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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

OMB No 1545-0052

_			be able to use a copy of this			
			1, 2010		JUN 30, 2011	
GC	heck	all that apply: Initial return		ormer public charity	Final return	ı
		Amended return	Address chan	ge 🔲	Name change	
Nar	ne of	foundation			A Employer identification	number
		THE UNAKA FOUNDATION,			62-1530053	
Nun	nber a	nd street (or P O box number if mail is not delivered to street	t address)	Room/suite	B Telephone number	
		1500 INDUSTRIAL ROAD			423-639-11	71
City	or to	own, state, and ZIP code			C if exemption application is p	
		-	5-3541		D 1. Foreign organizations	s, check here
H C	heck	type of organization: X Section 501(c)(3) ex			Foreign organizations me check here and attach co	emputation
<u></u>			Other taxable private founda	ation	E If private foundation sta	tus was terminated
I Fa	ur ma	rket value of all assets at end of year J Accounti	ing method: X Cash	Accrual	under section 507(b)(1)	(A), check here
(fr	om i	Part II, col. (c), line 16)	ther (specify)		F If the foundation is in a	60-month termination
		16,838. (Part I, colu	ımn (d) must be on cash l	basis)	under section 507(b)(1)	(B), check here
Pa	ırt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	465,000.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	209.	209.		STATEMENT 1
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)				
ø	6a	Net gain or (loss) from sale of assets not on line 10			=	
Revenue	b	Gross sales price for all assets on line 6a				
ě	7	Capital gain net income (from Part IV, line 2)		0.		
Œ	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	1 .	Less Cost of goods sold				
	С	Gross profit or (loss)				
	11	Other income				
	12	Total. Add lines 1 through 11	465,209.	209.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits			L DL(FIVED
enses	16a	Legal fees			TILL	121020
	b	Accounting fees			.o	SS
Ë	c	Other professional fees			YAM IGI	21 2012
ĕ.	17	Interest			101	当
rat	18	Taxes STMT 2	20.	0.	L 200	TAI IIT O.
nist	19	Depreciation and depletion				EN, UT
vĒ	20	Occupancy				
€\$	21	Travel, conferences, and meetings				
琴	22	Printing and publications				
<u>څځ</u>	23	Other expenses STMT 3	70.	0.		0.
江潭	24	Total operating and administrative				
Operating and Administrative Exp	l	expenses. Add lines 13 through 23	90.	0.		0.
ō	25	Contributions, gifts, grants paid	457,679.			457,679.
		Total expenses and disbursements.				
		Add lines 24 and 25	457,769.	0.	_	457,679.
	27	Subtract line 26 from line 12:				
ر		Excess of revenue over expenses and disbursements	7,440.	ı		
		Net investment income (if negative, enter -0-)		209.	1	
	С	Adjusted net income (if negative, enter -0-)			N/A	
02350 12-07)1 '-10	LHA For Paperwork Reduction Act Notice, see	the instructions.		 	Form 990-PF (2010)

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
<u></u>	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	3,308.	10,600.	10,600.
	2	Savings and temporary cash investments	6,090.	6,238.	6,238.
	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			
sts	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			
		Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	١	Less accumulated depreciation			
	ı	Investments - mortgage loans			
		Investments - other			
	14	Land, buildings, and equipment: basis			
	4.5	Less accumulated depreciation			
	15	Other assets (describe)			
	1.0	Total gasets (to be completed by all filers)	9,398.	16,838.	16,838.
	_	Total assets (to be completed by all filers) Accounts payable and accrued expenses	5,350.	10,030.	10,030*
		Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ğ	21	Mortgages and other notes payable			
Ë	1	Other liabilities (describe >			
	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.			
ĕ	24	Unrestricted			
Fund Balances	25	Temporarily restricted			
Ä	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31.		_	
ţ	27	, , , ,	0.	0.	
Assets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	16 930	
Net A	29	Retained earnings, accumulated income, endowment, or other funds	9,398. 9,398.	16,838. 16,838.	
ž	30	Total net assets or fund balances	3,330.	10,030.	
	31	Total liabilities and net assets/fund balances	9,398.	16,838.	
\equiv				10/0301	
LP	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		[1	9,398.
2	Ente	r amount from Part I, line 27a		2	7,440.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	16,838.
5		reases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		16,838.
					Form 990-PF (2010)

023511 12-07-10

Page 3

Part IV Capital Gains and Losses for Tax on Investment Income (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					(b) I	low ac - Purc - Dona	quired hase ation	(c) Date a (mo., d		(d) Date sold (mo., day, yr.)
1a					L_					
b NO	NE				_					-
<u>C</u>					<u> </u>					
d					<u> </u>					
e	(f) Do	propertion allowed	(=) Coo	t or other bears	<u> </u>			/b) C	or (loss	
(e) Gross sales price		preciation allowed (or allowable)		t or other basis xpense of sale					aın or (loss s (f) minus (
a										
b c			<u> </u>		-					·
d										
e							-			
Complete only for assets showing	ig gain in co	lumn (h) and owned by	the foundation	on 12/31/69					ol. (h) gain	
(i) F.M.V. as of 12/31/69		Adjusted basis s of 12/31/69		cess of col. (ı) col. (ı), ıf any			со	l. (k), but r Losses	not less that (from col. (1 -0-) or h))
a		· <u></u>					-		-	
b										
C										
d		····								
е			L			,				
2 Capital gain net income or (net ca	pital loss)	If gain, also enter			}	2				
3 Net short-term capital gain or (los	ss) as define									
If gain, also enter in Part I, line 8,	,	• • •	, ,-		$\left \right $					
If (loss), enter -0- in Part I, line 8 Part V Qualification U		ction 4940(e) for	Badaaad	Tau an Nat		3				
If section 4940(d)(2) applies, leave the Was the foundation liable for the section if "Yes," the foundation does not qual	tion 4942 ta lify under se	x on the distributable am ction 4940(e). Do not co	mplete this pa	rt.				-		Yes X No
Enter the appropriate amount in ((a)	each columi	<u> </u>	uctions before	making any entri	_					(4)
(a) Base period years Calendar year (or tax year beginnii	ng in)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) onchai	ritable-			Distrit (col. (b) div	(d) oution ratio rided by col. (c))
2009			8,342.				9,618			44.262514
2008			0,540.				6,119			49.676699
2007		2,10	2,739. 8,925.			<u> </u>	7,230 0,102	5		79.424862 81.032982
2006 2005			6,001.			- 4	$\frac{0,10}{7,10}$	•		7.064819
2000			0,0010				7,10			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2 Total of line 1, column (d)								2		261.461876
3 Average distribution ratio for the	5-year base	period - divide the total	on line 2 by 5,	or by the number	of ye	ars			_	
the foundation has been in exister	nce if less th	nan 5 years						3		52.292375
4 Enter the net value of noncharitab	le-use asse	ts for 2010 from Part X,	line 5					4		11,150.
5 Multiply line 4 by line 3				5		583,060.				
6 Enter 1% of net investment incom	ne (1% of Pa	art I, line 27b)						6		2.
7 Add lines 5 and 6								7		583,062
8 Enter qualifying distributions fron	ı Part XII. lii	ne 4						457,679		
If line 8 is equal to or greater than See the Part VI instructions.	•		1b, and comp	lete that part usir	ıg a 1	% tax ı	ate.	<u> </u>		

