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# For 990-PF

5 2011

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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service

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

For calendar year 2010, or tax year beginning , 2010, and ending ,

G CI	— — — — — — — — — — — — — — — — — — —	nitial Return of a former p	· —	Final return
Mana	Amended return	<del>`</del>	change	
			^A	• • •
Numbe	ry R. Cox Family Foundation	street address)	Room/suite B	75-2864400  Telephone number (see the instructions)
	) McKinney Avenue		1700	(214) 220-3612
City or		State	ZIP code C	·
Dal:				1 Foreign organizations, check here
Н		501(c)(3) exempt private f		2 Foreign organizations meeting the 85% test, check here and attach computation
<del></del>	Section 4947(a)(1) nonexempt charitable Fair market value of all assets at end of year  J A	trust   Other taxable   Accounting method: X C		If private foundation status was terminated
	(from Part II, column (c), line 16)	Other (specify)	Accidal F	under section 507(b)(1)(A), check here  If the foundation is in a 60-month termination
		t I, column (d) must be or		under section 507(b)(1)(B), check here
Part		(a) Revenue and	(b) Net investment	(c) Adjusted net (d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))	expenses per books	income	income for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch	·		
	2 Ck X if the foundn is not req to att Sch E 3 Interest on savings and temporary	3		<del> </del>
	cash investments			
	4 Dividends and interest from securities 5a Gross rents	236,509.	236,509	•
	b Net rental income or (loss)			
R E V E	6a Net gain/(loss) from sale of assets not on line 10	-33,019.		
	b Gross sales price for all assets on line 6a 15			
	7 Capital gam net income (from Part IV, line 2)		0	•
NU	8 Netshort-termicapital gain 9 Income medifications (0)		<u></u>	
E	10a Gross sales less			
				<del>_</del>
	goods sold			
	c Gross profit/(loss) (att sch)			
	See Part XVI-A, Line 1	14 -34,965.	-35,965	
	12 Total. Add lines 1 through 11	168,525.	200,544	•
	<ul><li>13 Compensation of officers, directors, trustees, etc.</li><li>14 Other employee salaries and wages</li></ul>		<del></del>	<del> </del>
	15 Pension plans, employee benefits			
A	16a Legal fees (attach schedule) L-16a Str	nt 3,300.	3,300	
A D M	b Accounting fees (attach sch) L-16b Str		8,155	. 8,154.
N	c Other prof fees (attach sch) L-16c Str	nt 1,481.	1,481	•
O Î P S E T	17 Interest 18 Taxes (attach schedule)(see instr.)	<del></del>		<del> </del>
RRATT	19 Depreciation (attach			
l i	sch) and depletion			<del> </del>
N Ý G E	20 Occupancy 21 Travel, conferences, and meetings			
A E N X D P	22 Printing and publications			<del></del>
Ď P E	23 Other expenses (attach schedule)	635		
Ñ S	See Line 23 Stmt  24 Total operating and administrative	-935.	······································	<del>                                     </del>
Ě	expenses. Add lines 13 through 23	20,155.	12,936	8,154.
	25 Contributions, gifts, grants paid	487,110.		487,110.
	26 Total expenses and disbursements. Add lines 24 and 25	507,265.	12,936	. 495,264.
	27 Subtract line 26 from line 12:	3077203.	12,550	193,204.
	a Excess of revenue over expenses and disbursements	_220 740		
	b Net investment income (if negative, enter -0-)	-338,740.	187,608	
	C Adjusted net income (if negative, enter -0-)		107,000	
BAA E	or Paperwork Reduction Act Notice see th	e instructions	TE	EA0301 07/23/10 Form 990-PF (2010)

