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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**

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Name of foundation AMAZA FOUNDATION CHARITABLE TRUST 65-6004239	G Check			·		n
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Control town, state, and ZP code NAPLES FL 34104	, vaniber a	*	2001030)			. 3 3
NAPLES, FL 34104 Check type of organization:	City or to			102		
## Check type of organization:	City of it					
Section 4947(a)(1) nonexempt charable trust	L Chack		remnt newate foundation		2. Foreign organizations m	eeting the 85% test,
Fair market value of all assets at end of year (from Part II, col. (c), inn 6) S 579, 082, [Part I] — Other (specify) Analysis of Revenue and Expenses S79, 082, [Part I] — Other (specify) Analysis of Revenue and Expenses Occasional analysis of Revenue and Expenses (a) Revenue and (b) Net swestment income (b) Adjusted net income (c) Adjusted net income (d) Decurrement or decision 507(b)(1)(B), check here be on cash basis.) I Contributions, grits, grants, etc., received 2 Occasional Signature of the state of th				tion		
Contributions of the contribution of the co					E If private foundation sta	atus was terminated
S 579, 0.82 (Part I. column (d) must be on cash basis.) Part II Analysis of Revenue and Expenses (the local of amounts in columns (b), (b), and (c) may not increase in recomment (c). Adustion in column (a). Increase in recomment (c). Adustion recommend (c). Adustion recomment (c). Adustion recommend (c). Adustio		· I ——	-	L21 Accidal	1 ' ' ' '	
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Table 1 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	11	Other income				
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b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	27	Subtract line 26 from line 12:	400.000			
c Adjusted net income (if negative, enter -0-)		•	-122,070.	45 444		
	1			17,430		
023501	023501	Adjusted net income (if negative, enter -0-)	<u> </u>		<u> </u>	Form 990-PE (2010)

101114	90-PF (2010) C/O FALCON CAPITAL	Beginning of year	***	5004239 Page 2
Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	End of (b) Book Value	(c) Fair Market Value
1		366,869.	145,949.	145,949.
- 1	Cash - non-interest-bearing	300,803.	145,343.	143,343.
- 1	Savings and temporary cash investments Accounts receivable			
"	Less: allowance for doubtful accounts			
1	Pledges receivable			
"	Less; allowance for doubtful accounts			
5				
6				
"	disqualified persons			
1 7				
'	Less; allowance for doubtful accounts			
g 8				
Assets	Prepaid expenses and deferred charges			
¥ 10	a Investments - U.S. and state government obligations		*	
	b Investments - corporate stock STMT 2	458,150.	458,150.	433,133.
- 1	c Investments - corporate bonds	250/250	130/1301	100/1001
	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			•.
12	Investments - mortgage loans			
13				
14	Land, buildings, and equipment; basis			
	Less accumulated depreciation			
15	Other assets (describe ►)			
16	Total assets (to be completed by all filers)	825,019.	604,099.	579,082.
17	Accounts payable and accrued expenses			
18	Grants payable			
<u>s</u> 19	F			
₹ 20	Loans from officers, directors, trustees, and other disqualified persons			
	Mortgages and other notes payable			
- 22	Other liabilities (describe)			
		0	0	
- 23	Total liabilities (add lines 17 through 22)	0.	0 •	
	Foundations that follow SFAS 117, check here			
8	and complete lines 24 through 26 and lines 30 and 31 Unrestricted			
24 25 25	·			
Ba 26	· · · · · · · · · · · · · · · · · · ·			
"וְפַּ	Foundations that do not follow SFAS 117, check here			
Fund Balances	and complete lines 27 through 31.			
اة ا	· · · · · · · · · · · · · · · · · · ·	0.	0.	
Net Assets	_	0.	0.	
SSA 29		825,019.	604,099.	
36 SE	F	825,019.	604,099.	
-				
3	Total liabilities and net assets/fund balances	825,019.	604,099.	
	t III Analysis of Changes in Net Assets or Fund Ba			

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	825,019.
2	Enter amount from Part I, line 27a	2	-122,070.
3	Other increases not included in line 2 (itemize)	3	_0.
4	Add lines 1, 2, and 3	4	702,949.
5	Decreases not included in line 2 (itemize) ► ADJUSTMENT TO FUND BALANCE	5	98,850.
<u>6</u>	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	604,099.