Form 990-PF (2010) THE UNAKA FOUNDATION, INC. Part VI Excise Tax Based on Investment Income (Section 49)		62-1530 948 - see i			Page 4
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and					
Date of ruling or determination letter: (attach copy of letter if n	ecessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1			4.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4	• •				•
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	2			0.
3 Add lines 1 and 2		3			<u>4.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	. Others enter -0-)	4			4.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	ŀ	5			 -
6 Credits/Payments:	6a 20.				
a 2010 estimated tax payments and 2009 overpayment credited to 2010	6a 20.				
 b Exempt foreign organizations - tax withheld at source 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	00	7			20.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is at	ttached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	• 1	10			16.
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax	16. Refunded	11			0.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	gislation or did it participate or intervene	ın	[.	Yes	No
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purp	poses (see instructions for definition)?		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	and copies of any materials published	d or			
distributed by the foundation in connection with the activities					
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during t					
(1) On the foundation. ► \$ (2) On foundation manage			ŀ		
e Enter the reimbursement (if any) paid by the foundation during the year for political exper	nditure tax imposed on foundation				
managers. > \$O.					
2 Has the foundation engaged in any activities that have not previously been reported to the	e 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 government of			١ , ا		х
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the char.			3 4a		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the y b If "Yes," has it filed a tax return on Form 990-T for this year?	eare	N/A	4b		<u> </u>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	ar?	14/ 11	5		X
If "Yes," attach the statement required by General Instruction T	at :		⊢ٿ		<u> </u>
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	either:				
By language in the governing instrument, or			1		
By state legislation that effectively amends the governing instrument so that no mandat	ory directions that conflict with the state	law			
remain in the governing instrument?	•		6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year?			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 instruct	tions) >				
TN					İ
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or designate)				İ
of each state as required by General Instruction G? If "No," attach explanation			8b	Х	<u> </u>
${\bf 9}$. Is the foundation claiming status as a private operating foundation within the meaning of		ndar			
year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes,"			9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a sche	edule listing their names and addresses		10		X
		For	m 990	-PF ((2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010? Form **990-PF** (2010)

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

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

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

b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

Yes X No

N/A

3b

4a

X

X

during the year?

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Form 990-PF (2010) THE UNAKA FOUNDATION, INC.		530053 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "l	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1 N/A	- "	
2		
3		
4		
Dort IV B C		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line	on 1 and 2	Amount
I	is I allu Z.	Amount
1 N/A		
2		
•		
All other program-related investments. See instructions.		······································
3		
·		
·		
Total. Add lines 1 through 3	▶	0.

Form **990-PF** (2010)

P	art X Minimum Investment Return (All domestic foundations mus	st complete this part. Foreign fou	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, or	etc., purposes:		
a	Average monthly fair market value of securities	, , , , , , , , , , , , , , , , , , ,	1a	0.
	Average of monthly cash balances		1b	11,320.
	Fair market value of all other assets		1c	
d			1d	11,320.
_	Reduction claimed for blockage or other factors reported on lines 1a and			
Ī	· · · · · · · · · · · · · · · · · · ·	e 0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	11,320.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, se	e instructions)	4	170.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Pa	*	5	11,150.
6	Minimum investment return. Enter 5% of line 5		6	558.
	Distribute has a second of the	(1)(5) private operating foundations ar	nd certain	
L	art XI Distributable Amount (see instructions) (Section 4942())(3) and foreign organizations check here and do not complete this part.)	(//(-/ -/		
1	Minimum investment return from Part X, line 6		11	558.
2a	1	a 4.		
b	Income tax for 2010. (This does not include the tax from Part VI.)	b	1	
C	Add lines 2a and 2b		2c	4.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	554.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	554.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII	I, line 1	7	554.
P	art XII Qualifying Distributions (see instructions)		1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos	665.	1 _a	457,679.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26 Program-related investments - total from Part IX-B		1b	#31,013:
ь 2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	ete purpoces	2	
3	Amounts set aside for specific charitable projects that satisfy the	etc., purposes	 	
a			3a	
			3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and	Part VIII line 4	4	457,679.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investing		\vdash	
J	income. Enter 1% of Part I, line 27b	nent	5	0.
e	Adjusted qualifying distributions. Subtract line 5 from line 4		6	457,679.
6		n calculation whether the foundation	ــــــــــــــــــــــــــــــــــــــ	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years whe 4940(e) reduction of tax in those years.	ii calculatiliy whether the loundation i	quallires 101	

