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Form **990-PF**

Return of Private Foundation

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

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

OMB No 1545-0052

	ent of the Treasury	Note Th		ne able to use a copy of this			rtina requirements	2010
	Revenue Service	or tax year begin			, and e		MAY 31, 2011	_
	ck all that apply:	Initial		Initial return of a fo	-		Final return	
u Cile	ck all that apply.		ded return	Address chang	•	· —	Name change	
Name			IES FOUND	ATION FOR HEA	<u> </u>		A Employer identification 61–9900166	number
Number	and street (or PO	oox number if mail is	not delivered to street	address)		Room/suite	B Telephone number	
	204 N	ORTH LEX	KINGTON A	VENUE			859-858-22	83
H Chec	ck type of organiz	RE, KY ation. X S		empt private foundation	tion		C If exemption application is portion or an interest of the control of the contro	, check here eting the 85% test, mputation
) nonexempt char	year J Accountii	Other taxable private founda	X Accr	uat	E If private foundation stat under section 507(b)(1)	us was terminated
		-		her (specify)	LAL ACCI	uai	''''	•
(irom	Part II, col. (c),			mn (d) must be on cash b	pasis.)		F If the foundation is in a 6 under section 507(b)(1)	_ 1 1
Part	# Analysis of R	evenue and Expe	nses		(b) Net in	wastmant	(c) Adjusted net	(d) Disbursements
Part	(The total of ame necessarily equ	ounts in columns (b), at the amounts in colu	(c), and (d) may not umn (a))	(a) Revenue and expenses per books	inco		income	for charitable purposes (cash basis only)
1		gıfts, grants, etc.,					N/A	
2		if the foundation is not rec	quired to attach Sch B	11.		11.		STATEMENT 1
3		s and temporary		8,994.		8,994.		STATEMENT 2
4		ınterest from seci	urities	24,640.		$\frac{6,994.}{4,640.}$		STATEMENT 3
	ia Gross rents		5,869.	24,040.		4,040.		STATEMENT 4
l l	Net rental income			7,880.	********		111 11111 1111 1111 1111 1111 1111 1111 1111	HILL HOUSE
<u>e</u> 6	Grace cales price	from sale of assets n		7,000.				
	D assets on line 6a		26,103.			7,880.	. ,, ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,	**************************************
		ncome (from Part IV, I	line 2)			7,000.		
OBMINITY Revenue	Net short-term			, 11 1111 1411, 111 11 1111.	· 1 · · · · · · · · · · · · · · · · · 	m 		,, , , ,,,,, ,, ,,,,,,,,,,,,,,,,,,,,,
و رخي	Income modifi Gross sales less							
<u>골</u> 10	and allowances				1 1' 'HI II	111 42241	········	
	D Less Cost of goo					······		
	c Gross profit or	• • • • • • • • • • • • • • • • • • • •						'Hart 11' 'Har
۱۱ <u>احر</u>	• • • • • • • • • • • • • • • • • • • •			41,525.	1	1,525.		
		s 1 through 11		0.		0.		0.
13		officers, directors, tr		0.		<u></u>	Dros	
രെ 🗀		e salaries and wag	=		·		I PULLE	VED
15	•	employee benefit	ıs				181	
	ia Legal fees b Accounting fee		STMT 5	5,300.		0.	NOV 04	2011 8,300.
×	c Other professi		STMT 6	4,287.		$\frac{3}{4,287}$	141	2011 (300.
ш 9 17		unai iees .	D1,111, 0	1,20,0			OCD =:-	<u> </u>
.} <u>{</u>			STMT 7	1,517.		0.	- YUULN	117 9.
Operating and Administrative Expenses 12 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	•		•••	6,101.		$\frac{6,101.}{}$		The state of the s
E 20				<u> </u>		-,		
된 20 전 21		 inces, and meeting	 ne	216.		0.		216.
P 22			ys		-	<u></u> -		
E 23			STMT 8	14,886.	1	2,670.		2,216.
atin 24	•	s g and administra						
er.		d lines 13 through		32,307.	2	3,058.		7,741.
ဝီ ₂₅	-	gifts, grants paid		3,500.	-			7,741. 3,500.
		s and disbursem						
-	-	nd 25		35,807.	2	3,058.		11,241.
27	7 Subtract line 2		<u> </u>				ì	
'		e over expenses and	I dishursamente	5,718.			, ž	
		e over expenses and I t income (if negativ			1	8,467.		
		ncome (if negative,					N/A	
022501	- valuated ligt			·	************			- 000 DE