AMAZA FOUNDATION CHARITABLE TRUST 65-6004239 Form 990-PF (2010) C/O FALCON CAPITAL Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mo., day, yr.) 1a NONE b C d (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale b C d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any b d е lf gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see instructions before making any entries. Distribution ratio (col. (b) divided by col. (c)) (a) Base period years Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) Λ. .000000

	2009	U.	U•		• 000000
	2008	123,439.	849,278.		.145346
	2007	140,763.	986,771.		.142650
	2006	92,500.	1,038,240.		.089093
_	2005	89,439.	1,091,119.		.081970
2	Total of line 1, column (d)			2	.459059
3	Average distribution ratio for the 5-year bathe foundation has been in existence if less	•	, or by the number of years	3_	.091812
4	Enter the net value of noncharitable-use as	sets for 2010 from Part X, line 5		4	625,897.
5	Multiply line 4 by line 3	5	57,465.		
6	Enter 1% of net investment income (1% o	6_	174.		
7	Add lines 5 and 6	7_	57,639.		
8	Enter qualifying distributions from Part XII	, line 4		8	139,500.

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.

AMAZA FOUNDATION CHARITABLE TRUST

	1990-PF (2010) C/O FALCON CAPITAL		<u>6004</u> 2			age 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see in	stru	ction	is)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1			1	<u>74.</u>
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			1	74.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5			1	74.
6	Credits/Payments:					
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 500.					
	Exempt foreign organizations - tax withheld at source 6b	1				
	Tax paid with application for extension of time to file (Form 8868) 6c	1 !				
	Backup withholding erroneously withheld 6d -	1	i			
	Total credits and payments. Add lines 6a through 6d	1 ,			5	00.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				•••
_			-			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			3	26.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2011 estimated tax 326. Refunded	10				0.
	Enter the amount of line 10 to be: Credited to 2011 estimated tax Art VII-A Statements Regarding Activities	11				<u> </u>
				T	Yes	No
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervendence and attempt to influence any national, state, or local legislation or did it participate or intervendence and attempt to influence any national, state, or local legislation or did it participate or intervendence and attempt to influence any national, state, or local legislation or did it participate or intervendence and intervendence an	; 111	-	4.	103	X
	any political campaign?		}	1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		}	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or				
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?		}	1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .	<u>-</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		Į.	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		ļ	4a		_X_
b	olf "Yes," has it filed a tax return on Form 990-T for this year?	N	[/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		1	5		<u> </u>
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	te law				
	remain in the governing instrument?			6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	İ
	If "Yes," complete Part II, col (c), and Part XV.			-		
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
-	FL					
1	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					1
•	of each state as required by General Instruction G? If "No," attach explanation			8b	х	
9		lendar	İ			
,	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV		ŀ	9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		ŀ	10		X
-10	bits and persons severing additional deministrators during the tast four in test, attach a schedule isology their mailes and addresses			· v		

				•
	AMAZA FOUNDATION CHARITABLE TRUST			
orm	1990-PF (2010) C/O FALCON CAPITAL 65-600	1239		Page 5
	art VII-A Statements Regarding Activities (continued)			
	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			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address NONE			
14	The books are in care of ▶ CHAD OTT Telephone no. ▶ 239-4			
	Located at ► 555 ADMIRALITY PARADE WEST, NAPLES, FL ZIP+4 ►3	<u> 1102</u>		
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	/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,	,	Yes	l
	securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		12.0	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	a During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		-	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		İ	
	(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)?		ĺ	
	(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		<u> </u>	
	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)?	1b	 	-
	Organizations relying on a current notice regarding disaster assistance check here			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2010?	1c	<u> </u>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		1	
	defined in section 4942(j)(3) or 4942(j)(5)):		1	
	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 No			
	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	- 1	1	1

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.)

