

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

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

Department of the Treasury

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

OMB No 1545-0052

	-	dar year 2010, or tax ye	ear beginning		, and ending		
		all that apply:	Initial return	Initial return of a fo	ormer public charity	Final return	
_			Amended return	Address chan	· - —	Name change	
Nar	ne of	foundation				A Employer identification	number
			MILY CHARITI	ES, INC.			
ļ			AM E. GETZEN		15 7	82-0540623	
Nun	nber ar	,	er if mail is not delivered to street	address)	Room/suite	B Telephone number	01
Cit	orto		BROOK DRIVE		<u> </u>	941-922-85	
City	or it	wn, state, and ZIP code SARASOTA ,				C If exemption application is p D 1. Foreign organizations	
н (heck	type of organization:	X Section 501(c)(3) ex	empt private foundation		Foreign organizations me check here and attach co	seting the 85% test,
	_	ction 4947(a)(1) nonexe		Other taxable private founda	ation	1	
I Fa		rket value of all assets a			Accrual	 If private foundation sta under section 507(b)(1) 	(A), check here
(fr	om F	Part II, col. (c), line 16		her (specify)		F If the foundation is in a	
	\$		57,810. (Part I, colu	mn (d) must be on cash i	basis)	under section 507(b)(1)	
Pa	ırt I	Analysis of Revenue ((The total of amounts in connecessarily equal the amo	and Expenses blumns (b), (c), and (d) may not bunts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, gra		100,000.		N/A	
	-	Check If the foundary interest on savings and tem	ation is not required to attach Sch. B				
	3	cash investments		10 600	10 600		OMA MENTENIM 1
	4	Dividends and interest	from securities	10,692.	10,692.		STATEMENT 1
		Gross rents Net rental income or (loss)					
		Net gain or (loss) from sale	of accets not on line 10	-22,670.			
Revenue	b	Gross sales price for all assets on line 6a	183,858.	22/0/01		RECEIV	IED
e Vel	7	Capital gain net income (fro			0.	N.O.	1001
æ	8	Net short-term capital g	gain			21	2011
	9	Income modifications				MAY 3 1	5011
	10a	Gross sales less returns and allowances					
	l	Less Cost of goods sold				OGDE	N, U1
	l	Gross profit or (loss)		2 ((4	2 ((4		CM M M C C C C C C C C C C C C C C C C
	11	Other income	ugh 11	2,664. 90,686.	2,664. 13,356.		STATEMENT 2
	12	Total. Add lines 1 thro		0.	13,330.		0.
	14	Other employee salarie			<u>~</u>	-	
	15	Pension plans, employ	•				
ses	16a	Legal fees				·	
Expen	b	Accounting fees	STMT 3	875.	0.		875.
ŭ	I	Other professional fees	3				
and Administrative		Interest			400		ļ
stra	18	Taxes	STMT 4	506.	429.		0.
ij	19	Depreciation and deple	tion				
퉏	20	Occupancy Travel, conferences, ar	ad maatings				
þ	21	Printing and publication	<u> </u>				
		Other expenses	STMT 5	3,338.	3,277.		61.
Operating	24	Total operating and a		3/330.	3,2,,,		<u> </u>
Ser		expenses. Add lines 1		4,719.	3,706		936.
Õ	25	Contributions, gifts, gr		32,200.			32,200.
	26	Total expenses and di					
	lacksquare	Add lines 24 and 25		36,919.	3,706		33,136.
•	27	Subtract line 26 from l	ine 12:				
	1	Excess of revenue over exp		53,767.	2	1	
	1	Net investment incom			9,650		
0235	<u>C</u> 501 7-10	Adjusted net income (if negative, enter -0-) k Reduction Act Notice, see	the instructions	1	N/A	Form 990-PF (2010)
12-0	7-10	LUW LOLLABEIMON	i ricuuctivii Aet MULICE, SEE	the manufilling			(2010)

Form	990-PF	(2010)

82-0540623 Page 2

_	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
<u> </u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	5,569.	5,384.	5,384.
	2	Savings and temporary cash investments	45,624.	71,380.	71,380.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	840,080.	868,276.	881,046.
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers)	891,273.	945,040.	957,810.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
≣	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
		7	0	_	,
_	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.			
es	24	Unrestricted			
anc E	25	Temporarily restricted			
Bai	26	Permanently restricted	•		
Pu		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.			
Sor	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	891,273.	945,040.	
Net Assets or Fund Balance	30	Total net assets or fund balances	891,273.	945,040.	
	31	Total liabilities and net assets/fund balances	891,273.	945,040.	
_				2 2 3 7 0 2 0 6	· · · · · · · · · · · · · · · · · · ·
	art	Analysis of Changes in Net Assets or Fund B	aiaiices		

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	891,273.
2	Enter amount from Part I, line 27a	2	53,767.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	945,040.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	945,040.