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				554.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:				
· , ,		0.		
3 Excess distributions carryover, if any, to 2010:				
aFrom 2005 681,188.				
bFrom 2006 1,628,042.				
cFrom 2007 2,161,423.				
dFrom 2008 799,740.				
eFrom 2009 867,365.				
f Total of lines 3a through e	6,137,758.			
4 Qualifying distributions for 2010 from		- · · - · · · · · · · · · · · · · · · ·		
Part XII, line 4: ▶\$ 457,679.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior		-		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	-		* 	
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				554.
e Remaining amount distributed out of corpus	457,125.			
5 Excess distributions carryover applied to 2010	0.			0.
(if an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,594,883.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract			· · · · · · · · · · · · · · · · · · ·	
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
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	681,188.			
9 Excess distributions carryover to 2011.	_			
Subtract lines 7 and 8 from line 6a	5,913,695.			
10 Analysis of line 9:	······································			
a Excess from 2006 1,628,042.				
b Excess from 2007 2, 161, 423.				
c Excess from 2008 799,740.				
d Excess from 2009 867, 365.				
e Excess from 2010 457, 125.				
				Form 990-PF (2010)

	KA FOUNDATI				530053 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part V	I-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	r 2010, enter the date of t	the ruling	▶		<u> </u>
b Check box to indicate whether the found	lation is a private operatir	ng foundation described	in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,			 	-	
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.		1			
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:				1	
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter			 		
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:				İ	
(1) Total support other than gross investment income (interest, dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		l As Alsia mant ambu	if the formulation	n had \$5 000 ar	moro in accets
Part XV Supplementary Info			if the foundation	n nau \$5,000 or i	nore in assers
at any time during t	·•	instructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation wh			tributions received by th	e foundation before the (close of any tax
year (but only if they have contributed r	nore than \$5,000). (See s	section 507(a)(2).)			
NONE					
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large port	ion of the ownership of a	a partnership or
NONE					
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship, etc., P	rograms:		.
Check here if the foundation of the foundation makes gifts, grants, etc.	inly makes contributions	to preselected charitable	organizations and does	not accept unsolicited recomplete items 2a, b, c, a	equests for funds. If and d.
a The name, address, and telephone num					
SEE STATEMENT 5					
b The form in which applications should to	ne submitted and informa	tion and materials they s	should include:		
c Any submission deadlines:					
		 		Alter design	
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	i, kinds of institutions, or	other factors:	
					5 000 DE (0010)

3 Grants and Contributions Paid During the Y	ear or Approved for Future F	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year GRANTS TO CHARITABLE ORGANIZATIONS (SEE ATTACHED STATEMENT)				380,41
MATCHING GRANTS TO CHARITABLE ORGANIZATIONS (SEE ATTACHED STATEMENT)				19,26
SCHOLARSHIPS (SEE ATTACHED STATEMENT)				58,00
			.	457,67
Total	1			437,07
b Approved for future payment				
NONE				
	:			
Total			▶ 3b	

Part XVI-A Analysis of Income-Pro	oducing Activities
-----------------------------------	--------------------

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ided by section 512, 513, or 514	(e)
• • • • • • • • • • • • • • • • • • • •	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
C					
d					
e					
1					· · · · ·
g Fees and contracts from government agencies					
2 Membership dues and assessments					·
3 Interest on savings and temporary cash					
investments			14	209.	
4 Dividends and interest from securities					
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	-	<u> </u>			-
8 Gain or (loss) from sales of assets other		•			
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a					
b					
С					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0	•	209.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	209.
(See worksheet in line 13 instructions to verify calculations.)					<u> </u>

Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

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	Form 990-PF (2010

Yes No

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did i	he organization directly or indi	rectly engage in any of the following	ng with any other organization	described in section 501(c) of		Yes	No
the (Code (other than section 501(c)	e)(3) organizations) or in section 5	27, relating to political organiz	ations?			
a Tran	sfers from the reporting founda	ation to a noncharitable exempt or	ganization of:		1		
(1)	Cash	·			1a(1)		Х
	Other assets				1a(2)		X
b Othe	r transactions:						
(1)	Sales of assets to a noncharital	able exempt organization			16(1)		Х
• •		incharitable exempt organization			1b(2)		X
	Rental of facilities, equipment,				1b(3)		X
	Reimbursement arrangements				1b(4)		X
	Loans or loan guarantees				1b(5)		X
	•	embership or fundraising solicitation	nns		1b(6)		X
		ailing lists, other assets, or paid em			1c	_	X
		- ' '	• •	ys show the fair market value of the goods, o		ets.	
				in any transaction or sharing arrangement, s		0.0,	
		other assets, or services received.		many transaction of offering entangement, o			
(a)Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions, and	sharing arr	angeme	ents
(4)2	(5)7477047114701704	N/A	o oxompt organization	(C) Bookingson of deficiency, automotion, and			
		N/A					
			.	-			
		<u> </u>					
			·				
2a Is th	e foundation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organiza	tions described			_
	•	r than section 501(c)(3)) or in sec	, -		Yes	X] No
	es," complete the following sch						
	(a) Name of org		(b) Type of organization	(c) Description of relations	nip		
	N/A		1 1				
							
			 				
			 			·	
			 				
	Linder penalties of person I declare	e that I have examined this return, include	ting accompanying schedules and s	statements, and to the best of my knowledge and bel	ef. it is tru	ie. corre	ect.
C:		arer (other than taxpayer or fiduciary) is b					•
Sign	JA JUI	1 1	ارراس	La Same			
Here			2/14/	1 Levy			
	Signature of officer or tru		Date	Title //	_		
	Print/Type Peparer's na	ame Preparer's s	signature	Date Check if PTIN			
		X	-X + 1	5/9/12 self- employed			
Paid	JAMES H JO		<u>/ </u>				
Prepa	l l	H & COMPANY, P	Co-	Firm's EIN ►			
Use O							
	Firm's address ▶ 31	5 N. CEDAR BLUF	F RD.				
	KN	OXVILLE, TN 379	23	Phone no. (865)	<u> 769</u>	<u> 0 6 </u>	60
				Fo	rm 990	-PF	(2010)

023622 04-26-11

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number Name of the organization THE UNAKA FOUNDATION, INC. 62-1530053 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 X 501(c)(3) exempt private foundation Form 990-PF 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, chantable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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)

THE U	NAKA FOUNDATION, INC.		:-1530053
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	UNAKA COMPANY, INC. 1500 INDUSTRIAL ROAD GREENEVILLE, TN 377453541	\$\$	Person X Payroll
(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 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 Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2010)
023452 12-2	3-10	Scheanie R (Form	330, 330-CZ, 01 330-PF) (2010)

THE UNAKA FOUNDATION, INC.

