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Form **990-PF**

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

OMB No 1545-0052

<u>a</u>			venue Service Nute. The foundation may i					
\approx	_		· · · · · · · · · · · · · · · · · · ·	27. 2010		DEC 31, 2010		
	G C	heck	call that apply X Initial return		ormer public charity	Final return		
~			L Amended return	Address chan	ge L	Name change		
MAV	Nan	ne of	f foundation			A Employer identification	number	
			ROSE FAMILY FOUNDATIO	N		64 640000		
oate			P20114008			61-6408392		
ಸಿ	Nun	nber a	and street (or P O box number if mail is not delivered to street	•		B Telephone number	1.0	
			C/O JPMORGAN CHASE BA	NK, NA; P.O.BO	X 3038	414-977-12	10	
ENVELOR STEMES	Crty	or to	own, state, and ZIP code			C If exemption application is p	<u> </u>	
y [3	L		MILWAUKEE, WI 53201	-		D 1. Foreign organizations	s, check here	
م	H_C	_	type of organization X Section 501(c)(3) ex			Foreign organizations me check here and attach co	imputation	
	<u></u>			Other taxable private founda		E If private foundation sta		
			arket value of all assets at end of year J Accounti	-	Accrual	under section 507(b)(1)	(A), check here	
	(tr		Part II, col. (c), line 16) 10 , 025 , 789 . (Part I, colu	her (specify)	hoore l	F If the foundation is in a 60-month termination		
	<u> </u>	ırt I				under section 507(b)(1)(B), check here		
	Pa	IFT E	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes	
		•	necessarily equal the amounts in column (a))	5,986,706.		N/A	(cash basis only)	
		2	Contributions, gifts, grants, etc., received Check from If the foundation is not required to attach Sch. B	3,300,700.		147 FL		
		3	Interest on savings and temporary				·····	
2011		3	cash investments Dividends and interest from securities					
7		* 52	Gross rents					
∂		i	Net rental income or (loss)					
e d		آ ۾ ا	• /					
}	Revenue	l "h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all					
SCANNED WAY		7	assets on line 6a Capital gain net income (from Part IV, line 2)		0.			
Ω		8	Net short-term capital gain					
		9	Income modifications					
Ž		1 -	Gross sales less returns and allowances					
S S		١.	Less Cost of goods sold					
D		1	Gross profit or (loss)					
		11	Other income			,	,''	
		12	Total. Add lines 1 through 11	5,986,706.	0.			
		13	Compensation of officers, directors, trustees, etc	0.	0.		0.	
		14	Other employee salaries and wages					
		15	Pension plans, employee benefits					
	Ses	16a	Legal fees RECEIVED	_				
	ben							
	Expens	C	Other professional fees	•				
	ive	17	Other protessional fees Interest MAY 1 7 2011					
	Administrative	18	Taxes		II		,	
	nis	19	Depreciation and @@@EN, UT					
	Ę	20	Occupancy					
	Ψþ	21	Travel, conferences, and meetings				<u> </u>	
	Q I	22	Printing and publications	- · · · ·				
	ing	23	Other expenses					
	Operating	24	Total operating and administrative	_	_			
	ĕ		expenses. Add lines 13 through 23	0.	0.		0.	
		25	Contributions, gifts, grants paid	0.			0.	
		26	Total expenses and disbursements.	_	^			
			Add lines 24 and 25	0.	0.		0.	
			Subtract line 26 from line 12 ⁻	E 000 700				
			Excess of revenue over expenses and disbursements	5,986,706.				
	ļ		Net investment income (if negative, enter -0-)		0.	NT / 7\		
	02350		Adjusted net income (if negative, enter -0-)			N/A	5 000 DE (0040)	