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Forg	n <b>990</b>	-PF (2010) Berry R. Cox Family Foundation		75 <u>-</u> 28	75-2864400 Page 2		
Part Balance Sheets  Attached schedules and amounts in the description column should be for end of year amounts only (See instructions)			Beginning of year	End	of year		
r ca	1.71 :	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash — non-interest-bearing	375.	1,188	1,188.		
	2	Savings and temporary cash investments	1,094,480.	628,865	. 628,865.		
	3	Accounts receivable			To the second		
		Less: allowance for doubtful accounts					
	4	Pledges receivable	THE PROPERTY OF		19 Chi 4- 18 Chi		
		Less: allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)					
	7	Other notes and loans receivable (attach sch)	The state of the second				
Ą		Less: allowance for doubtful accounts					
š	8	Inventories for sale or use					
A S S E T	9	Prepaid expenses and deferred charges					
Ś	10	a Investments – U.S. and state government					
		obligations (attach schedule) L-10a Stmt	8,784,363.	8,726,378	9,160,892.		
		b Investments — corporate stock (attach schedule) L-10b Stmt		184,065	. 209,702.		
	'	c Investments — corporate bonds (attach schedule)					
	11	Investments – land, buildings, and equipment basis					
		Less: accumulated depreciation (attach schedule) ►					
	12	Investments – mortgage loans					
	13	Investments - other (attach schedule) L-13 Stmt	39.	21	. 21.		
	14	Land, buildings, and equipment basis	<b>网络阿拉拉斯</b>				
		Less. accumulated depreciation (attach schedule)					
	15	Other assets (describe )					
	16	Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)	0 070 257	0 540 517	10 000 669		
$\overline{}$	17		9,879,257.	9,540,517	10,000,668.		
Ţ	18	Accounts payable and accrued expenses Grants payable			-		
A B	19	Deferred revenue			-		
ĭ	20	Loans from officers, directors, trustees, & other disqualified persons			-		
Ļ	21	Mortgages and other notes payable (attach schedule)					
Ţ	22	Other habilities (describe )					
ļ	22	Other habilities (describe*)			-X		
E S	23	Total liabilities (add lines 17 through 22)					
		Foundations that follow SFAS 117, check here					
	ĺ	and complete lines 24 through 26 and lines 30 and 31.					
NE	24	Unrestricted					
N F E U T N	25	Temporarily restricted					
D	26	Permanently restricted					
A B A E L T		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.					
E L T A	27	Capital stock, trust principal, or current funds					
SN	28	Paid-in or capital surplus, or land, building, and equipment fund	11,953,753.	11,953,753.			
o E	29	Retained earnings, accumulated income, endowment, or other funds	-2,074,496.	-2,413,236.			
RS	30	Total net assets or fund balances (see the instructions)	9,879,257.	9,540,517.			
	31	Total liabilities and net assets/fund balances					
	Land.	(see the instructions)	9,879,257.	9,540,517.			
ran		Analysis of Changes in Net Assets or Fund Balance	es	-			
1	Total end-	net assets or fund balances at beginning of year - Part II, colum of-year figure reported on prior year's return)	nn (a), line 30 (must agr	ee with	9,879,257.		
2	Enter	r amount from Part I, line 27a		2	-338,740.		
3	Other	increases not included in line 2 (itemize)		3			
4	Add I	ines 1, 2, and 3		4	9,540,517.		
5	Decrea	ises not included in line 2 (itemize)		5			
6	Total	net assets or fund balances at end of year (line 4 minus line 5) -	- Part II. column (b), line	e 30 <b>6</b>	9,540,517.		

		5-28644			Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	ee the inst	ructions)		
1.	a Exempt operating foundations described in section 4940(d)(2), check here			<u> </u>	ž.
	Date of ruling or determination letter (attach copy of letter if necessary — see instr.)			_	
	b Domestic foundations that meet the section 4940(e) requirements in Part V,	1			876.
	check here X and enter 1% 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, column (b)				1
2					
3	foundations only. Others enter -0-) Add lines 1 and 2	3		1	<u>0.</u> 876.
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	<del>876.</del>
6	Credits/Payments:				070.
	a 2010 estimated tax pmts and 2009 overpayment credited to 2010 6a 4,755	1.			į
	Exempt foreign organizations – tax withheld at source 6b	<del>`</del>			
	Tax paid with application for extension of time to file (Form 8868)	7			
	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7 7		4,	751.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9		_	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10		2,	875.
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax	▶ 11			
Pa	Statements Regarding Activities				
1 8	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a	Yes	No X
ı	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		x
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials poor distributed by the foundation in connection with the activities.	ıblıshed			
(	: Did the foundation file Form 1120-POL for this year?		1 c		х
•	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation \$ (2) On foundation managers \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	<u> </u>	_		
•	foundation managers	OH			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		х
	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, article	·c			
Ū	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
	If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		4b		<u>L</u> _
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			ļ	
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 c	onflict			
_	with the state law remain in the governing instrument?		6	X	<del> </del>
/ 0-	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	X	
oa	Enter the states to which the foundation reports or with which it is registered (see the instructions)  TX - Texas				
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete the complete is the foundation of the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete the complete is the foundation of the taxable year beginning in 2010 (see instructions for Part XIV)?	r 4942(j)(5 e Part XIV	9		X
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their i and addresses.	names	10		<u>x</u>
BAA			Form <b>99</b>	0-PF	(2010)

