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DLN: 93491202004011

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Not e. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2010

For	cale	endar year 2010, or tax y	year beginning 01-	01-2010 , an	d end	ding 12-31-	2010	
G C	neck a	Ill that apply Initial retu	_	n of a former public cl			turn	
		undation					lentification numb	er
PL	KCEPII	ICS FOUNDATION				27-1034363		
Num	ber and	d street (or P O box number if mail is	not delivered to street addres	s) Room/suite		B Telephone no	umber (see page 10	of the instructions)
		GDILL ROAD NO 200N		,,		(619) 699-266	1	
		n, state, and ZIP code TN 37932					application is pendir rganizations, check h	_
						D I. Totelgil o	iganizations, check ii	eie 📮 j
		ype of organization Section					organizations meeting re and attach comput	
		n 4947(a)(1) nonexempt charita ket value of all assets at end	JAccounting method	Cash Acc			undation status was	
		from Part II, col. (c),	Other (specify)		iuai		on 507(b)(1)(A), ched	
lın	e 16)	\$ 342,170	(Part I, column (d) mus				ation is in a 60-mont on 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue a total of amounts in columns (b), (necessarily equal the amounts in the instructions))	c), and (d) may not	(a) Revenue and expenses per books	(b) N	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , rece	eived (attach schedule)					
	2	Check 🟲 🔽 if the foundation is not	required to attach Sch B					
	3	Interest on savings and tempo	orary cash investments	412		412		
	4	Dividends and interest from se	ecurities					
	5a	Gross rents						
	b	Net rental income or (loss)						
₽	6a	Net gain or (loss) from sale of						
Revenue	ь	Gross sales price for all assets on line				0		
	7	Capital gain net income (from						
	8	Net short-term capital gain . Income modifications						
	9		1					
	10a b	Gross sales less returns and allowand Less Cost of goods sold						
	"	Gross profit or (loss) (attach s						
	11	Other income (attach schedule	•					
	12	Total. Add lines 1 through 11	•	412		412		
	13	Compensation of officers, direct		0		0		0
. 6	14	Other employee salaries and v	wages					
Š	15	Pension plans, employee bene	fits					
至	16a	Legal fees (attach schedule) .		5,459		0		5,459
Expenses	ь	Accounting fees (attach sched	dule)					
	С	Other professional fees (attac	h schedule)	7,500		0		7,500
and Administrative	17	Interest						
Ī	18	Taxes (attach schedule) (see page 1	4 of the instructions)					
뒫	19	Depreciation (attach schedule) and depletion					
₽d	20	Occupancy						
Ρ	21	Travel, conferences, and meet	_			0		400
	22	Printing and publications				0		1 270
perating	23	Other expenses (attach sched		1,379		0		1,379
era	24	Total operating and administra	-	14,738		0		14 720
ō	25	Add lines 13 through 23 Contributions, gifts, grants pa				U		14,738 95,253
	25 26	Total expenses and disbursemen		109,991		0		109,991
	27	Subtract line 26 from line 12	es. Aud mics 24 and 23	103,331				103,331
	a a	Excess of revenue over expens	ses and disbursements	-109,579				
	Ь	Net investment income (if neg		,,,,		412		
		Adjusted net income (if negati						
		-						

) a	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year			of year
<u>u</u>		Should be for that or year amounts only (see instructions)	(a) Book Value	(b) Book Va	lue	(c) Fair Market Value
	1	Cash—non-interest-bearing	451 740		242 170	242.470
	2	Savings and temporary cash investments	451,749	,	342,170	342,170
	3	Accounts receivable				
	_	Less allowance for doubtful accounts				
	4	Pledges receivable Less allowance for doubtful accounts				
	_					
	5	Grants receivable				
	6	disqualified persons (attach schedule) (see page 15 of the				
		Instructions)				
	7	Other notes and loans receivable (attach schedule)				
	,					
۸		Less allowance for doubtful accounts 🟲				
Š	8	Inventories for sale or use				
€	9	Prepaid expenses and deferred charges				
		Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	C	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis 🕨				
		Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis 🟲				
		Less accumulated depreciation (attach schedule)				
	15	Other assets (describe				
	16	Total assets (to be completed by all filers—see the	451 740		242 170	242 470
		Instructions Also, see page 1, item I)	451,749	•	342,170	342,170
	17	Accounts payable and accrued expenses				-
٨	18 19	Deferred revenue				-
9		Loans from officers, directors, trustees, and other disqualified persons				-
5	20 21	Mortgages and other notes payable (attach schedule)				-
<u> </u>	22	Other liabilities (describe				-
		other habilities (describe F				-
	23	Total liabilities (add lines 17 through 22)	0		0	
		Foundations that follow SFAS 117, check here 🕨 🦵				
ا م		and complete lines 24 through 26 and lines 30 and 31.				
or Fund Balances	24	Unrestricted				
듄	25	Temporarily restricted				
ន	26	Permanently restricted				
Ξ		Foundations that do not follow SFAS 117, check here 🕨 🔽				
퀴		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0		0	1
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0		0	
2	29	Retained earnings, accumulated income, endowment, or other funds	451,749		342,170	
	30	Total net assets or fund balances (see page 17 of the	454 740	_		
ž		instructions)	451,749	•	342,170	-
	31	Total liabilities and net assets/fund balances (see page 17 of	451 740		242 170	
		the instructions)	451,749	•	342,170	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances				
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must agr	ee		
					1	451,749
2		Enter amount from Part I, line 27a			2	-109,579
3		Other increases not included in line 2 (itemize) 🟲			3	0
4		Add lines 1, 2, and 3			4	342,170
5		Decreases not included in line 2 (itemize) 🟲		[5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lin	e 30	6	342,170

