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Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)**
 ▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
 ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2010 calendar year, or tax year beginning 7/01, **2010, and ending** 6/30, **2011**

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C	D Employer identification number
	THE ROGER CLEMENS FOUNDATION	76-0378319
	8572 KATY FREEWAY #106	E Telephone number
	HOUSTON, TX 77024	(713) 444-1848
		F Group Exemption Number

G Accounting Method Cash Accrual Other (specify) ▶ _____ **H** Check if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ N/A

J Tax-exempt status (ck only one) — 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 65,114.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Check if the organization used Schedule O to respond to any question in this Part I

REVENUE	1 Contributions, gifts, grants, and similar amounts received	1	33,966.
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	527.
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	29,200.
c Less: direct expenses from gaming and fundraising events	6c	12,533.	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	16,667.	
7a Gross sales of inventory, less returns and allowances	7a	1,421.	
b Less: cost of goods sold	7b	29.	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	1,392.	
8 Other revenue (describe in Schedule O)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	52,552.	
10 Grants and similar amounts paid (list in Schedule O) <u>SEE SCHEDULE O</u>	10	27,480.	
11 Benefits paid to or for members	11		
12 Salaries, other compensation, and employee benefits	12	26,913.	
13 Professional fees and other payments to independent contractors	13	6,000.	
14 Occupancy, rent, utilities, and maintenance	14		
15 Printing, publications, postage, and shipping	15	2,287.	
16 Other expenses (describe in Schedule O) <u>SEE SCHEDULE O</u>	16	29,586.	
17 Total expenses. Add lines 10 through 16	17	92,266.	
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-39,714.	
NET ASSETS	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	101,429.
	20 Other changes in net assets or fund balances (explain in Schedule O) <u>SEE SCHEDULE O</u>	20	2,207.
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	63,922.

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2010)

SCANNED JUN 28 2012

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Part V Other Information (Note the statement requirements in the instructions for Part V.) SEE SCHEDULE O

Check if the organization used Schedule O to respond to any question in this Part V

X

33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O

Table with columns Yes, No and row 33

34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)

Table with columns Yes, No and row 34

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.

Table with columns Yes, No and row 35

a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?

Table with columns Yes, No and row 35a

b If 'Yes,' has it filed a tax return on Form 990-T for this year (see instructions)?

Table with columns Yes, No and row 35b

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N

Table with columns Yes, No and row 36

37a Enter amount of political expenditures, direct or indirect, as described in the instructions

37a 0.

Table with columns Yes, No and row 37a

b Did the organization file Form 1120-POL for this year?

Table with columns Yes, No and row 37b

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?

Table with columns Yes, No and row 38a

b If 'Yes,' complete Schedule L, Part II and enter the total amount involved

38b N/A

Table with columns Yes, No and row 38b

39 Section 501(c)(7) organizations Enter

a Initiation fees and capital contributions included on line 9

39a N/A

b Gross receipts, included on line 9, for public use of club facilities

39b N/A

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under:

section 4911 0., section 4912 0.; section 4955 0.

Table with columns Yes, No and row 40a

b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I

Table with columns Yes, No and row 40b

c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958

0.

Table with columns Yes, No and row 40c

d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization

0.

Table with columns Yes, No and row 40d

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T

Table with columns Yes, No and row 40e

41 List the states with which a copy of this return is filed NONE

42a The organization's books are in care of ANNA SHAHEEN, HENDRICKS MGMT Telephone no. 281-350-7000 Located at 400 RANDAL WAY, SUITE 106 SPRING TX ZIP + 4 77388

42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country.

Table with columns Yes, No and row 42b

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.

42c At any time during the calendar year, did the organization maintain an office outside of the U S ? If 'Yes,' enter the name of the foreign country:

Table with columns Yes, No and row 42c

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year

43 N/A

44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

Table with columns Yes, No and row 44a

b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

Table with columns Yes, No and row 44b

c Did the organization receive any payments for indoor tanning services during the year?