Part IV Capital Gains an	d Losses for Tax on In	vestment	Income						
(a) List and describe 2-story brick wareh	the kind(s) of property sold (e.gouse; or common stock, 200 she	., real estate, s. MLC Co.)		(b) H	łow acqu - Purcha - Donatii	se on (c) Date acq mo., day,		(d) Date sold (mo., day, yr.)
1a SEE ATTACHED					P	V.	ARIO	JS	VARIOUS
b SEE ATTACHED					P	V.	ARIO	JS	VARIOUS
c SEE ATTACHED					P	V.	ARIO	JS	VARIOUS
e				<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis opense of sale		_		(h) Gain (e) plus (f)		
a 12,375.			12,70						-334.
b 171,364.			193,81	9.					-22,455.
c 119.									119.
<u>d</u>									
<u>e</u>									
Complete only for assets showing of		ſ					ains (Col. :), but not		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)				osses (fr		
	as 01 12/3 1/09	Over	col. (j), if any				·····		
<u>a</u>									-334.
b									-22,455.
C		 	·	-					119.
<u>d</u>		 							
<u>e</u>				$\overline{}$					
2 Capital gain net income or (net capit	al loss) $ \begin{cases} \text{If gain, also ente} \\ \text{If (loss), enter -0} \end{cases} $			}	2	· · · · · · · · · · · · · · · · · · ·			-22,670.
3 Net short-term capital gain or (loss)	as defined in sections 1222(5) ar	nd (6):		١ , ا					
If gain, also enter in Part I, line 8, co	umn (c).			\downarrow	1			/-	
If (loss), enter -0- in Part I, line 8	lan Castian 4040(a) for	- Dadd	Tau an Nat	<u> </u>	3			N/A	<u> </u>
	der Section 4940(e) for					ent inco	me		
(For optional use by domestic private for	undations subject to the section	4940(a) tax on	net investment ir	ncome	9.)				
If section 4940(d)(2) applies, leave this	part blank.								
Was the foundation liable for the section		• •	•	riod?					Yes X No
If "Yes," the foundation does not qualify 1 Enter the appropriate amount in each				00					
(a)	···	uctions before	making any enur				<u> </u>		(d)
Base periód years	(b) Adjusted qualifying dis	stributions	Net value of no	(c) onchar	ritable-us	se assets	(00	Distri	(d) bution ratio vided by col. (c))
Calendar year (or tax year beginning		24,936.	1101 14100 01 110			,506.)i. (U) ui	• 03534 <u>5</u>
2009		6,350.				,532.			.008950
2007		310.				,660.			.000551
2006		180.				,940.	<u> </u>		.000331
2005	1	130.				647.			.065201
2003		L / , O ± Z •]			4/3	,047.			.003201
2 Total of line 1, column (d)							2		.110467
3 Average distribution ratio for the 5-y	ear hase nerind - divide the total	on line 2 by 5	or by the number	r of ve	are				*110407
the foundation has been in existence		on mic 2 by 5,	or by the number	i di ye	uis		3		.022093
the realitation has been in existence	in 1000 main o youro								.02203
4 Enter the net value of noncharitable	use assets for 2010 from Part X	line 5					4		808,449.
4 Litter the flet value of noncharitable	asc assets for 2010 from 1 art A,	, 11110 3							000/110
5 Multiply line 4 by line 3							5		17,861.
y Manapiy into 4 by into 5							-		11,70010
6 Enter 1% of net investment income	(1% of Part I line 27h)						6		97.
C Entor 170 of not invosimont mounts	(or are ginio Er b)								
7 Add lines 5 and 6							7		17,958.
. Add midd o and o							<u> </u>		
8 Enter qualifying distributions from F	art XII, line 4						8		33,136.
If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	e 1b, and comp	lete that part usir	ng a 1	% tax ra	te.			

