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990-PF

Department of the Treasury

Internal Revenue Service

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

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

OMB No 1545-0052

2010

For calendar year 2010, or tax year beginning and ending Final return G Check all that apply Initial return Initial return of a former public charity Amended return Address change Name change Employer identification number Name of foundation Hazel Rose Family Charitable 73-1519254 Telephone number (see page 10 of the instructions) Foundation 918-455-2415 Number and street (or P O box number if mail is not delivered to street address) Room/suite 3728 S. Elm Place PMB 520 C If exemption application is pending, check here City or town, state, and ZIP code D 1 Foreign organizations, check here OK 74011 Broken Arrow 2. Foreign organizations meeting the H Check type of organization X Section 501(c)(3) exempt private foundation 85% test, check here and attach computation E If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at J Accounting method X Cash Other (specify) end of year (from Part II, col (c), If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 271,764 (Part I, column (d) must be on cash basis) line 16) ▶ Part 1 Analysis of Revenue and Expenses (The total of (d) Disbursements expenses per (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal books income purposes income the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 17,681 Check ▶ If the foundation is **not** required to attach Sch B 2 16 16 16 Interest on savings and temporary cash investments 3 334 334 334 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) 8,317 Stmt 1 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 129,707 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns & allowance RECEIVED 10a Less Cost of goods sold b MAY Gross profit or (loss) (attagn schedule). C O RS-11 Other income (attach schedule) 26,348 350 350 12 Total. Add lines 1 through 1 Compensation of officers, directors trusted, et ... 13 $\{\{0,0\}\}$ Operating and Administrative Expenses Other employee salaries and wages 14 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Stmt 2 267 Accounting fees (attach schedule) Other professional fees (attach schedule) 17 Interest Taxes (attach schedule) (see page 14 of the instructions) Stmt 3 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 181 Printing and publications Stmt 4 33 23 Other expenses (att sch) Total operating and administrative expenses. 0 486 Add lines 13 through 23 16,897 16,897 25 Contributions, gifts, grants paid 16,897 Total expenses and disbursements. Add lines 24 and 25 17,383 0 26 27 Subtract line 26 from line 12 8,965 Excess of revenue over expenses and disbursements 350 Net investment income (if negative, enter -0-) 350 Adjusted net income (if negative, enter -0-)

Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Assets or Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted X Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund 28 263,647 266,735 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see page 17 of the Net 263,647 266,735 instructions) 31 Total liabilities and net assets/fund balances (see page 17 263,647 266,735 of the instructions)

Analysis of Changes in Net Assets or Fund Balances Part III 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with 263,647 end-of-year figure reported on prior year's return) 8,965 2 Enter amount from Part I, line 27a 2 3 3 Other increases not included in line 2 (itemize) ▶ 272,612 4 Add lines 1, 2, and 3 See Statement 6 5,877 5 Decreases not included in line 2 (itemize) ▶ 266,735 6 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

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

16,897

Form 990-PF (2010)

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8 Enter qualifying distributions from Part XII, line 4

Part VI instructions on page 18

Form	990-PF (2010) Hazel Rose Family Charitable /3-1519254			P	age 4
	irt VI * Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instru	ictions)			
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				4
	here ▶ X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	1			
	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
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>			(
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	<u> </u>			
6	Credits/Payments				
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a				
b	Exempt foreign organizations—tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	<u> </u>			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	·			4
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refunded ▶ 11	ı L			
<u> Pa</u>	rt VII-A Statements Regarding Activities		,		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				
	of the instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation > \$ (2) On foundation managers > \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state 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? If "Yes," complete Part II, col (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) ► OK		Į		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ŀ		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8Ь	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		ļ.		
	4942(J)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page		ŀ		_
	27)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X
		Fo	qq	0-PF	(2010

