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Form 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052 2010

For calendar year 2010, or tax year beginning and ending G Check all that apply: Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number MANA CHARITABLE FOUNDATION 36-4376140 Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number PO BOX 579 870-423-3511 City or town, state, and ZIP code C If exemption application is pending, check here BERRYVILLE AR 72614 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust If private foundation status was terminated I Fair market value of all assets at end of year | J Accounting method: under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination 1533272. (Part I, column (d) must be on cash basis) ▶\$ under section 507(b)(1)(B), check here Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome (cash basis only) 1 Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 2250 2250 STATEMENT Dividends and interest from securities 25790 25790 STATEMENT 5a Gross rents b Net rental income or (loss) 367380 6a Net gain or (loss) from sale of assets not on line 10 861009. 367380 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total Add lines 1 through 11 395420 395420 0 8000 8000 0 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 50 16a Legal fees STMT 3 0 50 0. 4 705 705 **b** Accounting fees STMT 0. 0. c Other professional fees STMT 7707 0 7707 istrative 1.3. 18 Taxes 19 Depreciation and depletion Occupancy Travels conferences, and meetings Printing and publications Other expenses 2 2 2 18 STMT 2755 2755 23 0 0. Total operating and administrative expenses. Add lines 13 through 23 19217 0 19217 0. 25 Contributions, gifts, grants paid 209999 209999. 26 Total expenses and disbursements. 229216 Add lines 24 and 25 19217 0 209999. 27 Subtract line 26 from line 12: 166204 & Excess of revenue over expenses and disbursements 395420 b Net investment income (if negative, enter -0-) 0 C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see the instructions.

P	art I	Balance Sheets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
\neg	1	Cash - non-interest-bearing	(2) - 300 - 400	/-/	(T) Marios Falas
		Savings and temporary cash investments	268321.	65157.	65157.
		Accounts receivable ► 1200.		- 001071	031371
		Less; allowance for doubtful accounts ▶	1701.	1200.	
		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 ▶			·····
ţ	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges	6026.	3797.	
⋖	10a	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 7	846141.	1218239.	1468115.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis		:	
	15	Other assets (describe STATEMENT 8)	300263.	249876.	0.
		Office assets (describe)	3002031	247070.	
	16	Total assets (to be completed by all filers)	1422452.	1538269.	1533272.
		Accounts payable and accrued expenses			
		Grants payable			
ģ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
	22	Other liabilities (describe >)			
_	23	Total liabilities (add lines 17 through 22)	0.	<u> </u>	
		Foundations that follow SFAS 117, check here			
S	١	and complete lines 24 through 26 and lines 30 and 31.			
nces	1	Unrestricted			
3ala	25 26	Temporarily restricted Permanently restricted			
Fund Balan	20	Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
šets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
AS	29	Retained earnings, accumulated income, endowment, or other funds	1422452.	1538269.	
Net Assets	30	Total net assets or fund balances	1422452.	1538269.	
	İ			··	
_	31	Total liabilities and net assets/fund balances	1422452.	1538269.	
F	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
_				· · · · · · · · · · · · · · · · · · ·	
1		I net assets or fund balances at beginning of year - Part II, column (a), line to asset with and of year figure reported an array year's estuan	30		1400450
		st agree with end-of-year figure reported on prior year's return) r amount from Part I, line 27a		1	1422452.
2		r amount from Part I, line 27a er increases not included in line 2 (itemize)		2	166204.
3 4		lines 1, 2, and 3			1588656.
5		reases not included in line 2 (itemize) DECREASE IN FM	V OF SECURITEE		50387.
-		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	1538269.
-					Form 990-PF (2010)

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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.

See the Part VI instructions.

