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Porm 990-PF Department of the Treasury

Return of Private Foundation

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

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

2010

OMB No 1545-0052

				so abio to ase a copy of this				
		dar year 2010, or tax year beginning			, and e			
G C	heck	all that apply Initial return		Initial return of a fo			Final return	1
_		Amended return	1	Address chang	ge		Name change	
Nar	ne of	foundation					A Employer identification	number
		שע דבסאנט אאי <i>ס א</i> י	ש ע	OMAS FOUNDAT	TON		74-2982555	
Nun	nber s	THE JERALD AND KA			TOM	Room/suite		<u> </u>
Nun	ivei g	9303 HOPE AVE	⊶ w sutedi	uuu 1000j		, too ily suite	B Telephone number (806) 798-	.2723
CIT	orte	own, state, and ZIP code					\	, r
"	יטונו	LUBBOCK, TX 7942	4				C If exemption application is p D 1. Foreign organizations	-
H (heck	· · · · · · · · · · · · · · · · · · ·		empt private foundation			2. Foreign organizations me check here and attach co	seting the 85% test,
<u> </u>	_	ction 4947(a)(1) nonexempt charitable trus		Other taxable private founda	ntion		l	•
I Fa		rket value of all assets at end of year J			Accr	ual	E If private foundation sta under section 507(b)(1)	tus was terminated
		Part II, col. (c), line 16)		her (specify)			F If the foundation is in a	• •
				mn (d) must be on cash t	basis)		under section 507(b)(1)	
	, ,	· · · · · · · · · · · · · · · · · · ·		(a) Revenue and		vestment	(c) Adjusted net	(d) Disbursements
_		☐ (The total of amounts in columns (b), (c), and (d) necessarily equal the amounts in column (a))	may not	expenses per books		ome	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received					N/A	
	2	Check X If the foundation is not required to attac	h Sch B					
	3	Interest on savings and temporary cash investments		4,434.		4,434.		STATEMENT 1
	4	Dividends and interest from securities		7,535.		7,535.		STATEMENT 2
	5a	Gross rents						
	b	Net rental income or (loss)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, h.h.h	
<u>o</u>	ба	Net gain or (loss) from sale of assets not on line 1	0					
enn	b	Gross sales price for all assets on line 6a					FCFIVED	,
Revenue	7	Capital gain net income (from Part IV, line 2)				01	Non to Sout V Endy	4.1
	8	Net short-term capital gain				<u> </u>	10V 1 5 2044	£
	9	Income modifications Gross sales less returns					10V 1 5 2011	
	10a	and allowances .						ķļ
		Less Cost of goods sold				1 (GDEN HT	
		Gross profit or (loss)	•			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		<u> </u>
		Other income	• •	11,969.	1	1,969.		
		Total. Add lines 1 through 11		3,330.	1	$\frac{1,969}{1,665}$		1,665.
		Compensation of officers, directors, trustees, etc	•	3,330.		1,000.		1,005.
	Name of Number a City or to H Check Se I Fair ma (from # \$ 2 3 4 5a b 6a b 7 8 9 10a b c 11 12 13 14 15 16a b c 11 12 22 23 24 25 26 27 a b	Other employee salaries and wages Pension plans, employee benefits			<u>.</u>			
es	_	Legal fees						
		Accounting fees STMT	· 3	450.		450.	 	0.
ă.	1	Other professional fees	. •					1
ě E		Interest						
Operating and Administrative Expenses Operating and Administrative Expenses 1		Taxes STMT	. 4	212.		212.		0.
iistr		Depreciation and depletion						
Ë		Occupancy			-			
Adi		Travel, conferences, and meetings				•		
Pu		Printing and publications	•					
19 a		Other expenses STMT	: 5	5.		5.		0.
ratir	24	Total operating and administrative						
þer		expenses. Add lines 13 through 23		3,997.		2,332.		1,665.
0	25	Contributions, gifts, grants paid		6,970.				6,970.
	26	Total expenses and disbursements.						
		Add lines 24 and 25		10,967.		2,332.		8,635.
	27	Subtract line 26 from line 12						
	ı	Excess of revenue over expenses and disbursem		1,002.			<u> </u>	
	l	Net investment income (if negative, enter -0	-) .			9,637.		
0235		Adjusted net income (if negative, enter -0-)	-	<u> </u>		•	N/A	L
12-0	7-10	LHA For Paperwork Reduction Act No	tice, see	the instructions.				Form 990-PF (2010)