Form 990-PF (2010) Berry R. Cox Family Foundation  PartWIFA Statements Regarding Activities (Continued)	75-	-2864 <u>4</u> 0	0	F	age 5
			ΠТ		$\overline{}$
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		<u>x</u>
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 Website address ► N/A	application	on?	13	Х	
14 The books are in care of Berry R. Cox Family Foundation Telephon		(214)	220	- <u>36</u> 1	12
Located at 2100 McKinney Ave, Ste 1700 Dallas TX ZIP + 4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	· _/ <u>5</u> 2	201		<u>-</u>	
and enter the amount of tax-exempt interest received or accrued during the year	▶[	15			
At any time during calendar year 2010, did the foundation have an interest in or a signature or other au bank, securities, or other financial account in a foreign country?	thority ov	er a	16	Yes	No X
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the nai foreign country ►	me of the	<del>)</del>			
Part VII-BI Statements Regarding Activities for Which Form 4720 May Be Required				:	· · · · ·
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	-	•		Yes	No
1a During the year did the foundation (either directly or indirectly):			.5 5 .		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			:
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	X Yes	No	. :		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	.!		
(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)?	X Yes	No			
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes	X No	i		
<b>b</b> If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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 the instruction	ns)?		1 b	v	
Organizations relying on a current notice regarding disaster assistance check here	<b>)</b>	· 🗆			
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?			1 c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?	∏ Ves	X No			
If 'Yes,' list the years ► 20, 20, 20		K 140		Į.	
	N/2N				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement – see the instructions.)	a)(2) )(2) to		2b		Х
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	ere				
► 20, 20, 20				į	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
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.)	_		3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		х
<b>b</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?			4 b		Х
BAA		Fo	rm <b>990</b>	-PF 0	

Form 990-PF (2010) Berry R. Cox Fami Part VII-B   Statements Regarding Activit		n 4720 May Bo Bog	75-28	64400 Page <b>6</b>
		11 4/20 May be ned	uneu (continueu)	277 W 477 W 107 W
<ul><li>5a During the year did the foundation pay or incuit</li><li>(1) Carry on propaganda, or otherwise attempt</li></ul>	•	n (section 4945(e))?	Yes X	No State
(2) Influence the outcome of any specific publ	ic election (see section			
on, directly or indirectly, any voter registra  (3) Provide a grant to an individual for travel,		ourposes?	Yes X	No No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, org 4940(d)(2)? (see instru	, ganızatıon described ictions)	Yes X	No S
(5) Provide for any purpose other than religious educational purposes, or for the prevention	us, charitable, scientific, n of cruelty to children o	literary, or or animals?	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5b X
Organizations relying on a current notice regar	rding disaster assistance	e check here	▶ []	
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure response	he foundation claim exe sibility for the grant?	mption from the	Yes X	No
If 'Yes,' attach the statement required by Regu		• •		
<ul><li>6a Did the foundation, during the year, receive an on a personal benefit contract?</li><li>b Did the foundation, during the year, pay premit</li></ul>	•	,, , , ,	Yes X	No 6b X
If 'Yes' to 6b, file Form 8870.	urns, directly or indirect	y, on a personal benefit	contract:	90 A
7a At any time during the tax year, was the found				No Carte Control
b if yes, did the foundation receive any proceeds				7b X
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees,
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see instru	ıctions).	
(a) Name and address	(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	(e) Expense account, other allowances
Berry R. Cox				
2100 McKinney Ave, Ste 1700, Dallas, TX 75201	Trustee 1.00	0.	0.	0.
Jeanne T. Cox		-		
2100 McKinney Ave, Ste 1700,	Trustee			
Dallas, TX 75201	1.00	0.	0.	0.
Justin B. Cox				
2100 McKinney Ave, Ste 1700,	Trustee			
Dallas TX 75201	1.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc.				
		0.	0.	0.
2 Compensation of five highest-paid employees	(other than those incl	uded on line 1- see ins	tructions). If none, ente	r 'NONE.'
(a) Name and address of each employee 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	(e) Expense account, other allowances
None				
0				
0				
0		_		<del></del>
0				<del></del>
Total number of other employees paid over \$50,000	TEEA0306 0	7/23/10		None Form <b>990-PF</b> (2010)

Forn <b>Pa</b> i	1 990-PF (2010) Berry R. Cox Family Foundation 75  1 VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Foundat	-28644 Paid Em	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'		
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	<del></del>	(c) Compensation
Nor			, , , , , , , , , , , , , , , , , , , ,
			_
Tota	I number of others receiving over \$50,000 for professional services	•	None
	Summary of Direct Charitable Activities		
List the organi	ie foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
	N/A		
		]	
•		$-\!\!+\!\!$	0.
2			
3			
4		<del>-  -</del>	
		<u> </u>	
Par	Summary of Program-Related Investments (see instructions)		
Desc	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
	N/A		
			0.
2			
All o	ther program-related investments. See instructions.		
3			
Total	Add lines 1 through 3	<b>•</b>	None
BAA		-	Form <b>990-PF</b> (2010)