- ·	be the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs M	· I P_PIII	chase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
(-) C	(f) Depreciation allower	d (g) Cost or other b	asıs	(h) Gain	or (loss)
(e) Gross sales price	(or allowable)	plus expense of s	ale		minus (g)
а					
b					
С					
d					
е					
Complete only for asset	s showing gain in column (h) and owne			(I) Gains (Col	(h) gain minus less than -0-) or
(i) F M V as of 12/31/6	(j) A djusted basis as of 12/31/69	(k) Excess of col over col (j), ıf aı			om col (h))
a			•		
b					
С					
d					
e					
		If gain, also enter in Part I, l			
2 Capital gain net in	come or (net capital loss)	If (loss), enter -0- in Part I,	line 7	2	
3 Net short-term ca	oital gain or (loss) as defined in section	ns 1222(5) and (6)			
If gain, also enter	ın Part I, lıne 8, column (c) (see pages	13 and 17 of the instruction	s)]		
If (loss), enter -0-			· }	3	
Part V Qualification	under Section 4940(e) for R	educed Tax on Net Inv	estmer	nt Income	
	s, leave this part blank the section 4942 tax on the distributa not qualify under section 4940(e) Do		base pei	riod?	┌ Yes ┌ No
1 Enter the appropriate a	mount in each column for each year, se	ee page 18 of the instructions	before m	nakıng any entries	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use as	sets	(d) Distribution (col (b) divided	
2009	48,291	7.4	,163	(=== (=) ======	0 651147
2008					
2007					
2006					
2005					
<i>'</i>	umn (d)		<u> </u>	2	
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5					0 65114
the number of year	s the foundation has been in existence	e if less than 5 vears		3	
the number of year	s the foundation has been in existence	e if less than 5 years		3	
	s the foundation has been in existence of noncharitable-use assets for 2010		.	1	0 65114
4 Enter the net value					0 65114
4 Enter the net value 5 Multiply line 4 by I	e of noncharitable-use assets for 2010	from Part X, line 5		1	0 65114
4 Enter the net value5 Multiply line 4 by l6 Enter 1% of net in	e of noncharitable-use assets for 2010 ine 3	from Part X, line 5		5	0 65114 0 65114 404,40 263,32
4 Enter the net value 5 Multiply line 4 by I	e of noncharitable-use assets for 2010 ine 3	from Part X, line 5		5	0 65114 404,40 263,32
 4 Enter the net value 5 Multiply line 4 by l 6 Enter 1% of net in 7 Add lines 5 and 6. 8 Enter qualifying dis 	e of noncharitable-use assets for 2010 ine 3	7b)		1 5 7	0 65114 404,40 263,32 263,32

	990-PF (2010)				age 4
Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of	the inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				8
	here Fand enter 1% of Part I, line 27b				
с	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2				8
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0				8
6	C redits/P ayments				
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a				
b	Exempt foreign organizations—tax withheld at source 6b				
c	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9				8
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 Refunded 11				
Par	t VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did			Yes	No
	ıt participate or intervene in any political campaign?		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	of			
	the instructions for definition)?		1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?	•	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers \blacktriangleright \$0				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers 🕨 \$0				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		No
	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	3	_		
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		No
ь _	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		No
_	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 state law remain in the governing instrument?		6		N-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	Yes	No
/ 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		–	i es	
od	instructions) TN				
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney				
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(1)(3)		├	<u> </u>	\vdash
-	or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on				
	page 27)? If "Yes," complete Part XIV		9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		No

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►NONE			
14	The books are in care of ►TAMMIE HERNANDEZ Telephone no ►(619)	699-	2661	
	Located at ▶9737 COGDILL ROAD SUITE 200N KNOXVILLE TN ZIP+4 ▶37932			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			— ▶ □
	and enter the amount of tax-exempt interest received or accrued during the year	•		,
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over			
16	a bank, securities, or other financial account in a foreign country?	16		No
		10		140
	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			
Pai	t VII-B 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? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(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) A gree to pay money or property to a government official? (Exception. Check "No"			
	if 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) Yes 🔽 No			
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		No
	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		No
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))			
а	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?			
	If "Yes," list the years 🕨 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation			
	or disqualified persons after 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			
	ıf the foundation had excess business holdings in 2010.).	3Ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		No

