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#### **Return of Private Foundation**

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

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. OMB No 1545-0052

		ar Revenue Service   Note: The loan dation may be	<del>``</del>	<del></del>		_ <del></del>					
			10, 2010		JUL 31, 2011	<del></del>					
	G C	heck all that apply: X Initial return		ormer public charity	Final return	l					
	Amended return Address change Name change										
	Nar	ne of foundation			A Employer identification number						
		SPECTRUM FOUNDATION			27-2576527						
	Nun	ber and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number						
		600 EXCHANGE BUILDING	, 205 5TH AV	- I	608-784-56	78					
	City	or town, state, and ZIP code		<del></del>	C If exemption application is p						
		LA CROSSE, WI 54601			D 1. Foreign organizations	s, check here					
	H C	heck type of organization: X Section 501(c)(3) exe	empt private foundation		<ol><li>Foreign organizations me check here and attach co</li></ol>	eting the 85% test, mputation					
			Other taxable private foundate	ation	E If private foundation sta						
	I Fa	r market value of all assets at end of year   J Accountin	-	Accrual	under section 507(b)(1)	(A), check here					
	-		er (specify)		F If the foundation is in a						
2012		\$ 19,756. (Part I, column			under section 507(b)(1)						
2	Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(0) Disbursements for charitable purposes					
		1 Contributions, gifts, grants, etc., received	22,382.		***************************************	(cash basis only)					
<b>≓</b>		2 Check I if the foundation is not required to attach Sch B	22,302.	<del></del>	<del></del>	<u> </u>					
JAN		3 Interest on savings and temporary cash investments				, , , ,					
		4 Dividends and interest from securities	150.	150.		STATEMENT 1					
		5a Gross rents				-					
SCANNED		b Net rental income or (loss)				. :					
	Ð	6a Net gain or (loss) from sale of assets not on line 10		-	•						
(25)	Revenue	Gross sales price for all assets on line 6a	<del></del>		*	<u>.</u>					
G.G.		7 Capital gain net income (from Part IV, line 2)		0.		· · · · · · · · · · · · · · · · · · ·					
		8 Net short-term capital gain									
		9 Income modifications	-			-					
		10a and allowances  b Less Cost of goods sold		· · ·		-					
		c Gross profit or (loss)				•					
		11 Other income				·					
		12 Total. Add lines 1 through 11	22,532.	150.	0.						
		13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.					
		14 Other employee salaries and wages				<u> </u>					
	ģ	15 Pension plans, employee benefits	2 106								
	nses	16a Legal fees STMT 2	2,196.	0.	0.	0.					
	Expens	b Accounting fees c Other professional fees									
	Б	17 Interest FOEN VED				-					
	atj.	Tax RECEIVED									
	and Administrative	19 Depreciation and depletion									
	Ē	20 Cccupancy 3 0 2011   Q									
	Ad	2) in ravel, conferences, and meetings									
	anc	22 Printing and publications STMT 3									
	ing	23 Other expenses 10 STMT 3	400.	0.	0.	0.					
	Operating	24 Total operating and administrative	2 506	0							
	ö	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid	2,596. 0.	0.	0.	0.					
		25 Contributions, gifts, grants paid 26 Total expenses and disbursements.			- <u>-</u>	0.					
		Add lines 24 and 25	2,596.	0.	0.	0.					
	_	27 Subtract line 26 from line 12:			•						
		Excess of revenue over expenses and disbursements	19,936.								
		b Net investment income (if negative, enter -0-)		150.							
		C Adjusted net income (if negative, enter -0-)			0.						
	0235 12-0	01 7-10 LHA For Paperwork Reduction Act Notice, see t	he instructions.			Form <b>990-PF</b> (2010)					

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Form 990-PF (2010)