	990-PF (2010) MANA CHARITABLE FOUNDATION				<u> 36-</u>	4376	140	F	age 4
<u>Pa</u>	rt VI Excise Tax Based on Investment Income (Section 494	0(a), 4	1940(b)	, 4940(e), or	<u>4948 -</u>	see i	nstru	ctior	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e	nter "N/A	A" on line	1.]					
•	Date of ruling or determination letter: (attach copy of letter if near	cessary-	see instr	uctions)	'				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		and enter	1%	1			79	08.
	of Part I, line 27b								
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	6 of Part	I, line 12	, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers en	ter -0-)		_2				0.
3	Add lines 1 and 2				3			79	08.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	Others er	nter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				5			79	08.
6	Credits/Payments:								
а	2010 estimated tax payments and 2009 overpayment credited to 2010	6a		3797					
b	Exempt foreign organizations - tax withheld at source	6b							
C	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments. Add lines 6a through 6d				7			37	97.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached			8		-		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			•	9			41	11.
10	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 >	11				
Pa	rt VII-A Statements Regarding Activities						•		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation of	r did it pa	rticipate or interve	ne in			Yes	No
	any political campaign?		•	,			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (see	ınstructı	ons for definition)?	•		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an	-		•					
	distributed by the foundation in connection with the activities.		- c,,	materiale passes			ŀ		
C	Did the foundation file Form 1120-POL for this year?						1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th	e vear:							
	(1) On the foundation. ▶ \$ 0 . (2) On foundation manager			0	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend				<u>•</u>				
	managers. ▶ \$ 0.	v tar		00000					
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	instrume	ent. articl	es of incornoration	٥r				
-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		o, a	or moorporation	, 0.		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the ye						4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?				N	/A	4b		
	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 6	either:							
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so that no mandato	rv direct	ions that	conflict with the st	ate law				
	remain in the governing instrument?	.,	iono inat	oomingt with the ou	ato iam		6		x
7	Did the foundation have at least \$5,000 in assets at any time during the year?						7	Х	
•	If "Yes," complete Part II, col. (c), and Part XV.						-	<u> </u>	
8:	Enter the states to which the foundation reports or with which it is registered (see instruction)	ons) 🕨							
•	IL	J.10, P							
,	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney	General (or designate)					
٠	of each state as required by General Instruction G? If "No," attach explanation	шотпоу	Goneral (or acoignate)			8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of s	ection AG	043(1)(3)	or 4942/1//5) for a	alandar		100	^	\vdash
3	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes,"				aitiiddi		9		x_
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a sched						10	 	X
	Tes, attach a scheduling the tax years in res, attach a sched	ulo listilig	uren name	o arru auuresses			1. 10		43

orm 990-PF (2010) MANA CHARITABLE FOUNDATI			<u> 36-43761</u>	40	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:				1	1
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	ŀ	
` (2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	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)?		☐ Ye	s X No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
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	der the exceptions described i	n Regulations		1	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned			İ
expenditure responsibility for the grant?			s No		
If "Yes," attach the statement required by Regulations section 53 494		.,			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	pay promiumo on	□ v _e	s X No		}
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal hanafit contract?		15 LAL 110	6b	x
If "Yes" to 6b, file Form 8870.	ersonal benefit contract.		-		— ^
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?		es X No		İ
b If "Yes," did the foundation receive any proceeds or have any net income attribute			N/A	7b	
Information About Officers Directors Tours		nagers Highly		70	
Part VIII Paid Employees, and Contractors	ees, i oulluation wa	inagers, riigini	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e	Expense
(a) Name and address	hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred	ačc) Expense ount, other lowances
JOHN WEAVER	DIRECTOR/PRES	enter -0-)	compensation	- 411	OWalices
2541 CR 452	DIRECTOR/FRED	IDENI			
BERRYVILLE, AR 72614	0.00	0.	0.		Λ
	DIRECTOR			`	0.
30 PIVOT ROCK RD	DIRECTOR				
EUREKA SPRINGS, AR 72632	0.00	0.	0.		^
	DIRECTOR/SECR		<u>U</u>	<u>'</u>	0.
310 CR 309	DIRECTOR/SECR	UETAKI		İ	
	1 000		_		^
EUREKA SPRINGS, AR 72632	0.00	0.	0.	<u> </u>	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	ontor INONE II			
2 Compensation of the highest-paid employees (other trial those the	(b) Title, and average	enter NONE.	(d) Contributions to	10) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acc	ount, other
MANTE	devoted to position	 	compensation	aı	lowances
NONE	-				
		 		+	
	4				
		ļ		+	
	+				
		 		-	
	4				
		 		<u> </u>	
	4				
	L	<u> </u>	L,	<u> </u>	
Total number of other employees paid over \$50,000	<u> </u>				0
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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1.	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	1307260.
	Average of monthly cash balances	1b	
	Fair market value of all other assets	1c	•
d	Total (add lines 1a, b, and c)	1d	1307260.
	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	1307260.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	19609.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1287651.
6	Minimum investment return. Enter 5% of line 5	6	64383.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	64383.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	7908.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	56475.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	56475.
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	56475.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	209999.
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	Suitability test (prior IRS approval required)	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	209999.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	209999.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for the	ne section