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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Page 2

	,,,,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	year
P	art	Balance Sheets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	14,345.	9,279.	9,279.
	3	Accounts receivable			
		Less: allowance for doubtful accounts]		
	4	Pledges receivable			
		Less, allowance for doubtful accounts	1		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			·
	Ĭ	disqualified persons			
	7	_			
	′	Less allowance for doubtful accounts	1	ì	
un.	8	In onto the fee colors and	300.	300.	300.
Assets	0		3,539.	3,925.	3,925.
As	10-	Prepaid expenses and deterred charges Investments - U.S. and state government obligations	3,3331	3,7231	
		Investments - corporate stock STMT 9	347,582.	413,629.	413,629.
	l l		31773021	110,0251	110/025
		Investments - corporate bonds			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
	11	140 501	287,089.	280,988.	280,988.
	40		2017003.	200/3001	200/3001
	l	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis	1		
		Less: accumulated depreciation Other assets (describe STATEMENT 11)	207.	1,040.	1,040.
	15	Other assets (describe STATEMENT 11)	2071	1,040.	1/0101
		The Land to the terror and the different	653,062.	709,161.	709,161.
_	16	Total assets (to be completed by all filers)	318.	364.	707/101.
	17	Accounts payable and accrued expenses	310.	304.	
	18	Grants payable			
ies	19	Deferred revenue	-		
Ę	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			• •
_	22	Other liabilities (describe)			
			210	264	
	23	Total Habilities (add lines 17 through 22)	318.	364.	
		Foundations that follow SFAS 117, check here			
Ś		and complete lines 24 through 26 and lines 30 and 31.	652 744	708,797.	
Ç		Unrestricted	652,744.	100,191.	
aja	25	Temporarily restricted			
or Fund Balances	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31.			
ţ	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
Ę	29	Retained earnings, accumulated income, endowment, or other funds	650 544	700 707	
ž	30	Total net assets or fund balances	652,744.	708,797.	
			652.060	700 161	
	31	Total liabilities and net assets/fund balances	653,062.	709,161.	
P	art	Analysis of Changes in Net Assets or Fund B	Balances		
_					
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		652,744.
_	•	st agree with end-of-year figure reported on prior year's return)		· · · · · · · 1	5,718.
2	Ente	r amount from Part I, line 27a	CATNO ON CECUT	. 2	50,335.
		r increases not included in line 2 (itemize) UNREALIZED	GAINO ON SECOR		708,797.
		lines 1, 2, and 3		4	0.
		eases not included in line 2 (itemize)	aluma (h) li 00	5	708,797.
Ď	rota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	OIUTTIN (D), IINO 3U	6	10011010

Form 990-PF (2010) EDUCATION, INC. 61-9900166

Part IV Capital Gains and Losses for Tax on Investment Income

Page 3

Part IV Capital Gallis	and Lusses for Tax Unit	18621111611						
(a) List and desc 2-stopy brick was	nbe the kind(s) of property sold (e garehouse, or common stock, 200 sh	, real estate,		P·	low acquired Purchase	(c) Da	te acquired ., day, yr)	(d) Date sold (mo , day, yr)
				U	- Donation			L
1a PUBLICLY TRADE					<u>P</u>		19/09	12/07/10
b PUBLICLY TRADE				ļ	P	12/	21/09	12/07/10
c CAPITAL GAINS	DIVIDENDS							
d								
e					•			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h)	Gain or (loss lus (f) minus) (a)
24 075	(0. 0)		<u> </u>	$\overline{\wedge}$		1-7 F		6,925.
a 24,875.			17,95					
b 328.			27	3.				55.
g 900.								900.
d								
е								
Complete only for assets showing	ng gain in column (h) and owned by	the foundation	on 12/31/69			(I) Gains	(Col (h) gain	minus
(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E	cess of col. (I) col. (j), if any		(ol (k), bu	ut not less tha es (from col. (n -0-) or
								6,925.
<u>a</u>		 		\dashv				55.
b		 						900.
C								900.
d								
e								
2 Capital gain net income or (net ca	If gain, also ente If (loss), enter -0	r ın Part I, line - ın Part I, line	7 7	}	2			7,880.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) ar			٦				
If (loss), enter -0- in Part I, line 8	column (c)			71	3		N/A	•
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inve	estment li	come		<u> </u>
if section 4940(d)(2) applies, leave the Was the foundation liable for the sec If "Yes," the foundation does not qual	tion 4942 tax on the distributable an	mplete this pa	ırt.		····			Yes X No
1 Enter the appropriate amount in	each column for each year, see instr	uctions before	making any entrie	es			 	
(a) Base period years Calendar year (or tax year beginni	ng in) Adjusted qualifying dis	tributions	Net value of no	(c) nchari	table-use asse	ts	Distrit (col (b) div	(d) oution ratio vided by col (c))
2009		8,012.	-		340,49	1.		.023531
2008	2	8,231.			309,43	3.		.091235
2007		6,813.			438,95			.083865
2006		4,274.			427,91			.009988
		1,2,110			121751	- 		
2005 2 Total of line 1, column (d)						2		.208619
3 Average distribution ratio for the the foundation has been in existen		on line 2 by 5, 	or by the number	of yea		. 3		.052155
4 Enter the net value of noncharitat	ole-use assets for 2010 from Part X,	line 5				4		391,733.
5 Multiply line 4 by line 3						5		20,431.
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		185.
7 Add lines 5 and 6						. 7	-	20,616.
8 Enter qualifying distributions from						. 8	<u> </u>	11,241.
If line 8 is equal to or greater than See the Part VI instructions	l line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	6 tax rate			orm 990-PF (2010)