Yes X No

N/A

Form 4720, to determine if the foundation had excess business holdings in 2010.)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

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X

3b

4a

statement - see instructions.)

during the year?

AMAZA FOUNDATION CHARITABLE TRUST Form 990-RF (2010) C/O FALCON CAPITAL 65-6004239 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (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); or to carry on, directly or indirectly, any voter registration drive? Yes X No Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A5b 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 LL Yes 🔲 No expenditure responsibility for the grant? N/AIf "Yes," attach the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b Х If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid. (a) Name and address allowances enter'-0-LUCILLE W. DRACKETT TRUSTEE/DIRECTOR 555 ADMIRALITY PARADE WEST NAPLES, FL 34102 0 0 0. 0.00 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation allowances NONE

Total number of other employees paid over \$50,000

AMAZA FOUNDATION CHARITABLE TRUST

Form 990-PF (2010) C/O FALCON CAPITAL	65-6	004 <u>23</u> 9 Page 7
Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, e	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
——————————————————————————————————————	i	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant s number of organizations and other beneficiaries served, conferences convened, research papers 1 N/A	statistical information such as the produced, etc.	Expenses
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	ar an lines 1 and 0	Amount
1 N/A	ar on lines 1 and 2.	Amount
2		
All other program-related investments. See instructions.		

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Total. Add lines 1 through 3

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P	Part X Minimum Investment Return (All domestic foundation	ons must complete t	his part Foreign four	idations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out cha	iritable, etc., purposes;			
	Average monthly fair market value of securities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1a	428,462.
	Average of monthly cash balances			1b	206,966.
	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	635,428.
	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	<u> </u>
3	Subtract line 2 from line 1d			3	635,428.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater am	nount, see instructions)	4	9,531.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here a	ınd on Part V, line 4		5	625,897.
6	Minimum investment return. Enter 5% of line 5			6	31,295.
P	Part XI Distributable Amount (see instructions) (Section 4942(j) foreign organizations check here and do not complete this		perating foundations an	d certain	
1	Minimum investment return from Part X, line 6			1	31,295.
2a		2a]	174.		
b	Income tax for 2010. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	174.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	31,121.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	31,121.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and or	n Part XIII, line 1		7	31,121.
P	Part XII Qualifying Distributions (see instructions)			T1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc	., purposes:			120 500
а	1 , , , , , , , , , , , , , , , , , , ,			1a	139,500.
þ				1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out cl	haritable, etc., purpose	es	2	
3	Amounts set aside for specific charitable projects that satisfy the:			_	
а	, ,			3a	
b				3b	120 500
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, lin		4	4	139,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on ne	et investment		_	4 17 4
	income. Enter 1% of Part I, line 27b	5	174. 139,326.		
6	Adjusted qualifying distributions Subtract line 5 from line 4		6		
	Note The amount on line 6 will be used in Part V, column (b), in subsequent y 4940(e) reduction of tax in those years.	ears when calculating	whether the foundation	qualifies f	for the section

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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,	00.600	100.0 prior to 2000	2000	
line 7				31,121.
2 Undistributed income, if any, as of the end of 2010				<u> </u>
a Enter amount for 2009 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 35,401.				
b From 2006 92,500.				
c From 2007 141,200.				
d From 2008 123,800.				
e From 2009				
f Total of lines 3a through e	392,901.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 139,500.			_	
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	120 500	•		
(Liection required - See mondomons)	139,500.			
d Applied to 2010 distributable amount				0.
e Remaining amount distributed out of corpus	0. 31,121.			21 101
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	31,121.			31,121.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	501,280.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				. 0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	4,280.			
9 Excess distributions carryover to 2011.	405 000			
Subtract lines 7 and 8 from line 6a	497,000.			
10 Analysis of line 9:				
a Excess from 2006 92,500.				,
b Excess from 2007 141, 200.				
c Excess from 2008 123,800.				
d Excess from 2009				
e Excess from 2010 139,500.	44 0			