SPECTRUM FOUNDATION

(a) List and des	cribe the kir	nd(s) of property sold (e.g or common stock, 200 shs	., real estate,		( <b>b</b> ) i	How acqu - Purcha - Donatio	ured se on	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					<u> </u>				
b NC	)NE								
<u>C</u>					-				
<u>d</u>		· · · · · · · · · · · · · · · · · · ·	<del></del>		-	-		<del>-</del>	
<u>e</u>	10.5	)	(-)0-		+ 1				L,
(e) Gross sales price	(1) L	Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss (e) plus (f) minus	
<u>a</u>	ļ		'						
<u>b</u>	<del> </del>								
<u>C</u>	<del> </del>		-						
<u>d</u>	1								
Complete only for assets show	ino dalo io d	column (h) and owned by	the foundation	n on 12/31/69				Counc (Col. (b) goin	
Complete only for assets show	<del>,                                     </del>	<del> </del>						) Gains (Col. (h) gain (k), but not less thai	
(i) F.M.V. as of 12/31/69		j) Adjusted basis as of 12/31/69		col. (j), if any				Losses (from col. (	h))
<u>a</u>	-		· · · · · ·			••			
<u>b</u>	1		ļ		$\dashv$				
<u>c</u>	-	<u> </u>	<u> </u>						
<u>d</u>	1								
<u>e</u>	1		1	<del></del>					
2 Capital gain net income or (net o	apıtal loss)	If gain, also enter of the loss of the los	r ın Part I, line - ın Part I, line	7 27	}	2			
3 Net short-term capital gain or (lo	ss) as defii	ned in sections 1222(5) ar	nd (6):		_ ,				
If gain, also enter in Part I, line 8	, column (d		` '		1				
Part V- Qualification	3	4040(-) (	<b>D.</b> 1	. <del> </del>		3			
If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qu	ction 4942 alify under s	tax on the distributable an section 4940(e). Do not co	mplete this pa	art.					Yes N
1 Enter the appropriate amount in	each colur	nn for each year; see instr	uctions before	e making any entr	ries.			-	
(a) Base period years Calendar year (or tax year begini	ning in)	(b) Adjusted qualifying dis	tributions	Net value of n	(c) oncha		e assets	Dıstrit (col. (b) div	(d) oution ratio rided by col. (c))
2009									
2008									
2007									
2006								<u></u>	
2005		<del></del>							
2 Total of line 1, column (d)								2	
3 Average distribution ratio for the	-	•	on line 2 by 5,	, or by the numbe	er of ye	ars			
the foundation has been in exist	ence if less	than 5 years						3	
4 Enter the net value of noncharita	able-use as:	sets for 2010 from Part X,	line 5				••	4	
5 Multiply line 4 by line 3					-		_	5	
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)					_	6	
7 Add lines 5 and 6								7	
8 Enter qualifying distributions fro	om Part XII,	line 4						8	
If line 8 is equal to or greater tha	an line 7, ch	eck the box in Part VI, line	tb, and com	plete that part usi	ng a 1	% tax rat	e.		

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_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948 -	see	nstru	CTIOI	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \ldots \) and enter "N/A" on line 1.	1	-	_		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	.				-
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here  and enter 1%	1				<u>3.</u>
	of Part I, line 27b	'	-	-		
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					-
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<u></u>			·0.
3	Add lines 1 and 2	3				3.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>`0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	L			3.
6	Credits/Payments:		•			; ]
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a					
b	Exempt foreign organizations - tax withheld at source 6b		_			
C	Tax paid with application for extension of time to file (Form 8868)		İ	•		٠,٠
d	Backup withholding erroneously withheld 6d	<u>]</u>	İ			
7	Total credits and payments. Add lines 6a through 6d	7	İ			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				3.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	11				
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervei	ie in			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish					
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				-	
_	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.			1		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	<u>-</u>				
•	managers. > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
_	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	.or				
·	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		_ <b>X</b> _
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		,	5		X
٠	If "Yes," attach the statement required by General Instruction T.		•			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					.
•	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state.</li> </ul>	te 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.				-41	<del> </del>
g.	Enter the states to which the foundation reports or with which it is registered (see instructions)					-
ua	WI			-		
	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				_	
0				8b	X	
0	of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar					<del> </del>
9	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	ionual		9		x
10		STMT	5	10	X	<del></del>
10	Did dirty personne december and addresses	<u> </u>		1 10	43	

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

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

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

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

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

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X

3b

4a

Yes X No

N/A

during the year?