GETZEN FAMILY CHARITIES, INC. Form 990-PF (2010) C/O WILLIAM E. GETZEN 82-0540623 Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 97. of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 97. 6 Credits/Payments: 200 a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations - tax withheld at source 6b c 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 200. 7 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 103. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax 77. Part VII-A | Statements Regarding Activities Yes No 1a 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? Х 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? Х 1¢ d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. ▶ \$ (1) On the foundation. > \$ e 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? X 2 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? Х 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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? X Х 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. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) FLb 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 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

Form **990-PF** (2010)

10

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

		<u>2-05406</u> 2	<u> 43</u>	Pay	JE 3
Pa	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	<u>_</u> 1	1		<u> </u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17, 2008?	<u>_</u> 1	2		ζ_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	<u></u>	3 2	<u> </u>	
	Website address ► N/A				
14	The books are in care of ► WILLIAM E. GETZEN Telephone no. ►			31	
		IP+4 ▶ <u>342</u>	31_		_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			►L	لـ
	and enter the amount of tax-exempt interest received or accrued during the year	15	N/I		_
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Y		ю
	securities, or other financial account in a foreign country?	1	6		<u> </u>
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of				
_	the foreign country				
P	art VII-B 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.	\vdash	 Y	es N	10
1:	a During the year did the foundation (either directly or indirectly):				
		X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
		X No			
		X No			
		X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
		X 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	[TE]			
	·	X No			
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	37/3	.		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	N/A	lb	-	_
	Organizations relying on a current notice regarding disaster assistance check here				
'	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	١.	.	١,	.
9	, , , ,		lc	- -	Κ
	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?	□ No			
	MRV 41 - M				
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
	statement - see instructions.)		ь :	x	
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	<u> </u>	-		
	•		-		
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
		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		1		
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to disj	į.			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,				
	Form 4720, to determine if the foundation had excess business holdings in 2010)	N/A 3	вь	-	
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	1	la	7	K
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose t			\top	_
_	had not been removed from jeopardy before the first day of the tax year beginning in 2010?		ь	_ 2	K
		Form 9	90-F	F (20	10)
				•	•

GETZEN FAMILY CHARITIES, INC. Form 990-PF (2010) C/O WILLIAM E. GETZEN 82-0540623 Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained __ Yes ___ No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b Х If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b N/AInformation About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances compensation SEE STATEMENT 7 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 hours per week (c) Compensation devoted to position allowances NONE

Form **990-PF** (2010)

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

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

All other program-related investments. See instructions.

Form **990-PF** (2010)

Total. Add lines 1 through 3

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Form 990-PF (2010) C/O WILLIAM E. GETZEN 82-0540623 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; 660,779. a Average monthly fair market value of securities 1a b Average of monthly cash balances 1b 82,324. c Fair market value of all other assets 1c 77,657. 820,760. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. l te i 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 820,760. 12,311. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 808,449. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 5 40,422. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here
and do not complete this part.) Minimum investment return from Part X, line 6 40,422. 97. 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.) 2b c Add lines 2a and 2b 2c 97. 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 325. 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 0. 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 33,136. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) За b Cash distribution test (attach the required schedule) 3Ь 33,136. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 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

Form **990-PF** (2010)

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,	55,745	Tours prior to 2000	2000	2010
line 7				40,325.
2 Undistributed income, if any, as of the end of 2010				, <u>,</u>
a Enter amount for 2009 only			34,545.	
b Total for prior years:			-	
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
¢ From 2007				
d From 2008				
e From 2009	0			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 33,136.			22 126	
a Applied to 2009, but not more than line 2a			33,136.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount	0.			0.
e Remaining amount distributed out of corpus	0.		•	<u></u>
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))	<u> </u>			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	•	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line		· · · ·		
4a from line 2a. Taxable amount - see instr.			1,409.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				40,325.
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.	0			
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				
				

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here LX if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2010)

C/O WILLIAM E. GETZEN

82-0540623 Page 11

Grants and Contributions Paid During the	vear or Approved for Future F	'ayment		
Recipient 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	or substantial contributor	recipient		
a raid during the year				
SEE STATEMENT 8				
Total			▶ 3a	32,200
b Approved for future payment				
NONE				
NONE				
			▶ 3b	(

Part XVI-A	Analysis of Income-Producing Activities
I WILKEL A	Analysis of moonic i roddomy Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
•	3333				
b					· ·
c				***	
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			_		
4 Dividends and interest from securities			14	10,692.	
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			14	2,664.	
8 Gain or (loss) from sales of assets other					
than inventory			18	-22,670.	
9 Net income or (loss) from special events		· -			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1				
a FEDERAL TAX REFUND			01		
b					
C	<u> </u>				
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		(0.	-9,314.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	-9,314
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	to the Acco	mplishment of	Exempt F	urposes	