Pai	rt VII-B	Statements Rega	rdin	g Activities for	Wh	ich Form 4720	May	Be Required (cont	inue	1)		
5a		e year did the foundation										
	(1) Carry	on propaganda, or other	wise	attempt to influence	e leg	ıslatıon (section 49	45(e))?	√ No			
	(2) Influe	ence the outcome of any	speci	fic public election (see	section 4955), or to	car	ry				
		rectly or indirectly, any v							- No			
	•	de a grant to an individua		-				┌ Yes ┡				
		de a grant to an organiza		, ,,		• •	scrib					
						· -		ctions) T Yes F	- No			
		de for any purpose other						, , , , , , , , , , , , , , , , , , , ,				
									- No			
b								exceptions described in				
_								page 22 of the instruction		5b		
_		wer is "Yes" to question										
·		•		•		•		T Yes 「	- _{No}			
							•	, res ,	140			
c -	If "Yes," attach the statement required by Regulations section 53.4945–5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay											
6a	premiums on a personal benefit contract?											
										c l		NI.
Ь			r, pay	premiums, directly	orı	ndirectly, on a perso	onai	benefit contract?	•	6b		No
_		o 6b, file Form 8870.							.			
7a		ne during the tax year, w										
_ь	If yes, did							the transaction?		7b		
Pa	rt VIII	Information About and Contractors	Offi	cers, Directors	5, Ti	rustees, Founda	atio	n Managers, Highly	Paid	Emp	loyee	es,
	List all off		fou	ndation managers a	ınd t	heir compensation (see i	page 22 of the instruction	ne)			
		Todio, unicotoro, trabicoo		Fitle, and average		c) Compensation		(d) Contributions to				
	(a) Na	me and address		ours per week		If not paid, enter	е	mployee benefit plans			e acco owance	
			dev	oted to position		-0-)	and	deferred compensation	011	ici uii	- Walle	
See	A dditional	Data Table										
	Compensati	tion of five highest-paid	emnl	ovees (other than	t hos	e included on line 1-	-see	page 23 of the instruction	ons).			
_	•	nter "NONE."	Ср.	o, cco (center enum				page 15 or the morraction	,.			
				(b) Title, and aver	206			(d) Contributions to				
(a)		l address of each employ	ee	hours per week	_	(c) Compensation	n	employee benefit	1	•	e acco	
	paid r	more than \$50,000		devoted to positi	on			plans and deferred compensation	oti	ner all	owance	es
NON	IF											
									<u> </u>			
-												
Tota	Laumbara	fother employees hald o	var d	F0 000		•						

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3. Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE". (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over\$50,000 for professional services. O	Form 990-PF (2010)		Page 7
(c) Compensation NONE Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services.		rustees, Foundation Managers, Highly	Paid Employees,
Total number of others receiving over \$50,000 for professional services. Description Descripti	3 Five highest-paid independent contractors for professional serv	vices (see page 23 of the instructions). If none, e	:nter "NONE".
Total number of others receiving over \$50,000 for professional services. Del the foundation's four largest direct charitable Activities List the foundation's four largest direct charitable activities during the lax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convered, presearch papers produced, etc. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 Amount Total. Add lines 1 through 3.	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Dart IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount 1 A mount	NONE		
Dart IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount 1 A mount			
Dart IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount 1 A mount			
Dart IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount 1 A mount			
Dart IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount 1 A mount			
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Dart IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount 1 A mount		1	
Expenses Lest the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See page 24 of the instructions Total. Add lines 1 through 3.	Total number of others receiving over \$50,000 for professional serv	rices	. 0
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See page 24 of the instructions.			
Total. Add lines 1 through 3	Summary of Direct Charitable Activities		
2 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See page 24 of the instructions 3 Total. Add lines 1 through 3. • 0	List the foundation's four largest direct charitable activities during the tax year. Including any other handle activities during the tax year. Including any other handle activities during the tax year.	ude relevant statistical information such as the number of	Expenses
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3.		15 produced, etc	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3.	-		•
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3.			-
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3.			
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Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See page 24 of the instructions All other program-related investments See page 24 of the instructions	2		
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3			•
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3			
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3			-
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3	Part IV P. Summary of Program-Polated Investme	nte (see page 24 of the instructions)	
All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3			A mount
All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3		9 , ,	- Timount
All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3			•
All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3			-
All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3	2		
3	•		-
3			•
3	All other program-related investments. See page 24 of the instru	ctions	
Total. Add lines 1 through 3		ctions	
Total Add Illies I tillough St	<u> </u>		1
Total Add Illies I tillough St			1
Total Add Illies I tillough St		_ 1	
	Iotal. Add lines 1 through 3		