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Part VII-B   Statements Regarding Activities for Which	Form 4/20 May Be I	Required (contin	nued)	_		Т.	
5a During the year did the foundation pay or incur any amount to:		<del></del>					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	• • •		es 🗶 No		-		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir				ŀ		
any voter registration drive?			es X No	_	İ	: 1	
(3) Provide a grant to an individual for travel, study, or other similar purposes		. L Y	es 🗶 No			-	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					,	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es 🗶 No 📗			· -,	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for							
the prevention of cruelty to children or animals?	•	Y	es 🗓 No		-	.	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	ın Regulations				.	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?	-	N/A	5b	<u> </u>		
Organizations relying on a current notice regarding disaster assistance check to	nere		▶□				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	rom the tax because it mainta	ined				-	
expenditure responsibility for the grant?	. N	I/A 🗀 Y	es 🔲 No				
If "Yes," attach the statement required by Regulations section 53.494	5-5(d)				_	١,	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		[	•			
a personal benefit contract?		Y	es X No			1	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a g	personal benefit contract?			6b		X	
If "Yes" to 6b, file Form 8870.			Ī				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es X No	_		ł	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?		N/A	7b			
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highl	y				
1 List all officers, directors, trustees, foundation managers and their		1		.,			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	,	(e) Exp	ense i, other	
<u> </u>	to position	(If not paid, enter -0-)	and deterred compensation		allowa	nces	
SARAH E. LAVOIE	TRUSTEE						
123 CLERMONT AVE, APT 2							
BROOKLYN, NY 11205	0.00	0.	0	<u>.</u>		0.	
	TRUST PROTECT	OR				1	
24 DOCKSIDE LN, #87				-			
KEY LARGO, FL 33037	0.00	0.	0	•		<u>0.</u>	
				↓_			
Componentian of five highest said assets as father than the	ludad an line 4). Here	"NON" "		1			
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NUNE."	(d) Contributions to	1	(a) Ev	nanca	
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	a	cconui (e) ext	ense , other inces	
3703777	devoted to position		compensation	-	allowa	nces	
NONE	-						
	<del> </del>	<del> </del>		+			
	<del> </del>	<del> </del>		+-			
	-						
		<del> </del>		+			
	1						
		<del> </del>		+			
	1						
Total number of other employees paid over \$50,000	<u> </u>	<u> </u>		1			
LOTAL HUHDEL OF OTHER ETHDROVEES DAID OVER 200.000			<b>•</b> 1			( )	

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	
(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  Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical ini number of organizations and other beneficiaries served, conferences convened, research papers produced,	ormation such as the	Expenses
1 NONE		
		0
2		
3		
4		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount
1 NOT APPLICABLE		
2		0
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3		0

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	6,650.
	Average of monthly cash balances	1b	7,512.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	14,162.
е	Reduction claimed for blockage or other factors reported on lines 1a and	- ,	
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	14,162.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	212.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	13,950.
6	Minimum investment return, Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6.	680.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1.	Minimum investment return from Part X, Line 6	1	.680
2a	Tax on investment income for 2010 from Part VI, line 5	7	•
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	3.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	677.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	_5	677.
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 XIII, line 1	7	<u>677.</u>
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u> </u>
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Surtability test (prior IRS approval required) .	3a	··· · · · · · · · · · · · · · · · · ·
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u> </u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies f	or the section

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Part XIII Undistributed Income (see instructions)