12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

KODD I WILLI	LOCKDALION
P20114008	

Part Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	*
Part II Data Fice Sheet's column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments			
3 Accounts receivable ►			
Less allowance for doubtful accounts			
4 Pledges receivable			,
Less allowance for doubtful accounts			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
7 Other notes and loans receivable			
Less allowance for doubtful accounts			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges			<u> </u>
10a Investments - U S and state government obligations			
b Investments - corporate stock STMT 1	0.	5,986,706.	10,025,789
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis	· · · · · · · · · · · · · · · · · · ·	,	
Less. accumulated depreciation		Í	
12 Investments - mortgage loans	-		,
13 Investments - other			
14 Land, buildings, and equipment basis	w -w -w - v		
Less accumulated depreciation		1	
15 Other assets (describe ►	-		
16 Total assets (to be completed by all filers)	0.	5,986,706.	10,025,789
17 Accounts payable and accrued expenses			
18 Grants payable	<u> </u>		
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
21 Mortgages and other notes payable			
22 Other liabilities (describe		· · · · · ·	
The strict maximizes (describe P			
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.		_	
27 Capital stock, trust principal, or current funds	0.	5,986,706.	
28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	5,986,706.	
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	0.	0.	
30 Total net assets or fund balances	0.	5,986,706.	
31 Total liabilities and net assets/fund balances	0.	5,986,706.	
		<u> </u>	
Part III Analysis of Changes in Net Assets or Fund Ba	alances		
Total net assets or fund balances at beginning of year - Part II, column (a), line 3	10		
Total net assets or fund balances at beginning of year - Part II, column (a), line 3 (must agree with end-of-year figure reported on prior year's return)		1	0
Enter amount from Part I, line 27a		2	5,986,706
Other increases not included in line 2 (itemize)		3	0
Add lines 1, 2, and 3		4	5,986,706
Add lines 1, 2, and 3 Decreases not included in line 2 (itemize)		5	5,986,706 0
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30	6	5,986,706