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

023621 12-07-10

	_	_		_	
82	-n	5.	4 N	6	ワマ
04	– u	-	4 U	O.	<i></i>

-orm 990-i		ILLIAM E. GET		82-054		<u>Pa</u>	ge 13
Part X			Fo and Transactions a	nd Relationships With Nonch	aritable	•	
	Exempt Organ				 -	-	
			lowing with any other organization			Yes	No
			on 527, relating to political organi	zations?			
	fers from the reporting found	ation to a noncharitable exem	pt organization of:			-	
(1) (1a(1)		<u>X</u> _
	Other assets				1a(2)		<u> </u>
	transactions:						
	Sales of assets to a noncharita				15(1)		<u> X</u>
٠,,	Purchases of assets from a no		on		1b(2)		<u> </u>
	Rental of facilities, equipment,				1b(3)	_	<u> </u>
(4) F	Reimbursement arrangements				1b(4)		X
	oans or loan guarantees				1b(5)		X
(6) F	Performance of services or me	mbership or fundraising solid	atations		1b(6)		<u>X</u>
	ng of facilities, equipment, ma				1c		<u> </u>
d If the	answer to any of the above is	"Yes," complete the following	schedule. Column (b) should alw	ays show the fair market value of the goods,	other ass	ets,	
or se	rvices given by the reporting fo	oundation. If the foundation re	eceived less than fair market value	e in any transaction or sharing arrangement,	show in		
colur	nn (d) the value of the goods,						
(a) Line no	(b) Amount involved	(c) Name of nonchar	itable exempt organization	(d) Description of transfers, transactions, and	d sharing an	angeme	nts
		N/	A				
_							
· · · · · · · · · · · · · · · · · · ·							
		-					
						-	
2a Is the	foundation directly or indirec	tly affiliated with, or related to	, one or more tax-exempt organiz	ations described			
ın se	ction 501(c) of the Code (other	r than section 501(c)(3)) or in	section 527?		Yes	X] No
b If "Ye	s," complete the following sch	ed <u>ule.</u>					
	(a) Name of org	anization	(b) Type of organization	(c) Description of relation	ship		
	N/A						
				statements, and to the best of my knowledge and b	elief, it is tri	ле, сопте	ct,
Sign	and complete Declaration of prepa	arer (other than taxpayer or flouciar)	y) is based on all information of which p	, ,			
Here	J John C	· Jessen	√S-23	DIRECTOR			
	Signature of officer or tru	ustee <i>U</i>	Date	Title			
	Print/Type preparer's na	ame Prepare	er's signature	Date Check if PTIN			
			LA CON	5/18/1(self- employed			
Paid	JULIE L. B	YNUM took	Alan BEKK	3,101.1			
Prepai			zkio e do.	Firm's EIN ▶			
Use O							
	Firm's address P .	O. BOX 49348					
		RASOTA, FL 34	230-6348	Phone no. 941-	-365-	461	7

023622 04-26-11

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

GETZEN FAMILY CHARITIES, INC. C/O WILLIAM E. GETZEN 82-0540623 Organization type (check one) Filers of: Section: ___ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 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 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

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Page 1 of 1 of Part I

Name of organization
GETZEN FAMILY CHARITIES, INC.

Employer identification number

C/O WILLIAM E. GETZEN

82-0540623

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	WILLIAM E. AND RUTH E. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Oncash Occash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

of

Name of organization

GETZEN FAMILY CHARITIES, INC.

82-0540623

Employer identification number

C/O WILLIAM E. GETZEN

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	90 990.E7 or 990.PE\/2010

:	orm 000, 000 E7, or 000 BE) (2010)		
Name of org	orm 990, 990-EZ, or 990-PF) (2010)		Page of of Part I Employer identification number
•	N FAMILY CHARITIES, INC.		Compros of recommendation manifest
	ILLIAM E. GETZEN		82-0540623
Part III	Exclusively religious, charitable, etc., inc	columns (a) through (e) and the us, charitable, etc., contributions	n 501(c)(7), (8), or (10) organizations aggregating following line entry. For organizations completing of
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
ļ	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	J.	(e) Transfer of gift	
ļ.	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee

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

If you a	are filing for an Automatic 3-Month Extension, comple	te oniv Pa	rt I and check this box		•	\mathbf{x}
	are filing for an Additional (Not Automatic) 3-Month Ex			form)	•	
	omplete Part II unless you have already been granted a				m 8868	
	ic filing (e-file). You can electronically file Form 8868 if y					oration
	to file Form 990-T), or an additional (not automatic) 3-mo					
	file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in pap					
	rs gov/efile and click on e-file for Charities & Nonprofits		,		3 · · ·	•
Part I	Automatic 3-Month Extension of Time		bmit original (no copies needed).	_		
A corpora	ation required to file Form 990-T and requesting an autor			nplete	_	
Part I onl	y				•	· 🗀
	corporations (including 1120-C filers), partnerships, REM ome tax returns	ICs, and t	rusts must use Form 7004 to request an	exten	sion of time	
Type or	Name of exempt organization			Emp	loyer identification	n number
print	GETZEN FAMILY CHARITIES, II	NC.		'	•	
	C/O WILLIAM E. GETZEN			8	2-0540623	
File by the due date for filing your	Number, street, and room or suite no If a P O box, s 1421 WESTBROOK DRIVE	ee instruc	tions			
return See instructions	City, town or post office, state, and ZIP code. For a for SARASOTA, FL 34231	oreign add	ress, see instructions			
	DAIGNOTA, FE 34231					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Applicat	ion	Return	Application			Return
Is For		Code	Is For			Code
Form 990)	01	Form 990-T (corporation)			07
Form 990	D-BL	02	Form 1041-A			08
Form 990)-EZ	03	Form 4720			09
Form 990)-PF	04	Form 5227			10
Form 990	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	0-T (trust other than above)	06	Form 8870			12
	WILLIAM E. GET	ZEN	-			
• The b	ooks are in the care of 1421 WESTBROOK	DRIV	E; - SARASOTA, FL 34	231		
Telepl	none No ▶ <u>941-922-8581</u>		FAX No 🕨			
	organization does not have an office or place of busines				•	· 🗀
	is for a Group Return, enter the organization's four digit	_	· · · · · · · · · · · · · · · · · · ·		r the whole group,	
box 🕨	If it is for part of the group, check this box				ers the extension i	s for
1 re	equest an automatic 3-month (6 months for a corporation					
_		t organiza	tion return for the organization named a	above	The extension	
	or the organization's return for:					
	X calendar year 2010 or					
	tax year beginning	, an	d ending		_	
2 lf t	he tax year entered in line 1 is for less than 12 months, o Change in accounting period	check reas	on. Initial return Fina	al retur	n	
	his application is for Form 990-BL, 990-PF, 990-T, 4720, nrefundable credits. See instructions	or 6069, e	nter the tentative tax, less any	32	\$	97.
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	3a		<i></i>
	timated tax payments made Include any prior year over	-		3b	s	200.
_	lance due. Subtract line 3b from line 3a Include your pa		<u> </u>	100		
	using EFTPS (Electronic Federal Tax Payment System).	-	·	3c	\$	0.
	If you are going to make an electronic fund withdrawal				EO for payment ins	
	For Paperwork Reduction Act Notice, see Instructions				Form 8868 (F	

023841 01-03-11

FORM 990-PF DIVIDENDS	S AND	INTER	EST F	'ROM	SECU	RITIES	STATEMENT	1
SOURCE		GROSS	AMOU	NT		ITAL GAINS	COLUMN (A	.)
NORTHERN TRUST	_		10,6	92.		0.	10,6	92.
TOTAL TO FM 990-PF, PART I, LI	N 4 =		10,6	92.		0.	10,6	92.
FORM 990-PF	0'	THER II	ICOME				STATEMENT	2
DESCRIPTION		1	(<i>F</i> REVE	NUE		(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
INCREASE IN CSV OF LIFE INSURA	ANCE		2,664		64.	2,664	•	
TOTAL TO FORM 990-PF, PART I,	LINE	11		2,6	64.	2,664	•	
FORM 990-PF	AC	COUNTI	IG FI	EES	<u> </u>		STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS			EST-	(C) ADJUSTED NET INCOM		
ACCOUNTANT FEES		875.			0.			75.
TO FORM 990-PF, PG 1, LN 16B		875.	-		0.	-		75.
FORM 990-PF		TAX	ES .				STATEMENT	4
FORM 990-PF DESCRIPTION	EXPE	A)	NET	(B) INVI	EST-	(C) ADJUSTED NET INCOM	(D) CHARITA	4 ABLE
	EXPE	A) NSES	NET	INV		ADJUSTED NET INCOM	(D) CHARITA	4 ABLE

TOTAL TO FORM 990-PF, PART II, LINE 13

881,046.

868,276.