For	m <b>990-PF</b> (2010) Berry R. Cox Family Foundation	75-28644	
Pa	Minimum Investment Return (All domestic foundations must complete this part, see instructions.)		oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		0 104 674
	a Average monthly fair market value of securities	1a	9,194,674.
	b Average of monthly cash balances	1b	1,084,600.
	c Fair market value of all other assets (see instructions)	1c	21.
	d Total (add lines 1a, b, and c)	1 d	10,279,295.
	e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
_	(attach detailed explanation)	_	
	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	10,279,295.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3		
	(for greater amount, see instructions)	4	154,189.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,125,106.
6	Minimum investment return. Enter 5% of line 5	6	506,255.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here ► ☐ and do not complete this		undations
1	Minimum investment return from Part X, line 6	1	506,255.
2	a Tax on investment income for 2010 from Part VI, line 5	6.	
	b Income tax for 2010. (This does not include the tax from Part VI.)		
	c Add lines 2a and 2b	2c	1,876.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	504,379.
4	Recoveries of amounts treated as qualifying distributions	4	1,000.
5	Add lines 3 and 4	5	505,379.
6	Deduction from distributable amount (see instructions)	6	<del> </del>
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	505,379.
Pa	Qualifying Distributions (see Instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes.		
	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	495,264.
	Program-related investments — total from Part IX-B	1 b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	495,264.
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 (see instructions)	5	1,876.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	493,388.
•			
	<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years.	er the founda	tion

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	<b>(c)</b> 2009	<b>(d)</b> 2010
1 Distributable amount for 2010 from Part XI, line 7				505,379.
2 Undistributed income, if any, as of the end of 2010:			<del> </del>	000,0:5
a Enter amount for 2009 only			478,974.	_
<b>b</b> Total for prior years: 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2010:				
<b>a</b> From 2005 0 .	.]			
<b>b</b> From 2006 0 .				
<b>c</b> From 2007 • 0 .			,	
<b>d</b> From 2008 0.				
<b>e</b> From 2009 0 .				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from Part				
XII, line 4 > \$ 495,264.		j		
a Applied to 2009, but not more than line 2a			478,974.	
<ul> <li>Applied to undistributed income of prior years (Election required — see instructions)</li> </ul>				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2010 distributable amount				16,290.
e Remaining amount distributed out of corpus	0.			
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:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	0.			
·	- 0.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
<ul> <li>Enter the amount of prior years' undistribut- ed income for which a notice of deficiency</li> </ul>	}			
has been issued, or on which the section	<u> </u>			l :
4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line 4a from				ì
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2010. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2011	1			400 000
7 Amounts treated as distributions out of				489,089.
corpus to satisfy requirements imposed			İ	į
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
,				<del></del>
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	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 0.	]			:
<b>b</b> Excess from 2007 0.	]			,
c Excess from 2008 0.				
d Excess from 2009 0.				,
e Excess from 2010 0.				,

Form 990-PF (2010) Berry R. Cox Fam	ily Foundat	<u>ion</u>		75-2864400	Page 10
Pan XIV Private Operating Foundation	ons (see instru	ctions and Part	VII-A, question	9)	N/A
1a If the foundation has received a ruling or d is effective for 2010, enter the date of the	uling	•			<del></del>
<b>b</b> Check box to indicate whether the foundation		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
<b>b</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					<del></del>
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon:	•				
a 'Assets' alternative test — enter:		1			
(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 listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					_
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information assets at any time during the	(Complete this e year — see in	part only if the istructions.)	organization ha	ad \$5,000 or more	e in
1 Information Regarding Foundation Manag			····		
a List any managers of the foundation who had close of any tax year (but only if they have	ave contributed mo contributed more t	re than 2% of the to han \$5,000). (See s	otal contributions red section 507(d)(2))	erved by the foundation	on before the
Berry R. Cox					
<b>b</b> List any managers of the foundation who or a partnership or other entity) of which the f	wn 10% or more of oundation has a 10	the stock of a corpo	oration (or an equall	y large portion of the	ownership of
None		, and the second			
2 Information Regarding Contribution, Grant	. Gift. Loan, Schol	arship, etc. Program	ns:		
Check here X if the foundation only managements for funds. If the foundation makes complete items 2a, b, c, and d.	akes contributions	to preselected char	itable organizations	and does not accept of acc	unsolicited conditions,
a The name, address, and telephone number	of the person to w	hom applications sh	nould be addressed:	· · · · · · · · · · · · · · · · · · ·	···
, ,					
<b>b</b> The form in which applications should be si	ubmitted and inforn	nation and materials	s they should include	3·	
c Any submission deadlines					
d Any restrictions or limitations on awards, so	uch as by geograph	nical areas, charitab	le fields, kinds of ins	stitutions, or other fac	tors.