SCANNED DEC 0 7 2011

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year			
Part II Data I Ce Si leets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1 Cash - non-interest-bearing	5,393.	6,361.	6,361		
2 Savings and temporary cash investments					
3 Accounts receivable ►					
Less. allowance for doubtful accounts					
4 Pledges receivable ►			min a		
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		_			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges					
10a Investments - U.S. and state government obligations STMT 6	81,662.	81,696.	86,750		
b Investments - corporate stock	·	•			
c Investments - corporate bonds					
11 Investments - land, buildings, and equipment basis					
Less: accumulated depreciation	ĺ	İ			
12 Investments - mortgage loans					
13 Investments - other STMT 7	139,937.	139,937.	109,100		
14 Land, buildings, and equipment basis					
Less accumulated depreciation					
15 Other assets (describe ►	· · · · · · · · · · · · · · · · · · ·				
10 00001 0000100 -					
16 Total assets (to be completed by all filers)	226,992.	227,994.	202,211		
17 Accounts payable and accrued expenses	220/3320	22.,,551.	202,211		
18 Grants payable					
19 Deferred revenue 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 state and a state of the st					
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	226,992.	227,994.			
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	· · · · · · · · · · · · · · · · · · ·				
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	226,992.	227,994.			
31 Total liabilities and net assets/fund balances	226,992.	227,994.			
Part III Analysis of Changes in Net Assets or Fund B					
					
Total net assets or fund balances at beginning of year - Part II, column (a), line	บ		226 002		
(must agree with end-of-year figure reported on prior year's return)	•		226,992		
Enter amount from Part I, line 27a		2	1,002		
Other increases not included in line 2 (itemize)		3	227 994		
Add lines 1, 2, and 3	•••		227,994		
Decreases not included in line 2 (itemize)	L /L\ L	5	227 004		
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iumn (b), line 30	6	227,994		

023511 12-07-10

-2-story brick w		ind(s) of property sold (e.g. or common stock, 200 shs.			P-	low acquired Purchase - Donation		acquired day, yr)	(d) Date sold (mo , day, yr.)
a					ļ				
b NC	ONE	- .	 		 				
<u>C</u>					 				
<u>d</u>					-				
<u>e</u>	- 40				1				
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		st or other basis expense of sale				Sain or (loss) is (f) minus (
<u>a</u> b									
:									
<u> </u>									
	<u> </u>			-					
Complete only for assets show	ing gain in	column (h) and owned by t	ne foundation	n on 12/31/69		_		Col (h) gain	
(i) F.M V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col (i)		C	Losses	not less than (from col. (I	n -U-) or h))
<u> </u>									
<u> </u>									
	<u> </u>								
	<u> </u>								
	<u> </u>								
Capital gain net income or (net c	apital loss	If gain, also enter If (loss), enter -0-	ın Part I, line ın Part I, line	7 17	}	2			
Net short-term capital gain or (Id		•		•	7				
If gain, also enter in Part I, line 8			. (0))				
If (loss), enter -0- in Part I, line 8	·	Section 4940(e) for				3			
ection 4940(d)(2) applies, leave as the foundation liable for the se Yes," the foundation does not qui	ction 4942 alify under	tax on the distributable amo section 4940(e) Do not cor	nplete this pa	art .				s+ _+	Yes X
Enter the appropriate amount in	each colu	mn for each year, see instru	ctions before	e making any entri					(d)
(a) Base period years Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying dist		Net value of no	(c) onchari			Distrib (col. (b) div	ution ratio ided by col (c))
2009			7,400.			149,53			.0494
2008			0,410.			157,66			.0660
2007			506.			216,55			.0438
2006			9,900.			216,72			.0456
2005			3,100.	<u> </u>		217,57	1.	1	.0372
Total of line 1, column (d)							2		.2423
Average distribution ratio for the the foundation has been in exist	-		n line 2 by 5,	, or by the number	r of yea	ırs	3		.0484
Enter the net value of noncharita	ible-use as	sets for 2010 from Part X, II	ne 5	_		_	4		206,82
Multiply line 4 by line 3		·		-			5		10,02
Enter 1% of net investment inco	me /1% of	f Part I. line 27h)					6		9
	(1700)		•						
And lines 5 and 6							7	1	יכו חך
Add lines 5 and 6	•					-	7		10,120 8,63