023511

61-6408392

t d e (e) Gross sales price a b Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Complete only for assets showing ga Value of 12/31/69 a b c d e Capital gain net income or (net capital gain, also enter in Part I, line 8, columb [1] (loss), enter -0- in Part I, line 8	(f) Depreciation allowed (or allowable) sin in column (h) and owned by to (j) Adjusted basis as of 12/31/69 If gain, also enter if (loss), enter -0-	he foundation (k) Ex over	on 12/31/69 cess of col. (i) col. (j), if any		- Dona	(1)	(h) Gain or (loss) (e) plus (f) minus (d) Gains (Col. (h) gain (k), but not less than Losses (from col. (f)	minus
b NONE c d e (e) Gross sales price a b c d e Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital gain, also enter in Part I, line 8, coluif (loss), enter -0- in Part I, line 8	(f) Depreciation allowed (or allowable) sin in column (h) and owned by to (j) Adjusted basis as of 12/31/69 If gain, also enter if (loss), enter -0-	he foundation (k) Ex over	on 12/31/69 cess of col. (I)				(e) plus (f) minus (e) Gains (Col (h) gain (k), but not less than	minus
d e (e) Gross sales price a b c d e Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital sain or (loss) as if gain, also enter in Part I, line 8, coluif (loss), enter -0- in Part I, line 8	(or allowable) In in column (h) and owned by t (j) Adjusted basis as of 12/31/69 If gain, also enter If (loss), enter -0-	he foundation (k) Ex over	on 12/31/69 cess of col. (I)				(e) plus (f) minus (e) Gains (Col (h) gain (k), but not less than	minus
e (e) Gross sales price a b c d e Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital sales) Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, columb (loss), enter -0- in Part I, line 8	(or allowable) In in column (h) and owned by t (j) Adjusted basis as of 12/31/69 If gain, also enter If (loss), enter -0-	he foundation (k) Ex over	on 12/31/69 cess of col. (I)				(e) plus (f) minus (e) Gains (Col (h) gain (k), but not less than	minus
(e) Gross sales price a b c d e Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital gain, also enter in Part I, line 8, coluif (loss), enter -0- in Part I, line 8	(or allowable) In in column (h) and owned by t (j) Adjusted basis as of 12/31/69 If gain, also enter If (loss), enter -0-	he foundation (k) Ex over	on 12/31/69 cess of col. (I)				(e) plus (f) minus (e) Gains (Col (h) gain (k), but not less than	minus
a b c d e Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital gain, also enter in Part I, line 8, columb (loss), enter -0- in Part I, line 8	(or allowable) In in column (h) and owned by t (j) Adjusted basis as of 12/31/69 If gain, also enter If (loss), enter -0-	he foundation (k) Ex over	on 12/31/69 cess of col. (I)				(e) plus (f) minus (e) Gains (Col (h) gain (k), but not less than	minus
b c d e Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital and short-term capital gain or (loss) as if gain, also enter in Part I, line 8, column (loss), enter -0- in Part I, line 8	(j) Adjusted basis as of 12/31/69 If gain, also enter If (loss), enter -0-	(k) Ex over	cess of col. (I)				(k), but not less than	10 (-0- r
c d e Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital short-term capital gain or (loss) as if gain, also enter in Part I, line 8, coluif (loss), enter -0- in Part I, line 8	(j) Adjusted basis as of 12/31/69 If gain, also enter If (loss), enter -0-	(k) Ex over	cess of col. (I)				(k), but not less than	10 (-0- r
d e Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital short-term capital gain or (loss) as if gain, also enter in Part I, line 8, colulif (loss), enter -0- in Part I, line 8	(j) Adjusted basis as of 12/31/69 If gain, also enter If (loss), enter -0-	(k) Ex over	cess of col. (I)				(k), but not less than	10 (-0- r
Complete only for assets showing ga (i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital 3 Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, colulif (loss), enter -0- in Part I, line 8	(j) Adjusted basis as of 12/31/69 If gain, also enter If (loss), enter -0-	(k) Ex over	cess of col. (I)				(k), but not less than	10 (-0- r
(i) F M V as of 12/31/69 a b c d e Capital gain net income or (net capital Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, coluit (loss), enter -0- in Part I, line 8	(j) Adjusted basis as of 12/31/69 If gain, also enter If (loss), enter -0-	(k) Ex over	cess of col. (I)				(k), but not less than	10-) or
a b c d e Capital gain net income or (net capital Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colu If (loss), enter -0- in Part I, line 8	as of 12/31/69 If gain, also enter If (loss), enter -0-	over				col	(k), but not less than Losses (from col. (f	ו -0-) or ((ר
t c d e Capital gain net income or (net capital Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colu If (loss), enter -0- in Part I, line 8	•	ın Part I, line					•	
b c d e Capital gain net income or (net capital Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, colu if (loss), enter -0- in Part I, line 8	•	ın Part I, line						
e Capital gain net income or (net capital Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, colu if (loss), enter -0- in Part I, line 8	•	ın Part I, line						
2 Capital gain net income or (net capital 3 Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, colu if (loss), enter -0- in Part I, line 8	•	ın Part I, line						
 Capital gain net income or (net capital Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, colulif (loss), enter -0- in Part I, line 8 	•	ın Part I, line						
Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colu If (loss), enter -0- in Part I, line 8	•	ın Part I, line						
If gain, also enter in Part I, line 8, colu If (loss), enter -0- in Part I, line 8	•	· in Part I. line	7 7	}	2			
If (loss), enter -0- in Part I, line 8								
	mn (c)			 	,			
Part V Qualification Unde	er Section 4940(e) for	Reduced	Tay on Not	Llov	oetn	ent Inc	ome	
If section 4940(d)(2) applies, leave this pa Was the foundation liable for the section 4 If "Yes," the foundation does not qualify ui 1 Enter the appropriate amount in each	4942 tax on the distributable am	mplete this pa	rt					Yes N
(a)	(b)	ictions before	making any citin	(c)				(d)
Base periód years Calendar year (or tax year beginning in		ributions	Net value of no			use assets	Distrib (col (b) divi	utión ratio ided by col (c))
2009					_			-
2008							_	
2007 2006			<u>.</u>					·
2005								
2000								
2 Total of line 1, column (d)							2	
3 Average distribution ratio for the 5-year the foundation has been in existence if		on line 2 by 5,	or by the number	r of ye	ars		3	
	•							
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5					4			
5 Multiply line 4 by line 3							5	
6 Enter 1% of net investment income (1	% of Part I, line 27b)		-				6	
7 Add lines 5 and 6							7	
8 Enter qualifying distributions from Par	R Enter qualifying distributions from Part XII line 4							
If line 8 is equal to or greater than line See the Part VI instructions	rt XII, line 4	_					8	