$\ensuremath{\mathsf{MARTHA}}$ R. JONES FOUNDATION FOR HEALTH

_	n 990-PF (2010) EDUCATION, INC.		<u>-9900</u>			Page 4
Pá	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u>4948</u>	- see i	nstru	ctio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here ▶ 🔲 and enter "N/A" on line 1					
	Dațe of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			3	69.
	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		2	1			0.
3	Add lines 1 and 2	3			3	69.
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	†		3	69.
6	Credits/Payments.	1	 		····	~~~
_	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 1, 160					
	Exempt foreign organizations - tax withheld at source	-				
		-				
	· · · · · · · · · · · · · · · · · · ·	-				
	Backup withholding erroneously withheld 6d 6d	┥,	1		1 1	60.
7	• • • • • • • • • • • • • • • • • • • •	7	 		1,1	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	 	<u>-</u>		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 		7	91.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11		11	<u> </u>			0.
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in		اا	Yes	
	any political campaign?	•		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?		-	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$	<u>•</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		-	3		<u> </u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	. N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		'	5		X
	If "Yes," attach the statement required by General Instruction T.		i			
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	e law				ĺ
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	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)					
	KY					
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation		ļ	8b	Х	ĺ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cal	endar				
•	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		•••	10		X
10	DIG BITY POLICION DECORNIC CONTRIBUTION OF THE		Forr	n 990	-PF/	
					1	

$\ensuremath{\mathsf{MARTHA}}$ R. JONES FOUNDATION FOR HEALTH

om	1990-PF (2010) EDUCATION, INC. 01-990	0100		· ugo c
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			l
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ DEXTER W. PORTER, TREASURER Telephone no ▶859-8			
	Located at ▶204 NORTH LEXINGTON AVENUE, WILMORE, KY ZIP+4 ▶4	<u>0390</u>	<u>-11</u>	29
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	$\cdot \square$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country	Ш.,		
Pε	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.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	١.		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	-		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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)? 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)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		·····
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			х
	before the first day of the tax year beginning in 2010?	10		^
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)):			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? Yes X No			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,	ŀ		
D	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.)	2b	1	
_	statement - see instructions)			
G				
2-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
34	V V N-			
h	during the year?			
u	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		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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 jeonardy before the first day of the tax year beginning in 2010?	4b		Х

Form **990-PF** (2010)

MARTHA R. JONES FOUNDATION FOR HEALTH

Form 990-PF (2010) EDUCATION, INC.			61-99001	.66 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	. 🗀 Yı	es X No	
(2), Influence the outcome of any specific public election (see section 4955), of	r to carry on, directly or indir	ectly,	ŧ	
any voter registration drive?		. 🗀 Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	. 🗀 Yo	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		🗀 Yo	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or :		}	
the prevention of cruelty to children or animals?		. L Yo	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und				
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h			▶∟	
${f c}$ If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				
expenditure responsibility for the grant?	N	I/A∟ Y∈	s L No	
If "Yes," attach the statement required by Regulations section 53.494	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	•	-		
a personal benefit contract?		L Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.		·		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		L Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Truston Paid Employees, and Contractors		inagers, Highly	/ 	
1 List all officers, directors, trustees, foundation managers and their		Levor	(-1\0	
(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
				