AMAZA FOUNDATION CHARITABLE TRUST Form 990-PF (2010) C/O FALCON CAPITAL 65-6004239 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (b) 2009 (a) 2010 (c) 2008(d) 2007 (e) Total income from Part I or the minimum 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 Complete 3a, b, or c for the alternative test relied upon; a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year 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 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here Fig. 1 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If

the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

SEE STATEMENT 4

- b The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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Part XV | Supplementary Information (continued)

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3 Grants and Contributions Paid During the Ye		Pavment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor		Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	Foundation status of recipient	contribution	Amount
a Paid during the year	or substantial contributor	recipient		
SEE STATEMENT 5			▶ 3a	139,500.
Total b Approved for future payment			<u> </u>	T33,300.
NONE				
Total	. 4		▶ 3h	0.

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C/O FALCON CAPITAL

nter grace amounts unless otherwise indicated	Unrelated h	ousiness income	Excluded	by section 512, 513, or 514	/61
ter gross amounts unless otherwise indicated.	(a)	(b)	(C) Exclu-	(d)	(e) Related or exempt
Program service revenue:	Business code	Amount	sion	Amount	function income
1					
	-				
					,—
				1	
Fees and contracts from government agencies		-1			
Membership dues and assessments			1		· · ·
nterest on savings and temporary cash					<u>-</u>
nvestments					
Dividends and interest from securities			14	17,430.	
let rental income or (loss) from real estate:					
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
han inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			<u> </u>		
Other revenue:			1 1		
a	_				
b	_		_		
			 		
c					
d			 		
de				1.7. 120	
d e Subtotal. Add columns (b), (d), and (e)		0.	,	17,430.	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e)		0.	,	17,430.	
d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.				13	
d E Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations.				13	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities	s to the Accon	nplishment of E	xempt F	13 Purposes	17,4
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations. Belationship of Activities The No. Explain below how each activity for which in	s to the Accon	nplishment of E	xempt F	13 Purposes	17,4
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculations.) Relationship of Activities	s to the Accon	nplishment of E	xempt F	13 Purposes	17,4
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations. Belationship of Activities The No. Explain below how each activity for which in	s to the Accon	nplishment of E	xempt F	13 Purposes	17,4
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d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations. art XVI-B Relationship of Activities ne No. Explain below how each activity for which in	s to the Accon	nplishment of E	xempt F	13 Purposes	17,4

AMAZA FOUNDATION CHARITABLE TRUST

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Form,990-PF (2010) C/O F	ALCON CAP	PITAL			65-6	004239	Page 13	
			sfers To a	and Transactions	and Relations	ships With Non	charitable		
	Exempt Organ							/aal Nia	
				g with any other organization		tion 501(c) of		es No	
' - '	, ,			7, relating to political orgai	nizations?				
	n the reporting founda	ation to a noncharita	ible exempt or	ganization of:			10(1)	v	
(1) Cash	uoto.	•			-		1a(1)	X X	
(2) Other ass		•					1a(2)		
b Other transact		ble evernet ergenize	tion				15/1	_ x	
* *	issets to a noncharital is of assets from a noi						1b(1) 1b(2)	X	
• •		•	organization				1b(2)	X	
(3) Rental of facilities, equipment, or other assets							X		
	(4) Reimbursement arrangements (5) Loans or loan guarantees						1b(4) 1b(5)	X	
* *	nce of services or me	mharchin ar fundrai	eina enlicitatio	ne			1b(6)	X	
	alities, equipment, ma						10(0)	X	
				dule. Column (b) should al	wave chow the fair	market value of the go			
	-		_	ed less than fair market val	-	-		ιο,	
_	e value of the goods,			Su 1633 triuri fair friumet var	ue in any banoaetto	in or sharing arrangem	cirt, snow in		
	Amount involved			exempt organization	(d) Description	on of transfers, transactions	and sharing arra	ngements	
(-)		(0)	(c) Name of noncharitable exempt organization N/A			(d) Description of transfers, transactions, and sharing arrange			
			24/22						
									