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,	.		-	
line 7				56475.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 100464.				
b From 2006 106158.				
c From 2007 190940.				
d From 2008 113639.				
e From 2009 148974.				
f Total of lines 3a through e	660175.	:		
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 209999.				
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				56475.
e Remaining amount distributed out of corpus	153524.	· -		
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				
	813699.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	013033.			,
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
		<u> </u>		
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.	ļ
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				į
corpus to satisfy requirements imposed by	•			
section 170(b)(1)(F) or 4942(g)(3)	0.	· · ·		
8 Excess distributions carryover from 2005	100464			
not applied on line 5 or line 7	100464.			
9 Excess distributions carryover to 2011.	F1 2025			
Subtract lines 7 and 8 from line 6a	713235.			
10 Analysis of line 9:				
a Excess from 2006 106158.	-			
b Excess from 2007 190940.	-			
c Excess from 2008 113639.				
d Excess from 2009 148974.	4			
e Excess from 2010 153524.		<u> </u>		Form 990-PF (2010)

Part XIV Private Operation	g Foundations (see in	Structions and Part V	II-A. guestion 9)		-43/614U Page 10
1 a If the foundation has received a rul				M/A	
foundation, and the ruling is effecti		· · · · · ·			
b Check box to indicate whether the f	·	-	in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net		g loundation acsembed	Prior 3 years		1 4342())(3)
income from Part I or the minimum	1 1 22 12	(b) 2009	(c) 2008	(d) 2007	(e) Totai
investment return from Part X for	(-)	(0)	(0) 2000	(0,200)	(0) 10121
each year listed		Į.			
b 85% of line 2a					
c Qualifying distributions from Part X	/II				
line 4 for each year listed	NII,				
d Amounts included in line 2c not		<u> </u>	 		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made direc	+1/2				
for active conduct of exempt activit	<i>'</i>				
Subtract line 2d from line 2c	1163.				
3 Complete 3a, b, or c for the			- 		
alternative test relied upon:				1	
a "Assets" alternative test - enter:(1) Value of all assets					ł
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - ente					
2/3 of minimum investment return shown in Part X, line 6 for each yea listed				!	
c "Support" alternative test - enter:					
(1) Total support other than gross	3				
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 fro	om .				
an exempt organization					
(4) Gross investment income					
	Information (Comple		if the foundation	on had \$5,000	or more in assets
at any time duri	ng the year-see the	instructions.)			
1 Information Regarding Found	•				
a List any managers of the foundation	on who have contributed more	than 2% of the total co	ntributions received by t	the foundation before	the close of any tax
year (but only if they have contribu	ited more than \$5,000). (See s	section 507(d)(2).)			
NONE					
 b List any managers of the foundation other entity) of which the foundation 			n (or an equally large po	rtion of the ownership	p of a partnership or
NONE		•			
2 Information Regarding Contr	ribution Grant Gift Loop	Cabalarahin ata I		 .	
Check here ► X if the foundathe foundation makes gifts, grants	tion only makes contributions	to preselected charitabl	e organizations and doe	s not accept unsolicit	ed requests for funds. If
				, complete items 2d, t	,, c, and u.
a The name, address, and telephone	number of the person to who	iii applications should t	e addressed:		
b The form in which applications sh	ould be submitted and informa	tion and materials they	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on a	- Iwards, such as hy geographic	al areas, charitable field	s kinds of institutions	or other factors:	
w rany restrictions or miniations on a	oo, odon do by yeographii	ai ai cao, chanananc nelu	o, minuo or moduulons, l	or other lacturs.	
			_		
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3 Grants and Contributions Paid During to		Payment	<u></u>	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year CLEAR SPRINGS SCHOOL EUREKA SPRINGS, AR	NONE	SCHOOL	EDUCATIONAL	200000
AR CRAFT SCHOOL EUREKA SPRINGS, AR	NONE	SCHOOL	EDUCATIONAL	9999.
				i
Total			▶ 3a	209999
b Approved for future payment				
NONE				
			<u> </u>	
Total 023611 12-07-10		 	<u>▶ 3b</u>	0 Form 990-PF (2010