Part V		0(a), 4940(b), 4940(e), or 4	_	instru		1s)
	pt operating foundations described in section 4940(d)(2), check here and e					
	of ruling or determination letter (attach copy of letter if net	4				
	estic foundations that meet the section 4940(e) requirements in Port V, check here		f 1 1			0.
of Part I, line 27b						
	her 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 Others enter -0-)					
	3 Add lines 1 and 2					
	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					
	5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					
	ts/Payments				, ,,, ,	
	estimated tax payments and 2009 overpayment credited to 2010	6a				
	opt foreign organizations - tax withheld at source	6b				
	aid with application for extension of time to file (Form 8868)	6c	1			
	up withholding erroneously withheld	6d	1			
	credits and payments Add lines 6a through 6d		7			0.
	any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached	8			
	lue. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			0.
	payment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			
	the amount of line 10 to be Credited to 2011 estimated tax	Refunded ▶	11			
	I-A Statements Regarding Activities					
1a Durir	g the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate or intervene	ın .		Yes	No
any p	olitical campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?						X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or						
distr	buted by the foundation in connection with the activities.					
c Did the foundation file Form 1120-POL for this year?						X
d Enter	the amount (if any) of tax on political expenditures (section 4955) imposed during the	e year				
(1)	On the foundation 🕨 \$ O . (2) On foundation managers	s ► \$0.	_	:		
e Enter	the reimbursement (if any) paid by the foundation during the year for political expend	liture tax imposed on foundation				
mana	managers ► \$0 .					
2 Has t	he foundation engaged in any activities that have not previously been reported to the I	RS?		2	,	<u> </u>
If "Yo	es," attach a detailed description of the activities			ļ		
3 Hast	he foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of incorporation,	or			
bylav	is, or other similar instruments? If "Yes," attach a conformed copy of the chang	res		3		<u> X</u>
4a Did ti	ne foundation have unrelated business gross income of \$1,000 or more during the yea	ar?	1-	4a		X
b If "Ye	s," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was	there a liquidation, termination, dissolution, or substantial contraction during the year	?		5		X
If "Yo	es," attach the statement required by General Instruction T.					
6 Are ti	ne requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	either				
	language in the governing instrument, or			ŀ		
	state legislation that effectively amends the governing instrument so that no mandator	ry directions that conflict with the stat	e law			.,
	nain in the governing instrument?			6	.,	X
	ne foundation have at least \$5,000 in assets at any time during the year?			7	Х	ļ,
	es," complete Part II, col. (c), and Part XV			ſ		
8a Enter TX	the states to which the foundation reports or with which it is registered (see instruction	ons) ►	 -	-		
	answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or designate)		_		}
	ch state as required by General Instruction G? If "No," attach explanation			8b	Х	
	foundation claiming status as a private operating foundation within the meaning of se	ection 4942(j)(3) or 4942(j)(5) for cal	endar			
year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV						X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses						X
Form 9						2010)