Table with columns Yes, No and row 44c

d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

Table with columns Yes, No and row 44d

45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?	45	Yes	No
	a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see inst).	45a		X
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	46		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47	Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	47	Yes	No
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E.	48		X
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		X
	b If 'Yes,' was the related organization a section 527 organization?	49b		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE		0.	0.	0.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		0.

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer *[Signature]* Date 5/15/12
 DEBBIE CLEMENS Trustee
 Type or print name and title.

Paid Preparer Use Only: Print/Type preparer's name N. ANNA SHAHEEN Preparer's signature *[Signature]* Date 5/15/12 Check if self employed PTIN N/A
 Firm's name Hendricks Management Firm's EIN N/A
 Firm's address 400 Randal Way, Suite 106 Spring, TX 77388 Phone no. (281) 350-7000

May the IRS discuss this return with the preparer shown above? See instructions... Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization THE ROGER CLEMENS FOUNDATION	Employer identification number 76-0378319
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 9 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III – Functionally integrated d Type III – Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	<input type="checkbox"/>	<input type="checkbox"/>
(ii) A family member of a person described in (i) above?	<input type="checkbox"/>	<input type="checkbox"/>
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	<input type="checkbox"/>	<input type="checkbox"/>

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants'.)	69,895.	32,534.	25,571.	23,567.	33,966.	185,533.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3	69,895.	32,534.	25,571.	23,567.	33,966.	185,533.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6 Public support. Subtract line 5 from line 4						185,533.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	69,895.	32,534.	25,571.	23,567.	33,966.	185,533.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,553.	2,337.	265.	13.	527.	9,695.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	442,304.	-1,306.	-1,571.	65,300.	18,059.	522,786.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 Total support. Add lines 7 through 10						718,014.
12 Gross receipts from related activities, etc (see instructions)					12	0.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	25.8%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	27.6%
16a 33-1/3% support test – 2010. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 33-1/3% support test – 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 10%-facts-and-circumstances test – 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

BAA

Schedule A (Form 990 or 990-EZ) 2010

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants')						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lns 9, 10c, 11, and 12)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a 33-1/3% support tests – 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33-1/3% support tests – 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

PART II, LINE 17A - 10% FACTS AND CIRCUMSTANCES TEST - CURRENT YEAR

PURSUANT TO TREASURY REGULATION SECTION 1.170A-9T(F)(3) - DETERMINATION WHETHER AN ORGANIZATION IS "PUBLICLY SUPPORTED"; FACTS AND CIRCUMSTANCES TEST:

(1) THE PUBLIC SUPPORT OF APPROX. 26% IS MORE THAN 100% GREATER THAN THE 10% FACT AND CIRCUMSTANCE TEST WHICH SHOULD BE EVIDENCE IN COMPLIANCE AS STATED IN TREASURY REGULATION SECTION 1.170A-9T(F)(3)(III)(A) STATES "THE PERCENTAGE OF SUPPORT RECEIVED BY AN ORGANIZATION FROM PUBLIC OR GOVERNMENTAL SOURCES WILL BE TAKEN INTO CONSIDERATION IN DETERMINING WHETHER AN ORGANIZATION IS "PUBLICLY SUPPORTED." THE HIGHER THE PERCENTAGE OF SUPPORT ABOVE THE 10 PERCENT REQUIREMENT OF PARAGRAPH (F)(3)(I) OF THIS SECTION FROM PUBLIC OR GOVERNMENTAL SOURCES, THE LESSER WILL BE THE BURDEN OF ESTABLISHING THE PUBLICLY SUPPORTED NATURE OF THE ORGANIZATION THROUGH OTHER FACTORS DESCRIBED IN THIS PARAGRAPH (F)(3), WHILE THE LOWER THE PERCENTAGE, THE GREATER WILL BE THE BURDEN."