1									
		<u> </u>							
			<u> </u>						
					- 				
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	1						-,		
				-				=	
									
2a Is the foundat	tion directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organ	izations described				
	1(c) of the Code (othe	-		· -			Yes	X No	
	lete the following sch	•	/(+//						
			(b) Type of organization	(c) Description of relationship					
	N/A		_						
			-						
								_	
				ing accompanying schedules a			and belief, it is true	, correct,	
Sign and comp	plete Declaration of preparation	ater (other than texpsye	cor fiduciary) is b	ased on all information of which	preparer has any knov	wiedge			
Here				<u> </u>	2/2 T	RUSTEE			
Sig	nature of officer or tri	ustee		Date		Title			
Pi	rınt/Type preparer's na	ame	Preparer's s	ignature	Date	Check If	PTIN		
					1	self- employed			
Paid]	aid RONALD J. WALTHER RONALD J. WALTHER 0				03/19/12				
	rm's name ► HIL				 	Fırm's EIN ▶			
Use Only		. =======		_	111110 2111				
	rm's address ► 38	338 TAMIAN	MI TRAI	L NORTH					
		APLES, FL				Phone no. 23	9-263-2	2111	
							Form 990 -		

FORM 990-PF	DIVIDENDS AN	D INTEREST FROM	SECURITIES	STATEMENT 1	
SOURCE		GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT	
NORTHERN TRUST SECU	RITIES	17,430.	0.	17,430.	
TOTAL TO FM 990-PF,	17,430.	0.	17,430.		
FORM 990-PF CORPORATE STOCK					
FORM 990-PF	C	ORPORATE STOCK		STATEMENT 2	
FORM 990-PF DESCRIPTION	C	ORPORATE STOCK	BOOK VALUE	STATEMENT 2 FAIR MARKET VALUE	
DESCRIPTION	C B AND ZIMMER H		BOOK VALUE 458,150.	FAIR MARKET	

65-6004239

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FORM 990-PF

ELECTION UNDER REGULATIONS SECTION
53.4942(A)-3(D)(2) TO TREAT
EXCESS QUALIFYING DISTRIBUTIONS
AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT

3

PURSUANT TO CODE SEC. 4942(H)(2) AND REG. 53.4942(A)-3(D)(2), AMAZA FOUNDATION CHARITABLE TRUST ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS COMING FROM PRIOR YEAR'S UNDISTRIBUTED INCOME AS FOLLOWS:

YEAR END 2005

AMOUNT \$31,121

65-6004239

FORM 990-PF

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

STATEMENT

4

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LUCILLE W. DRACKETT, 555 ADMIRALITY PARADE WEST, NAPLES, FL 34102 555 ADMIRALITY PARADE WEST NAPLES, FL 34102

TELEPHONE NUMBER

239-403-7335

FORM AND CONTENT OF APPLICATIONS

LETTER FORM, EXPLAIN THE NEED FOR AND USE OF SAID FUNDS

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

STATEMENT

5

FORM 990-PF

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
BOYS AND GIRLS CLUB, INC 7500 DAVIS BLVD NAPLES, FL 34104		PUBLIC	5,000.
DAVID LAWRENCE CENTER, NAPLES, FL 6075 BATHEY LANE NAPLES, FL 34116	NONE CHARITABLE	PUBLIC	5,000.
TRINITY-BY-THE-COVE, EPISCOPAL CHURCH 553 GALLEON DRIVE NAPLES, FL 34102	NONE CHARITABLE	PUBLIC	50,000.
YMCA OF THE PALMS 5450 YMCA ROAD NAPLES, FL 34109		PUBLIC	5,000.
	NONE CHARITABLE	PUBLIC	10,000.
THEATRE ZONE 13275 LIVINGSTON ROAD NAPLES, FL 34109		PUBLIC	5,000.
COMMUNITY SCHOOL OF NAPLES 13275 LIVINGSTON ROAD NAPLES, FL 34109	NONE EDUCATION	PUBLIC	34,500
NAPLES EQUESTRIAN CHALLENGE 206 RIDGE DRIVE NAPLES, FL 34108	NONE CHARITABLE	PUBLIC	25,000
TOTAL TO FORM 990-PF, PART XV, LI	INE 3A		139,500