Part VII-A Statements Regarding Activities (continued)					
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of					
section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		_X_		
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	i				
August 17, 2008?	12		X		
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х			
Website address ► N/A					
14 The books are in care of ▶ JPMORGAN CHASE BANK, N.A. Telephone no ▶817-					
Located at ► 420 THROCKMORTON FL 3, FORT WORTH, TX ZIP+4 ►	76102	· .			
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	N	I/A			
16 At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,	ı	Yes	No		
securities, or other financial account in a foreign country?	16	L	X		
See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of	:				
the foreign country					
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required		150	•		
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 X No.	'				
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X N					
a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N					
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?					
(5) Transfer any income or assets to a disqualified person (or make any of either available	'				
for the benefit or use of a disqualified person)?	,				
(6) Agree to pay money or property to a government official? (Exception. Check "No"	'				
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)	,				
b 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 22 of the instructions)? N/A	. 1b	1			
Organizations relying on a current notice regarding disaster assistance check here	ו ד				
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?	10		Х		
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation					
defined in section 4942(j)(3) or 4942(j)(5))					
a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning					
before 2010? Yes X N	,				
If "Yes," list the years ▶,,,					
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	į				
statement - see instructions) N/A	2b	ļ			
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	ŀ				
>			-		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			-		
during the year?	•		ŀ		
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 if the foundation had excess business holdings in 2010.) N/A	۱				
· · · · · · · · · · · · · · · · · · ·			X		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but ofter December 21, 1960) that could recognize its charitable purpose that	4a	-			
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	a.		х		
had not been removed from jeopardy before the first day of the tax year beginning in 2010?	<u> 4b</u> Form 99 0)-PF /			

Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	lequired (continu	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?					
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ctly,	į	- 1	
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo				
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 unc		n Regulations	27 / 2		
section 53 4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check here					
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained					
expenditure responsibility for the grant?		/A Ye	s L No		
If "Yes," attach the statement required by Regulations section 53 4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		s X No		
a personal benefit contract?			S LA NO	6.	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denetit contract?		-	6b	 ^
If "Yes" to 6b, file Form 8870	holtor transportion?		s X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s b if "Yes," did the foundation receive any proceeds or have any net income attribution.		18	N/A	7b	
Total		nagere Highly		70	
Part VIII Paid Employees, and Contractors	ees, i oundation wa	nagers, mgm,	•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				-
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acco	unt, other owances
JPMORGAN CHASE BANK, N.A.	TRUSTEE	•			
P.O. BOX 3038					
MILWAUKEE, WI 53201	2.00	0.	0.	•	0.
	TRUSTEE & COM	MITTEE ME	MBER		
1110 POST OAK PL	ı				
WESTLAKE, TX 76262	2.00	0.	0.	•	0.
	COMMITTEE MEM	BER			
1110 POST OAK PL		_	_		_
WESTLAKE, TX 76262	2.00	0.	0.	•	<u> </u>

				1	
2 Compensation of five highest-paid employees (other than those inc	Inded on line 4) If none	anter NNONE II			
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(0)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	acco	unt, other
NONE	devoted to position		compensation	and	owances
NONE					
				+	
				†	
		İ			
				1	
Total number of other employees paid over \$50,000			. •		0
		•	Form	000 0	PF (2010)

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "No	ONE."	
(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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced	information such as the	Expenses
1 N/A	,, 010	
I M/ A	-	
		0.
2		
3		_ ,
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
1 <u>N/A</u>		
		•
		0.
2		
All other program-related investments. See instructions		
3 N/A		
<u></u>		
		0.
Total Add lines 1 through 3	>	0.

023561

P	art X Minimum Investment Return (All domestic foundations m	nust comple	te this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc , purpos	 ses		
а	Average monthly fair market value of accurities		1a	10,025,789.	
b	Average of monthly cash balances			1b	
C	Fair market value of all other assets .			10	
d	Total (add lines 1a, b, and c)			1d	10,025,789.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	10,025,789.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,	see instruction	ons)	4	150,387.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on	Part V, line 4	<u> </u>	5	9,875,402.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHO	ORT TAX	X PERIOD	6	6,765.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part)		te operating foundations ar	id certain	
1	Minimum investment return from Part X, line 6			1	6,765.
2a	Tax on investment income for 2010 from Part VI, line 5	2a			
b	Income tax for 2010 (This does not include the tax from Part VI)	2b			
C	Add lines 2a and 2b			2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	6,765.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	6,765.
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	6,765.
P	art XII Qualifying Distributions (see instructions)	-			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	ooses			
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26			1a	0.
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 charitab	le, etc , purpo	oses	2	
3	Amounts set aside for specific charitable projects that satisfy the				
а	Surtability 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, an	nd Part XIII, in	ne 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigations.				
	income Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years w	hen calculatir	ng whether the foundation (nualifies fo	r the section