2 Undistributed income, if any, as of the end of 2010 a Enter amount for 2009 only b Total for prior years:  0.  Excess distributions carryover, if any, to 2010: a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e  4 Quălifying distributions for 2010 from	
line 7  2 Undistributed income, if any, as of the end of 2010 a Enter amount for 2009 only b Total for prior years:  3 Excess distributions carryover, if any, to 2010: a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e  4 Qualifying distributions for 2010 from	
2 Undistributed income, if any, as of the end of 2010 a Enter amount for 2009 only b Total for prior years:  0.  Excess distributions carryover, if any, to 2010: a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e  4 Quălifying distributions for 2010 from	77.
a Enter amount for 2009 only b Total for prior years:  3 Excess distributions carryover, if any, to 2010: a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e  4 Qualifying distributions for 2010 from	<del></del>
b Total for prior years:  3 Excess distributions carryover, if any, to 2010: a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e  4 Qualifying distributions for 2010 from	,
3 Excess distributions carryover, if any, to 2010: a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e  4 Qualifying distributions for 2010 from	
a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e  4 **Qualifying distributions for 2010 from	
b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e  4 **Qualifying distributions for 2010 from	· .
c From 2007 d From 2008 e From 2009 f Total of lines 3a through e  4 **Oùùálifying distributions for 2010 from	
d From 2008 e From 2009 f Total of lines 3a through e  4 **Qualifying distributions for 2010 from	-
e From 2009 f Total of lines 3a through e  4 Qualifying distributions for 2010 from	· .'
f Total of lines 3a through e  4 Qualifying distributions for 2010 from	
4 Qualifying distributions for 2010 from	
Part XII, line 4: ► \$ 0 .	
a Applied to 2009, but not more than line 2a O •	·
b Applied to undistributed income of prior	
years (Election required - see instructions)	-
c Treated as distributions out of corpus	
(Election required - see instructions) 0.	•
d Applied to 2010 distributable amount	0.
e Remaining amount distributed out of corpus 0 .	,; -
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:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	
b Prior years' undistributed income. Subtract	• ;
line 4b from line 2b O .	····
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 O.	`
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.	
f Undistributed income for 2010. Subtract	
lines 4d and 5 from line 1. This amount must	
	<u>77.</u>
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 0 .	-
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 0 .	
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 0.	
10 Analysis of line 9:	
a Excess from 2006	
b Excess from 2007	
c Excess from 2008	
d Excess from 2009	
e Excess from 2010	

	M FOUNDATIO		A (a)		7-25/652/ Page 10			
Part XIV Private Operating Fo	<del></del>		A, question 9)	N/A				
1 a If the foundation has received a ruling or								
foundation, and the ruling is effective for 2010, enter the date of the ruling  b Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or 4942(j)(5)								
•		ig foundation described i		4942(j)(3) or	4942(j)(5)			
2 a Enter the lesser of the adjusted net	Tax year	(F) 2000	Prior 3 years	(4) 0007	(-) 7-4-1			
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.								
Subtract line 2d from line 2c  3 Complete 3a, b, or c for the			<del> </del>	<del></del>				
alternative test relied upon:								
a "Assets" alternative test - enter:								
(1) Value of all assets			<del></del>					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)								
b "Endowment" alternative test - enter								
2/3 of minimum investment return shown in Part X, line 6 for each year								
listed								
c "Support" alternative test - enter:								
(1) Total support other than gross								
investment income (interest, dividends, rents, payments on								
securities loans (section								
512(a)(5)), or royalties)			<del></del>					
(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				-	<del></del>			
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	te this part only i	f the foundation	n had \$5 000	or more in accete			
at any time during the			i die iodiidado	n nau \$5,000 t	or more in assets			
1 Information Regarding Foundation	<del></del> _	· · · · · · · · · · · · · · · · · · ·						
a List any managers of the foundation who		than 2% of the total contr	ibutions received by ti	he foundation before	the close of any tax			
year (but only if they have contributed m	ore than \$5,000). (See s	ection 507(d)(2).)	•		,			
SARAH J. GEPHART								
b List any managers of the foundation who			or an equally large por	tion of the ownership	of a partnership or			
other entity) of which the foundation has	a 10% or greater interes	š <b>L</b>						
NONE	0 1 0 0	0.1.1.1.1.1.						
2 Information Regarding Contribution Check here ► X if the foundation of				not accept upgeliet	and requires to fav funda. If			
the foundation makes gifts, grants, etc. (	see instructions) to indiv	io preselecteu chantable t iduals or organizations ili	nder other conditions	s not accept unsoncit complete items 2a -h	ed requests for fullus. If			
a The name, address, and telephone numb	<del></del>		<del> </del>		, 0, 4114 41			
a monamo, addreso, and tolophone name	ou or the person to who	ii appiloations silvaia be	1001 03300.					
b The form in which applications should b	e submitted and informat	tion and materials they sh	ould include:	-				
c Any submission deadlines:								
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kınds of ınstitutions, o	r other factors:				

3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
Name and address (home or business)  a Paid during the year  NONE	any foundation manager or substantial contributor	recipient	contribution	Amount
Total	T		<b>▶</b> 3a	0.
<b>b</b> Approved for future payment				
NONE				
Total			<b>▶</b> 3b	0.

Enter gross amounts unless otherwise indicated.