(2) PURSUANT TO TREASURY REGULATION SECTION 1.170A-9T(F)(3)(III)(B) SOURCES OF SUPPORT. THE FACT THAT AN ORGANIZATION MEETS THE REQUIREMENT OF PARAGRAPH (F)(3)(I) OF THIS SECTION THROUGH SUPPORT FROM GOVERNMENTAL UNITS OR DIRECTLY OR INDIRECTLY FROM A REPRESENTATIVE NUMBER OF PERSONS, RATHER THAN RECEIVING ALMOST ALL OF ITS SUPPORT FROM THE MEMBERS OF A SINGLE FAMILY, WILL BE TAKEN INTO CONSIDERATION IN DETERMINING WHETHER AN ORGANIZATION IS "PUBLICLY SUPPORTED." IN DETERMINING WHAT IS A "REPRESENTATIVE NUMBER OF PERSONS," CONSIDERATION WILL BE GIVEN TO THE TYPE OF ORGANIZATION INVOLVED, THE LENGTH OF TIME IT HAS BEEN IN EXISTENCE...

THE FACTS AND CIRCUMSTANCES FOR THE ROGER CLEMENS FOUNDATION ARE SUCH THAT THE ORGANIZATION MEETS THE REQUIREMENT OF SEVERAL PUBLIC SUPPORTERS, IN THAT THE TWO ENTITIES/FAMILY PROVIDED LESS THAN 27% (\$14,362) OF THE SUPPORT WHILE THE REMAINING SUPPORT OF APPROX. \$40,000 WAS PROVIDED BY NUMEROUS PUBLIC SUPPORTERS, AND PUBLICLY SUPPORTED FUNDRAISING EVENTS.

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

PART II, LINE 17A - 10% FACTS AND CIRCUMSTANCES TEST - CURRENT YEAR (CONTINUED)

(3) THE ISSUE OF DECREASED FUNDRAISING AND PUBLIC SUPPORT IS DUE TO UNFORESEEN CIRCUMSTANCES OUTSIDE OF THE ROGER CLEMENS FOUNDATION'S CONTROL. FUNDRAISING ACTIVITIES AND WEBSALES OF DONATED INVENTORY HAVE BEEN VERY RESTRICTED. ACTIVITIES HAVE CONTINUED TO DECLINE FOR SEVERAL YEARS, SINCE DECEMBER 2007. HOWEVER, THE ORGANIZATION HAS MAINTAINED THE SUPPORT OF NUMEROUS COMMITTED PUBLIC SUPPORTERS WHO TO SUPPORT THE ORGANIZATION. THE FOUNDATION HAS BEEN ABLE TO CONTINUE ITS CHARITABLE PURPOSE, ALTHOUGH AT A LESSOR LEVEL. THE TRUSTEES OF THE ROGER CLEMENS FOUNDATION SINCERELY BELIEVE THAT THEY WILL BE ABLE TO INCREASE FUNDRAISING ACTIVITIES THROUGH THE PUBLIC SUPPORT FROM WEBSALES OF DONATED ITEMS, AND SPECIAL EVENTS, IN ORDER TO CONTINUE THE CHARITABLE PURPOSE OF THE FOUNDATION BY MID 2012, ONCE SEVERAL UNFAVORABLE PUBLIC EVENTS ARE CONCLUDED.

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6a. List events with gross receipts greater than \$5,000.

REVENUE	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
	2011CSF CELEBR (event type)	1ST ANNUAL THR (event type)	(total number)	(add column (a) through column (c))	
1	Gross receipts	20,000.	9,200.	29,200.	
2	Less Charitable contributions				
3	Gross income (line 1 minus line 2)	20,000.	9,200.	29,200.	
DIRECT EXPENSES	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	3,633.	8,900.	12,533.
	10	Direct expense summary Add lines 4- through 9 in column (d)			12,533.
11	Net income summary Combine line 3, column (d), and line 10			16,667.	

Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
				(add column (a) through column (c))
1	Gross revenue			
DIRECT EXPENSES	2	Cash prizes		
	3	Non-cash prizes		
	4	Rent/facility costs		
	5	Other direct expenses		
	6	Volunteer labor	Yes _____ % No _____ %	Yes _____ % No _____ %
7	Direct expense summary Add lines 2 through 5 in column (d)			
8	Net gaming income summary Combine lines 1, column (d) and line 7			

- 9 Enter the state(s) in which the organization operates gaming activities _____
- a Is the organization licensed to operate gaming activities in each of these states? Yes No
- b If 'No,' explain _____
- 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
- b If 'Yes,' explain _____

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

Open to Public
Inspection

Name of the organization

THE ROGER CLEMENS FOUNDATION

Employer identification number

76-0378319

FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

SUPPORT OF EDUCATIONAL AND ATHLETIC ORGANIZATIONS FOR CHILDREN; ADDITIONAL SUPPORT
PROVIDED TO AT-RISK FAMILIES.

FORM 990-EZ, PART III, LINE 30 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

TO ASSIST VARIOUS CHARITABLE ORGANIZATIONS WITH FUNDRAISING CAUSES:

CADDY FOR A CURE-	\$2,500
GREATER WEST HOSUTON GIRLS SOFTBALL	1,000
SHRINER CIRCUS	350
SPRING BRANCH EDUCATIONAL FOUNDATION	520

TOTAL CASH CONTRIBUTIONS \$4,370

=====

FORM 990-EZ, PART V - REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR
INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR
INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? NO

THE ROGER CLEMENS FOUNDATION

76-0378319

**FORM 990-EZ, PART I, LINE 10
GRANTS AND SIMILAR AMOUNTS PAID IN EXCESS OF \$5,000**

DONEE'S NAME:	VAR. CHAR. - SEE SCH ATTACHED	
DESCRIPTION OF PROPERTY:	BB MEMORABILIA & JACKETS	
DATE OF GIFT:	VARIOUS	
BOOK VALUE:	20,210.	
METHOD USED TO DETERMINE BV:	PURCHASE PRICE	
FAIR MARKET VALUE:		\$ 20,210.
METHOD USED TO DETERMINE FMV:	CONTRIBUTION VALUE	

**FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES**

BANK SERVICE CHARGES, ETC	\$	722.
COMPUTER MAINTENANCE		364.
COURIER FEES		57.
CREDIT CARD FEES		857.
OFFICE EXPENSES		447.
OFFICE RENT		19,065.
SECURITY		949.
STORAGE		2,990.
TELEPHONE		2,276.
WEBSITE & INTERNET		1,859.
TOTAL	\$	<u>29,586.</u>

**FORM 990-EZ, PART I, LINE 20
OTHER CHANGES IN NET ASSETS OR FUND BALANCES**

TOTAL	\$	2,207.
	\$	<u>2,207.</u>

**FORM 990-EZ, PART II, LINE 24
OTHER ASSETS**

	<u>BEGINNING</u>	<u>ENDING</u>
FURNITURE AND FIXTURES	\$ -354.	\$ -6,978.
INVENTORIES	5,885.	4,413.
MACHINERY AND EQUIPMENT	49,847.	52,564.
	7,859.	7,859.
TOTAL	\$ <u>63,237.</u>	\$ <u>57,858.</u>

**Depreciation and Amortization
(Including Information on Listed Property)**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

THE ROGER CLEMENS FOUNDATION

Identifying number

76-0378319

Business or activity to which this form relates

FORM 990/990-PF, COGS

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,472.

Part III MACRS Depreciation (Do not include listed property) (See instructions)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2010	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B – Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C – Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	1,472.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