62-1530053

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
İ		\$	
(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	(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
— I			

ATTACHMENT TO 990-PDF PAGE 10, PART XV, #2(D) EIN: 62-1530053

THE UNAKA FOUNDATION, INC

Qualifying Gifts

Unaka Company will match each eligible contributor's gift up to an aggregate of \$500 00 after one year of employment and

securities will be determined by the company as of the last the contributor and be in cash or securities. The value of The contribution must come from the personal funds of sale or published bid price on the date of the gift

Amendment, Suspension, or Discontinuance

(

Unaka Company may at any time amend, suspend, or discontinue discontinuance shall affect the obligation of the company to match gifts made prior to the date of such amendment, suspension, or this matching of gifts However, no amendment, suspension or discontinuance

interpretation which may arise in connection with the administration Unaka Company reserves the right to decide all questions of of this program

Contribution Instructions

remaining section of your form and return it to Unaka Company, Director of Human Resources, 1500 Industrial Rd , Greeneville, Tn Simply fill out the donor's portion of this brochure and mail it with your contribution to the organization of your choice. When your gift is received, an official of the organization will complete the

Matching Charitable Gifts Program

Purpose of the Program

up to \$5000 00 after two years of employment

- match personal gifts of eligible contributors to those organizations employees and others Under this program, Unaka Company will The purpose of the program is to increase Unaka Company's chantable contributions and to stimulate individual gifts from
- Unaka's Matching Charitable Gifts Program will match dollar For organizations outside these four counties, the company for dollar for organizations in Greene County, TN, Sullivan County, TN, Marion County, SC, and Marlboro County, SC will match \$ 50 for each \$1 00
- The employee cannot benefit personally from the contribution

All regular salaned and hourly paid employees who have been employed one year or longer, retirees, and directors of Unaka

that meet the requirements of eligibility set forth below

Eligible Contributors

Company and its subsidiaries are eligible to participate in this

Matching Charitable Gifts Program

- For IRS purposes Unaka must receive a receipt or a written acknowledgement for any gift
- Matching gifts are not automatic Unaka reserves the right to refuse any requests

(

- Private or public schools, colleges, universities, and graduate which has been qualified to receive gifts for the school and its certified alumni fund, foundation, or subdivision of the school for-profit institutions Gifts may also be made to a properly professional schools in the United States qualified as noteducational program
- Organizations that are involved in public service on a broad American Red Cross, American Heart Association, United scale Examples include the American Cancer Society,
- The organization must qualify as a charitable organization under section 501(c) of the Internal Revenue Code

Matches will not be made for gifts made to religious institutions or political organizations **(**

OR SCHOLARSHIP GRANT FROM THE UNAKA SCHOLARSHIP FOUNDATION

Company where parent	works		Date						
Name	.=	Age _	Sex	SSN					
			Tel. No Marital	Status					
Parent's Name		· 							
	Father			Dept. where parent works					
	Mother			Dept. where parent works					
High School Attended				Year Graduated					
Scholastic Average	Major S	ubjects _							
College or University Selected Address Have you made application for									
Have you been accepted? *Applicant must maintain 12 Program; 6 hours for Graduate TO BE SIGNED BY THE PA	School.		2 hours) pe	ours enrolled er semester for Undergraduate					
	to receive thes	ip Founda se funds.	ation in the We agree t	amount of \$ and o encourage our child to abide attee governing the granting of					
Father	Date		other	Date					
TO BE SIGNED BY THE A	PPLICANT:								
I hereby make application to the Unaka Scholarship Foundaset forth by the Administrative	ation and if app	roved, agi	ee to abide	by all the rules and conditions					
Signature of Applicant	Date								
APPROVED – ADMINISTR	ATIVE COM	MITTEE		DATE					
Chai	irman								

UNAKA FOUNDATION, INC. CHARITABLE CONTRIBUTIONS FOR YEAR ENDING JUNE 30, 2011

PAYEE	DATE	CK#	AMOUNT
SYMPHONY ARLINGTON	8/6/2010	WIRE	125,000.00
LAS COLINAS SYMPHONY ORCHESTRA	8/6/2010	WIRE	100,000.00
GARLAND SYMPHONY ORCHESTRA	8/6/2010	WIRE	75,000.00
MARCH OF DIMES	21-Jul-10	892	1,000.00
MARION COUNTY UNITED FUND	21-Jul-10	893	5,000.00
UNITED WAY OF MARLBORO COUNTY	21-Jul-10	895	5,000.00
AMERICAN RED CROSS	21-Jul-10	896	1,000.00
GREENEVILLE EXCHANGE CLUB	21-Jul-10	897	500.00
VOLUNTEER CENTER OF GREENE COUNTY	21-Jul-10	898	1,000.00
R&DA MILITARY ASSISTANCE PROGRAM	21-Jul-10	899	1,000.00
CASA OF NORTHEAST TENNESSEE	21-Jul-10	900	1,000.00
THE SCHOOL FOUNDATION	29-Jul-10	932	2,500.00
GREENEVILLE CITY SCHOOLS FOUNDATION	14-Sep-10	936	12,500.00
GREENE COUNTY YMCA CAPITAL CAMPAIGN	14-Sep-10	937	6,666.67
PEE DEE VISIONS FOUNDATION	18-Oct-10	941	7,500.00
TUSCULUM COLLEGE	27-Jan-11	1027	5,000.00
BOY SCOUTS OF AMERICA	27-Jan-11	1028	2,500.00
CARSON NEWMAN COLLEGE	27-Jan-11	1029	1,000.00
GREENE COUNTY COMMUNITY MINISTRIES	27-Jan-11	1030	2,500.00
HOLSTON HOME FOR CHILDREN	27-Jan-11	1031	1,000.00
JUNIOR ACHIEVEMENT GREENE COUNTY	27-Jan-11	1032	5,000.00
NATHANIEL GREENE MUSEUM	27-Jan-11	1033	1,000.00
AMERICAN DIABETES ASSOCIATION	27-Jan-11	1034	1,000.00
THE HOME DEPOT FOUNDATION	27-Jan-11	1035	10,000.00
UNITED WAY OF GREENE COUNTY	27-Jan-11	1036	5,000.00
OVARIAN CANCER RESEARCH FUND (GOODRICH)	17-Mar-11	1048	250.00
GREENEVILLE CITY SCHOOLS FOUNDATION	17-Mar-11	1049	500.0D
AMERICAN RED CROSS	4-May-11	1050	1,000.00

380,416.67

ALL RECIPIENTS ARE PUBLIC CHARITIES.
ALL CONTRIBUTIONS WERE UNRESTRICTED AND FOR USE IN FURTHERANCE OF THE RECIPIENT ORGANIZATIONS STATED CHARITABLE PURPOSES.