Form	1990-PF (2010) THE JERALD AND KAY THOMAS FOUNDATION		2982			Page 4			
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	<u>- see ir</u>	<u>ıstru</u>	ctior	าร) _			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	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>93.</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).								
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.			
	Add lines 1 and 2	3			1	93.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				93.			
5									
6	Credits/Payments			***********					
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a								
	Exempt foreign organizations - tax withheld at source								
	Tax paid with application for extension of time to file (Form 8868)								
	Backup withholding erroneously withheld . 6d								
	Total credits and payments Add lines 6a through 6d	7				0.			
8	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			1	93.			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10							
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	11	<u> </u>						
	rt VII-A Statements Regarding Activities								
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No			
	any political campaign?		Ĭ	1a		X			
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		Х			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or							
	distributed by the foundation in connection with the activities.	- 0.	l						
r	Did the foundation file Form 1120-POL for this year?			10		Х			
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		Ì						
ď	(1) On the foundation \blacktriangleright \$ 0 . (2) On foundation managers \blacktriangleright \$								
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation								
6	managers > \$O.								
9	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х			
2	If "Yes," attach a detailed description of the activities.		1						
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,)r							
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,		3		х			
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		t	4a		X			
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	1/A	4b					
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		`	5		X			
•	If "Yes," attach the statement required by General Instruction T.			····		····			
R	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.								
J	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	Х				
7	Did the foundation have at least \$5,000 in assets at any time during the year?		•	7	X				
•	If "Yes," complete Part II, col. (c), and Part XV.		ļ		·				
٩a	Enter the states to which the foundation reports or with which it is registered (see instructions)								
Ja	TX								
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)								
u	of each state as required by General Instruction G? If "No," attach explanation			8b	X				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	 ndar		-00					
J	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	muai		9	İ	х			
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		ł	10		X			
	one any persons second substantial contributors during the tax year. If ites, atlasci a screening freir names and addresses		For	n 990	-PF				
			1 0111		(, ,			

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X

Х

3b

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

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

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0

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

Part VIII Information About Officers, Directors, Trustees, Foundation Mana Paid Employees, and Contractors (continued)	gers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	·	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<u> </u>	
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 information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	1 such as the	Expenses
1 ST. JUDES CHILDRENS HOSPITAL DIRECT UNRESTRICTED DO	NIA TITONI	
1 51: UUDES CHIEDRENS HOSFITAL DIRECT UNRESTRICTED DO	MATION	
		250.
2 FOCUS ON THE FAMILY DIRECT UNRESTRICTED DONATION		230.
		1,850.
3 WORLD VISION DIRECT UNRESTRICTED DONATION		
		1,650.
4 NAZARENE COMPASSIONATE DIRECT UNRESTRICTED DONATION	1	
		1 000
D. A.W. D. C.		1,220.
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 N/A		Amount
1 N/ K		
		0.
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	•	0.
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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
a	Average monthly fair market value of securities	1a	197,913.
b	Average of monthly cash balances	1b	197,913. 12,061.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	209,974.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	209,974.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,150.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	206,824.
6	Minimum investment return. Enter 5% of line 5	6	10,341.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	10,341.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	193.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,148.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10,148.
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	10,148.
P	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
· a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	8,635. 0.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		•
а	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	8,635.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		· · · · · · · · · · · · · · · · · · ·
-	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,635.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years	qualifies for	