SCHEDULE A

ROGER CLEMENS FOUNDATION
FY2010 NON-CASH CONTRIBUTION

Request Date	Charity Requesting	Address & Contact Info	Tax ID #	Dt. Of Evt.	Item sent	Value	Amt. Raised
1/9/11	2011 Cattle Baron's Ball Benefiting the American Cancer Society	P O Box 572915 Houston, TX 77257 Nancy Wilder-713-266-5831	74-1185665	4/30/2011	Ladies Jacket	\$ 500.00	\$ 350.00
1/9/11	2011 Cattle Baron's Ball Benefiting the American Cancer Society	P.O. Box 572915 Houston, TX 77257 Nancy Wilder-713-266-5831	74-1185665	4/30/2011	Autographed Photo Bat	\$ 350.00	\$ 400.00
8/11/10	2nd Annual All-Star Concert for Handicapped Children	5555 Hilton Ave, 5th Floor Baton Rouge, LA 70808 Scott Innes-225-454-7008	26-1740861	10/4/2010	USA Jersey	\$ 2,000.00	\$ 1,000.00
8/11/10	2nd Annual All-Star Concert for Handicapped Children	5555 Hilton Ave, 5th Floor Baton Rouge, LA 70808 Scott Innes-225-454-7008	26-1740861	10/4/2010	Yankees Photo	\$ 100.00	\$ 150.00
8/11/10	2nd Annual All-Star Concert for Handicapped Children	5555 Hilton Ave, 5th Floor Baton Rouge, LA 70808 Scott Innes-225-454-7008	26-1740861	10/4/2010	Autographed Rocketman Cap	\$ 100.00	\$ 75.00
8/11/10	2nd Annual All-Star Concert for Handicapped Children	5555 Hilton Ave, 5th Floor Baton Rouge, LA 70808 Scott Innes-225-454-7008	26-1740861	10/4/2010	300 Win Baseball	\$ 300.00	\$ 350.00
7/8/10	2nd Annual Zach Hamm Don't Sweat it Golf Classic	8010 Downington Ct Spring, TX 77379 Paul Hamm-281-655-4799		8/8/2010	MLB Baseball	\$ 250.00	\$ 350.00
7/8/10	2nd Annual Zach Hamm Don't Sweat it Golf Classic	8010 Downington Ct Spring, TX 77379 Paul Hamm-281-655-4799		8/8/2010	Astros Photo	\$ 100.00	\$ 125.00
1/17/11	8th Annual Derek Jeter Celebrity Golf Classic	215 Park Avenue South, Suite 1905 New York, NY 10003 212-475-2978		1/17/2011	Yankees Photo	\$ 100.00	\$ 150.00
1/17/11	8th Annual Derek Jeter Celebrity Golf Classic	215 Park Avenue South, Suite 1905 New York, NY 10003 212-475-2978		1/17/2010	300 Win Baseball	\$ 350.00	\$ 350.00
1/17/11	8th Annual Derek Jeter Celebrity Golf Classic	215 Park Avenue South, Suite 1905 New York, NY 10003 212-475-2978		1/17/2010	USA Jersey	\$ 2,000.00	\$ 2,500.00
3/18/11	Ace Baily Children's Foundation	90 Cambridge Road Woburn, MA 01801-4714 Barbara Pothier-401-270-6420		3/23/2011	Yankees Photo	\$ 100.00	\$ 150.00
6/7/10	Alan Cassella Memorial Golf Tournaemnt	145 Harwich Road West Springfield, MA 01089 Christopher Thompson-413-896-2592		8/28/2010	Boston Photo	\$ 100.00	\$ 225.00
4/8/11	Bellaire Little League	2726 Bissonnet Ste. 240-175 Houston, TX 77005 Tanya Gee 281-703-3904	23-168823	4/29/2011	3 Autographed Caps	\$ 300.00	\$ 150.00