Part XVI-A Analysis of Income-Producing Activities

Inter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
C	-				·
d	 				
e					
·	———				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			اما	2250	
investments			14	2250.	
4 Dividends and interest from securities			14	25790.	
5 Net rental income or (loss) from real estate:	 				
Debt-financed property Not debt-financed property			-		
6 Net rental income or (loss) from personal			+		
property					
7 Other investment income	ļ				
8 Gain or (loss) from sales of assets other than inventory					367380
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			_		
b					
c					
d		· · · · · · · · · · · · · · · · · · ·			
e					
12 Subtotal. Add columns (b), (d), and (e)		0) .	28040.	367380
13 Total. Add line 12, columns (b), (d), and (e)				13	395420
(See worksheet in line 13 instructions to verify calculations.)					

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of
	the foundation's exempt purposes (other than by providing funds for such purposes).
	DIVIDENDS PAID ON STOCKS IN THE FOUNDATIONS PORTFOLIO AND INCOME FROM
	BUYING AND SELLING STOCKS ON THE FOUNDATION PORTFOLIO PROVIDE THE
	MONIES TO MAKE THE CONTRIBUTIONS TO THE 501(C)(3) ORGANIZATIONS AS
	INTENDED IN THE CHARTER
-	

023621 12-07-10

Dod VVII		CHARTIADI				. 10.1.1.		2 / O T # O		ye is
Part XVII	Exempt Organ		isters 10 a	and Irans	actions a	nd Relatio	nships With Nor	icharitable) 	
1° Did the org	ganization directly or indir	rectly engage in any	of the followin	g with any oth	er organizatio	n described in s	ection 501(c) of		Yes	No
the Code (other than section 501(c))(3) organizations) o	or in section 52	7, relating to p	olitical organi	zations?		1 1		
a Transfers f	from the reporting found	ation to a noncharita	able exempt org	ganization of:						i
(1) Cash								1a(1)		X
(2) Other	assets							1a(2)		X
b Other trans										
	of assets to a noncharita	ble exempt organiza	ition					1b(1)		X
• •	ases of assets from a no							1b(2)		X
` '	l of facilities, equipment,	•	g					1b(3)		X
• •	oursement arrangements							1b(4)		X
, ,	s or loan guarantees							1b(5)		X
• •	rmance of services or me	embership or fundra	ısına solicitatio	ns				1b(6)		X
	facilities, equipment, ma		-					1c		X
•	ver to any of the above is	• .	•		h) should alw	vave show the fa	ur market value of the o		ete	
	s given by the reporting f								,	
) the value of the goods,				. mains raid	o ay aoao	non or onaring arranger			
	(b) Amount involved	,	f noncharitable		uzation	(d) Descrit	otion of transfers, transaction	ns, and sharing an	rangeme	nts
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<u> </u>	(-,	N/A			(0, 2000.)		,		
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	ndation directly or indirec	-			xempt organiz	zations describe	đ			л
	501(c) of the Code (other		c)(3)) or in sect	tion 5277				Yes	LX	No
b If Yes, co	omplete the following sch			(h) Turn of		 _	(-) D			
	(a) Name of org	ganization		(b) Type of o	ngamzanon		(c) Description of re	lationship		
	N/A									
		-								
	•				_					
					<u></u>					
1000				<u> </u>						
and	er penalties of perjury, I declar complete Declaration of prep							and belief, it is to	ue, corre	≠Ct,
Sign	10/1./	1111 10 A	rai		16	9/11				
Here	- Johny		rai		010	44	TRUSTEE/PR	<u>ESIDENT</u>		
	Signature of officer of tr		T2		Dapte		Title			
	Print/Type preparer's n	iame	Preparer's s	signature		Date	Check if	PTIN		
			N	ا مد	CA. C		self- employed			
Paid	DON MEYER		07	<u>-</u>		06/27/1	1	P01360		<u> </u>
Preparer	Firm's name ► DON	MEYER,	CPA PC				Firm's EIN ► 7	1-08036	51	
Use Only										
	Firm's address ► 18	303 GREEN	ACRES	RD						
	FA	AYETTEVIL	LE, AR	72703			Phone no. (479)443	-00	54