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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,				
line 7				10,148.
2 Undistributed Income, if any, as of the end of 2010.				,
a Enter amount for 2009 only	*		1,698.	
b Total for prior years			· · · · · · · · · · · · · · · · · · ·	*************************************
		0.		
3 Excess distributions carryover, if any, to 2010				
a From 2005				
b From 2006				
c 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 \triangleright \$ 8,635.				
a Applied to 2009, but not more than line 2a			1,698.	
b Applied to undistributed income of prior	***************************************		· · · · · · · · · · · · · · · · · · ·	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			111 11111111111111111111111111111111111	
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount		****	· · · · · · · · · · · · · · · · · · ·	6,937.
e Remaining amount distributed out of corpus	0.	·····		
5 Excess distributions carryover applied to 2010	0.			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:				
2 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				
be distributed in 2011				3,211.
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.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2006				
b Excess from 2007 .				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				
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3 Grants and Contributions Paid During the	· · · · · · · · · · · · · · · · · · ·	Pavment		 -
Recipient	If recipient is an individual,		D	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
		1		
CDD CMARRYDNA 10				
SEE STATEMENT 10			 	6,970.
Total b Approved for future payment				0/3/00
a , pproved to ratere payment				
NONE				
NONE				
		}		
Total .			▶ 3b	0.
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Part XVI-A Analysis of Income-Prod	_				
Enter gross amounts unless otherwise indicated.		usiness income		by section 512, 513, or 514	(e)
·	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt function income
1 Program service revenue	code	Amount	code	Amount	- Tunction income
a	-				
b	-				· · · · · · · · · · · · · · · · · · ·
<u> </u>	-				
d					
4	-	·			
g Fees and contracts from government agencies	-		_	• •	_
g Fees and contracts from government agencies					-
3 Interest on savings and temporary cash					
investments					4,434
4 Dividends and interest from securities					4,434 7,535
5 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 .					
8 Gain or (loss) from sales of assets other than inventory					· · · · · · · · · · · · · · · · · · ·
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a	- 				
b	_				
<u> </u>	-				
d	- 			+	
12 Subtotal Add columns (b), (d), and (e)	- 		0.	0.	11,969
13 Total. Add line 12, columns (b), (d), and (e)			, , , , , , , , , , , , , , , , , , 	13	11,969
(See worksheet in line 13 instructions to verify calculations))				
	 	mliahman ad	Evamet D		
Part XVI-B Relationship of Activities	to the Accon	ipiisiinent oi	Exemple	urposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other than	an by providing funds	for such purposes).		
DONATIONS OR GRANTS EI					
PURPOSE FOR MINISTERIA	AL OUTREAC	CH AND RE	LATED C	PERATIONAL A	CTIVITY.

LING NO.	Explain below now each activity for which income is reported in column (c) or rate xxx x contributed importantly to the accomplishment of	
	the foundation's exempt purposes (other than by providing funds for such purposes).	
	DONATIONS OR GRANTS ENABLE CHARITABLE ORGANIZATION TO FULFILL ITS	
	PURPOSE FOR MINISTERIAL OUTREACH AND RELATED OPERATIONAL ACTIVITY.	
-		
		_

023621 12-07-10

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Organ	izations					
1	Did the or	ganization directly or indi	rectly engage in any of the followin	g with any other organization	n described in section 501(c) of		Yes	No
	the Code (other than section 501(c))(3) organizations) or in section 52	7, relating to political organia	zations?			
а	Transfers	from the reporting founda	ation to a noncharitable exempt orç	ganization of				
	(1) Cash			• •		1a(1)		X
	(2) Other	assets .				1a(2)		X
b	Other tran	sactions.						
	(1) Sales	of assets to a noncharital	ble exempt organization			1b(1)		<u> </u>
	(2) Purch	nases of assets from a nor	nchantable exempt organization			1b(2)		X
	(3) Renta	of facilities, equipment,	or other assets			1b(3)		X
	(4) Reiml	bursement arrangements				16(4)		X
	(5) Loans	s or loan guarantees				1b(5)		X
	(6) Perfo	rmance of services or me	mbership or fundraising solicitatio	ns		16(6)		X
C	Sharing of	f facilities, equipment, ma	ılıng lısts, other assets, or paid em	ployees .		10		X
d	If the ansv	ver to any of the above is	"Yes," complete the following sche	dule Column (b) should alw	ays show the fair market value of the goods, o	ther ass	sets,	
	or service:	s given by the reporting fo	oundation. If the foundation receive	ed less than fair market value	e in any transaction or sharing arrangement, s	how in		
	column (d) the value of the goods,	other assets, or services received					
(a) 1	ine no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions, and	sharing ar	rangeme	ents
			N/A					
		·						
		<u> </u>						
								