				_
SEE STATEMENT 12		0.	0.	0.
		1		
				<u> </u>
			· -	·
				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1), If none.	enter "NONE."		L
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	account, other allowances
NONE	devoted to position		compensation	anowanees
		[
Total number of other employees paid over \$50 000	··			0

MARTHA R. JONES FOUNDATION FOR HEALTH

Form 990-PF (2010) EDUCATION, INC.	61-9900166 Page
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	у
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of serv	rice (c) Compensation
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service NONE **Otal number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianss served, conferences convened, research papers produced, etc. CO-SPONSOR PURCHASE OF TREADMILL FOR STUDENT FITNESS CENTER AT ASBURY THEOLOGICAL SEMINARY MILK PROGRAM GRANT AT WILMORE DAY CARE CENTER SPONSORSHIP OF 23 STUDENTS IN WEIGHT WATCHERS PROGRAM. 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.	
	<u>></u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
	R 2,500
MILK PROGRAM GRANT AT WILMORE DAY CARE CENTER	
	1,000
3 SPONSORSHIP OF 23 STUDENTS IN WEIGHT WATCHERS PROGRAM.	
	1,852
<u> </u>	
Part IX-B Summary of Program-Related Investments	
	Amount
1N/A	
2	
	J.

Form **990-PF** (2010)

All other program-related investments. See instructions

Total. Add lines 1 through 3

EDUCATION, INC.

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: 382,795. a Average monthly fair market value of securities 1a 14,903. Average of monthly cash balances c Fair market value of all other assets . . . 10 397,698. Reduction claimed for blockage or other factors reported on lines 1a and 0. 2 Acquisition indebtedness applicable to line 1 assets 397,698. 3 3 5,965. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 391,733. 5 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 19,587.Minimum investment return. Enter 5% of line 5 6 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.) 19,587. 1 Minimum investment return from Part X, line 6 369 Tax on investment income for 2010 from Part VI, line 5 Income tax for 2010. (This does not include the tax from Part VI.) 2b 369. 218. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions . . . 19.218. 5 Add lines 3 and 4 0. Deduction from distributable amount (see instructions) 218. 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. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 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 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) 11,241. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(a) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form 990-PF (2010)

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,		 iur an		
line 7				19,218.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years	· · · · · · · · · · · · · · · · · · ·			
B roter to processor		0.		
3 Excess distributions carryover, if any, to 2010	······································		' ,' ''' ' ,- ' 	· · · · · · · · · · · · · · · · · · ·
a From 2005				
b From 2006		;		
c From 2007		<i>'</i>		
d From 2008 3,255.				
e From 2009				
f Total of lines 3a through e	3,255.		`	
4 Qualifying distributions for 2010 from	3,233.			
Part XII, line 4 > \$ 11, 241.				
			0.	
a Applied to 2009, but not more than line 2a	, ,,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			······································
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			*****	······································
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	U •			11,241.
d Applied to 2010 distributable amount	0.			11,241.
e Remaining amount distributed out of corpus		··· ····· · · · · · · · · · · · · · ·	···• • • • • • • • • • • • • • • • • •	3,255.
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	3,255.			3,255.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
Enter the amount of pnor 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			<u></u>	······································
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010, Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011	1			4,722.
7 Amounts treated as distributions out of		. • 11'4	**************************************	7 - 117 - 1771 1 1 1 1 1 1 1 1 1 1 1 1 1
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005			·····	·
- 1	0.			
not applied on line 5 or line 7	·		-	
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	0.			
· · · · · · · · · · · · · · · · · · ·				
O Analysis of line 9:				
a Excess from 2006	1			
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010	1			·