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<u></u>		ng Activities for Which For	m 4/20 May be Ke	quirea (contil	iueu)		
5a •	During the year did the foundation pay or i (1) Carry on propaganda, or otherwise at	•	n 4945(e))?	_ Y	es 🗓 No		
	(2) Influence the outcome of any specific	public election (see section 4955), c	or to carry on,				
	directly or indirectly, any voter registra	tion drive?		<u> </u>	es X No		
	(3) Provide a grant to an individual for tra-	vel, study, or other similar purposes	?	Y	es 🛚 X No		
	(4) Provide a grant to an organization oth	er than a charitable, etc , organizati	on described in				1
	section 509(a)(1), (2), or (3), or sectio	n 4940(d)(2)? (see page 22 of the ir	structions)	Y	es X No		1
	(5) Provide for any purpose other than rel	igious, charitable, scientific, literary,	or educational				
	purposes, or for the prevention of crue	elty to children or animals?		Y	es X No		
b	If any answer is "Yes" to 5a(1)-(5), did an	y of the transactions fail to qualify ui	nder the exceptions des	cribed in	4_		-
	Regulations section 53 4945 or in a currer	nt notice regarding disaster assistan	ce (see page 22 of the I	nstructions)?	N/A	5b	
	Organizations relying on a current notice r	egarding disaster assistance check	here		▶ 📙		
С	If the answer is "Yes" to question 5a(4), do	oes the foundation claim exemption	from the tax				
	because it maintained expenditure respon	sibility for the grant?		N/A 🗌 Y	es No		
	If "Yes," attach the statement required by	Regulations section 53 4945-5(d)					
6a	Did the foundation, during the year, receiv	e any funds, directly or indirectly, to	pay premiums				
	on a personal benefit contract?			Y	es X No	1	1
b	Did the foundation, during the year, pay pr	remiums, directly or indirectly, on a p	personal benefit contrac	ارې		6b	X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the fo	undation a party to a prohibited tax	shelter transaction?		es X No		I
b	If Yes, did the foundation receive any production	eeds or have any net income attribi	utable to the transaction	?	N/A	7b	I _
Pa	rt VIII Information About Off	icers, Directors, Trustees,	Foundation Mana	gers, Highly F	aid Employe	es,	
	and Contractors						
1 L	ist all officers, directors, trustees, found	ation managers and their compen	sation (see page 22 of	the instructions)			
	(a) Name and a	ddress	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense account, allowances
	ane Love Karnuth	Broken Arrow	President		, , , , , , , , , , , , , , , , , , , ,		
37	28 South Elm Place PMB 520	OK 74011	1.00	0	0		0
Gl	enda L. Durano	Albuquerque	Sec-Treas				
PO	Вож 90625	NM 87199-0625	1.00	0	0	ļ	0
2	Compensation of five highest-paid emp If none, enter "NONE."	loyees (other than those included	on line 1 — see page	23 of the instruct	ions).		
	(a) Name and address of each employ	ree paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		ense account, allowances
NC	NE						
					<u>. </u>	-	
						<u></u>	
Tota	I number of other employees paid over \$50	,000					0

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Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Emplo	
3 Five highest-paid independent contractors for professional services (see page 23 of the	instructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information organizations and other beneficianes served, conferences convened, research papers produced, etc.	on such as the number of	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see page 24 of	f the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments See page 24 of the instructions 3		

Total. Add lines 1 through 3

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 16,897 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 1a 1b Program-related investments—total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 3 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a 3b Cash distribution test (attach the required schedule) 16,897 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions) 5

Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

Form **990-PF** (2010)

6

16,893

Pa	Undistributed Income (see page 26 of	tne instructions)			Т
٠,	Distributable amount for 2010 from Bort VI	(a) Corpus	(b) Years pnor to 2009	(c) 2009	(d) 2010
1	Distributable amount for 2010 from Part XI,	Corpus	rears prior to 2005	2003	
_	line 7				13,349
2	Undistributed income, if any, as of the end of 2010				
	Enter amount for 2009 only				
	Total for prior years 20, 20, 20				<u> </u>
3	Excess distributions carryover, if any, to 2010				
	From 2005 1,281				
-	From 2006				1
-	From 2007 193	-i 1			
_	From 2008 1,318	1			1
	From 2009 1,554	-T t			
f	Total of lines 3a through e	4,346			
4	Qualifying distributions for 2010 from Part XII,				1
	line 4 ▶ \$16,897				1
а	Applied to 2009, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)			*******************************	
d	Applied to 2010 distributable amount				13,349
е	Remaining amount distributed out of corpus	3,548			
5	Excess distributions carryover applied to 2010				
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,894			Ī
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				1
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
Ī	amount—see page 27 of the instructions				
۵	Undistributed income for 2009 Subtract line				
Ť	4a from line 2a Taxable amount—see page				
	27 of the instructions				
f					
•	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) (see page 27 of the				
	instructions)				
	•				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the	1 201			
	instructions)	1,281			
9	Excess distributions carryover to 2011.	6 613			
4.0	Subtract lines 7 and 8 from line 6a	6,613			
10	Analysis of line 9				1
a	Excess from 2006	-			
b	Excess from 2007 193				‡ ‡
С	Excess from 2008 1,318				
d	Excess from 2009 1,554	· · · · · · · · · · · · · · · · · ·			
е	Excess from 2010 3,548	·			<u> </u>