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,	OUIPUS	Tours prior to 2005		2010
line 7				6,765.
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	. '''' '''' ''''' ''''''		H. H. H. H. H. H.	
a From 2005				
b From 2006				
€ From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4 ► \$ 0.				
a Applied to 2009, but not more than line 2a			0.]
b Applied to undistributed income of prior		1111. 1-0	· -1	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	, , , ,,, ,,,, ,,,,, ,,,,,,,,,,,,,,,,,	-7	144 - HH	
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount			, ' <u>'</u>	0.
e Remaining amount distributed out of corpus	0.	······		
5 Excess distributions carryover applied to 2010	0.	111 [11-7 - 11-7 1	/	0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:	-			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2009 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must	į			
be distributed in 2011				6,765.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				ł
Subtract lines 7 and 8 from line 6a	0.			
IO Analysis of line 9				
a Excess from 2006				
b Excess from 2007				1
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				1
				Form 000 DE (2010)

Part XIV Private Operating F	oundations (see Ins	tructions and Part VI	l-A, question 9)	N/A	
1 a If the foundation has received a ruling of	determination letter that	t is a private operating			
foundation, and the ruling is effective for			. •		
h Check box to indicate whether the found			n section	4942(j)(3) or 494	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	-	Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a		-			
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				· ·	
used directly for active conduct of			}		
exempt activities					
•					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		•		<u> </u>	
alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets			 -		
(2) Value of assets qualifying under section 4942(1)(3)(B)(I)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					· · · · · · · · · · · · · · · · · · ·
an exempt organization					
(4) Gross investment income	-				
Part XV Supplementary Info	rmation (Complet	e this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t			ii iiio iodiidaaaa	1100 40,000 01 1110	
1 Information Regarding Foundation					
a List any managers of the foundation wh	-	han 2% of the total con	ributions received by the	foundation before the clos	a of any tay
year (but only if they have contributed in			indutions received by the	iodilodion belote the clos	c or any tax
NONE	.,,,,				
b List any managers of the foundation wh	n own 10% or more of the	stock of a corneration	(or an equally large portio	n of the ownership of a na	irtnerehin or
other entity) of which the foundation has			(or an equally large portio	ii oi tile ownersinp of a pa	inthership of
NONE	3				
	on Cront Cift Loon	Cabalambia ata D			
2 Information Regarding Contribution				at accort upoplicated requi	anta for funda. If
Check here X if the foundation of the foundation makes gifts, grants, etc.					
	•			implete items za, b, c, and	· · · · · · · · · · · · · · · · · · ·
a The name, address, and telephone num	per of the person to whon	i applications should be	audressed		
b The form in which applications should b	e submitted and informati	on and materials they s	nould include		
c Any submission deadlines					
• Any Submission Obsumes					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, chantable fields	kinds of institutions, or o	ther factors	
,		,	· • • •		

Part XV Supplementary Information	1 (continued)			
3 Grants and Contributions Paid During the	fear or Approved for Future F	Payment		_
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
NONE				
		•		
Total			▶ 3a	0.
b Approved for future payment				
NONE				
Total	<u> </u>		▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

			16/		(e)
1 Program service revenue	Business code	(D) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	_				
b	_				
c					<u></u>
d					
8					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash			1		
investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
B Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Other revenue					
a	_				
	_		<u> </u>		
b					
b					
b					
b c		0.		0.	
b c d e Subtotal Add columns (b), (d), and (e)		0.		'	0.
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)		0.	•	'	
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations)			•	13	
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities	to the Acc	omplishment of E	xemp	13 _	0.
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.
b c d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which inc	to the Acc	omplishment of E	xemp	13 _	0.