GRANTS AND CONTRIBUTIONS

• •						
	68 (Rev 1-2011)					Page 2
	are filing for an Additional (Not Automatic) 3-Month Ex				>	
	ly complete Part II if you have already been granted an a			Form 8	3868	
Part II	are filing for an Automatic 3-Month Extension, comple Additional (Not Automatic) 3-Month E					
Faitii	` '	XICHSIO	if of Time. Only file the original (no c	T	eeded) oyer identification	
Type or	. •	• =				number
print	AMAZA FOUNDATION CHARITABLE	TABLE TRUST			65-6004239	
File by the	C/O FALCON CAPITAL	<u> </u>	5-6004239			
extended due date for filing your						
return See instructions	City, town or post office, state, and ZIP code For a fo	oreign add	dress, see instructions.			
	NAPLES, FL 34104					
Enter the	Return code for the return that this application is for (file	a copara	to application for each return)			0 4
cite the	The turn code for the fetuni that this application is for the	за зерага	tte application for each returny			0 4
Applicat	ion	Return	Application			Return
ls For		Code	Is For			Code
Form 990)	01				
Form 990)-BL	02	Form 1041-A			08
Form 990)-EZ	01	Form 4720			09
Form 990)-PF	04	Form 5227			10
Form 990	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above) 06 Form 8			Form 8870			12
STOP! D	o not complete Part II if you were not already granted	l an autor	matic 3-month extension on a previou	ısly file	d Form 8868.	
	CHAD OTT					
	ooks are in the care of 555 ADMIRALITY	PARA		<u>. 34</u>	102	
-	hone No ▶ <u>239-403-7335</u>		FAX No ▶			
	organization does not have an office or place of busines				>	
• If this	is for a Group Return, enter the organization's four digit	n .				
box 🕨	If it is for part of the group, check this box			memb	ers the extension is	for
	equest an additional 3-month extension of time until					
	r calendar year 2010 , or other tax year beginning $_$					
6 Ift	he tax year entered in line 5 is for less than 12 months, o	heck reas	son Initial return	Fınal r	eturn	
L	Change in accounting period					
	ate in detail why you need the extension					
	DDITIONAL TIME IS NEEDED IN			(MAT	ION NECESS	SARY
<u>T(</u>	O FILE A COMPLETE AND ACCURA	re Re	TURN.			
0- 164	his annihilation is fan Farra 200 DL 200 DF 200 T 4700	6060		1		
	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			0.
	nrefundable credits See instructions his application is for Form 990-PF, 990-T, 4720, or 6069,	ontor on	refundable aredite and estimated	8a	\$	
	• •	•				
	c payments made Include any prior year overpayment al	iowed as	a credit and any amount paid	05	*	0.
	eviously with Form 8868		All Alexa 6	8b	\$	
	lance due. Subtract line 8b from line 8a. Include your pa	=	th this form, if required, by using	0-		0.
	TPS (Electronic Federal Tax Payment System) See instr		nd Verification	<u> 8c</u>	\$	
Under nor	olgites of perjury, I declare that I have examined this form, include		· ·	e heet o	f my knowledne and h	nelief
it is true,	correct, and complete, and that I am authorized to prepare this fo	orm.	panying someones and statements, and to tr	יט שניטניטו	i my knomicage and t	, , , , , , , , , , , , , , , , , , , ,
Signature	Title •	TRUST	EE	Date	•	
<u> </u>	Signature ► Truste ► Truste					

Form 8868 (Rev 1-2011)