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	IPORARY CA	ASH IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
MORGAN STANLEY				•	22	50.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A			22	50.
FORM 990-PF DIVIDEND	S AND INTER	REST FROM	SECUE	RITIES	STATEMENT	2
SOURCE	GROSS	S AMOUNT		TAL GAINS	COLUMN (A AMOUNT)
MORGAN STANLEY		25790.		0.	257	90.
TOTAL TO FM 990-PF, PART I, L	N 4	25790.		0.	257	90.
FORM 990-PF	LEGAI	, FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS			(C) ADJUSTED NET INCOM		
MCGREEVY JOHNSON WILLIAMS	50.	•	0.	5	50.	0.
TO FM 990-PF, PG 1, LN 16A =	50.	-	0.	5		0.
FORM 990-PF	ACCOUNT	ING FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTEI NET INCOM		
DON MEYER CPA PC	705	•	0.	70)5.	0.
TO FORM 990-PF, PG 1, LN 16B	705		0.	70)5.	0.

FORM 990-PF O	THER PROFES	SIONAL FE		STATEMENT	5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC	ST-	(C) ADJUSTED NET INCOM		
MORGAN STANLEY	7707.		0.	770	7.	0.
TO FORM 990-PF, PG 1, LN 16C =	7707.		0.	770	7.	0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC	ST-	(C) ADJUSTED NET INCOM		
REGISTRATION FEE MISCELLANEOUS PRIOR YR INCOME TAXES	25. 501. 2229.		0.	2 50 222		0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	2755.		0.	275	5.	0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	T
SECURITIES				1218239.	14681	15.
TOTAL TO FORM 990-PF, PART II	, LINE 10B			1218239.	14681	15.
FORM 990-PF	OTHER	ASSETS			STATEMENT	8
DESCRIPTION		NING OF X VALUE		OF YEAR OK VALUE	FAIR MARKE VALUE	T
CHANGE IN FMV OF SECURITIES		300263.		249876.		0.
TO FORM 990-PF, PART II, LINE	 : 15	300263.		249876.		0.