FORM 990-PF	OTHER E	XPENSES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO	T- ADJ	C) USTED INCOME		
CORPORATE ORGANIZATION FEE INVESTMENT FEES PREMIUM ON LIFE INSURANCE	61. 1,305.		0. 05.			61.
HELD BY CHARITY	1,972.	1,9	72.			0.
TO FORM 990-PF, PG 1, LN 23	3,338.	3,2	77.			61.
FORM 990-PF	OTHER INV	ESTMENTS		S	TATEMENT	
FORM 990-PF DESCRIPTION	V.	ESTMENTS LUATION LETHOD	BOOK VAL	F	TATEMENT AIR MARKE	
	VA M EQ FD ALUE FD	LUATION	BOOK VAL 108, 291,	UE 553.	AIR MARKE	T 98.
DESCRIPTION MFB NORTHERN EMERGING MRKTS MFB NORTHERN FDS LARGE CAP V	VA M EQ FD ALUE FD NTL EQ ID CAP	LUATION ETHOD COST COST	108, 291,	F UE 553. 255.	AIR MARKE VALUE	98. 00.

	- LIST OF OFFICERS, DES AND FOUNDATION MANA		STAT	EMENT 7
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
WILLIAM E. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 2.00	0.	0.	0.
RUTH E. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 1.00	0.	0.	0.
LINDA R. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 1.00	0.	0.	0.
SANDRA L. ALGER 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 1.00	0.	0.	0.
JAMES W. GETZEN 1421 WESTBROOK DRIVE SARASOTA, FL 34231	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, I	PAGE 6, PART VIII	0.	0.	0.

FORM 990-PF

STATEMENT 8

	DURING THE YEAR	SIAII	EMENI. 0
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
BOY SCOUT COUNCIL 11046 JOHNSON BLVD SEMINOLE, FL 33772	NONE GENERAL FUND	509(A)(1)	2,500.
CHURCH OF THE PALMS 3224 BEE RIDGE RD SARASOTA, FL 34239	NONE FOOD PANTRY	CHURCH	2,000.
FORTY CARROTS FAMILY CENTER 1500 SOUTH TUTTLE AVE SARASOTA, FL 34239	NONE GENERAL FUND	SCHOOL	1,000.
GIRL SCOUT COUNCIL P.O. BOX 19611A NEWARK, NJ 07195	NONE GENERAL FUND	509(A)(1)	5,000.
HIGHLANDS-CASHIERS HOSPITAL FOUNDATION PO BOX 190 HIGHLANDS, NC 28741	NONE GENERAL FUND	509(A)(3)	5,000.
RESURRECTION HOUSE 507 KUMQUAT COURT SARASOTA, FL 34236	NONE GENERAL FUND	509(A)(1)	2,000.
RED CROSS P.O. BOX 4002018 DES MOINES, IA 50340	NONE GENERAL FUND & HAITI	509(A)(1)	2,000.
GULF COAST HERITAGE ASSOCIATION, INC. P.O. BOX 846 OSPREY, FL 34229	NONE GENERAL FUND	509(A)(1)	100.

GRANTS AND CONTRIBUTIONS

GETZEN FAMILY CHARITIES, INC. C	/O WILLIA	83	2-0540623
HIGHLANDS BOLIVIAN MISSION 171 HOSPITAL DRIVE, SUITE 700 HIGHLANDS, NC 28741	NONE GENERAL FUND	509(A)(1)	100.
CASHIERS-HIGHLANDS HUMANE SOCIETY P.O. BOX 638 CASHIERS, NC 28717	NONE GENERAL FUND	509(A)(1)	250.
SOUTHSIDE ELEMENTARY SCHOOL 1901 WEBBER ST SARASOTA, FL 34239	NONE GENERAL FUND	SCHOOL	3,000.
BASCOM ART CENTER 323 FRANKLIN ROAD HIGHLANDS, NC 28741	NONE GENERAL FUND	509(A)(1)	250.
SAMARITAN COUNSELING SERVICES 3224 BEE RIDGE RD SARASOTA, FL 34239		509(A)(1)	2,000.
SARASOTA MEMORIAL HEALTHCARE FOUNDATION 1700 S TAMIAMI TRAIL SARASOTA, FL 34239	NONE GENERAL FUND	509(A)(1)	2,000.
HIGHLANDS UNITED METHODIST CHURCH P.O. BOX 1959 HIGHLANDS, NC 28741	NONE FOOD PANTRY	509(A)(1)	1,000.
HABITAT FOR HUMANITY 1757 N EAST AVE SARASOTA, FL 34234	NONE GENERAL FUND	509(A)(1)	2,000.
SALVATION ARMY P.O. BOX 2792 SARASOTA, FL 34230	NONE GENERAL FUND	509(A)(1)	2,000.
TOTAL TO FORM 990-PF, PART XV, LI	:NE 3A		32,200.