Recipient Name and address (home or business) Paid during the year See Statement 7	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business) or substantial contributor a Paid during the year	recipient		
a Paid during the year See Statement 7			
See Statement /			
			16,897
			10,097
		1 1	
Total		▶ 3a	16,897
b Approved for future payment			10,897
N/A			
]	
I I			
Total		▶ 3b	

Part XVI-A	Analysis of Income-Producing Ac	tivities				
	ounts unless otherwise indicated		d business income	Excluded	by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program se	ervice revenue					the instructions)
a		_				
b		-		-		
		_		-		
		-		 		
f		-				
•	nd contracts from government agencies			 		
	p dues and assessments			25	16	
	savings and temporary cash investments			25	334	
	and interest from securities			123	334	
	ncome or (loss) from real estate nanced property		‡ 			
	bt-financed property			1		
	ncome or (loss) from personal property					
	stment income					
	ss) from sales of assets other than inventory					8,317
	e or (loss) from special events					
	it or (loss) from sales of inventory					
	nue a					
		_				
е				ļ		
12 Subtotal A	dd columns (b), (d), and (e)		1 (ס	350	
	line 12, columns (b), (d), and (e)				13	8,667
	t in line 13 instructions on page 29 to verify calculation					
Part XVI-I						
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purp instructions)					f the
N/A	manuchons)					
N/A						
						
						
					· · · ·	
-			-			
	-		<u> </u>			
	1					

Part 2	KVII	Information Regardanization	_	insfers To and	l Transaction	ns and Relationships	With Noncharitable)		
1 Di	the ora			e in any of the follo	wing with any oth	ner organization described		1	Yes	No
	_					tion 527, relating to political				
	anization			(/ /)	,	. 5 ,				
	•	om the reporting found	ation to a nor	ncharitable exempt	organization of					
	Cash	. 0		·	ŭ			1a(1)		X
	Other a	ssets						1a(2)		X
	her trans									
(1)	Sales o	f assets to a noncharita	ble exempt o	organization				1b(1)		X
(2)	Purcha	ses of assets from a no	ncharitable e	exempt organization	n			1b(2)		X
(3)	Rental	of facilities, equipment,	or other asse	ets				1b(3)		X
(4)	Reimbu	rsement arrangements						1b(4)		X
(5)	Loans	or loan guarantees						1b(5)		X
(6)	Perform	nance of services or me	mbership or	fundraising solicita	itions			1b(6)		X
c Sh	aring of f	acilities, equipment, ma	uling lists, oth	ner assets, or paid	employees			1c		X
d If t	he answe	er to any of the above is	"Yes," comp	olete the following s	schedule Colum	n (b) should always show the	fair market			
va	ue of the	goods, other assets, o	r services giv	ven by the reporting	g foundation If th	ne foundation received less th	nan fair market			
va	ue in any	transaction or sharing	arrangemen	t, show in column (d) the value of the	ne goods, other assets, or se	rvices received			
	ne no	(b) Amount involved	(c) Name	of nonchantable exen	npt organization	(d) Description of transfe	ers, transactions, and sharing	arrange	ments	
N/A										
			ļ <u>.</u>							
			ļ							-
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						<u> </u>				
		lation directly or indirec	•			. •		\Box	Ty.	a
		section 501(c) of the	*	han section 501(c)	(3)) or in section	52/7		Y	es 🔼	.j No
b it"		nplete the following sch) Name of organization	redule	/h) Time of a		(a) D	time of relationship			
N/		i) Name of organization		(b) Type of o	organization	(6) 0	escription of relationship			
14/.	<u> </u>						·			
							<u>-</u>			
										