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

Application Is For Code	If you a	re filing for an Automatic 3-Month Extension, complet	e only Par	rt I and check this box				
Electronic filling (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (e) months for a corporative grouped to file Form 990-1), or an additional (not automatic) 3-month solarson of time. You can electronically file Form 8868 to require an extension of the Form 990-1), or an additional (not automatic) 3-month solarson of 1 file. The file of the	If you a	re filing for an Additional (Not Automatic) 3-Month Ext	ension, c	omplete only Part II (on page 2 of this	form).			
equared to file Form 990T, or an additional (not automatic) 3-month extension of time. You can electronically file Form 8888 to request an extens of time to file any of the forms lated in Part or Part II with the exception of Form 8870, Information Return for Transfers Associated Whit Craiting in the form with the part of Part II with the exception of Form 8870, Information Return for Transfers Associated Whit Craiting is www.wis.gov/efile and click on e-file for Charities & Nonprofits. Part I I Automatic 3-Month Extension of Time. Only submit original (no copies needed). **Corporation required to file Form 990T and requesting an automatic 6-month extension - check this box and complete Part I chip. With other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of the income tax returns. **Type or or in file by the file of the Port of the Port of the Port of the Port of time of the income tax returns. **Type or or or or or or or or or or or or or	o not co	mplete Part II unless you have already been granted a	n automat	ic 3-month extension on a previously file	ed Forn	n 8868.		
equared to file Form 990T, or an additional (not automatic) 3-month extension of time. You can electronically file Form 8888 to request an extens of time to file any of the forms lated in Part or Part II with the exception of Form 8870, Information Return for Transfers Associated Whit Craiting in the form with the part of Part II with the exception of Form 8870, Information Return for Transfers Associated Whit Craiting is www.wis.gov/efile and click on e-file for Charities & Nonprofits. Part I I Automatic 3-Month Extension of Time. Only submit original (no copies needed). **Corporation required to file Form 990T and requesting an automatic 6-month extension - check this box and complete Part I chip. With other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of the income tax returns. **Type or or in file by the file of the Port of the Port of the Port of the Port of time of the income tax returns. **Type or or or or or or or or or or or or or	lectronic	c filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of time to	file (6	months for a	corporation	
time to file any of the forms issted in Part to Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain research albertif Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, rest www.ins.gov/effice and click on e-filic for Charles & Montrolfits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). Corporation required to file Form 990 Tand requesting an automatic 6-month extension - check this box and complete and to file norms fax returns. Name of exempt originization With other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of file income tax returns. Name of exempt originization With the corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of file income tax returns. Name of exempt originization With the corporation of the second of time of the second of time of file income tax returns. Name of exempt originization With the corporation of time of time of time of time of time of time of time exempt originization of time of time exempt originization or suite no. If a P.O box, see instructions. PO BOX 579 Employer identification numbers of time of time of time of time or suite no. If a P.O box, see instructions. PO BOX 579 Entry time of time return that this application is for (file a separate application for each return) On Form 990-Time originization or suite no. If a P.O box, see instructions BERRYVILLE, AR 72614 Enter the Return code for the return that this application is for (file a separate application for each return) On Form 990-Time originization for each return) On Form 990-Time originization for each return for form 990-Time exempt originization for each return) On Form 990-Time originization for each return for form 990-Time exempt originization for each return) On Form 990-Time		-, -						
Part I Automatic 3-Month Extension of Time. Only submit original (see instructions). For more details on the electronic fling of this form, isst www are governor and original for copies needed). **Normatic 3-Month Extension of Time.** Only submit original (no copies needed). **Normatic 3-Month Extension of Time.** Only submit original (no copies needed). **Normatic 3-Month Extension of Time.** Only submit original (no copies needed). **Normatic 3-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only submit original (no copies needed). **Normatic 4-Month Extension of Time.** Only s	•	•		-		-		
Part Automatic 3-Month Extension of Time. Only submit orginal (no copies needed).		•	-					
Part I Automatic 3-Month Extension of Time. Only submit organal (no copies needed).		• •	-	,				
Corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part tonly				omit original (no copies needed)				
Varied Corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of the income tax refurms. Varied Corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of the income tax refurms. Varied Corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of the income tax refurms. Varied Corporations		*			olete			
Application Is For Form 990-E Form 990-E Form 990-E Form 990-F For	•				P .0.0			