Excluded by section 512, 513, or 514

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

Enter gross amounts unless otherwise indicated.		ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	( <b>d)</b> Amount	Related or exempt function income
a					
b					
c					
d			1		
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					· ·
investments					
4 Dividends and interest from securities			14	150.	
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					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
c					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)	_	0.		150.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	
See worksheet in line 13 instructions to verify calculations.)	•				
Part XVI-B Relationship of Activities t	o the Acco	omplishment of Ex	xemp	t Purposes	
Line No. Explain below how each activity for which inco			A contrib	outed importantly to the accomp	plishment of
the foundation's exempt purposes (other than	by providing ful	nas for such purposes).		· · · · · · · · · · · · · · · · · · ·	
					·
		<del></del> -			
					<del></del>
					<del></del>
					<del></del>
				<del> </del>	
		. <u>.</u>			
	<u> </u>				
				·	
				_	

Unrelated business income

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of										Yes	No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										7.	
a Transfers from the reporting foundation to a noncharitable exempt organization of:											
(1) Cash <u>1:</u>											X
(2) Other assets											X
b		nsactions:									`_ ~
	(1) Sale	s of assets to a noncharıta	ible exempt organiza	ition		-			1b(1)		X
	(2) Puro	hases of assets from a no	ncharitable exempt	organization					1b(2)		<u>X</u> _
		al of facilities, equipment,							1b(3)		<u>X</u>
		nbursement arrangements							<u>1b(4)</u>		<u>X</u>
		is or loan guarantees							1b(5)		<u>X</u> .
(6) Performance of services or membership or fundraising solicitations  c Sharing of facilities, equipment, mailing lists, other assets, or paid employees											X
	-					: :			1c		<u>X</u>
đ		wer to any of the above is								ets,	
		es given by the reporting fo			ed less than ta	ir market valu	ie in any transaction	on or sharing arrangi	ement, show in		
(2):	ne no	d) the value of the goods, (b) Amount involved	<del>,</del>	rices received. If noncharitable	avamat argar	uzation	(4) 5	<u> </u>			
(a)L	ine no	<del></del>			exempt organ	IIZatiOII	(U) Descripti	on of transfers, transacti	ons, and sharing arr	angeme	nts
			NOT APPL	CABLE					<del> </del>		
		· · ·						-			
						· ·					
								<del></del>			
						<del> </del>	<del></del>				
		<del>-</del>					-				
			İ	-							
								·			
										-	
				,							
2a	Is the fou	ındatıon dırectly or ındırec	tly affiliated with, or	related to, one	or more tax-ex	xempt organı	zations described		_		
	ın sectioi	n 501(c) of the Code (other	er than section 501(d	:)(3)) or in sect	ion 527?				. Tyes	X	] No
_b	If "Yes," o	complete the following sch						<u> </u>			
		(a) Name of org	ganization		(b) Type of o	organization		(c) Description of r	elationship		
		N/A									
	<del>-,</del> -		<u> </u>					····			
	T.,	to consider of constitution	- Abat I base	Na calculation of the							
Ο.	and	ter penalties of perjury, I declare complete Declaration of prepa							je and belief, it is tru	e, corre	≾t,
	gn 🖺	16 M	9-21	1	ı	12/201	111 .				
• • •		Signature of officer or tru	ustee				<del>'''</del>	Talla			
		<del></del>		Droparario e	anatura.	Date	Data	Title	DTIN		
		Print/Type preparer's na	ame	Preparer's s	iyildlul t		Date	Check if self- employed	PTIN		`
Da	iid	מ עמממממ	TENCEN	0	02		/ / / >	acii- ciiipioyed	1		
	eparer	JEFFERY D. Firm's name ► RSM		The state of	I June	<u></u>	17-13-2011	Frank Sin N	l		
	se Only		I MCGUADKI	יז דור	-			Firm's EIN ▶			
J.	Jy	Firm's address ▶ 20	1 MATH CO	ם פווד	TE 810			<del>-</del>			
		•	CROSSE,	-	01-329	Λ		Phone no. 6	08.791.	6 E O	1
_		<u>, "</u>	<u></u>	414 JEO	<u> </u>			TI HOHE HU. O	Form <b>990</b>		
									1 01111 000	(	-010)