Request Date	Charity Requesting	Address & Contact Info	Tax ID #	Dt. Of Evt.	Item sent	Value	Amt. Raised
4/8/11	Bellaire Little League	2726 Blissonnet Ste. 240-175 Houston, TX 77005 Tanya Gee 281-703-3904	23-168823	4/29/2011	2 Mini Home plates	\$ 100.00	\$ 50.00
11/1/10	Blanker Fall Festival	328 Ponce De Leon Pl Orlando, FL 32801 Susan Fuqua-407-246-7333		11/5/2010	Yankees Photo	\$ 100.00	\$100.00
3/18/11	Boys and Girls Country Spring Festival	18806 Roberts Road Hockley, TX 77447 Tony Buccieri-281-246-9579		4/3/2011	MLB Baseball	\$ 250.00	\$ 250.00
3/18/11	Boys and Girls Country Spring Festival	18806 Roberts Road Hockley, TX 77447 Tony Buccieri-281-246-9579		4/3/2011	Astros Photo	\$ 100.00	\$ 75.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/2010	Astros Notepad Autographed	\$ 50.00	\$ 30.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/1010	Astros Notepad Autographed	\$ 50.00	\$ 30.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/2010	Astros Notepad	\$ 25.00	\$ 30.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/2010	Astros Notepad	\$ 25.00	\$ 30.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/2010	Men's Rocketman Cap Autographed	\$ 100.00	\$ 100.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/2010	Yankees autographed Pennant	\$ 75.00	\$ 40.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/2010	Yankees autographed Pennant	\$ 75.00	\$ 40.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/2010	Yankees autographed Pennant	\$ 75.00	\$ 30.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/2010	Autographed MLB Baseball	\$ 350.00	\$ 150.00
8/27/10	Breakthrough House Inc	603 SW Topeka Blvd Ste 100 Al Hammons 785-230-2202	48-0879168	10/16/2010	autographed Mini Bat	\$ 200.00	\$ 110.00
3/18/11	Cleburne Christian Academy	1410 Glenhaven Drive Cleburne, TX 76033 Jenifer Stembrige-817-641-2854		3/26/2011	Yankees Photo	\$ 100.00	\$ 100.00
3/29/11	Corvallis High School Golf Fundraiser	2330 NW 29th Street Corvallis, OR 97330 John McMurray 541-760-6890		4/16/2011	Ladies Rhineston Cap	\$ 75.00	\$ 50.00
3/29/11	Corvallis High School Golf Fundraiser	2330 NW 29th Street Corvallis, OR 97330 John McMurray 541-760-6890		4/16/2011	MLB Baseball	\$ 150.00	\$ 200.00
3/18/11	Cystic Fibrosis Foundation	6931 Arlington Road, 2nd floor, Bethesda, MD 20814	13-1930701		Boston Jersey	\$ 2,000.00	\$ 1,000.00
3/18/11	Cystic Fibrosis Foundation	6931 Arlington Road, 2nd floor, Bethesda, MD 20814	13-1930701		Mini Bat Yankees	\$ 75.00	\$ 100.00
3/18/11	Cystic Fibrosis Foundation	6931 Arlington Road, 2nd floor, Bethesda, MD 20814	13-1930701		All star Ball	\$ 250.00	\$ 200.00