UNAKA FOUNDAITON INC.
MATCHING CHARITABLE CONTRIBUTIONS
FOR YEAR ENDING JUNE 30, 2011

PAYEE	DATE	CK#	AMOUNT	CONTRIBUTOR
LAUGHLIN HEALTHCARE FOUNDATION	22-Jul-10	901	2.000.00	JACKSON
UNIVERSITY OF TENNESSEE	22-Jul-10	902	1,600.00	
UNIVERSITY OF TENNESSEE	22-Jul-10	903	4,000.00	CARTER
CUMBERLAND UNIVERSITYY	22-Jul-10	904	500.00	WARD
AMERICAN CANCER SOCIETY	22-Jul-10	905	2,928.00	UNAKAMECO EMPLOYEES
UNITED WAY OF GREENE COUNTY	22-Jul-10	906	499.40	UNAKA/MECO EMPLOYEES
UNITED FUND OF MARION COUNTY	22-Jul-10	907	390.00	SOPAKCO EMPLOYEES
HOLSTON HOME FOR CHILDREN	22-Jul-10	908	70.00	PHILLIPS
UNION UNIVERSITY	22-Jul-1 0	909	59.00	WARD
TEXAS A&M KINGSVILLE FOUNDATION	22-Jul-10	910	2,747.80	MCCORMICK
SHOP WITH A COP	27-Jan-11	1037	203.22	MECO EMPLOYEES
UNITED WAY OF GREENE COUNTY	27-Jan-11	1038	50.00	PHILLIPS
UNITED WAY OF GREENE COUNTY	27-Jan-11	1039	25.00	WINTER
UNITED WAY OF GREENE COUNTY	27-Jan-11	1040	368.00	UNAKA/MECO EMPLOYEES
HOLSTON HOME FOR CHILDREN	27-Jan-11	1041	140.00	PHILLIPS
GREENE COUNTY COMMUNITY MINISTRIES	27-Jan-11	1042	250.00	PHILLIPS
NATIONAL MS SOCIETY	27-Jan-11	1043	100.00	WARD
AMERICAN CANCER SOCIETY	27-Jan-11	1044	265.10	UNAKA/MECO EMPLOYEES
AMERICAN CANCER SOCIETY	27-Jan-11	1045	20.00	WINTER/WILLIAMS
UNITED FUND OF MARION COUNTY	27-Jan-11	1046	280.00	SOPAKCO EMPLOYEES
NATIONAL MS SOCIETY	27-Jan-11	1047	2,775.00	UNAKAMECO EMPLOYEES
			19,261.52	

ALL RECIPIENTS ARE PUBLIC CHARITIES.
ALL CONTRIBUTIONS WERE UNRESTRICTED AND FOR USE IN FURTHERANCE OF THE RECIPIENT ORGANIZATIONS STATED CHARITABLE PURPOSES.

Unaka Foundation 06/30/2011 Scholarship Summary Scholarship Grants

Fall 2010 Grants Spring 2011 Grants	\$ \$ \$	38,000 00 (1) 30,000.00 (2) 68,000.00
Refunded Scholarships	\$	(10,000.00)
Grand Total	\$	58,000.00

NO SCHOLARSHIP RECIPIENT IS RELATED TO ANY FOUNDATION MANAGER OR SUBSTANTIAL CONTRIBUTOR.

SCHOLARSHIP RECIPIENTS Fall Semester 2010

MECO

Student	Parent	Address	Colloge/University Attending	Amount CHECK # ACKNOWLEDGED	ACKNOWLEDGED
Joshua Lynn Brooks	Mechelle Brooks	208 Brooks Drive Greeneville, TN 37743	Walters State Community College	1,000.00	
Casey Broyles	Lora Broyles	60 Lorraine Street Greeneville, TN 37743	Walters State Community College,	1,000.00	
Sasha Davis	Allan Hubbard	1525 Jim Fox Road Greeneville, TN 37743	East Tennessee State University	1,000.00	
Corrin Fife	Jim Fife	60 Shilo Road Greeneville, TN 37743	Tusculum College	1,000.00	
Slephen Lelfert	Robert Lelfert	217 Woodcrest Dr. Greeneville, TN 3775	East Tennessee State University	1,000.00	
Amanda Lowe	Judy Kltzmiller	770 Balleyton Road Greeneville, TN 37745	Tusculum College	1,000.00	
Tommy H. Ricker	Shirley Ricker	189 Heron Lane Greeneville, TN 37743	King Callege	1,000.00	
Christopher Van Gorp	Marina Van Gorp	222 Northwood Lane Greeneville, TN 37743	Northeast State Technical College	1,000.00	