GETZEN FAMILY CHARITIES, INC 82-0540623

2010 Tax Information Statement

Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Questions?

Corrected

XX-XXX0623 57-6141618 (941)329-2656 2nd TIN notice

23-77952

Recipient's Name and Address: GETZEN FAMILY CHARITIES INC ATTN: WILLIAM GETZEN 1421 WESTBROOK DR. SARASOTA, FL 34231-3548

Page 7 of 17

Payer's Name and Address: NORTHERN TRUST, NA P.O. BOX 803878 CHICAGO, IL 60680

2010 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS are Gross Proceeds less commissions and option premiums.

Number of shares	CUSIP	Description	Date Acquired	Date of Sale	Stocks : Bonds, etc.	Cost or other Basis	Net Gain or Loss	Federal Income Tax Withheld
	(Box 1b)	(Box 7)	· , -	(Box 1a)	(Box 2)			(Box 4)
Short Term S	ales Reported on	1099-B	ø	,,	(2011)			1002 47
	722005667	PIMCO COMMODITY REALRETURN STRATEGY FUND	VARIOUS	05/10/2010	10,859.16	11,259.75	-400 59	0 00
189.7100	665162517	MFB NORTHERN FDS MULTI MANAGER LARGE CAPFD	10/15/2009	08/05/2010	1,515.78	1,449.38	66 40	0 00
Total Short To	erm Sales Report	ed on 1099-B			12,374.94	12,709.13	-334 19	0.00
	5% Sales Reporte 665162558	d on 1099-B MFB NORTHN MULTI MANAGER INTL EOTY FD FD	06/01/2007	05/07/2010	22,750.00	34,423.66	-11,673.66	0.00
489 8600 ,	665162582	MFB NORTHN FUNDS EMERGING MKTS EQTY EQTY INDEX FD	VARIOUS	05/07/2010	5,070.00	6,151.03	-1,081.03	0 00
1911 3500	22544R305	MFO CREDIT SUISSE COMMODITY-RETURN PLUS STRATEGY FD COM CL	VARIOUS	05/10/2010	15,443.77	22,259 45	-6,815 68	0.00
989 1100	722005667	PIMCO COMMODITY REALRETURN STRATEGY FUND	03/24/2009	05/10/2010	7,734 84	6,360 00	1,374 84	0.00
2496 4000	665162517	MFB NORTHERN FDS MULTI MANAGER LARGE CAPFD	07/31/2009	08/05/2010	19,946 22	17,350 00	2,596 22	0.00
329 8300	G65162558	MFB NORTHN MULTI-MANAGER INTL EQTY FD FD	06/01/2007	08/05/2010	2,952.00	4,182 24	-1,230.24	0 00



GETZEN FAMILY CHARITIES, INC 82-0540623

2010 Tax Information Statement

Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Questions?

Corrected

23-77952 XX-XXX0623 57-6141818 (941)329-2656 2nd TIN notice Recipient's Name and Address: GETZEN FAMILY CHARITIES INC ATTN: WILLIAM GETZEN 1421 WESTBROOK DR. SARASOTA, FL 34231-3548