MARTHA R. JONES FOUNDATION FOR HEALTH

					OO100 Page I			
<u> </u>				N/A				
-			1					
_		•						
2 a Enter the lesser of the adjusted net					=			
income from Part I or the minimum	Private Operating Foundations (see instructions and Part VII-A, question 9) N/A		(e) Total					
investment return from Part X for	Assertions and Part VIIA, question 9) N/A Assertion of Comparison As							
each year listed	ting Foundations (see instructions and Part VII-A, question 9) In ruling or determination letter that it is a private operating fective for 2010, enter the date of the ruling the foundation is a private operating foundation described in section If any year Prior 3 years If (a) 2010 (b) 2009 (c) 2008 (d) 2007 (e) Total and XII, It of the foundation is a private operating foundation described in section If any year Prior 3 years If (a) 2010 (b) 2009 (c) 2008 (d) 2007 (e) Total and XII, It of the foundation is a private operating foundation described in the foundation is a first order of the foundation of the foundation for the foundation before the close of any tax included more than 2% of the total contributions received by the foundation before the close of any tax included more than \$5,000. (see section 507(d)(2)) attorn who own 10% or more of the stock of a corporation (or an equally large portion of the ownership or auton has a 10% or greater interest. Intribution, Grant, Gift, Loan, Scholarship, etc., Programs: Intribution of the person to whom applications should be addressed							
b 85% of line 2a								
 Qualifying distributions from Part XII, 								
line 4 for each year listed					<u> </u>			
d Amounts included in line 2c not								
used directly for active conduct of								
exempt activities								
e Qualifying distributions made directly								
for active conduct of exempt activities.								
Subtract line 2d from line 2c								
3 Complete 3a, b, or c for the								
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	_							
				ļ				
1			<u> </u>					
C "Support" alternative test - enter:								
(1) Total support other than gross								
investment income (interest,	-	}		1				
512(a)(5)), or royalties)								
(2) Support from general public								
and 5 or more exempt	,							
section 4942(J)(3)(B)(iii)								
(3) Largest amount of support from								
an exempt organization								
(4) Gross investment income								
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets			
at any time during t	he year-see the i	nstructions.)						
1 Information Regarding Foundatio	n Managers:							
a List any managers of the foundation wh	o have contributed more	than 2% of the total cor	itributions received by the	foundation before the clos	e of any tax			
* * *	nore than \$5,000). (See s	ection 507(d)(2))						
NONE				<u> </u>				
			(or an equally large portion	on of the ownership of a pa	rtnership or			
- ·	s a 10% or greater interes	st.						
NONE								
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations	under other conditions, co	mplete items 2a, b, c, and	<u>d.</u>			
a The name, address, and telephone numl	per of the person to whor	n applications should be	e addressed					
								
b The form in which applications should b	e submitted and informat	tion and materials they s	should include.					
A Auranbariana da disa		···		· · · · · · · · · · · · · · · · · · ·				
c Any submission deadlines								
d Any restrictions or limitations on awards	s, such as by geographica	ıl areas, charitable fields	, kinds of institutions, or o	ther factors:				
,								

023601 12-07-10

Form 990-PF (2010)

Form **990-PF** (2010)

61-9900166

023611 12-07-10

EDUCATION, INC.

Part XV 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 Recipient Foundation Purpose of grant or status of recipient Amount contribution Name and address (home or business) a Paid during the year WILMORE DAY CARE CENTER NONE PUBLIC 1,000. MILK PROGRAM FOR CHARITY 190 SPRING STREET CHILDREN & CPR WILMORE, KY 40390 TRAINING FOR WORKERS NONE PUBLIC 2,500. ASBURY THEOLOGICAL PURCHASE OF TREADMILL CHARITY SEMINARY 204 NORTH LEXINGTON AVENUE WILMORE, KY 40390 3,500. ► 3a Total b Approved for future payment NONE **▶** 3b 0. Total

Form 990-PF (2010) Part XVI-A

EDUCATION, INC. **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code		TETTOCOTTO
a			1		
b		ļ	<u> </u>		
c	<u></u>				
d	L			<u> </u>	
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
In contract	}		14	11.	
4 Dividends and interest from securities			14		·
5 Net rental income or (loss) from real estate:			 		
	<u> </u>		 		
a Debt-financed property	<u> </u>		16	5,869.	
b Not debt-financed property	-		1.0	3,003.	
6 Net rental income or (loss) from personal	1				
property		 	<u> </u>		
7 Other investment income	<u></u>	ļ	<u> </u>		
8 Gain or (loss) from sales of assets other	1			7 000	
than inventory	<u></u>	<u> </u>	18	7,880.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a	Ĺ				
b	L				
C		l			
d					
6					
12 Subtotal Add columns (b), (d), and (e)		0.		22,754.	0.
13 Total. Add line 12, columns (b), (d), and (e)					22,754.
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ev	omn	t Purposas	
				 	
Line No. Explain below how each activity for which incom			contrib	outed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than b	y providing fu	inds for such purposes)			
				· · · · · · · · · · · · · · · · · · ·	
			-		
					
					
	·				
023521 12-07-10	 -				Form 990-PF (2010)

EDUCATION, INC.