# 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

Name of the organization	Employer identification number			
S	27-2576527			
Organization type(check	PECTRUM FOUNDATION one).			
Filers of:	Section:			
Form 990 or 990-EZ				
	4947(a)(1) nonexempt chantable trust not treated as a private foundation			
	527 political organization			
Form 990-PF	S01(c)(3) exempt private foundation			
	4947(a)(1) nonexempt chantable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
	us covered by the <b>General Rule</b> or a <b>Special Rule.</b> c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions.		
X For an organizati	on filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in maplete Parts I and II	oney or property) from any one		
Special Rules				
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the rec (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.			
aggregate contri	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, for cruelty to children or animals. Complete Parts I, II, and III	· ·		
contributions for If this box is che purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not accided, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the <b>General Rule</b> applies to this organization because in the percent of \$5,000 or more during the year.	ggregate to more than \$1,000. ely religious, chantable, etc.,		
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule I on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line in filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•		
LHA For Panerwork Re	duction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule 8	3 (Form 990 990-F7 or 990-PF) (2010)		

Schedule B (F	orm 990, 990-EZ, or 990-PF) (2010)		Page $f 1$ of $f 1$ of Part I
Name of or	ganization		Employer identification number
SPECT	RUM FOUNDATION		27-2576527
Part i	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribut	(d) ions Type of contribution
1	SARAH J. GEPHART  24 DOCKSIDE LN, #87  KEY LARGO, FL 33037	\$\$	Person X Payroll  Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	(d) ions Type of contribution
	Halle, address, and zir + 4	**************************************	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributi	(d) ions 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 contributi	(d) ions 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 contributi	(d) ions 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 contributi	(d) ions Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number

### SPECTRUM FOUNDATION

27-2576527

art II	Noncash Property (see instructions)		
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		(see mad dedons)	<del></del>
1	150 SHARES PEPSICO		
— 1		-	
		\$ 9,786.	12/15/10
(a) No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate)	Date received
art I		(see instructions)	
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I			
<u> </u>			
		\ \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No.	/h.\	(c)	/.n
from Part I	(b)  Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
(a)		(c)	
No. from	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noticasti property given	(see instructions)	Date received
53 12-23		Schedule B (Form 9	90, 990-EZ, or 990-PF) (

	990, 990-EZ, or 990-PF) (2010)		Page of of Part		
ame of organ	ization		Employer identification number		
סקרייים י	JM FOUNDATION		27-2576527		
Part III	Exclusively religious, charitable, etc., ir	e columns (a) through (e) and the folk ous, charitable, etc., contributions of	01(c)(7), (8), or (10) organizations aggregating owing line entry. For organizations completing		
a) No. from	(h) Diamond of sife	(a) Lieu of sith	(d) December of how sife is held		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(e) Transfer of gift			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how with in held		
Part I	(b) Furpose of gift	(c) ose of girt	(d) Description of how gift is held		
-		(e) Transfer of gift			
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
-					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
-		(e) Transfer of gift			
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	· (d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
-					
-			· · · · · · · · · · · · · · · · · · ·		

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A	)
INVESTMENT INCOME	•		150.		0.	1	50.
TOTAL TO FM 990-PF, PART I, I	LN 4		150.		0.	1	50.
FORM 990-PF		LEGAL	FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	NET INV		ADJUSTED	(D) CHARITA ME PURPOS	
LEGAL FEES		2,196.		0.		0.	0.
TO FM 990-PF, PG 1, LN 16A		2,196.		0.		0.	0.
FORM 990-PF	0	THER E	XPENSES			STATEMENT	3
DESCRIPTION	EXPE	A) INSES BOOKS		EST-		(D) CHARITA ME PURPOS	
IRS FILING FEE		400.		0.		0.	0.
TO FORM 990-PF, PG 1, LN 23		400.		0.		0.	0.
				· · · · · · · · · · · · · · · · · · ·			
FORM 990-PF	СО	RPORAT	E STOCK			STATEMENT	4
FORM 990-PF  DESCRIPTION	CO	RPORAT	E STOCK	вос	OK VALUE	STATEMENT FAIR MARKE VALUE	• "
	co	RPORAT	E STOCK	BOO	OK VALUE 9,786.	FAIR MARKE	T

FORM 990-PF`	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	5
NAME OF CONTRIBUTOR	ADDRESS		
SARAH J. GEPHART	24 DOCKSIDE LN, #87 KEY LARGO FL 33037		