PartXV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or contribution status of Amount recipient Name and address (home or business) a Paid during the year Highland Park United Methodist 170(b) General Fund 3300 Mockingbird Ln (1) (A) (i) Dallas TX 75205 1,200. Greenhill School 170(b) |General Fund 4141 Spring Valley Rd (1) (A) (ii) Addison TX 75001 1,000. Fort Worth Zoological Association General Fund 1989 Colonial Parkway 509(a)(2) Fort Worth TX 76110 5,000. National Multiple Sclerosis Society General Fund 900 S. Broadway, Ste 250 509(a)(2) Denver CO 80209 100. Council on Foreign Relations General Fund 58 East 68th Street 509(a)(1) New York NY 10065 5,000. Prince of Peace Christian School 170(b) Field of Dreams Phase 1 4000 Midway Road (1) (A) (ii) Carrollton TX 75007 1,000. SPCA of Texas General Fund 2400 Lone Star Drive 509(a)(2) Dallas TX 75266 100. Southern Methodist University 170(b) Medal of (1) (A) (ii) Freedom PO Box 750402 Dallas TX 75275 75,000. Southwestern Medical Foundation Gladie Jo Salvio 2305 Cedar Springs Rd, Ste 150 509(a)(1) Fund Dallas TX 75201 100. See Line 3a statement 398,610. Total 3a 487,110. b Approved for future payment

Total

3Ь

### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income	Exclude	d by section 512, 513, or 514	(e)	
	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (see the instructions)	
1 Program service revenue:			code			
a	<b>_</b>					
b	ļ		<b></b>			
C		_		<u> </u>		
d	<del>                                     </del>		-			
e			-			
g Fees and contracts from government agencies	<del> </del>					
2 Membership dues and assessments	<del></del>		<del>                                     </del>			
3 Interest on savings and temporary cash investments			<del> </del>		· · · · · · · · · · · · · · · · · · ·	
Dividends and interest from securities		<del></del>	14	236 500	<del></del>	
5 Net rental income or (loss) from real estate:	3-777		14	236,509.		
a Debt-financed property	1		24/25/24			
<b>b</b> Not debt-financed property	<u> </u>		<b> </b>			
6 Net rental income or (loss) from personal property			<u> </u>			
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory		- <del></del>				
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue	No.		100			
a JPM Class Action Settlement			14	1,104.		
b Flow-Through From K-1 - Ordinary Inco	me		14	-555.		
c Flow-Through From K-1 - Swap Inco			14	-36,514.		
d Grant Refund			14	1,000.		
e					<del></del>	
12 Subtotal Add columns (b), (d), and (e)	<b>增加</b>		10 m	201,544.		
13 Total. Add line 12, columns (b), (d), and (e)				13	201,544.	
See worksheet in line 13 instructions to verify calculation	ns)			•		
Part XV-B: Relationship of Activities to the	Accompl	ishment of Exempt	Pum	ncec		
	71000111.p.					
Explain below how each activity for which include accomplishment of the foundation's exempting	come is repo	rted in column (e) of Pa	rt XVI-A	contributed importantly	to the	
accomplishment of the foundation's exempt	Julposes (oil		105 101 5	del purposes) (See trie	HISTOCHOTIS.)	
	<del></del>					
				<del></del>		
		<del></del>			<del></del>	
-					<del></del>	
	NOT	APPLICABLE			· · · · · ·	
		•			<del></del>	