SOPAKCO - SC				
Jessica L. Alken	Lottle A. Campbell	210 Patmar Square Mullins, SC 29574	Coastal Carolina University	1,000.00
Marquita Brigman	Tara Brigman	518 Morgan Circle Mullins, SC 29574	Fiorence-Darlington Technical College	1,000.00
Talania Brigman	Tara Brigman	518 Morgan Circle Mullins, SC 29574	Florence-Darlington Technical College	1,000.00
Jüstin Cheek	Keith Cheek	128 Pineview Road Bennettsville, SC 29512	Florence-Darlington Technical College	1,000.00
Adrian Davis	Alice Paige	6366 Golden Ct Mullins, SC 28574	Florence-Darlington Technical College	1,000.00
Kassie A. Driggers	Barbara Origgers	115 Maple Street Latta, SC 29565	Francis Marion University	1,000,00
Oavis Marie Dubose	David DuBose	333 Powhatan Drive Mullins, SC 29574	College of Charleston	1,000.00
Thomas S. DuBose	David DuBose	333 Powhatan Drive . Mullins, SC 29574	College of Charleston	1,000.00
Shanlque N. Green	Tina M. Crawford	3525 Quall Roost Road Mullins, SC 29574	Florence-Daylington Technical College	1,000.00
Samentha Grier	Susan Grier	105 E. McLaurin Ave. McColl, SC 28570	Clemson University	1,000.00
Jenica Hemingway	Curlene Herningway	1550 Terrell Mill Rd. Apt 16P Marietta, GA 30067	Life University	1,000.00
My'Cweshia Littles	Mary Littles	6106 Dalsy Road Latta, SC 29565	Florence-Darlington Technical Collage	1,000.00
Calilln McCaustland	David McCaustland	729 Lakeshore Drive Benneltsville, SC 29512	USC- Upstate	1,000.00
Elbert McClain	Elizabeth McClein	309 Orr Street Mullins, SC 29574	Mullns Technology Center	1,000.00
Justin W. McCreary	Bill McCreary	1809 Nighthawk Drive Florence, SC 29501	University of South Carolina	1,000.00
Ryan J. McCreary	Bill McCreary	1809 Nighthawk Drive Florence, SC 29501	University of South Carolina	1,000.00
Arica Nelson	Wille Nelson	6009 Braddy Ct. Mullins, SC 29574	Francis Marion University	1,000.00
Samentha Palge	Alan Palge	23030 Miller Road Steger, IL 60475	University of Illinois	1,000.00
Tyquan Parker	Valerie Smith	473 McQueen Road Bennettsville, SC 29512	Voorhees College	1,000.00
Antonio Tyquan Pompey	Andre Love Martin	1415 Old Slage Road Mullins, SC 29574	National Aviation Academy	1,000.00
Dorothy Rogers	Michael Rogers	806 Bethea Ext. Latta, SC 29565	Coastal Caroline University	1,000.00
Shantrell Sindab	Johnnie Sindab	PO Box 243 Mullins, SC 29574	Claffin University	1,000.00
Hashan S. Tyson	Herman Tyson	623 Wilkinson Drive Laurinburg, NC 28352	Richmond Community College	1,000.00

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504 E. Manning Street Marton, SC 28571

Gloria Wilson

Vernisha D. Wilson

Florence-Darlington Technical College

1,000,00

!

CROWN POINT

Jeffrey W. Gates	Kevin Gates	3151 Burge Drive Crown Point, IN 46307	Indiana University Law School	1,000.00
Jessica L. Gates	Kevin Gales	3151 Burge Drive Crown Point, IN 46307	University of Southern Indiana	1,000.00
SOPAKCO - Warehousing	86			
Kalie E. Barron	Anila Powers	649 1/2 Alcoa Dr. Kingsport, TN 37660	King College	1,000.00
Perry Southerland	Willis Southerland	14885 Lonesome Pine Trall Greeneville, TN 37745	Walters State Community College	1,000.00
UNAKA				
Kelly Hodge	Kris Hodge	331 Gulnn Drive Greeneville, TN 37743	East Tennesse State University	1,000.00
Hannah Royal	Melinda Stewart Hickerson 313 N. Main St. Graeneville, TN	n 313 N. Maln St. Graeneville. TN 37743	University of Tennessee-Knoxville	1,000.00

TOTAL \$38,000.00

< 6000.00> Petumed

(1) 32,000.00 Hijusted TOTAL

SCHOLARSHIP RECIPIENTS Spring Semester 2011

MECO

Student	Parent	Address	College/University Attending	Amount Ch	TECK #	Amount CHECK # ACKNOWLEDGED
Joshua Lynn Brooks	Mechelle Brooks	208 Brooks Drive Greeneville, TN 37743	Walters State Community College	1,000.00		
Casey Broyles	Lora Broyles	60 Lorraine Street Greeneville, TN 37743	Walters State Community College	1,000.00		
Sasha Davis	Allan Hubbard	1525 Jim Fox Road Greeneville, TN 37743	East Tennessee State University	1,000.00		
Corrin Fife	Jim Fife	60 Shilo Road Greeneville, TN 37743	Tusculum College	 -	Returned C	
Stephen Leifert	Robert Leifert	217 Woodcrest Dr. Greeneville, TN 3775	East Tennessee State University	1,000.00		
Tommy H. Ricker	Shirley Ricker	189 Heron Lane Greeneville, TN 37743	King College	1,000.00		
Christopher Van Gorp	Marina Van Gorp	226 Northwood Lane Greeneville, TN 37743	Northeast State Technical College	1,000.00		

SOPAKCO - SC

College	College - Returned h	l Cellege 1,000.00	1,000 00	1,000.00	1,000.00	i College 1,000.00	1,000.00	1,000.00	Cellege 1,000.00	1,000.00	1,000.00	1,000.00	Callege 1,000.00	1,000.00	1,000 00	- Returned Not Enrolled	cal College 1,000.00
Florence-Vaningion (echnical College	Florence-Darlington Technical Collega	Florence-Darlington Technical College	Francis Marion University	Morris College	College of Charleston	Florence-Darlington Technical College	Clemson University	Life University	Florence-Darlington Technical College	USC- Upstate	University of South Carolina	Francis Marion University	Figrence-Darlington Technical College	Voorhees Callege	Coastal Carolina University	Claffin University	Florence-Darlington Technical College
Mullins, SC 29574	518 Morgan Circle Mullins, SC 28574	128 Pineview Road Bennettsville, SC 29512	115 Maple Street Latta, SC 29565	319 North East Front Street Mullins, SC 29574	333 Powhatan Drive Multins, SC 29574	3525 Quali Roost Road Mullins, SC 29574	105 E. McLaurin Ave. McColl, SC 29570	1550 Terrell Mill Rd. Apt 18P Mariella, GA 30067	6106 Daisy Road Latta, SC 29565	729 Lakeshore Drive Bennettsville, SC 29512	1809 Nighthawk Drive Florence, SC 29501	6009 Braddy Ct. Mullins, SC 29574	130 East Canal Road Sellers, SC 29592	473 McQueen Road Bennettsville, SC 29512	806 Bethea Ext. Latta, SC 29565	PO Box 243 Multins, SC 29574	504 E. Manning Street
	Tara Brigman	Keith Cheek	Barbara Origgers	Laray Ross	David DuBose	Tina M. Crawford	Susan Grier	Curlene Hemingway	Mary Littles	David McCauslland	Bili McCreary	Willie Nelson	Wanda Oxendine	Valerie Smith	Michael Rogers	Johnnie Sindab	Gloria Wilson
Walter Brightlan	Talanla Brigman	Justin Cheek	Kassle A. Driggers	Sean Darsey	Davis Marle Dubose	Shanique N. Green	Samantha Grier	Jenica Hemingway	My'Qweshla Littles	Calilin McCaustland	Ryan J. McCreary	Arica Nelson	Tiffany Nicole Oxendine	Tyquan Parker	Dorothy Rogers	Shanfrell Sindab	Vernisha D. Wilson