61-9900166 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Organ	izations			
1	Did the o	rganization directly or indir	rectly engage in any of the follow	wing with any other organization	n described in section 501(c) of	Yes No
)(3) organizations) or in section			
а			ation to a noncharitable exempt			
-	(1) Cash		2.00. (0 2			1a(1) X
	(2) Othe					1a(2) X
						10(2) 12
D	Other tran					
	• •		ble exempt organization			1b(1) X
	(2) Purc	hases of assets from a nor	nchantable exempt organizatıon			1b(2) X
	(3) Rent	al of facilities, equipment, (or other assets			1b(3) X
	(4) Reim	bursement arrangements				1b(4) X
	• -	is or loan guarantees				1b(5) X
	· ·	•	mbership or fundraising solicita	ations.		1b(6) X
-			iling lists, other assets, or paid (1c X
	-		_		unus chaw the fair market value of the goods	•
đ		•	•		vays show the fair market value of the goods	
			oundation, if the foundation reci other assets, or services receive		e in any transaction or sharing arrangement	, snow in
a) L	ле по	(b) Amount involved	(c) Name of nonchanta	ble exempt organization	(d) Description of transfers, transactions, an	nd sharing arrangements
			N/A		1	
						
						
					 	
_					 	
			 		 	
			 		+	
			<u> </u>		<u> </u>	
					 	
						
			 			
			<u> </u>		<u> </u>	
2a			tly affiliated with, or related to, o		ations described	
	in section	501(c) of the Code (other	r than section 501(c)(3)) or in se	ection 527?		Yes X No
b	If "Yes," co	omplete the following sche	edule.			
		(a) Name of orga	anization	(b) Type of organization	(c) Description of relation	nship
		N/A				
_						
-				- 		
	Linde	er nenaklesot neduru. I declare	that I have examined this return inc	luding accompanying schedules and	statements, and to the best of my knowledge and	hellef, it is true, correct.
٥:	and		rer (other than taxpayer or fiduciary) is			
SI	gn	XIII), / Ymi(/)		11	_
He	ere 📐	MONOW !	W. Docas	10-31		
		Signature of officer or tru	stee	Date	Title	
		Print/Type preparer's na	me Preparer's	s signature	Date _ Check _ if PTIN	1
		MICHAEL K.	STEVENS,		self- employed	
Pa	id	CPA	Much	gel K. Stevens (PA)	10/26/11	
	eparer	Firm's name ► ROB	INSON, HUGHES	ael K. Stevens, CPA 1 & CHRISTOPHER,	, P.S.C. Firm's EIN ▶	
	e Only	Thin s hattie F NOD.	11.2011/ 110011110	- JIIII	, - To to I I I I I I I I I I I I I I I I I I	
U S	e Cilly	Firm's address A E	O WEST MIT WI	NC DIVID		
		Firm's address ► 45		NG BLVD		11226 6620
_		<u>DAI</u>	NVILLE, KY 404	23-0880	Phone no (855	9)236-6628

FORM 990-PF INTEREST ON SAVINGS	AND TEMPORARY C	ASH INVESTMENTS	STATEMENT	1
RMERS BANK TAL TO FORM 990-PF, PART I, LINE 3, COLUMN A RM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES URCE GROSS AMOUNT DIVIDENDS LLIARD LYONS 9,894. 900. FAL TO FM 990-PF, PART I, LN 4 9,894. 900. RM 990-PF RENTAL INCOME SURCE GROSS AMOUNT DIVIDENDS FAL TO FM 990-PF, PART I, LN 4 9,894. 900. ACTIVITY NUMBER FOR	AMOUNT			
FARMERS BANK				11.
TOTAL TO FORM 990-PF, PART I, LIN	E 3, COLUMN A			11.
FORM 990-PF DIVIDENDS AN	D INTEREST FROM	SECURITIES	STATEMENT	2
SOURCE	GROSS AMOUNT		COLUMN (A AMOUNT)
HILLIARD LYONS	9,894.	900.	8,9	94.
TOTAL TO FM 990-PF, PART I, LN 4	9,894.	900.	8,9	94.
FORM 990-PF RE	NTAL INCOME		STATEMENT	3
KIND AND LOCATION OF PROPERTY			GROSS RENTAL INC	OME
DAY CARE CENTER IN WILMORE, KY		1	24,6	40.
TOTAL TO FORM 990-PF, PART I, LIN	E 5A		24,6	40.
FORM 990-PF REN	TAL EXPENSES		STATEMENT	4
DESCRIPTION		AMOUNT	TOTAL	
DEPRECIATION REPAIRS AND MAINT		10,636.		
	TAL - 1	2,034.	18,7	71.
TOTAL RENTAL EXPENSES			18,7	71.
NEW DENIES THOUSE HO HODY OOD DE	מאסת ד ד אור או	a	5,8	69