Page 8 of 17

Payer's Name and Address: NORTHERN TRUST, NA P.O. BOX 803878 CHICAGO, IL 60680

Number of shares	CUSIP	Description Description	Date Acquired	Date of Sale	Stocks Bonds, etc.	Cost or other Besis	Net Gain or Loss	Federal Income Tax Withheld
	(Box 1b)	(Box 7)		(Box 1a)	(Box 2)			(Box 4)
271.8800	665162574	MFB NRTHN MULTIMGR MID" FOR NMMCX MID FOR NMMCX	06/01/2007	08/05/2010	2,727.00	3,295.19	-568.19	0.00
135.1800	722005667	PIMCO COMMODITY REALRETURN STRATEGY FUND	08/03/2009	08/05/2010	1,099.00	1,043.59	55.41	0.00
56,13.0300	665162772	MFB NORTHERN FDS STK INDEX FD	03/13/2008	.11/05/2010	85,318.00	91,436.25	-6,118.25	
905.6600	722005667	PIMCO COMMODITY REALRETURN STRATEGY FUND	10/15/2009	11/05/2010	8,323.00	7,317.70	1,005.30	0.00
Total Long Te	rm 15% Sales Re	ported on 1099-B			171,363.83	193,819.11	-22,455.28	0.00
75.0000	% Sales Reporte 78463V107	d on 1099-B MFC SPDR GOLD TR GOLD SHS MFC SPDR GOLD TR GOLD SHS		01/07/2010			2.71	
***************************************	.78463V107			02/03/2010		0.00	Z.69	0.00.
	.78463V107	MFC SPDR GOLD TR GOLD SHS		03/03/2010	2.31			
	.784 <u>63V</u> 107	MFC SPDR GOLD TR GOLD SHS		.04/08/2010	2.60	0.00	2.60	0.00
•• ••	78463 <u>V.107</u>	MFC SPDR GOLD TR GOLD SHS		05/07/2010			2.47	0.00
	78,463V,10 <u>7</u>	MFC SPDR GOLD TR GOLD SHS		06/04/2010	12.00		12,00	ơ oớ
300.0000	78463V107	MFC SPDR GOLD TR GOLD SHS		.07/08/2010	11,85	0.00	11.85	0.00
300.0000	78463V107	MFC SPDR GOLD TR GOLD SHS		08/04/2010	12,22	0.00	12.22	, 0,.00,
400.0000	.78463V107	MFC SPDR GOLD TR GOLD SHS		09/03/2010	17.46	0.00	17.46	0.00
400.0000	784 <u>63</u> V107	MFC SPDR GOLD TR GOLD SHS		19/04/2010		0.00	17.05	0.00
400.0000	.7.8463Y107	MFC SPDR GOLD TR GOLD SHS		1,1/05/2010	17.86	0.00	17.86	0.00.

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence pensity or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

À.

GETZEN FAMILY CHARITIES, INC 82-0540623

2010 Tax Information Statement

23-77952 XX-XXX0623 57-6141618

Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Questions?

Corrected

(941)329-2656 2nd TIN notice Recipient's Name and Address: GETZEN FAMILY CHARITIES INC ATTN: WILLIAM GETZEN 1421 WESTBROOK DR. SARASOTA, FL 34231-3548

Page 9 of 17

Payer's Name and Address: NORTHERN TRUST, NA P.O. BOX 803878 CHICAGO, IL 60680

Number of shares 0	CUSIP	Description	Date Acquired	Date of Sale	Stocks Bonds, etc.	Cost or other Basis		Net Gain or Loss	Federal Income Tax Withheld
u	Box 1b)	(Box 7)		(Box 1a)	(Box 2)			,	(Box 4)
400.0000 7	8463V107	MFC SPDR GOLD TR GOLD SHS		12/03/2010	17.62		0.00	17.62	0.00
Total Long Term 28% Sales Reported on 1099-B					118.84		0.00	118.84	0.00

Account Statement

December 1, 2010 - December 31, 2010

Account Number 23-77952
GETZEN FAMILY CHARITIES INC

Portfolio Summary

	Market Value	Change from Prior Period	Cost	Unrecized Gain/Loss	Estimated Ansual Income	Yteld	% cf Assets
Equity Securities							
Large Cap	\$ 291.099.66	\$16,093.82	\$ 291,255.14	(\$ 155.48)	\$ 3.057.67	1.1%	33.3%
Mid Cap	42,510 96	2,371.85	43,235 65	[724.69]	40,14	01%	4,9%
Small Cap	43,627.99	3.237.06	47,232,00	[3,404.01]	0.00	0.0%	5.0%
International Daveloped	221,113.11	13,124,42	238.092.96	(16,979.65)	1,623.87	0.7%	25.3%
International Emerging	128.697.50	6.515.06	108,552,80	20,144,70	2.014.66	1.634	14,7%
Total Equity Securities	\$ 727,249.22	\$ 41,342.21	\$ 728,348.55	(\$ 1,117.33)	\$ 6,734.33	0.9%	83.1%
Commodifies							
Commoditios	76,138.74	2,742,66	62.249.63	13,889,11	1,849.45	2.4%	8.7%
Total Commodifies	\$ 74,138,74	\$ 2,742.44	\$ 42,249.43	\$ 12,829,11	\$ 1,849.45	2.4%	2.7%
Cash and Short Term Investments							
Cosh	71,380.19	4,464.64	71,378.53	0.00	21.43	0.0%	6.25
Total Cash and Short Term Investments	\$ 71,380.19	5 4.444.44	\$ 71,378.53	\$ 0.00	\$ 21.43	0.0%	4.2%
Total Portfolio	\$ 874,748.15	\$ 48,549.51	\$ 841,794,71	\$ 12,749.78	\$ 8,407.21	1.0%	192.0%

Page 3 of 8