CROWN POINT				
Taylor Baran	Lance Baran	6970 W. 105th Pi. Crown Point, IN 46307	Purdue/North Central Campus	1,000.00
Jeffrey W. Gates	Kevin Gales	3151 Burge Drive Crown Point, IN 46307	Indiana University Law School	1,000.00
Jessica L. Gates	Kevin Gales	3151 Burge Drive Crown Point, IN 46307	University of Southern Indiana	1,000.00

SOPAKCO - Warehousing	- Bu			
Katle E. Barron	Anila Powers	549 1/2 Alcoa Dr.	King College	1,000.00
		Kingsport, TN 37660		
UNAKA				

Hannah Royal

					<u>(S)</u>	
1,000.00	TOTAL \$26,000.00		\$26,000	\$ 4,000	\$30,000	
University of Tennessee-Knoxviile	TOTA	Gross Total:	Scholarships Paid: \$26,000	Returned:	Total Gross Paid \$30,000	
313 N. Main St. Greeneville, TN 37743						
Melinda Stewart Hickerson 313 N. Main St. Greeneville, TN						

<u>@</u>

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
ANDREW JOHNSON BANK			•	2	09.
TOTAL TO FORM 990-PF, PART I,	, LINE 3, CO	LUMN A		2	09.
FORM 990-PF	TAX	ES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
TN SECRETARY OF STATE	20.	0.			0.
TO FORM 990-PF, PG 1, LN 18	20.	0.			0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
BANK CHARGES	70.	0.			0.
TO FORM 990-PF, PG 1, LN 23	70.	0.			0.

	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS					
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT		
DEAN A. NEBBEN 1914 HIXSON MARINA ROAD HIXSON, TN 37343	DIRECTOR 1.00	0.	0.	0.		
RAYBURN H. TANKERSLEY 216 HICKORY TRAIL GREENEVILLE, TN 37745	DIRECTOR 1.00	0.	0.	0.		
HARRY D. WADE P.O. BOX 50754 KNOXVILLE, TN 379500754	DIRECTOR 1.00	0.	0.	0.		
DOMINICK JACKSON 1500 INDUSTRIAL ROAD GREENEVILLE, TN 37745	PRESIDENT 1.00	0.	0.	0.		
L. A. YONZ 1500 INDUSTRIAL ROAD GREENEVILLE, TN 37745	SECRETARY 1.00	0.	0.	0.		
TOTALS INCLUDED ON 990-PF, PAG	GE 6, PART VIII	0.	0.	0.		

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SCHOLARSHIPS-DOMINICK JACKSON; GRANTS TO CHARITABLE ORGANIZATIONS-L.A. YONZ (423) 639-1171; 1500 INDUSTRIAL ROAD GREENEVILLE, TN 377453541

TELEPHONE NUMBER

(423)639-1171

FORM AND CONTENT OF APPLICATIONS

SEE ATTACHED APPLICATIONS FOR BOTH SCHOLARSHIPS AND CHARITABLE CONTRIBUTIONS

ANY SUBMISSION DEADLINES

SCHOLARSHIPS - NONE

CHARITABLE CONTRIBUTIONS - NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

SCHOLARSHIPS ARE LIMITED TO DEPENDENTS OF EMPLOYEES OF UNAKA COMPANY, INC. AND DEPENDENTS OF EMPLOYEES' SPOUSES. CHARITABLE CONTRIBUTIONS ARE AVAILABLE TO ALL ORGANIZATIONS EXEMPT UNDER CODE SEC. 501(C). SEE ATTACHED REGARDING THE MATCHING CHARITABLE GIFTS PROGRAM.