Part XVI	Information Re Exempt Organ		o and Transactions a	and Relationships With Nor	ncharitable	•	
1 Did the			owing with any other organization	on described in section 501(c) of		Yes	No
	-		n 527, relating to political organ				
		ation to a noncharitable exemp			-		
(1) Ca:		·	v		. 1a(1)		Х
(2) Oth	ner assets				1a(2)		X
b Other tr	ansactions.						
(1) Sal	es of assets to a noncharita	ble exempt organization	•		1b(1)		X
(2) Pu	rchases of assets from a no	ncharitable exempt organizatio	n		1b(2)		X
(3) Re	ntal of facilities, equipment,	or other assets			1b(3)		X
(4) Re	mbursement arrangements				1b(4)		X
(5) Lo	ans or Ioan guarantees				1b(5)		X
(6) Pe	formance of services or me	embership or fundraising solici	tations		1b(6)		X
-		alling lists, other assets, or paid			10_	L	X
or servi	ces given by the reporting f	oundation. If the foundation re-	cerved less than fair market valu	ways show the fair market value of the g ie in any transaction or sharing arrange		ets,	
column	• • • • • • • • • • • • • • • • • • • •	other assets, or services receiv					
(a) Line no	(b) Amount involved		able exempt organization	(d) Description of transfers, transaction	ns, and sharing ar	rangeme	ents
		N/	A				
		<u> </u>			·		
							
			<u> </u>				
							
	• • • • • • • • • • • • • • • • • • • •						
	-						
	· · ·		·				
						-	
							
					 		
							
ın secti		r than section 501(c)(3)) or in	one or more tax-exempt organi section 527?	zations described	Yes	X] No
	(a) Name of org	ganization	(b) Type of organization	(c) Description of re	lationship		
	N/A						
					 		
					 -		
			is based on all information of which	d statements, and to the best of my knowledge preparer has any knowledge AUTHORIZED			ct,
	Signature or officer of the	of received	Date	Title			
	Print/Type preparer's in	UTHORIZED OFFI	C.Fig.Pature	Date Check f	PTIN	-	
				self- employed			
Paid				<u> </u>			
Prepare	Firm's name			Firm's EIN ▶			
Use Onl	y						
	Firm's address			Phone no	<u> </u>		
					Form 990	LPF	/2010\

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

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Name of the organization **Employer identification number** ROSE FAMILY FOUNDATION P20114008 61-6408392 Organization type (check one). Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization ROSE FAMILY FOUNDATION

P20114008

61-6408392

Employer identification number

Part !	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MATTHEW AND LISA ROSE 1110 POST OAK PL WESTLAKE, TX 76262	\$\$\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$\$	Person Payroll Complete Part II if there is a noncash contribution.

1 of 1 of Part II

Name of organization
ROSE FAMILY FOUNDATION
P20114008

Employer identification number

61-6408392

(a) (b) (c) FMV (or estimate) (see instructions)			Noncash Property (see instructions)	art ii
BERSHIRE HATHAWAY INC DEL CL B 355 SHARES (a) No. from Part I (b) Description of noncash property given (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) No. from Part I (e) No. from Part I (f) Description of noncash property given (g) Description of noncash property given	(d) Date received	FMV (or estimate)		No. from
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No. (b) FMV (or estimate) (see instructions) (a) No. (b) Tom Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (for estimate)		\$		
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No. (b) FMV (or estimate) (see instructions)	-	\$		
	(d) Date received	FMV (or estimate)		No. rom
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of Part III

Name of organization

ROSE FAMILY FOUNDATION P20114008

61-6408392

Employer identification number

Part III	Exclusively religious, charitable, etc., inc	columns (a) through (e) and the us, charitable, etc., contributions		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-		(e) Transfer of gif	ift	
-	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gif	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-	Transferee's name, address, and	(e) Transfer of gif	of gift Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee			

FORM 990-PF CORPORATE STOCK		STATEMENT 1
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
BERKSHIRE HATHAWAY INC CL A - 83 SHS BERKSHIRE HATHAWAY INC DEL CL B - 355 SHS	5,959,406. 27,300.	9,997,350. 28,439.
TOTAL TO FORM 990-PF, PART II, LINE 10B	5,986,706.	10,025,789.

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