The content of the	Form	990-PF (2010)		Page 8
Purposes 1	Pa		reign	
A verage monthly fair market value of securities 16	1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
b Average of monthly cash balances. 1b 410,559 c Fair market value of all other assets (see page 24 of the instructions). 1c 0 d Total (add lines 1.b, b, and c). 1d 410,559 e Reduction claimed for blockage or other factors reported on lines 1 a and 1 1c 0 2 Acquisition indebte denses applicable to line 1 assets. 2 0 3 Subtract line 2 from line 1 d. 3 410,559 4 Cash deemed held for charitable activities Einter 11/2% of line 3 (for greater amount, see page 25 of the instructions). 4 6,158 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Einter here and on Part V, line 4 6 20,220 5 Minimum investment return. Einter 5% of line 5. 6 20,220 5 Value of noncharitable-use assets. Subtract line 4 from line 3 Einter here and on Part V, line 4 6 20,220 5 Value of noncharitable-use assets. Subtract line 4 from line 3 Einter here and on Part V, line 4 6 20,220 5 Value of noncharitable-use assets. Subtract line 4 from line 3 Einter here and on Part V, line 4 6 20,220 5 Value of noncharitable-use assets. Subtract line 2 from line 1 7 20 20 20 5 Value of noncharitable-use assets. Subtract line 2 from line 3 7 20 20 20 20 20 20 20				
Table Add Innex Innex	а	A verage monthly fair market value of securities	1a	0
Red Red	b	A verage of monthly cash balances	1b	410,559
Reduction claimed for blockage or other factors reported on lines 1 a and 1 c (attach detailed explanation).	c	Fair market value of all other assets (see page 24 of the instructions)	1c	0
1	d	Total (add lines 1a, b, and c)	1d	410,559
2	e	Reduction claimed for blockage or other factors reported on lines 1a and		
3 3 3 3 3 3 3 3 3 3		1c (attach detailed explanation)		
4 6,158	2	Acquisition indebtedness applicable to line 1 assets	2	0
Note Section Sectio	3	Subtract line 2 from line 1d	3	410,559
S	4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
Part Tile Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here Tile Tile		of the instructions)	4	6,158
Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part.) Minimum investment return from Part X, line 6.	5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	404,401
foundations and certain foreign organizations check here ▶ and do not complete this part.) Minimum investment return from Part X, line 6	6	Minimum investment return. Enter 5% of line 5	6	20,220
Toundations and certain foreign organizations check nere	Dat			
Tax on investment income for 2010 from Part VI, line 5	r a	foundations and certain foreign organizations check here 🕨 📗 and do not complete t	his pa	
b Income tax for 2010 (This does not include the tax from Part VI). 2b	1	Minimum investment return from Part X, line 6	1	20,220
c Add lines 2a and 2b	2a	Tax on investment income for 2010 from Part VI, line 5 2a 8		
3 20,212 4 Recoveries of amounts treated as qualifying distributions	b	Income tax for 2010 (This does not include the tax from Part VI) 2b		
4 00 5 Add lines 3 and 4	C	Add lines 2a and 2b	2c	8
5 20,212 6 Deduction from distributable amount (see page 25 of the instructions). 6 0 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	3	Distributable amount before adjustments Subtract line 2c from line 1	3	20,212
6 Deduction from distributable amount (see page 25 of the instructions)	4	Recoveries of amounts treated as qualifying distributions	4	0
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	5	Add lines 3 and 4	5	20,212
Part XII Qualifying Distributions (see page 25 of the instructions) 1	6	Deduction from distributable amount (see page 25 of the instructions)	6	0
Part XII Qualifying Distributions (see page 25 of the Instructions) 1	7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26		line 1	7	20,212
a Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	Par	Qualifying Distributions (see page 25 of the instructions)		
b Program-related investments—total from Part IX-B	1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
b Program-related investments—total from Part IX-B	а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	109,991
A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	ь		1b	
purposes	2			
a Suitability test (prior IRS approval required)			2	
a Suitability test (prior IRS approval required)	3	A mounts set aside for specific charitable projects that satisfy the		
b Cash distribution test (attach the required schedule)	а	Suitability test (prior IRS approval required)	3a	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 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 (see page 26 of the instructions)	ь		3b	
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions)				109,991
income Enter 1% of Part I, line 27b (see page 26 of the instructions)				
		· · · · · · · · · · · · · · · · · · ·	5	0
b Adjusted qualitying distributions. Subtract line 5 from line 4	6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	109,991
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for				<u> </u>

P	art XIII Undistributed Income (see page	26 of the instructi	ons)		
		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1	Distributable amount for 2010 from Part XI, line 7				20,212
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only			0	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2010				
а	From 2005				
b	From 2006				
c	From 2007				
	From 2008				
	From 2009				
f	Total of lines 3a through e	47,347			
4	Qualifying distributions for 2010 from Part				
	XII, line 4 🕨 \$ 109,991				
а	Applied to 2009, but not more than line 2a			0	
b	Applied to undistributed income of prior years		0		
	(Election required—see page 26 of the instructions)		0		
С	Treated as distributions out of corpus (Election required—see page 26 of the instructions)	0			
d	Applied to 2010 distributable amount				20,212
е	Remaining amount distributed out of corpus	89,779			
5	Excess distributions carryover applied to 2010	0			0
	(If an amount appears ın column (d), the same amount must be shown ın column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	137,126			
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				
u	amount—see page 27 of the instructions		0		
e	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page 27			0	
	of the instructions			U	
f	Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2011				0
7	A mounts treated as distributions out of				
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27	0			
	of the instructions)	0			
8	Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the	_			
	ınstructions)	0			
9	Excess distributions carryover to 2011.	137,126			
4.0	Subtract lines 7 and 8 from line 6a	137,120			
	A nalysis of line 9				
a L	Excess from 2006 Excess from 2007				
D	Excess from 2007				
	Excess from 2009				
	Excess from 2010 89,779				