## Form 990-PF (2010) Berry R. Cox Family Foundation 75-2864400 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

	<del></del>								
descri	e organization direct bed in section 501(c) ig to political organiz	) of the Code (otl	ngage in any of her than section	the following with 501(c)(3) organ	h any oth	er organization or in section 5	 1 27,		Yes No
a Transf	ers from the reporting	ng foundation to a	a noncharitable	exempt organiza	ition of			新疆 株式社 大	
<b>(1)</b> Ca								1a (1)	Х
<b>(2)</b> Ot	ther assets							1a (2)	Х
<b>b</b> Other	transactions:							THE	
(1) Sa	ales of assets to a no	oncharitable exer	nnt organizatio	n				1b(1)	X
	urchases of assets from		, ,					1b(2)	$\frac{x}{x}$
	ental of facilities, equ			ariization					X
	eimbursement arrang		assets					1b (3)	$\frac{\lambda}{x}$
	oans or loan guarante	•		•		•		1b (4)	
	_		f d	!				1b (5)	X
	erformance of service							1b (6)	<u>X</u>
<b>c</b> Snarin	ig of facilities, equipr	nent, mailing list	ts, other assets	, or paid employe	ees			1c	<u> </u>
<b>d</b> If the a the god any tra	answer to any of the ods, other assets, or ansaction or sharing	above is 'Yes,' c services given t arrangement, sh	complete the follow the reporting	lowing schedule foundation. If the	Column ( e foundati	(b) should alwa	ays show the fa ss than fair ma or services rece	ıır market value o arket value ın	of
(a) Line no	(b) Amount involved		of noncharitable exe					ns, and sharing arrang	nements
<u> </u>	(D) randant involved	(c) Name o	THOREHATTABLE CAL	impt organization	1 (0)	Description of the	nisiers, transaction	s, and snaring arrang	ements
	<u> </u>	+			†				
	·			******	+	<del></del>			
	······································			· · · · · · · · · · · · · · · · · · ·	╁──				
					+				
		<del></del>	<del></del>		<del></del>				
		<del></del>			<del> </del>				
					<del> </del>				
					<u> </u>				
					<u> </u>			·	
						-	_		
	<del></del> -	<del></del>			<del> </del>		-		
describ	oundation directly or sed in section 501(c) complete the follow	of the Code (oth	ted with, or rela	ated to, one or m 501(c)(3)) or in	ore tax-ex section 5	empt organiza 27?	itions	Yes	X No
(	a) Name of organiza	ition	<b>(b)</b> Typ	e of organization		(	c) Description (	of relationship	
_						<del></del>	•		
			<u> </u>						
-						_	,		
		_					-		
Under	penalties of periury. I ded	are that I have exami	ed this return inch	rding accompanying si	hedules and	I statements and to	the best of my kny	owledge and belief it i	e to o
Sign Here	penalties of perjury, I decl t, and complete Declaration	of peparer other i	han taxpayar or fidu	iciary) is based on all	nformation	of which preparer h			s true,
	ignature of officer of truste				Date/	110/1	Pres/I	res	
	Print/Type preparer's n		Preparer's	signature	Date	Date		, PTIN	
	<b>.</b> .		- Inchairle is	Sylettie	<u> </u>		Check if _	<b>」</b> "  ₋	-71.19
Paid	morgan	Souza		ogano.	Dug	81811	self-employed	d Poolos	22012
Preparer		KPMG LLP		<u> </u>		<del></del>	Firm's EIN ►		
Use Only	i Firm's address		wood St.,	Suite 310	0		1		
		Dallas			X 752	201-6585	Phone no (	214) 840-2	000
BAA								Form <b>990</b>	- <b>PF</b> (2010)
									•

Berry R. Cox Family Foundation	n 75-28	64400						
Form 990-PF, Page 1, Part I, L Line 23 Stmt	lne 23							
Other expenses: Other Expense U.S. Treasury - Tax Refund	Rev/Exp Book 15. -950.	15.		et Inv Inc Ad		Chai	rity Disb	
Total =	-935.							
Form 990-PF, Page 6, Part VII Information about Officers, Di		s, Etc.		. <u></u>				
(a) Name and address	(b) Title, a average if per we devoted position	nours ek I to	(c) Compens (If not p enter	satıon <b>paid,</b>	(d) Contribution to employed benefit plan and deferred	e a	(e) Expense ccount, other allowances	
Person X Business Cindy Wolf 2100 McKinney Ave, Ste	201 1.0	<u>ry</u>	0.				0.	
Total				<u> </u>		<u>o.                                    </u>	0.	
Form 990-PF, Page 11, Part XV Line 3a statement	V, line 3a							
Recipient  Name and address (home or business)	If recipie an indivi show a relationsh any found manage substar contribi	dual, any anp to dation er or atial	Foundation status of recipient	Purpose of grant or contribution		dation grant or contribution Bu status Che		Person or Business Checkbox Amount
a Paid during the year  Southwestern Medical Founda  2305 Cedar Springs Rd, St  Dallas TX 75  Movember Inc.  PO Box 2726	e 150		509 (a) (1)	Alzhei Cente	nds of the mer's Diseas er ral Fund	Bus Pers	son or X 500. son or I	
Venice CA 90	294		1				100.	

