24202	CHARITABLE	300.

CLARKE CHARITABLE FOUNDATION		26-3561790
MECCA P.O. BOX 3021 BRISTOL, TN 37625-3021	EDUCATIONAL	100.
MENNONITE DISASTER FUND 583 AIRPORT ROAD LITITZ, PA 17543	CHARITABLE	500.
MILITARY ORDER OF THE PURPLE HEART SERVICE FOUNDATION, INC. P.O. BOX 290213 NASHVILLE, TN 37229	CHARITABLE	25.
PARAMOUNT CENTER FOR THE ARTS 518 STATE STREET BRISTOL, TN 37620	CHARITABLE	1,000.
RIVER'S WAY 889 STONEY HOLLOW ROAD BLUFF CITY, TN 37618	CHARITABLE	5,100.
SEQUOYAH COUNCIL OF BOY SCOUTS P.O. BOX 3010 JOHNSON CITY, TN 37603	CHARITABLE	1,300.
SPECIAL OLYMPICS TENNESSEE 1900 12TH AVENUE SOUTH NASHVILLE, TN 37203	CHARITABLE	50.
SULLINS ACADEMY 22218 SULLINS ACADEMY DRIVE BRISTOL, VA 24202	EDUCATIONAL	2,000.
THEATRE BRISTOL 512 STATE STREET BRISTOL, TN 37620	CHARITABLE	250.
THS VIKING BOOSTER CLUB P.O. BOX 3224 BRISTOL, TN 37625-3224	CHARITABLE	250.

CLARKE CHARITABLE FOUNDATION		26-3561790
TRINITY ARTS FOUNDATION 909 CHASE DRIVE JOHNSON CITY, TN 37604	CHARITABLE	200.
VICTORY BAPTIST CHURCH 11101 ISLAND ROAD BRISTOL, VA 24202	RELIGIOUS	1,000.
VIRGINIA TECH ATHLETIC DEPARTMENT P.O. BOX 10307 BLACKSBURG, VA 24062-0307	CHARITABLE	750.
YOUNG LIFE P.O. BOX 548 BRISTOL, TN 37621-2177	RELIGIOUS	1,200.
TOTAL TO FORM 990-PF, PART XV, I	LINE 3A	41,000.

· 1.

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.

OMB No. 1545-1709

• If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box		>	X
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of this	form)		
Do not c	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previously fil	ed Fo	m 8868	
Electron	ic filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of time to	o file (6	months for a corpo	oration
required '	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 88	368 to request an ex	tension
of time to	file any of the forms listed in Part I or Part II with the ex-	ception of	Form 8870, Information Return for Tran	sfers /	Associated With Cer	taın
Personal	Benefit Contracts, which must be sent to the IRS in page	er format	(see instructions) For more details on the	ne elec	tronic filing of this fo	orm,
visit www	urs.gov/efile and click on e-file for Charities & Nonprofits	<u> </u>				
Part I	Automatic 3-Month Extension of Time	Only su	bmit original (no copies needed)			
A corpora	ation required to file Form 990 T and requesting an autor	natic 6-mo	onth extension - check this box and com	plete		
Part I onl	y				>	
All other	corporations (including 1120-C filers), partnerships, REM	IICs, and ti	rusts must use Form 7004 to request an	exten	sion of time	
to file inc	ome tax returns.					
Type or	Name of exempt organization			Emp	loyer identification	number
print						
	CLARKE CHARITABLE FOUNDATION	NC		2	6-3561790	
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions			
filing your return See	1239 LAKEVIEW DOCK					
instructions	City, town or post office, state, and ZIP code For a for	oreign add	ress, see instructions			
	BRISTOL, TN 37620					
Cator tha	Patura and for the return that this application in far (file	0 0 0000ra	to application for each return)			0 4
Enter the	Return code for the return that this application is for (file	e a Separa	te application for each return)			[0]4]
Analiant		Return	Application			Return
Applicat	loli	Code	Is For			1
Is For Form 990		01	Form 990-T (corporation)			Code 07
		02	Form 1041-A		 _	
Form 990						08
Form 990		03	Form 4720			09
Form 990		04	Form 5227			10
	O-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	O-T (trust other than above)	06	Form 8870			12
• The b	THE FOUNDATION	DOCK	- BRISTOL, TN 37620			
	books are in the care of \triangleright 1239 LAKEVIEW	DOCK .				
	none No ► 276-645-1406		FAX No.			
	organization does not have an office or place of busines		·			
	is for a Group Return, enter the organization's four digit	n .			r the whole group, c	
box 🕨	. If it is for part of the group, check this box		ich a list with the names and EINs of all		ers the extension is	tor
1 Ire	quest an automatic 3-month (6 months for a corporation	•	•			
		it organiza	tion return for the organization named a	bove	The extension	
	or the organization's return for					
	X calendar year 2010 or					
>	tax year beginning	, an	id ending			
	hada waxaada ahada daa faabaa dhaada ahaa ah					
2 If t	he tax year entered in line 1 is for less than 12 months, o	neck reas	on: Initial return Fina	ıl retur	n	
L	Change in accounting period					
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	nter the tentative tax, less any	<u> </u>	Γ	
	nrefundable credits. See instructions	, •	2 12	3a	\$	0.
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	30		
	umated tax payments made. Include any prior year over	-		3b	\$	0.
	lance due. Subtract line 3b from line 3a Include your pa			30	- -	
	using EFTPS (Electronic Federal Tax Payment System)	-		3c	•	0.
	If you are going to make an electronic fund withdrawal		·		FO for navment met	
	or Paperwork Reduction Act Notice, see Instructions			23.0	Form 8868 (Re	
					- · · · · · · · · · · · · · · · · · · ·	