- I	Hadasas		that I have 60	L	Ludon annones	I ng schedules and statements, and	to the best of multipoulades			
	belief, it	enalties of perjury, I declare is true, correct, and comple	te, Declaration	of preparer (other tha	n taxpayer or fiduci	ig schedules and statements, and ary) is basgd on all information of t	which preparer has any know	ano Iledge		
Sign	k	Non		111011	1.5	<i>[]]]]]</i>	Tionsen	a		
Here	Sign	nature of officer or trustee	<u> </u>	0000	Daw	Title	vame			
		ype preparer's name			Preparer's signa	/	Date			
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Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Hazel Rose Family Charitable

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

73-1519254 Foundation Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 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)

Employer identification number

Name of organization Hazel Rose Family Charitable 73-1519254 Part I Contributors (see instructions) (a) (c) (d) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. 1 Nadine N. Holloway Person 3029 Quail Creek Road **Payroll** X 17,681 Noncash \$ Oklahoma City OK 73120 (Complete Part II if there is a noncash contribution) (a) (c) Type of contribution No. Name, address, and ZIP + 4 **Aggregate contributions** Person **Payroll** Noncash \$ (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 Aggregate contributions Person Payroli \$ Noncash (Complete Part II if there is a noncash contribution) (d) (a) (b) (c) Type of contribution Name, address, and ZIP + 4 Aggregate contributions No. Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) (b) Type of contribution Aggregate contributions No. Name, address, and ZIP + 4 Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution.)

Hazel Rose Family Charitable

Employer identification number 73-1519254

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	I Date received
1	Berkshire Hathaway Cl B		
		\$ 7,2	72 07/12/11
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	l Date received
1	Spyder S&P 500 ETF		
l		\$ 1,0	49 07/12/11
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	I Date received
1	BP		
		\$ 9,3	07/12/11
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	I Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	I I I I I I I I I I I I I I I I I I I
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (see instructions	I Hate received
:		\$	

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Federal Statements

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

Des	Description		How Received	ı			
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss
Akamaı Tech	Various	Various :	Purchase s 10,071 s	\$ 10,067 \$		<i>v</i> ›	ጭ 4
Berkshire Hathaway Cl	М	0	Donation 8,007				129
вр	7/12/10	8/20/10	Donation 10,744	9,456			1,288
CF Industries	10/05/10 11/16/10	11/16/10	Purchase 11,506	998'6			1,640
Cree	2/24/10	5/04/10	Purchase 7,137	6,547			590
F5 Networks	Various	Various	Purchase 19,160	19,187			-27
Freeport-McMoran	Various	Various	Purchase 9,226	9,323			76-
General Mills	7/01/09	6/30/10	Purchase 14,050	12,424			1,626
Netapp	9/17/10	9/17/10 11/11/10	Purchase 9,793	767,6			-4
Proctor & Gamble	7/01/09	5/06/10	Purchase 5,590	5,565			25
Salesforce.com	8/20/10	7	Purchase 12,974	11,297			1,677
Sina Total	9/16/10	9/16/10 11/16/10	11,449 12,707	9,983 s 121.390 s	0	S	1,466
1 d				111111111111111111111111111111111111111			

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	w w
Adjusted Net	\$ \$
Net Investment	\$ \$
Total	\$ 267
Description	Tax Return Prep. Total

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	Statement 3 - Form 99	3 - Form 990-PF, Part I, Line 18 - Taxes	Xes	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
990-PF Taxes Total	w w	0 0 0 8	O O	0 0 0
	Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses	Part I, Line 23 - Other E	xpenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses Postage	\$ 13	· ω-	o-	···
Total	\$ 33	0 8	\(\text{O} \)	\[\cdot \] \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\

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Federal Statements

Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description

Doscinption		— Beginning of Year	End of Year	Basis of Valuation		Fair Market Value
General Mills	_	10.404.0			_	
Proctor & Gamble	\$	12,424 \$		Cost	\$	
		5 , 565		Cost		
BP			7,268	Cost		8,834
F5 Networks			13,100	Cost		13,016
Jınkosolar Hldgs			•			•
Riverbed Technology			7,213	Cost		4,024
			9,235	Cost		14,068
Salesforce.com			11,297	Cost		13,200
SPDR Tr S&P 500 ETF			·			
Total	\$ <u></u>	17,989 \$	1,258 49,371	COSL	\$_	1,258

Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount			
Prior Period Adjustment	\$	5,877		
Total	\$	5,877		

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Federal Statements

Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the

400

500

300

100

100

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150

100

150

Welfare/Religious

501c3

PO Box 25451

PO Box 1924

Albuquerque NM 87125

Noonday Ministries

Religious

501c3

ΝE

9528 Bend Rd

PO Box 6000

PO Box 1082

Colorado Springs CO 80934

Edgewood NM 87015

The Rekindling

Sebring FL 33872

World Outreach Church

Tulsa OK 74133

Christian U.

Texas

Family Outreach

Total

Albuquerque NM 87109

The Navigators

Outreach to Asia Nat'l

Tulsa OK 74101

Oasis Network

Religious

501c3

Religious

501c3

Education

501c3

Welfare

501c3

1,000

250

400

150

250

2,000

Religious/Welfare

501c3

Education

501c3

TCU Box 297045

Fort Worth TX 76129

8863 91st St

PO Box 7847

750

1,000 2,000 1,500 Amount Purpose Education/Religious Religious/Education Religious/Welfare Welfare/Religious Education/Arts Religious Religious Religious Religious Education Welfare Status 501c3 Relationship 3728 S. Elm Place 346 Clark Road SW Address 4001 Osuna NE PO Box 21962 PO Box 35300 PO Box 39800 PO Box 30961 PO Box 4600 PO Box 1860 PO Box 655 PO Box 409 80949 Broken Arrow OK 74011 John Smithwick Ministries Albuquerque NM 87109 Albuquerque NM 87154 Albuquerque NM 87105 Albuquerque Youth Symphon Albūquerque NM 87190 Colorado Springs CO Calvary Chapel Orphanage CareNet Crisis Pregnancy Kirk Karnuth Ministries Brooklyn NY 11237 Joel Osteen Ministries Joyce Meyer Ministries Houston TX 77210 Catoosa OK 74015 Address Fenton MO 63026 Tucson AZ 85740 Family Life Radio Metro Ministries HCJB/Sutherland Name Mandy's Farm

Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount	307	1,500	1,075	200	25	50	75	200	250	400	100	250	300	200	100	16,897
	Purpose	Religious	Religious	Religious	Welfare/Religious	Religious .	Religious	Welfare	Religious	Religious	Welfare/Religious	Welfare/Religious	Welfare/Religious	Welfare/Religious	Welfare	Religious	Education
	Status	501c3	501c3	501c3	501c3	501c3	501c3	501c3	501c3	501c3	501c3	501c3	501c3	501c3	501c3	501c3	501c3
Address	Relationship	2421 Aztec Rd			//US MOLLIS Kipple	for odes/	1١	7	X POX	PO Box 628222	Abe	 () E	1800 Golden Irail CE	86 36	X ON C	X C	FO BOX 3203
Name	Address	Faith Comes By Hearing Albuquerque NM 87107	LonniewDana Schrader Min Fo Santa Barbara CA 93120	Southcliff Baptist Church 4100 SW Loop Fort Worth TX 76109	Albuquerque NM 87122	Flagstaff AZ 86011	Austin Global Outleach Austin TX 78749	American Cancer Society Atlanta GA 30303	Our Finest Hour Broken Arrow OK 74013	Campus Crusade Orlando FL 32862		Young Life Crownpoint NM 87313	5010	ission Springs CO	Helier Project Merrifield VA 22116	Living Frooi Ministries Houston TX 77284	Christian Assn Farent Edu Moriarty NM 87035 Total

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	Taxable Interest on	Investments			
Description	Amount	Unrelated Business Code	Exclusion Code	Postal Code	US Obs (\$ or %)
Fidelity Investments	\$\$16	Dudinioso Godo	25	0000	(Ψ σι 10)
Total	\$ 16				
	Toyoblo Dividende f	rom Coouritios			
	Taxable Dividends f			5	
Description	Amount	Unrelated Business Code	Exclusion Code	Code	US Obs (\$ or %)
Fidelity Investments TD Ameritrade	\$ 142 192		25 25		
Total	\$ 334		25		
	` 				