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient	If recipient is an individual,	Foun- dation	Purpose of grant or contribution	Person or Business
Name and address	show any	status		Checkbox
(home or business)	relationship to	of re-		
()	any foundation	cipient		Amount
	manager or	o.p.o	{	7
	substantial			
	contributor			
	CONTRIBUTOR			
• Paud during the year				
a Paid during the year		170/2	Q	Davison or [
University of Texas Syste	<u>n</u>		Center for	Person or
2200 W Mockingbird Lane		_(1) (A) (V)	Brain Health	Business X
Dallas TX 75235			1 7 7	100.
Fort Worth Zoological Association	,		General Fund	Person or
1989 Colonial Parkway	<b></b>	509(a)(2)		Business X
Fort Worth TX 76110				250.
Southern Methodist University	, 	<u>  170(b)</u>	John Tower Center	
PO_Box_750402		_(1) (A) (11		Business X
Dallas TX 75275	<u> </u>			1,200.
Southwestern Medical Foundation			General Fund	Person or
2305 Cedar Springs Road, Ste 15	0	509 (a) (1)		Business X
<u>Dallas TX 75201</u>				250.
Southwestern Medical Foundation		l	Fund for	Person or
2305 Cedar Springs Road, Ste 15	<u>0</u>	509 (a) (1)	Brain Health	Business X
Dallas TX 75201				250,000.
Southwestern Medical Foundation			Fund for	Person or
2305 Cedar Springs Road, Ste 15	0	509(a)(1)	Brain Health	Business X
Dallas TX 75201				125,000.
John F Kennedy Center for the Performing			2010 Mark Twain	Person or
2700 F Street, NW		509(a)(1)	Prize	Business X
Washington DC 20566				10,000.
Providence Christian School of Texas	9	170(b)	General Fund	Person or
5002 W. Lovers Lane		(1) (A) (ii		Business X
Dallas TX 75209				100.
University of Texas System	n	170(b)	Center for	Person or
2200 W Mockingbird Lane		(1) (A) (v)		Business X
Dallas TX 75235				100.
Epworth Children's Home			General Fund	Person or
2900 Millwood Ave		509(a)(1)		Business X
Columbia SC 29205				100.
World Affairs Council			General Fund	Person or
325 N. St. Paul Street, Ste 42	00	509(a)(1)		Business X
Dallas TX 75201		33332		110.
The Humane Society of the U.S		-	General Fund	Person or
2100 L Street, NW		509(a)(1)	722222222	Business X
Washington DC 20037		727 (7,777		200.
The Salvation Army Women's Auxiliar			General Fund	Person or
PO Box 36026		509(a)(1)		Business X
Dallas TX 75235		303(8/11/		150.
The Salvation Army			General Fund	Person or
				Business X
8787 N. Stemmons Freeway, Ste 80	<u> </u>	509(a)(1)		250.
Dallas TX 75247			Conoral Earl	
Dallas Area Habitat for Humanit	¥		General Fund	Person or
2800 N. Hampton Road		509 (a) (1)		Business X
Dallas TX 75212		L		100.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year Wilkinson Center PO Box 720248 Dallas TX 75372		 509(a)(1)	General Fund	Person or Business X 2,500.
Parkland Foundation 2777 N. Stemmons Frwy, Ste 17 Dallas TX 75207	 00 	 509(a)(1)	Capital Campaign	Person or Business X 5,000.
Ronald McDonald House of New York I 405 East 73rd Street New York NY 10021	nc	509(a)(1)	General Fund	Person or Business X
Ronald McDonald House of New York I 405 East 73rd Street New York NY 10021	nc	 509(a)(1)	General Fund	Person or Business X
Baylor Health Care System Foundation 3600 Gaston Ave, Ste 100 Dallas TX 75246	n	509 (a) (1)	General Fund	Person or Business X
New York-Presbyterian Fund Inc. 525 East 68th Street, Box 1 New York NY 10065	23	509 (a) (1)	Ronaldo O. Perelman Heart Institute	
United Service Organizations Inc PO Box 96860 Washington DC 20077		509 (a) (1)	General Fund	Person or Business X

Total

398,610.

Form 990-PF, Page 1, Part I

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Locke Liddell & Sap	Legal Services	3,300.	3,300.		

Total

3,300.

<u>3,300.</u>

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Provider	Provided	Paid Per Books	Investment Income	Net Income	Disbursements for Charitable Purposes		
KPMG To	ax Services	11,609. 4,700.	<u>5,805.</u> 2,350.		5,804. 2,350.		

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
JP Morgan Chase	Safekeeping Fees Account Fees	1,381. 100.	1,381. 100.		

Total

1,481. 1,481.

Form 990-PF, Page 2, Part II, Line 10a

L-10a Stmt

İ	End o	f Year	End of Year		
Line 10a - Investments - US and State Government Obligations:	State and Local Obligations Book Value	State and Local Obligations FMV	US Government Obligations Book Value	US Government Obligations FMV	
U.S. Treasury Bills/Notes			8,726,378.	9,160,892.	

Total

8,726,378. 9,160,892.

Form 990-PF, Page 2, Part II, Line 10b **L-10b Stmt** 

	End of Year				
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value			
U.S. Natural Gas Fund, L.P.	184,065.	209,702.			
Total	184,065.	209,702.			

Form 990-PF, Page 2, Part II, Line 13 L-13 Stmt

	End of Year				
Line 13 - Investments - Other:	Book Value	Fair Market Value			
U.S. Treasury Bills Purchased Interest Receivable	21.	21.			
Total	21.	21.			