Form **8868**

(Rev. January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Internal Reven	of the Treasury nue Service	► File a sepa	rate appli	ication for each return.				
• If you ar	re filing for an Aut	omatic 3-Month Extension, complete	te only Pa	rt I and check this box				X
-	_		_	complete only Part II (on page 2 of this	· farm).			
_				tic 3-month extension on a previously file		m 8868.		
	-			3-month automatic extension of time to			corpo	ration
		·		ion of time. You can electronically file Fo			-	_
				Form 8870, Information Return for Trans		-		
			•					
		lick on e-file for Charities & Nonprofits		(see instructions). For more details on th	IO OIOC	tronic ming of	uns ic	XIII,
Part		c 3-Month Extension of Time		bmit original (no coples needed).				
A corporat	tion required to file	Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and com	plete	-		
Part I only	·							
	orporations (includ nme tax returns.	ding 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to request an	exten	sion of time		
Type or	Name of exemp	t organization			Empl	oyer Identific	ation	number
Ì	THE UNAKA FOUNDATION, INC. 62-1530053							
File by the due date for filing your 1500 INDUSTRIAL ROAD								
return Sec Instructions	City, town or po	st office, state, and ZIP code. For a for LLE, TN 37745-354	-	ress, see instructions.				
Enter the I	Return code for th	e return that this application is for (file	a separa	te application for each return)				0 4
						·		
Application	on		Return	Application				Return
ls For			Code	Is For				Code
Form 990			01	Form 990-T (corporation)				07
Form 990-	·BL		02	Form 1041-A				08
Form 990-			03	Form 4720				09
Form 990-			04	Form 5227				10
		OB(a) truct)	05		_			11
	T (sec. 401(a) or 4		06	Form 6069		_		12
FOIIII 990-	T (trust other than	L.A. YONZ		Form 8870				
A Thaba	-le !- Ab		ו אר סם	O - GREENEVILLE, TN	277	45_3541		
		-639-1171	NOAL		3//	43-3341		
-	-			FAX No. ▶				
	•	not have an office or place of business						
				emption Number (GEN) If this		-		
box ▶ L				ch a list with the names and EINs of all		ers the extens	ion is	for.
				to file Form 990-T) extension of time unti				
	FEBRUARY	15, 2012 , to file the exemp	t organizat	tion return for the organization named a	bove.	The extension		
is fo	r the organization							
▶∟	calendar year	or						
►L	🗶 tax year begir	JUL 1, 2010	, an	dending JUN 30, 2011				
2 If the	e tax year entered	in line 1 is for less than 12 months, cunting period	heck reas	on: Initial return Fina	il retur	n		
3a If thi	is application is fo	r Form 990-BL, 990-PF, 990-T, 4720,	or 6069, ea	nter the tentative tax, less any				
		. See Instructions. r Form 990-PF, 990-T, 4720, or 6069,	enter env	refundable credits and	3a	\$		4.
		its made. Include any prior year overp	-		3ь	\$		20.
		et line 3b from line 3a. Include your pa tronic Federal Tax Payment System).		· · · · · · · · · · · · · · · · · · ·	3c	•		0.
				orm 8868, see Form 8453-EQ and Form		O for paymer	nt inst	
		fuction Act Notice, see Instructions		SOUM		, Form 88		v. 1-2011)
023841				Date	<u> </u>			
023841 01-03-11				Bv	<u> </u>			
501100	726002	26000225 2010	04040	THE INAKA FOINDATIO	N T	TNO 9	2600	16586
אווו מו	- / <nxx <<="" td=""><td>50448425 2010</td><td>папап</td><td>THE UNAKA ECHNIDATIC</td><td>IN .</td><td>INC.</td><td>1 N 4 '</td><td>* K (/ </td></nxx>	50448425 2010	папап	THE UNAKA ECHNIDATIC	IN .	INC.	1 N 4 '	* K (/

Form 8868 (Rev. 1-2011)			_		Page 2
• If you are filing for an Additional (Not Automatic)	3-Month Extension, c	omplete only Part II and check this b	ox	•	X
Note. Only complete Part II if you have already been				868.	
• If you are filing for an Automatic 3-Month Extens					
		of Time. Only file the original (no c	copies ne	eded).	
Name of exempt organization				oyer identification	number
Type or print must into an action and the				1520052	
THE UNAKA FOUNDATION,			0.4	2-1530053	
extended Number, street, and room of suite no. if a	a P.O. box, see instruct	tions.			
due date for 1500 INDUSTRIAL ROAD filing your					
return. See City, town or post office, state, and ZIP of instructions GREENEVILLE, TN 3774	ode. For a foreign add 5 🗕 3 5 4 1	ress, see instructions.			
GREENEVILLE, IN 3774	J - JJ - I				
Enter the Return code for the return that this applica	tion is for (file a separa	te application for each return)	:		0 4
Application	Return	Application			Return
ls For	Code	Is For			Code
Form 990	01		737	1 18.71	
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOPI Do not complete Part II if you were not aire		natic 3-month extension on a previo	usly file	d Fo <u>rm 8868.</u>	
L.A. YON					
 The books are in the care of ► 1500 IND 	USTRIAL ROA	D - GREENEVILLE, TN	377	45-3541	
Telephone No. ► <u>423-639-1171</u>		FAX No. ▶			
 If the organization does not have an office or place 					
 If this is for a Group Return, enter the organization 	n's four digit Group Exe	emption Number (GEN) If t	his is for	the whole group, o	check this
box 🕨 🔙 . If it is for part of the group, check this		ich a list with the names and EINs of a	<u>ll membe</u>	ers the extension is	for.
4 I request an additional 3-month extension of tir		<u>15, 2012</u> .			
5 For calendar year, or other tax year b	eginning <u>JUL 1</u>	, 2010 , and ending	<u>JUN</u>	30, 2011	
6 If the tax year entered in line 5 is for less than	12 months, check reas	on: Initial return	J Final re	eturn	
Change in accounting period					
7 State in detail why you need the extension	 				
THE TAXPAYER REQUESTS A			INFO	RMATION N	EEDED
IN ORDER TO PREPARE A C	OMPLETE AND	ACCURATE RETURN.			
				 	
8a If this application is for Form 990-BL, 990-PF, 9	390-T, 4720, or 6069, e	inter the tentative tax, less any			
nonrefundable credits. See instructions.			8a	\$	<u>4.</u>
b If this application is for Form 990-PF, 990-T, 47	'20, or 6069, enter any	refundable credits and estimated			
tax payments made. Include any prior year over	erpayment allowed as	a credit and any amount paid			20
previously with Form 8868.			8b	\$	20.
c Balance due. Subtract line 8b from line 8a. Inc	clude your payment wi	th this form, if required, by using			•
EFTPS (Electronic Federal Tax Payment Syste			8c_	_\$	<u> </u>
	Signature ar	nd Verification			
Under penalties of perjury, I declare that Thave examined the it is true, correct, and complete, and that I am authorized to	is form, including accomp	panying schedules and statements, and to t	he best o	f my knowledge and l	belief,
	()			. 2/2	1.12
Signature > (1)	Title ▶		Date	Form 8868 (F	
				Form 8868 (F	lev. 1•2011)
_					
				CCAR	INIED
		Certified Mail		_	NED
		Date 2/12/12		Date	-11-12
				Бу^_	
023842		By		<i>-y</i>	
023842 01-24-11		$\boldsymbol{\nu}$			