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	5,300.	0.		5,300. 5,300.	
TO FORM 990-PF, PG 1, LN 16B	5,300.	0.			
FORM 990-PF C	THER PROFES	SIONAL FEES	S'	ratement 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT FEES	4,287.	4,287.		0.	
TO FORM 990-PF, PG 1, LN 16C	4,287.	4,287.		0.	
FORM 990-PF	TAXES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
REGISTRATION FEE KY SECRETARY OF STATE EXCISE TAX FOR 2009 990-PF EXCISE TAX FOR 2010 990-PF	9. 1,139. 369.	0. 0. 0.		9. 0. 0.	
TO FORM 990-PF, PG 1, LN 18	1,517.	0.		9.	

	OTHER EXPENSES				STATEMENT 8	
DESCRIPTION	(A) EXPENSE PER BOO	S NET I	3) NVEST- INCOME	(C) ADJUSTED NET INCOM	(D) CHARITABL E PURPOSES	
SUPPLIES & POSTAGE FIDELITY BOND FITNESS PROGRAMS REPAIRS AND MAINT INSURANCE	1		0. 0. 0. 10,636. 2,034.			57. 83. 76. 0.
TO FORM 990-PF, PG 1, LN 23	14,8	86.	12,670.		2,2	16.
FORM 990-PF	CORPO	RATE STOC	ζ		STATEMENT	9
DESCRIPTION			ВО	OK VALUE	FAIR MARKE	T
VARIOUS CORPORATE STOCKS				413,629.	413,629.	
TOTAL TO FORM 990-PF, PART II,	, LINE 1	0В		413,629.	413,62	29.
FORM 990-PF DEPRECIATION OF	F ASSETS	HELD FOR	INVEST	MENT	STATEMENT	10
		acam on	7 .C			
DESCRIPTION	0	COST OR THER BASIS		CUMULATED PRECIATION	BOOK VAL	UE
DESCRIPTION MARTHA R JONES BUILDING LAND			DE:		BOOK VALU 225,50 55,42	66.
MARTHA R JONES BUILDING		THER BASIS	5 DE:	PRECIATION 140,521.	225,5	66. 22.
MARTHA R JONES BUILDING LAND	LN 11 =	366,00 55,4	5 DE:	140,521. 0.	225,5 55,4	66. 22.
MARTHA R JONES BUILDING LAND TOTAL TO FM 990-PF, PART II, I	LN 11OTH	366,03 55,42 421,50	5 DE:	140,521. 0.	225,50 55,42 280,98	88.
MARTHA R JONES BUILDING LAND TOTAL TO FM 990-PF, PART II, I	LN 11OTH	THER BASIS 366,03 55,43 421,50 ER ASSETS GINNING OF BOOK VALUE 20	5 DE: 37. 22. 09. F END B BOO	140,521. 0. 140,521. OF YEAR	225,56 55,42 280,98 STATEMENT FAIR MARKET VALUE	88.