								
_				<u>. </u>				
	in section	•	tly affiliated with, or related to, one r than section 501(c)(3)) or in sect edule			Yes	X	No No
		(a) Name of org	ganization	(b) Type of organization	(c) Description of relations	hip		
		N/A						
			· · · · · · · · · · · · · · · · · · ·					
	ign ere	complete Declaration of preparation	arer (other than taken yer or fiduciary) is b	ing accompanying schedules and ased on all information of which p	d statements, and to the best of my knowledge and be preparer has any knowledge. Title	lief, it is tr	rue, com	et,
		Print/Type preparer's na			Date Check if PTIN			
_					self- employed			
	aid	JEFF W. VI		anso /	11-3-11			
	reparer se Only	Firm's name LAM	I VINSON & COMPA	MY, LLP	Firm's EIN			
J	Se Cilly	Firm's address > 65	02 SLIDE ROAD;	STE 200				
			BBOCK, TX 79424		Phone no			
_					<u> </u>	00/	DE	(2010)

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY C	ASH IN	IVESTMENTS	STATEMENT	1	
SOURCE					AMOUNT		
MML INVESTORS SERVICES, INC. MML INVESTORS SERVICES, INC	BOND ACCRE	TION			4,4	00. 34.	
TOTAL TO FORM 990-PF, PART I,	LINE 3, C	OLUMN A			4,4	34.	
FORM 990-PF DIVIDEND	S AND INTE	CREST FROM	SECUF	RITIES	STATEMENT	2	
SOURCE	GROS	S AMOUNT		TAL GAINS	COLUMN (A AMOUNT)	
MML INVESTORS SERVICES, INC.		7,535.		0.	7,5	35.	
TOTAL TO FM 990-PF, PART I, L	N 4	7,535.			7,535.		
FORM 990-PF	ACCOUNT	ING FEES			STATEMENT	3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM			
ACCOUNTING FEES	450		450.			0.	
TO FORM 990-PF, PG 1, LN 16B	450). 	450.			0.	
FORM 990-PF	T.	AXES			STATEMENT	4	
DESCRIPTION	(A) EXPENSES PER BOOKS			(C) ADJUSTED NET INCOM			
	212	2.	212.			0.	
TO FORM 990-PF, PG 1, LN 18	212	2.	212.			0.	