Request Date	Charity Requesting	Address & Contact Info	Tax ID #	Dt. Of Evt.	Item sent	Value	Amt. Raised
3/18/11	Cystic Fibrosis Foundation	6931 Arlington Road, 2nd floor, Bethesda, MD 20814	13-1930701		Yankees Cap Autographed	\$ 100.00	\$ 75.00
3/18/11	Cystic Fibrosis Foundation	6931 Arlington Road, 2nd floor, Bethesda, MD 20814	13-1930701		NY Mini Plate	\$ 100.00	\$ 50.00
3/18/11	ESCAPE Family Resource Center	3210 Eastside Houston, TX 77098 Joan Schnitzer-713-942-9500		4/10/2011	Astros Photo	\$ 100.00	\$ 75.00
3/18/11	Holy Cross School Spring Bazar	2001 Katy Avenue Bay City TX 77414 Stephanie Kucera-979-245-5632		4/3/2011	Astros Photo	\$ 100.00	\$ 75.00
6/4/10	Humane Society of Pagosa Springs	269 Pagosa St Pagosa Springs, CO 81147 Steve Wadley-970-264-5549	74-2350919	8/27/2010	Yankees Photo	\$ 100.00	\$ 100.00
9/3/10	Jason Peter All Fore Junior Achievement Gala	285 S 68th Street Place, Ste 580 Lincoln, NE 68510 Tera Norms-402-467-1217	47-0535692	10/14/2010	Yankees Jersey	\$ 2,000.00	\$ 800.00
10/22/10	Kym Coleman Education Foundation	5868 Westheimer A-1 #325 Houston, TX 77057 Cookie Michael-713-410-6739	26-1594921	10/22/2010	MLB Baseball	\$ 250.00	\$ 200.00
10/22/10	Kym Coleman Education Foundation	5868 Westheimer A-1 #325 Houston, TX 77057 Cookie Michael-713-410-6739	26-1594921	10/22/2010	Astros Photo	\$ 100.00	\$ 100.00
6/24/11	Mark Herzlich Foundation	84 Sheppard Avenue Braintree, MA 02184 Steven Zaniboni-781-849-3001		7/6/2011	Red Sox Mini Plate	\$ 100.00	\$ 100.00
8/11/10	Massachusetts Chiefs of Police Association	82 Shore Road West Dennis, MA 02670 Michael Healy-508-398-0028	04-2595447	8/19/2010	Boston Photo	\$ 100.00	\$ 125.00
8/11/10	Massachusetts Chiefs of Police Association	82 Shore Road West Dennis, MA 02670 Michael Healy-508-398-0028	04-2595447	8/19/2010	MLB Baseball	\$ 250.00	\$ 210.00
8/11/10	Massachusetts Chiefs of Police Association	82 Shore Road West Dennis, MA 02670 Michael Healy-508-398-0028	04-2595447	8/27/2010	Boston Photo	\$ 100.00	\$ 100.00
5/10/11	Massachusetts Chiefs of Police Association	26 Providence Road Grafton, MA 01519 Michael Healy 508-989-7049	04-2595447	5/13/2011	Red Sox Photo	\$ 100.00	\$ 150.00
5/10/11	Massachusetts Chiefs of Police Association	26 Providence Road Grafton, MA 01519 Michael Healy 508-989-7049	04-2595447	5/13/2011	MLB Baseball	\$ 250.00	\$ 300.00
1/20/11	MDA Across the Pond Gala	5615 Kirby Drive Suite 500 Houston, TX 77005 Karla Hoskin-713-522-1426	13-166552	1/21/2011	Autographed Astros Photo	\$ 150.00	\$ 163.00
1/20/11	MDA Across the Pond Gala	5615 Kirby Drive, Suite 500 Houston, TX 77005 Karla Hoskin-713-522-1426	13-166552	1/21/2011	Men's Memories Jacket	\$ 900.00	\$ 355.00

Request Date	Charity Requesting	Address & Contact Info	Tax ID #	Dt. Of Evt.	Item sent	Value	Amt. Raised
1/20/11	MDA Across the Pond Gala	5615 Kirby Drive Suite 500 Houston, TX 77005 Karla Hoskin-713-522-1426	13-166552	1/21/2011	Ladies Memories Jacket	\$ 800.00	\$355.00
1/20/11	MDA Across the Pond Gala	5615 Kirby Drive Suite 500 Houston, TX 77005 Karla Hoskin-713-522-1426	13-166552	1/21/2011	Ladies Rhinestone Astros Cap	\$ 50.00	\$163.00
1/20/11	MDA Across the Pond Gala	5615 Kirby Drive Suite 500 Houston, TX 77005 Karla Hoskin-713-522-1426	13-166552	1/21/2011	300Win Baseball	\$ 300.00	\$382.00
8/11/10	MDA Jerry Lewis Labor Day Telethon	5615 Kirby Drive, Suite 500 Houston, TX 77005 Amanda Hardy-832-485-4421	13-166552	9/6/2010	Astros Photo	\$ 100.00	\$ 100.00
8/11/10	MDA Jerry Lewis Labor Day Telethon	5615 Kirby Drive, Suite 500 Houston, TX 77005 Amanda Hardy-832-485-4421	13-166552	9/6/2010	MLB Baseball	\$ 250.00	\$ 475.00
10/13/10	Memorial Villages Police Officer's Association	P.O. Box 79883 Houston, TX 79883 Officer Sorrell-713-365-3710	26-1594921	10/22/2010	Ladies Rocketman Jacket	\$ 260.00	\$ 130.00
10/13/10	Memorial Villages Police Officer's Association	P.O. Box 79883 Houston, TX 79883 Officer Sorrell-713-365-3710	26-1594921	10/22/2010	Autographed Photo Bat	\$ 550.00	\$ 700.00
10/13/10	Memorial Villages Police Officer's Association	P.O. Box 79883 Houston, TX 77279 Officer Sorrell-713-365-3710	26-1594921	10/22/2010	Astros Photo	\$ 100.00	\$ 100.00
10/13/10	Memorial Villages Police Officer's Association	P.O. Box 79883 Houston, TX 77279 Officer Sorrell-713-365-3710	26-1594921	10/22/2010	Ladies Rhinestone Cap	\$ 75.00	\$ 45.00
9/3/10	NFL Alumni Golf Tournament & Auction	5868 A-1 Wesheimer #311 Houston, TX 77057 David Carter-713-443-6670	76-0262730	9/13/2010	Astros Photo	\$ 100.00	\$ 160.00
9/3/10	NFL Alumni Golf Tournament & Auction	5868 A-1 Wesheimer #311 Houston, TX 77057 David Carter-713-443-6670	76-0262730	9/13/2010	MLB Baseball	\$ 250.00	\$ 160.00
10/4/10	St. Peters United Methodist Church	20775 Kingsland Blvd Katy, TX 77450 Audra Farace-281-660-7520	74-2093700	10/9/2010	MLB Baseball	\$ 250.00	\$25.00
10/4/10	St. Peters United Methodist Church	20775 Kingsland Blvd Katy, TX 77450 Audra Farace-281-660-7520	74-2093700	10/9/2010	Astros Photo	\$ 100.00	\$25.00