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

c Any submission deadlines

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year See Additional Data Table 95,253 **b** Approved for future payment

Form 990-PF (2010) Part XVI-A Analysis of Income-Produc	ina Activitie	<u> </u>			Page 1 2
Enter gross amounts unless otherwise indicated		usiness income	Excluded by section	ı 512, 513, or 514	(e)
	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemp function income (See page 28 of
a			14	412	the instructions)
c d e 12 Subtotal Add columns (b), (d), and (e). 13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions on page 2 Part XVI-B Relationship of Activities to Explain below how each activity for whith accomplishment of the organization page 28 of the instructions)	8 to verify calc the Accomp	ulations) plishment of E ported in column(Exempt Purpos e) of Part XVI-A co	es ontributed importa	412
page 20 of the matteriors /					

Form 9	90-PF (2	2010)							Рa	ge 13
Part	XVII	Information Re Noncharitable		Transfers To and Tr organizations	ransad	ctions and Relation	ships With			
1 Did	the organi	zation directly or indirectly	y engage in any	of the following with any other	er organız	ation described in section			Yes	No
501	(c) of the	Code (other than section	501(c)(3) orgai	nizations) or in section 527, rel	lating to p	oolitical organizations?				
a Tra	nsfers fr	om the reporting four	ndation to a r	oncharitable exempt org	anızatıc	on of				
(1)	Cash.							1a(1)		No
(2)	Othera	issets						1a(2)		No
b Oth	ner trans	actions								ĺ
(1)	Sales	fassets to a noncha	rıtable exem	pt organization				1b(1)		No
(2)	Purcha	ses of assets from a	noncharitabl	e exempt organization.				1b(2)		No
(3)	Rental	of facilities, equipme	nt, or other a	ssets				1b(3)		No
(4)	Reımbu	rsement arrangemer	nts					1b(4)		No
								1b(5)		No
(6)	Perform	ance of services or n	nembership d	r fundraising solicitation	s			1b(6)		No
				other assets, or paid em				<u> </u>		No
	•	, ,		mplete the following sche						
	ny trans		angement, sh	by the reporting foundation in column (d) the valuation on the valuation on the column (d) the valuation of the column is a second of the column in the column in the column is a second of the column in the column	ue of th		services receive	ed		nts
(d) Line	110	(b) Amount involved	(c) Name or	Tonenantable exempt organiza	icion	(a) bescription of dansiers,	transactions, and she	ining arra	ngemei	113
des	crıbed ır	•	ne Code (otho schedule	ed with, or related to, one er than section 501(c)(3 (b) Type of org)) or in s	section 527?	ons Ons Ons Ons Ons Ons Ons Ons	. 厂 Y€	s F	No
	Under	penalties of perjury,	I declare tha	at I have examined this r	eturn, ır	ncluding accompanying s	chedules and sta	tement	s, and	to
	based			s true, correct, and comp er has any knowledge	olete De	eclaration of preparer (ot	herthan taxpaye	r or fidu	cıary)	IS
	Sign	nature of officer or t	rustee			Date	Title			
		I				Date	1	PTIN		
<u>8</u> 2						Date	Check if self-	FIIN		
Sign Here		Preparer's JANICE A RATICA Signature								
ß	Paid Preparer's Use Only	Firm's name		CHERRY BEKAERT & F	HOLLAN	ND LLP	Fırm's EIN ▶	1		
	Se P			1111 METROPOLITA	NAVEN	IUE SUITE 1000]			
		Firm's address 🕨		CHARLOTTE, NC 282	204		Phone no (704	377-	1678	
	1	Ī					I			

Software ID: Software Version:

EIN: 27-1034363

Name: PERCEPTICS FOUNDATION

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
PERCEPTICS LLC	SOLE MEMBER	0	0	0
9737 COGDILL ROAD KNOXVILLE,TN 37932	1 00			
LEIGH CARRASCO	PRESIDENT	0	0	0
9737 COGDILL ROAD KNOXVILLE,TN 37932	1 00			
MYLISSA BUTTRAM	TREASURER	0	0	0
9737 COGDILL ROAD KNOXVILLE,TN 37932	1 00			
TAMMIE HERNANDEZ	SEC / VP	0	0	0
9737 COGDILL ROAD KNOXVILLE,TN 37932	1 00			
DAVID BRADSHAW	BOARD MEMBER	0	0	0
9737 COGDILL ROAD KNOXVILLE,TN 37932	1 00			
STAN DAWSON	BOARD MEMBER	0	0	0
9737 COGDILL ROAD KNOXVILLE,TN 37932	1 00			
RANDALL WARREN	BOARD MEMBER	0	0	0
9737 COGDILL ROAD KNOXVILLE,TN 37932	1 00			
TERRY LACKEY	BOARD MEMBER	0	0	0
9737 COGDILL ROAD KNOXVILLE,TN 37932	1 00			
JULIE STROUPP	BOARD MEMBER	0	0	0
9737 COGDILL ROAD KNOXVILLE,TN 37932	1 00			

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CROSSROADS COMMUNITY MINISTRIES 420 COURTLAND ST NE ATLANTA, GA 30308	NONE	509(A)(1)	SUPPORT FOR HOMELESS MEN, WOMEN AND CHILDREN	6,000
KNOX AREA RESCUE MINISTRIES PO DRAWER 3310 KNOXVILLE,TN 379273310	NONE	509(A)(1)	PROVIDE FOOD, SHELTER AND OTHER NECESSARY SERVICES TO NEEDY MEN, WOMEN AND C	600
LEUKEMIA & LYMPHOMA SOCIETY 1131 MAMARONECK AVENUE - SUITE 310 WHITE PLAINS,NY 10605	NONE	509(A)(1)	FIND A CURE FOR LEUKEMIA, LYMPHOMA, HODGKIN'S DISEASE AND MYELOMA	1,500
LIVING WATER INTERNATIONAL PO BOX 35496 HOUSTON,TX 772355496	NONE	509(A)(1)	PROVIDE CLEAN WATER TO DEVELOPING COUNTRIES	375
SECOND HARVEST FOOD BANK OF E TN 922 DELAWARE AVE KNOXVILLE,TN 37921	NONE	509(A)(1)	FEED THE HUNGRY	105
THE LOVE KITCHEN INC PO BOX 6839 KNOXVILLE,TN 379146839	NONE	509(A)(1)	PROVIDES MEALS TO LOW INCOME PEOPLE	300
ARTHRITIS FOUNDATION TN CHAPTER 6504 DEAN HILL DR STE C KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT RESEARCH TO FIND A CURE FOR AND PREVENT ARTHRITIS	150
BREAST CANCER RESEARCH FOUNDATION 60 E 56TH ST 8TH FLOOR NEW YORK, NY 10022	NONE	509(A)(1)	SUPPORT RESEARCH TO FIND A CURE FOR BREAST CANCER	750
CYSTIC FIBROSIS FOUNDATION 5401 KINGSTON PIKE SUITE 230 KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT RESEARCH TO FIND A CURE FOR CYSTIC FIBROSIS	375
JOY OF MUSIC SCHOOL 1209 EUCLID AVE KNOXVILLE,TN 37921	NONE	509(A)(2)	PROVIDE MUSIC EDUCATION FOR FINANCIALLY DISADVANTAGED YOUTH	300
LEUKEMIA & LYMPHOMA SOCIETY 1131 MAMARONECK AVENUE - SUITE 310 WHITE PLAINS, NY 10605	NONE	509(A)(1)	FIND A CURE FOR LEUKEMIA, LYMPHOMA, HODGKIN'S DISEASE AND MYELOMA	75
SHANGRI LA THERAPEUTIC RIDING ACADEMY 11800 HWY 11E LENIOR CITY,TN 377725550	NONE	509(A)(1)	SUPPORT HORSE RELATED ACTIVITIES FOR PERSONS WITH DISABILITIES	5,000
ALL SAINTS PARISH 7 MCMENAMY ROAD ST PETERS,MO 63376	NONE	CHURCH	SUPPORT OF MINISTRY	1,530
FOOTHILLS ELEMENTARY FTO 520 SANDY SPRINGS ROAD MARYVILLE,TN 37803	NONE	509(A)(1)	PROVIDE SUPPORT TO FOOTHILLS ELEMENTARY PROJECTS	2,550
KNOXVILLE TRACK CLUB PO BOX 52266 KNOXVILLE,TN 37950	NONE	509(A)(2)	SPONSORSHIP OF AMATEUR ATHLETIC EVENTS	1,500
Total				95,253