	LIST OF OFFICERS, D AND FOUNDATION MANA		STATI	EMENT 12
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JODY BROCK 329 E. MAIN STREET WILMORE, KY 40390	TRUSTEE 0.10	0.	0.	0.
BRUCE CAREY 334 DUDLEY ROAD LEXINGTON, KY 40502	TRUSTEE 0.10	0.	0.	0.
DR. TERRY L. GALBRAITH 340 LEGION DRIVE LEXINGTON, KY 40504	TRUSTEE 0.10	0.	0.	0.
MARY M. NAGLE 1145 MERIDIAN DRIVE LEXINGTON, KY 40503	TRUSTEE 0.10	0.	0.	0.
DR. KENNETH PICKERILL 605 HAYNES COURT WILMORE, KY 40390	2ND VICE PRESI 0.10	DENT 0.	0.	0.
DEXTER W. PORTER 105 HAGER COURT WILMORE, KY 40390	TREASURER 1.00	0.	0.	0.
DAWN RIGHTMIRE 112 SEAMANDS DRIVE WILMORE, KY 40390	PRESIDENT 0.50	0.	0.	0.
REV. STEVE WILLINGHAM 302 WALTERS LANE WILMORE, KY 40390	SECRETARY 0.25	0.	0.	0.
LYNN BECK 68 SUMMERTREE DRIVE NICHOLASVILLE, KY 40356	TRUSTEE 0.10	0.	0.	0.
REV. J.D. WALT 116 CALLIS CIRCLE WILMORE, KY 40390	TRUSTEE 0.10	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	GE 6, PART VIII	0.	0.	0.

Form **8868**

(Rev. January 2011) Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

internal Hevi	enue Service File a Sep	parate app	nication for each return.	_	_ (
• If you a Do not continue to time to	are filing for an Automatic 3-Month Extension, complete filing for an Additional (Not Automatic) 3-Month Extension omplete Part II unless you have already been granted ic filing (e-file). You can electronically file Form 8868 if to file Form 990-T), or an additional (not automatic) 3-months of the forms listed in Part I or Part II with the extension of the forms listed in Part I or Part II with the extension of the forms listed in Part I or Part II with the extension of the forms listed in Part I or Part II with the extension of the forms listed in Part I or Part II with the extension of the forms listed in Part I or Part II with the extension of the forms listed in Part I or Part II with the extension of the forms listed in Part I or Part II with the extension of the forms listed in Part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II with the extension of the part I or Part II o	an automa you need onth exten	complete only Part II (on page 2 of thi atic 3-month extension on a previously a 3-month automatic extension of time sion of time. You can electronically file f Form 8870, information Return for Tra	is forn filed F to file Form ansfer	n). Form 8868. e (6 months for a cor 8868 to request an s Associated With C	extension Certain	
	Benefit Contracts, which must be sent to the IRS in par		(see instructions). For more details on	the el	lectronic filing of this	; form,	
	.irs.gov/efile and click on e-file for Charities & Nonprofits						
Part I	Automatic 3-Month Extension of Time						
•	ation required to file Form 990-T and requesting an auto			mplet	e		
	v corporations (including 1120-C filers), partnerships, REN ome tax returns.			ın exte	ension of time		
print MARTHA R. JONES FOUNDATION FOR HEALTH					Employer identification number		
File by the due date for filing your Country of the Avenue Country of the Country					61-9900166		
return, See Instructions	City, town or post office, state, and ZIP code. For a few WILMORE, KY 40390-1129	oreign add	iress, see instructions.				
Enter the I	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
Application			Application Is For			Return	
Form 990	^	Code 01	Form 990-T (corporation)			07	
om 990-	BL	02	Form 1041-A			08	
orm 990-	EZ	03	Form 4720			09	
orm 990-	PF	04	Form 5227			10	
orm 990-	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
orm 990-	T (trust other than above)	06	Form 8870			12	
	DEXTER W. PORTE oks are in the care of 204 NORTH LEXIN one No. 859-858-2283			(Y _4	10390-1129		
If the or	ganization does not have an office or place of business		ited States, check this box			•	
	for a Group Return, enter the organization's four digit (
	. If it is for part of the group, check this box				bers the extension is	s for.	
1 I requ	uest an automatic 3-month (6 months for a corporation <u>JANUARY 15, 2012</u> , to file the exempt				. The extension		
ıs for	the organization's return for:						
▶ [_	calendar year or						
►L≥	tax year beginning JUN 1, 2010	, and	dending MAY 31, 2011		·		
2 If the	tax year entered in line 1 is for less than 12 months, che Change in accounting period	neck reasc	on: Initial return Fina	al retur	m		
Ba If this	application is for Form 990-BL, 990-PF, 990-T, 4720, o	r 6069, en	ter the tentative tax, less any			260	
	efundable credits. See instructions.			3a	\$	369.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$,160.		
	nce due. Subtract line 3b from line 3a. Include your pay					· · - · · ·	
	ing EFTPS (Electronic Federal Tax Payment System). S			3c	\$	0.	