<u>Request Date</u>	<u>Charity Requesting</u>	<u>Address & Contact Info</u>	<u>Tax ID #</u>	<u>Dt. Of Evt.</u>	<u>Item sent</u>	<u>Value</u>	<u>Amt. Raised</u>
10/13/10	Sunshine Kids Foundation	2814 Virginia Street Houston, TX 77098 Rita Suchma-713-524-1264		10/13/2010	Astros Photo	\$ 100.00	\$100.00
10/13/10	Sunshine Kids Foundation	2814 Virginia Street Houston, TX 77098 Rita Suchma-713-524-1264		10/13/2010	Astros Mini Plate	\$ 100.00	\$50.00
10/13/10	Sunshine Kids Foundation	2814 Virginia Street Houston, TX 77098 Rita Suchma-713-524-1264		10/13/2010	MLB Baseball	\$ 250.00	\$300.00
7/4/10	The Ace Bailey Children's Foundation	84 Sheppard Avenue Braintree, MA 02184 Steven Zamboni-781-849-3001		8/2/2010	Boston Home Plate	\$ 100.00	\$ 75.00
7/4/10	The Ace Bailey Children's Foundation	84 Sheppard Avenue Braintree, MA 02184 Steven Zamboni-781-849-3001		8/2/2010	Boston Photo	\$ 100.00	\$ 125.00
8/11/10	The Woodlands Celebrity Golf Classic	1600 Lake Front Circle The Woodlands, TX 77380 Jennifer Ashley-281-419-4826	74-2035878	11/11/2010	Astros Photo	\$ 100.00	\$ 100.00
8/11/10	The Woodlands Celebrity Golf Classic	1600 Lake Front Circle The Woodlands, TX 77380 Jennifer Ashley-281-419-4826	74-2035878	11/11/2010	MLB Baseball	\$ 250.00	\$ 200.00
9/15/10	Valley Life 6th Annual Legacy of Love Dinner & Silent Auction	1142 West Hatcher Rd. Phoenix, AZ 85021 Nick Vosovic-602-371-0806	86-0135840	10/2/2010	MLB Baseball	\$ 250.00	\$ 200.00
3/18/11	Vanalia-Butler Pee Wee Youth Sports Association	8500 Dog Leg Road Dayton, OH 45414 Steve Dent898-8553		3/27/2011	Yankees Photo	\$ 100.00	\$ 100.00
					TOTAL	\$ 20,210.00	\$ 16,088.00