				-
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CLEAR SPRINGS BAPTIST CHURCH 3709 CLEAR SPRINGS ROAD MASCOT,TN 37806	NONE	CHURCH	SUPPORT OF MINISTRY	3,000
LEUKEMIA & LYMPHOMA SOCIETY 1131 MAMARONECK AVENUE - SUITE 310 WHITE PLAINS,NY 10605	NONE	509(A)(1)	FIND A CURE FOR LEUKEMIA, LYMPHOMA, HODGKIN'S DISEASE AND MYELOMA	600
ROCKY HILL ELEMENTARY PTO 1200 MORRELL ROAD KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT TO ROCKY HILL ELEMENTARY PROJECTS	300
KNOXVILLE TRACK CLUB PO BOX 52266 KNOXVILLE,TN 37950	NONE	509(A)(2)	SPONSORSHIP OF AMATEUR ATHLETIC EVENTS	2,700
ANDREW BOGLE CHAPTER 72 EAST FOX DEN DRIVE KNOXVILLE,TN 37934	NONE	509(A)(2)	PROMOTION OF PATRIOTISM AND PRESERVATION OF AMERICAN HISTORY	1,200
MOMENTUM DANCE LAB 100 SOUTH GAY STREET KNOXVILLE,TN 37902	NONE	509(A)(1)	DANCE EDUCATION	1,245
OAK RIDGE COMMUNITY PLAYHOUSE PO BOX 5705 OAK RIDGE,TN 378315705	NONE	509(A)(1)	THEATRE APPRECIATION	5,000
LIPSCOMB UNIVERSTIY ONE UNIVERSITY PARK DRIVE NASHVILLE,TN 37204	NONE	SCHOOL	EDUCATIONAL PROGRAMS SUPPORT	500
ASPCA 424 EAST 92ND STREET NEW YORK,NY 101286804	NONE	509(A)(1)	PREVENTION OF ANIMAL ABUSE AND NEGLECT	100
FRIENDS OF YOUNG-WILLIAMS ANIMAL CENTER PO BOX 550 KNOXVILLE,TN 37901	NONE	509(A)(1)	PROVIDE SAFE ENVIRONMENT FOR ABANDONED AND NEGLECTED ANIMALS	100
CYSTIC FIBROSIS FOUNDATION 5401 KINGSTON PIKE SUITE 230 KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT RESEARCH TO FIND A CURE FOR CYSTIC FIBROSIS	100
CLEAR SPRINGS BAPTIST CHURCH 3709 CLEAR SPRINGS ROAD MASCOT,TN 37806	NONE	CHURCH	SUPPORT OF MINISTRY	500
DOWN SYNDROME AWARENESS GROUP OF ET PO BOX 53575 KNOXVILLE,TN 37950	NONE	509(A)(2)	SUPPORT AWARENESS OF DOWN SYNDROME DISEASE	100
COMPASSION INTERNATIONAL INC PO BOX 65000 COLORADO SPRINGS, CO 80962	NONE	509(A)(2)	CHRISTIAN CHILD DEVELOPMENT PROGRAMS	750
DOWNTOWN RESCUE MISSION 1400 EVANGEL DRIVE HUNTSVILLE,AL 35816	NONE	509(A)(2)	PROVIDE HOUSING AND MEALS TO THE HOMELESS	550
Total				95,253

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GIRL SCOUTS TROOP # 975 7601 MAYS CHAPEL ROAD KNOXVILLE,TN 37938	NONE	509(A)(2)	SUPPORT OF COURAGE, CONFIDENCE AND CHARACTER BUILDING PROGRAMS FOR GIRLS	250
KNOX COUNTY COUNCIL ON AGING PO BOX 51650 KNOXVILLE,TN 37950	NONE	509(A)(1)	SUPPORT PROGRAMS FOR SENIOR CITIZENS	250
GREAT SMOKY MNT COUNCIL 557 BOY SCOUTS OF AMERICA TRUST - PO BOX 51885 KNOXVILLE,TN 379501885	NONE	509(A)(3)	SUPPORT OF BOY SCOUTS OF AMERICA	250
MISSION OF HOPE PO BOX 51824 KNOXVILLE,TN 37950	NONE	509(A)(2)	A GRICULTURAL PROJECT FUND	1,000
WORLD RELIEF 7 E BALTIMORE STREET BALTIMORE,MD 212021602	NONE	509(A)(1)	HUMANITARIAN RELIEF AND DEVELOPMENTAL AID	750
KNOXVILLE AREA URBAN LEAGUE 2230 SUTHERLAND AVENUE KNOXVILLE,TN 37919	NONE	509(A)(2)	PROVIDE VARIOUS AID TO PEOPLE SEEKING SELF- SUFFICIENCY AND EQUALITY	300
KNOX AREA RESCUE MINISTRIES PO DRAWER 3310 KNOXVILLE,TN 379273310	NONE	509(A)(1)	PROVIDE FOOD, SHELTER AND OTHER NECESSARY SERVICES TO NEEDY MEN, WOMEN AND C	48
WDVX PO BOX 27568 KNOXVILLE,TN 37927	NONE	509(A)(2)	PUBLIC RADIO PROGRAMMING	690
LEUKEMIA & LYMPHOMA SOCIETY 1131 MAMARONECK AVENUE - SUITE 310 WHITE PLAINS, NY 10605	NONE	509(A)(1)	FIND A CURE FOR LEUKEMIA, LYMPHOMA, HODGKIN'S DISEASE AND MYELOMA	75
CYSTIC FIBROSIS FOUNDATION 5401 KINGSTON PIKE SUITE 230 KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT RESEARCH TO FIND A CURE FOR CYSTIC FIBROSIS	75
OAK RIDGE COMMUNITY PLAYHOUSE PO BOX 5705 OAK RIDGE,TN 378315705	NONE	509(A)(1)	THEATRE APPRECIATION	1,200
WELLNESS COMMUNITY - EAST TENN 2230 SUTHERLAND AVENUE KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT OF CANCER PATIENTS	250
UNITED WAY OF ANDERSON COUNTY PO BOX 4158 OAK RIDGE,TN 37831	NONE	509(A)(1)	COMMUNITY PRORGRAMS	900
AMERICAN HEART ASSOCIATION PO BOX 78851 PHOENIX,AZ 850628851	NONE	509(A)(1)	PREVENTION OF CARDIOVASCULAR DISEASE AND STROKE	150
ANDREW BOGLE CHAPTER 72 EAST FOX DEN DRIVE KNOXVILLE,TN 37934	NONE	509(A)(2)	PROMOTION OF PATRIOTISM AND PRESERVATION OF AMERICAN HISTORY	300
Total			▶ 3a	95,253