# BERRY R. COX FAMILY FOUNDATION A SUPPORTING SCHEDULE ATTACHED TO AND MADE PART OF FORM 990-PF, RETURN OF PRIVATE FOUNDATION FOR THE YEAR 2010

#### Page 1, Line 16a, Legal Fees

Description	Revenue and Expenses Per Books	Net Investment Income	Disbursements for Charitable Purposes
Legal Fees	\$3,300	\$3,300	\$0
Page 1, Line 16b, Accounting Fee	2		
Description	Revenue and Expenses Per Books	Net Investment Income	Disbursements for Charitable Purposes
Accounting Fees	\$16,309	\$8,155	\$8,154
Page 1, Line 16c, Other Professio	nal Fees		
<u>Description</u>	Revenue and Expenses Per Books	Net Investment Income	Disbursements for Charitable Purposes
Investment Fees	\$1,481	\$1,481	\$0

Berry R. Cox Family Foundation December 31, 2010

EIN: 75-2864400

#### **Statement Pursuant to §171**

The taxpayer has chosen to amortize bond premium on the following bonds using the constant yield method:

Treasury Note 2.625%, due 06-30-14, (912828ky5) \$300,000, purchased 08-16-10 Treasury Note 1.875%, due 04-30-14, (912828kn9) \$310,000, purchased 08-16-10

# Form **8868** (Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

O If you a	re filing for an Automatic 3-Month Extension, co re filing for an Additional (Not Automatic) 3-Mon Inplete Part II unless you have already been grant	th Extensio	n, complete only Part I(on page 2 of this	s form	).	,	<b>►</b> <u>x</u>
Electronic corporation request an Associated	filing (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (ne extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which reling of this form, visitwww.irs.gov/efile and click	8 if you nee ot automation Part I or P must be sen	ed a 3-month automatic extension of time:  3) 3-month extension of time. You can eleant II with the exception of Form 8870, It to the IRS in paper format (see instruc	e to fil	e (6 n	nonths fo	r a 18868 to 1 Transfers alls on the
Part/图 A	Automatic 3-Month Extension of Time.	Only subr	mit original (no copies needed).				
A corporation	on required to file Form 990-T and requesting an	automatic 6	5-month extension- check this box and co	omple	te Pai	rt I only	▶ [
All other co income tax		, REMICS, a	and trusts must use Form 7004 to reques	st an e	extens	ion of tin	ne to file
Type or print	Name of exampt organization  Berry R. Cox Family Foundation				·	entification 4400	number
File by the due date for	Number, street, and room or suite number. If a P.O. box, see	instructions.					
filing your return. See	2100 McKinney Avenue, #1700			_			
instructions.	City, town or post office, state, and ZIP code. For a foreign add	dress, see instru	uctions.				
	Dallas				TX_	7 <u>5</u> 20:	1
Enter the Re	eturn code for the return that this application is fo	or (file a sep	parate application for each return)				04
Application Is For		Return Code	Application is For				Return Code
Form 990		01	Form 990-T (corporation)				07
Form 990-Bl	·	02	Form 1041-A			. 08	
Form 990-E2	<u> </u>	03	Form 4720			09	
Form 990-PF	· · · · · · · · · · · · · · · · · · ·	04	Form 5227				10
	(section 401(a) or 408(a) trust)	05	Form 6069				
Form 990-T	(trust other than above)	05	Form 8870				12
Telephon If the org If this is to check this the exten I I reques	ts are in the care of Berry R. Cox, In the No. (214) 220-3612  anization does not have an office or place of but for a Group Return, enter the organization's four ts box . [ ] . If it is for part of the group, check tsion is for.  St an automatic 3-month (6 months for a corpora	FAX No siness in the digit Group k this box .	Exemption Number (GEN) If  and attach a list with the names a  d to file Form 990-T) extension of time	this is	for th	ne whole	group,
The ext	ug 15 , 20 11 , to file the exempt orgension is for the organization's return for: calendar year 20 10 or tax year beginning, 20						
	x year entered in line 1 is for less than 12 montlinge in accounting period	hs, check re	ason: Initial return Fina	al retu	m		
nonrefu	pplication is for Form 990-BL, 990-PF, 990-T, 47 ndable credits. See instructions			За	\$		3,000.
paymen	pplication is for Form 990-PF, 990-T, 4720, or 60 ts made. Include any prior year overpayment all	owed as a c	redit	3b	\$		4,751.
EFTPS	due. Subtract line 3b from line 3a. Include your (Electronic Federal Tax Payment System). See	nstructions.		3c			0.
Caution. If yo ayment instr	u are going to make an electronic fund withdraw uctions.	al with this	Form 8868, see Form 8453-EO and Forn	n <b>88</b> 79	9-E0 1	for	