Name of exempt organization MANA CHARITABLE FOUNDATION 36-4376140	VI other o	corporations (including 1120-C filers), partnerships, REM	ICs, and tr	rusts must use Form 7004 to request an	extens	sion of time	, —	
MANA CHARITABLE FOUNDATION MANA CHARITABLE FOUNDATION					Empl	over identifie	otion number	
MANA CHARITABLE FOUNDATION Number, street, and room or surfe no. If a P.O box, see instructions. PO BOX 579 City, town or post office, state, and ZIP code. For a foreign address, see instructions BERRYVILLE, AR 72614 Enter the Return code for the return that this application is for (file a separate application for each return) OApplication Return Application Return Application Return Application Return Boy Town 990-Town		Name of exempt organization				Employer Identification number		
Wumber, street, and room or suite no. If a P.O. box, see instructions. PO BOX 579	print	MANA CUARTMARIE ECINIDAMION				26 4276140		
PO BOX 579 City, town or post office, state, and ZIP code. For a foreign address, see instructions BERRYVILLE, AR 72614 Enter the Return code for the return that this application is for (file a separate application for each return) O Application Return Befor Code Is For Code Is For Code Form 990. Form 990. Code Form 990. Form 990. Code Form 990. Form 990. Code Form 990. Form 990. Form 990. Form 990. Form 990. Code Form 990. For	File by the	Notes that and are sent as the DO have an instructions				0-43/01	¥U	
City, town or post office, state, and ZIP code. For a foreign address, see instructions BERRYVILLE, AR 72614 Enter the Return code for the return that this application is for (file a separate application for each return) Operation Return Application February Is For Code Code Is For Code Code Is For Code Code Is For Code Code Is For Code Code Code Is For Code Code Code Is For Code Code Code Code Is For Code Code Code Code Code Is For Code	iling your	• · · · · · · · · · · · · · · · · · · ·	ee instruct	lions.				
Application Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Code Is For Sept Comportation) Form 990-BL 02 Form 1041-A Form 5227 Form 990-EZ 03 Form 4720 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870 JOHN WEAVER ■ The books are in the care of ▶ 2541 CR 452 − BERRYVILLE, AR 72614 Telephone No ▶ 870 − 423 − 3511 FAX No. ▶ ■ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check box ▶ ■ If it is for part of the group, check this box ▶ ■ If it is for part of the group, check this box ▶ ■ And attach a list with the names and EINs of all members the extension is for. AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for. ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X calendar year 2010 or ▶ X See instructions B X 3' ■ X		1	oreign add	ress, see instructions				
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S For Code Is For Code Is For Code Is For Company Company Composition Company	Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
SFOr Code IsFOr Code IsFOr Company Composition Code IsFOr Composition Code IsFOr Composition Code IsFOr Composition Code IsFOr Composition Code IsFOr Composition Code IsFOr Code IsFOR Code I	Applicati	ion	Beturn	Application			Return	
Form 990 BL							Code	
Form 990-BL Form 990-EC Form 990-EC Form 990-FF Odd Form 5227 Form 990-FF Odd Form 5227 Form 990-T (sec 401(a) or 408(a) trust) O5 Form 6069 Form 8870 JOHN WEAVER The books are in the care of ▶ 2541 CR 452 - BERRYVILLE, AR 72614 Telephone No ▶ 870 - 423 - 3511 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 Is for the organization's return for. X calendar year 2010 or X calen					ration)			
Form 990-EZ Form 990-FF Form 990-FF Form 990-T (sec 401(a) or 408(a) trust) JOHN WEAVER The books are in the care of ▶ 2541 CR 452 - BERRYVILLE, AR 72614 Telephone No ▶ 870 - 423 - 3511 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 I to file the exempt organization return for the organization named above. The extension is for the organization's return for. X calendar year 2010 or Tax year beginning If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made, Include any prior year overpayment allowed as a credit. Blance due. Subtract line 3b from line 3 include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.				1		07		
Form 990-PF Form 990-T (sec 401(a) or 408(a) trust) DOHN WEAVER The books are in the care of 2541 CR 452 - BERRYVILLE, AR 72614 Telephone No 870 - 423 - 3511 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach a list with the names and ElNs of all members the extension is for. If request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 It of file the exempt organization return for the organization named above. The extension is for the organization's return for. X calendar year 2010 or Tax year beginning If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made, include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.				†		09		
Form 990-T (sec 401(a) or 408(a) trust) DOHN WEAVER The books are in the care of ▶ 2541 CR 452 - BERRYVILLE, AR 72614 Telephone No ▶ 870 - 423 - 3511 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. If request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for. ▶ X calendar year 2010 or ▶ 1 the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.				<u> </u>	-			
The books are in the care of ▶ 2541 CR 452 - BERRYVILLE, AR 72614 Telephone No ▶ 870-423-3511 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011, to file the exempt organization return for the organization named above. The extension is for the organization's return for. ▶ ☑ calendar year 2010 or ▶ ☐ tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period 3a if this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions b if this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.				1				
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