DESCRIPTION PER BOOKS MENT INCOME NET INCOME PURPOSES ACCOUNT FEES 5. 5. 0. TO FORM 990-PF, PG 1, LN 23 5. 5. 0. FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT OBSCRIPTION DESCRIPTION U.S. OTHER GOV'T GOV'T BOOK VALUE DENVER COLO CITY & CNTY CTFS PARTN X COPS 5.5% MUNI BOND TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS TOTAL TO FORM 990-PF, PART II, LINE 10A B1,696. 86,750 TOTAL TO FORM 990-PF, PART II, LINE 10A B1,696. STATEMENT VALUATION METHOD DESCRIPTION WE HIGH YIELD OPPORTUNITIES CL COST 110,000. 84,572 OPPENHEIMER SENIOR FLOATING RATE CL COST 110,000. 84,572	FORM 990-PF	OTHER EXPENSES			STATEMENT		
TO FORM 990-PF, PG 1, LN 23 5. 5. 0 FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT OBSCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS TOTAL TO FORM 990-PF, PART II, LINE 10A B1,696. 81,696. 86,750. TOTAL TO FORM 990-PF, PART II, LINE 10A B1,696. STATEMENT DESCRIPTION WETHOD METHOD DESCRIPTION METHOD METHOD METHOD METHOD METHOD METHOD METHOD METHOD DESCRIPTION METHOD MET		EXPENSES NET INVES			ADJUSTED	CHARITABLE	
FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT OBSCRIPTION U.S. OTHER GOV'T GOV'T BOOK VALUE DENVER COLO CITY & CNTY CTFS PARTN X COPS 5.5% MUNI BOND X 81,696. 86,750 TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS 81,696. 86,750 TOTAL TO FORM 990-PF, PART II, LINE 10A 81,696. 86,750 FORM 990-PF OTHER INVESTMENTS STATEMENT DESCRIPTION VALUATION METHOD BOOK VALUE MFS HIGH YIELD OPPORTUNITIES CL COST 110,000. 84,572 OPPENHEIMER SENIOR FLOATING RATE CL COST 29,937. 24,528	ACCOUNT FEES	5.		5.	•		0.
U.S. OTHER GOV'T GOV'T BOOK VALUE DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION DESCRIPTION TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS TOTAL TO FORM 990-PF, PART II, LINE 10A DESCRIPTION DESCRIPTION WETHOD METHOD DESCRIPTION METHOD METHOD DESCRIPTION METHOD METHOD DESCRIPTION DESCRIPTION METHOD DESCRIPTION DESCRIP	TO FORM 990-PF, PG 1, LN 23	5.		5.			0.
DESCRIPTION GOV'T GOV'T BOOK VALUE VALUE DENVER COLO CITY & CNTY CTFS PARTN COPS 5.5% MUNI BOND TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS TOTAL TO FORM 990-PF, PART II, LINE 10A B1,696. 86,750 TOTAL TO FORM 990-PF OTHER INVESTMENTS STATEMENT VALUATION METHOD DESCRIPTION METHOD METHOD DESCRIPTION METHOD METHOD DESCRIPTION DESCRIPTION METHOD DESCRIPTION DESCRIPTION METHOD DESCRIPTI	FORM 990-PF U.S. AND ST	ATE/CITY G	OVERNMENT	OBLIG	GATIONS	STATEMENT	6
TOTAL U.S. GOVERNMENT OBLIGATIONS TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS TOTAL TO FORM 990-PF, PART II, LINE 10A FORM 990-PF OTHER INVESTMENTS VALUATION METHOD METHOD	DESCRIPTION			B001	K VALUE		т
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS TOTAL TO FORM 990-PF, PART II, LINE 10A 81,696. 86,750 86,750 FORM 990-PF OTHER INVESTMENTS STATEMENT VALUATION METHOD METHO	DENVER COLO CITY & CNTY CTFS P COPS 5.5% MUNI BOND	ARTN	X		81,696.	86,7	50.
TOTAL TO FORM 990-PF, PART II, LINE 10A 81,696. 86,750 FORM 990-PF OTHER INVESTMENTS VALUATION METHOD MET	TOTAL U.S. GOVERNMENT OBLIGATI	ONS					
FORM 990-PF OTHER INVESTMENTS STATEMENT DESCRIPTION METHOD MFS HIGH YIELD OPPORTUNITIES CL OPPENHEIMER SENIOR FLOATING RATE CL C 29,937. 24,528	TOTAL STATE AND MUNICIPAL GOVE	CRNMENT OBL	IGATIONS		81,696.	86,7	50.
DESCRIPTION METHOD METHOD BOOK VALUE VALUE VALUE TAIR MARKET VALUE OPPENHEIMER SENIOR FLOATING RATE CL COST COST 29,937. 24,528	TOTAL TO FORM 990-PF, PART II,	LINE 10A			81,696.	86,7	50.
METHOD BOOK VALUE VALUE MFS HIGH YIELD OPPORTUNITIES CL COST 110,000. 84,572 OPPENHEIMER SENIOR FLOATING RATE CL COST 29,937. 24,528	FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	7
OPPENHEIMER SENIOR FLOATING RATE CL COST C 29,937. 24,528	DESCRIPTION			ВОО	K VALUE		T
C 29,937. 24,528	MFS HIGH YIELD OPPORTUNITIES CL			110,000.		84,572.	
TOTAL TO FORM 990-PF, PART II, LINE 13 139,937. 109,100	OPPENHEIMER SENIOR FLOATING RA	ATE CL	COST		29,937.	24,5	28.
	TOTAL TO FORM 990-PF, PART II,	LINE 13			139,937.	109,1	00.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

8

NAME OF MANAGER

JERALD THOMAS KAY THOMAS

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JERALD OR KAY THOMAS, 9303 HOPE AVE; LUBBOCK, TX 79424