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CYSTIC FIBROSIS FOUNDATION 5401 KINGSTON PIKE SUITE 230 KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT RESEARCH TO FIND A CURE FOR CYSTIC FIBROSIS	570
RIDGEPOINT CHURCH PO BOX 4806 OAK RIDGE,TN 37831	NONE	CHURCH	SUPPORT OF MINISTRY	5,000
KNOX AREA RESCUE MINISTRIES PO DRAWER 3310 KNOXVILLE,TN 379273310	NONE	509(A)(1)	PROVIDE FOOD, SHELTER AND OTHER NECESSARY SERVICES TO NEEDY MEN, WOMEN AND C	300
SECOND HARVEST FOOD BANK OF E TN 922 DELAWARE AVE KNOXVILLE,TN 37921	NONE	509(A)(1)	FEED THE HUNGRY	75
OAK RIDGE COMMUNITY PLAYHOUSE PO BOX 5705 OAK RIDGE,TN 378315705	NONE	509(A)(1)	THEATRE APPRECIATION	6,600
COPPER RIDGE ELEMENTARY SCHOOL 2502 E BRUSHY VALLEY ROAD POWELL,TN 37849	NONE	SCHOOL	EDUCATIONAL PRO GRAMS SUPPORT	4,425
CYSTIC FIBROSIS FOUNDATION 5401 KINGSTON PIKE SUITE 230 KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT RESEARCH TO FIND A CURE FOR CYSTIC FIBROSIS	1,305
SHANGRI LA THERAPEUTIC RIDING ACADEMY 11800 HWY 11E LENIOR CITY,TN 377725550	NONE	509(A)(1)	SUPPORT HORSE RELATED ACTIVITIES FOR PERSONS WITH DISABILITIES	15,000
ARTHRITIS FOUNDATION TN CHAPTER 6504 DEAN HILL DR STE C KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT RESEARCH TO FIND A CURE FOR AND PREVENT ARTHRITIS	150
ROCKY HILL ELEMENTARY PTO 1200 MORRELL ROAD KNOXVILLE,TN 37919	NONE	509(A)(1)	SUPPORT TO ROCKY HILL ELEMENTARY PROJECTS	750
OAK RIDGE COMMUNITY PLAYHOUSE PO BOX 5705 OAK RIDGE,TN 378315705	NONE	509(A)(1)	THEATRE APPRECIATION	3,400
DOWNTOWN RESCUE MISSION 1400 EVANGEL DRIVE HUNTSVILLE,AL 35816	NONE	509(A)(2)	PROVIDE HOUSING AND MEALS TO THE HOMELESS	750
WEST END CHURCH OF CHRIST 8301 EAST WALKER SPRINGS LANE KNOXVILLE,TN 37923	NONE	CHURCH	SUPPORT OF MINISTRY	5,985
BOYS & GIRLS CLUB OF NORTH ALABAMA 203 E SIDE SQUARE HUNTSVILLE,AL 35801	NONE	509(A)(2)	MENTOR PROGRAMS	3,000
JUNIOR ACHIEVEMENT OF EAST TENN 2135 N CHARLES G SEIVERS BLVD CLINTON,TN 37716	NONE	509(A)(1)	EDUCATIONAL PROGRAMS SUPPORT	3,600
Total				95,253

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TY 2010 Legal Fees Schedule

Name: PERCEPTICS FOUNDATION

EIN: 27-1034363

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL EXPENSE	5,459	0		5,459

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TY 2010 Other Expenses Schedule

Name: PERCEPTICS FOUNDATION

EIN: 27-1034363

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DUES & SUBSCRIPTIONS	120	0		120
OFFICE SUPPLIES	1,259	0		1,259

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TY 2010 Other Professional Fees Schedule

Name: PERCEPTICS FOUNDATION

EIN: 27-1034363

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL SERVICES	7,500	0		7,500