TELEPHONE NUMBER

FORM AND CONTENT OF APPLICATIONS

PROPOSE IN LETTER FORMAT INCLUDING THE REQUESTED AMOUNT AND THE PURPOSE FOR FUNDING AND NONPROFIT STATUS

ANY SUBMISSION DEADLINES

FOR 2007 - BEFORE 12/31/2007

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

STATEMENT 10

FORM 990-PF

<u> </u>				
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT 1,220.	
NAZARENE COMPASSIONATE MINISTRIES 17001 PRAIRIE STAR PARKWAY LENEXA, KS 66220	NONE CHRISTIAN MINISTRY	PUBLIC CHARITY		
AMERICAN CANCER SOCIETY 3411 73RD STREET LUBBOCK, TX 79423		PUBLIC CHARITY	250.	
FOCUS ON THE FAMILY 8605 EXPLORER DRIVE COLORADO SPRINGS, CO 80995		PUBLIC CHARITY	1,850.	
M.D. ANDERSON HOSPITAL P.O. BOX 4486 HOUSTON, TX 77210		PUBLIC CHARITY	250.	
PRISON FELLOWSHIP MINISTRIES P.O. BOX 17434 WASHINGTON, DC 20041	NONE CHRISTIAN MINISTRY	PUBLIC CHARITY	250.	
RADIO BIBLE CLASS P.O. BOX 1622 GRAND RAPIDS, MI 49501	NONE CHRISTIAN MINISTRY	PUBLIC CHARITY	250.	
SALVATION ARMY 1111 16TH ST. LUBBOCK, TX 79401	NONE CHRISTIAN MINISTRY	PUBLIC CHARITY	250.	
ST. JUDES CHILDRENS HOSPITAL 101 E. VALENCIA DRIVE FULLERTON, CA 92835	NONE MEDICAL RESEARCH & TREATMENT	MEMORIAL FOUNDATION	250.	

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

THE JERALD AND KAY THOMAS FOUND	ATION		74-2982555
WORLD VISION P.O. BOX 9716 FEDERAL WAY, WA 98063	NONE CHRISTIAN MINISTRY	PUBLIC CHARITY	1,650.
SLOAN KETTERING HOSPITAL 1275 YORK AVENUE NEW YORK, NY 10065	NONE MEDICAL RESEARCH & TREATMENT	PUBLIC CHARITY	250.
SOUHT PLAINS FOOD BANK 4612 LOCUST AVE. LUBBOCK, TX 79404	NONE ALLEVIATING HUNGER	PUBLIC CHARITY	250.
THE HAVEN ANIMAL CARE SHELTER 4501 N. FM 1729 LUBBOCK, TX 79413	NONE ANIMAL CARE SHELTER	PUBLIC CHARITY	250.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		6,970.

Form 886	8 (Rev. 1-2011)					Page 2	
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this bo	ж		X	
Note. On!	y complete Part II if you have already been granted an a	automatic	3-month extension on a previously filed	Form 8	3868.		
If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I (on page 1).				
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no co	opies n	eeded).		
Type or	Name of exempt organization			Empl	Employer identification number		
print	THE JERALD AND KAY THOMAS FO	OUNDA	TION	7	4-2982555		
File by the extended due date for	Number, street, and room or suite no. If a P.O. box, see instructions.						
filing your return See Instructions	City, town or post office, state, and ZIP code. For a following to the code of	oreign add	lress, see instructions.				
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
Applicati	on	Return	Application			Return	
ls For		Code	Is For			Code	
Form 990		01					
Form 990	·BL	02	Form 1041-A			08	
Form 990		03	Form 4720			09	
Form 990	·	04	Form 5227		<u>. </u>	10	
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
	-T (trust other than above) o not complete Part II if you were not already granted	06	Form 8870		<u> </u>	12	
Teleph If the c If the c If this is to the control of the cont	calendar year 2010, or other tax year beginning the tax year entered in line 5 is for less than 12 months, of Change in accounting period te in detail why you need the extension DITIONAL TIME IS NEEDED TO	s in the Ur Group Exe and atta NOVEM	FAX No. ►	is is for memb	the whole group, cers the extension is	for	
AC	CURATE TAX RETURN.						
	nis application is for Form 990·BL, 990·PF, 990·T, 4720, prefundable credits. See instructions.	or 6069, e	nter the tentative tax, less any	8a	s	0.	
	nis application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and estimated	"			
	payments made. Include any prior year overpayment al						
	eviously with Form 8868.		• • • • • • • • • • • • • • • • • • • •	8b	\$	0.	
	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.			8c	\$	0.	
<u></u>			nd Verification		Ψ		
	alties of perjury, I declare that I have examined this form, includ orrect, and complete, and that I am authorized to prepare this fo	ling accomp		e best o	f my knowledge and b	elief,	
Signature	► Title ►			Date	>		
					Form 8868 (Re	ev. 1·2011)	