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# **EXTENSION GRANTED TO 10/15/2012 SEE ATTACHED**

Form **990-PF** 

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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service

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

						12/01	, 2010	, and ending	11/3	30 ,	2011	
4	G	Chec	k all	that apply.	K Initial return 🔲 Init	ial Return o	of a former p	ublic charity_			Fır	nal return
_					Amended return		Address of	change	Name	change		
									A		entification nu	ımber
				MKP CHARIT FFIN ROAD	TABLE FOUNDATIO	ON, INC			_	27-43		<del></del>
				L 33314-45					В	•	umber (see the	
			, –	_	•				С		797~04	s pending, check here X
									D	1 Foreign orga		· · · · · · · · · · · · · · · · · · ·
-	Н	Ch	eck t	ype of organiza	ition: X Section 50	1(c)(3) exe	mpt private f	oundation			•	eting the 85% test, check
					nonexempt charitable			orivate founda	ation _	here and att	ach computat	ion 🔭 📘
_	ı			et value of all asset	s at end of year J Acc	counting me		ash Acc	rual			is was terminated
			om Par	t II, column (c), line	· · · L	Other (specif		,- ,,	F	If the found	ation is in a 6	0-month termination
г		<b>≻</b> \$	I A ×			, column (d	i) must be oi	n cash basis )		under section	on 507(b)(1)(E	3), check here
L	Pai			nalysis of Re	total of amounts in	(a) Rev	enue and	(b) Net inve			sted net	(d) Disbursements
	r 30.		col	umns (b), (c), a	and (d) may not neces-	expenses	s per books	incon	ie	Inco	ome	for charitable purposes
	~		sar	rily equal the an ee the instruction	nounts ın column (a)							(cash basis only)
-	- J	<del>.</del> T			grants, etc, received (att sch)	1,0	000,000.	- J	[XY].	3 "k + , x	٠	Maria Marchan William
	Ĵ	<b>5</b>	2	Ck ► if the fo	oundn is not req to att Sch B	2 22	. ;4	-40° - 2773	2 × 1884	· 18.0014	<u>.</u>	RECEIVES
		,,	3	Interest on sav	ings and temporary		2,691.		2,691		2,691.	- J-IVEU
		7	4	Dividends and inter			400.		400	·   -	400.	OCT C W. Co.
	ŗ	2	5a	Gross rents						·	रिं	2 2 2012
	: 3	- :	b	Net rental income or (loss)	<u> </u>	12 640	TWO MADE		Tiri ki	****		Mary Control of the C
	R	<u> </u>		Net gain/(loss) from Gross sales price for	sale of assets not on line 10	<b>*****</b>	-170.		1,25,5	1 1 1 1 1 1 1		DGDEN IT
•	C. J.M	<sub>ව</sub>		assets on line 6a	<u> </u>			£ 1.13	ं ैं हैं 0			
-		- 1		Net short-term	ome (from Part IV, line 2) capital gain		- \$\langle \tau		1 · · · · · · ·	•	1,489	The second of th
			9	Income modific	•		A A RA		· , 26 ·		2,100.	SAUDEN SAUDS ASS
		٠	10 a	Gross sales less returns and allowances								
				Less Cost of		31.7		200	<u>&gt; 8000-801</u>			1 11/1 (20 (20))
2012			_	goods sold Gross profit/(loss)	(ott coh)	1000 cm		74 × 65-459			*	
					(attach schedule)		<del></del>	W/ X1	(No. 10.00)	-		##### 1
വ			• •		(2)	İ						277 7 - 108 2 1 1 15
<b>o</b> .			_	Total. Add line	s 1 through 11	1,0	002,921.		3,091		4,580.	
			13		ficers, directors, trustees, etc		0.			+		
2			14 15	Other employee sal	aries and wages. employee benefits.					<del> </del>		
_				Legal fees (attach :					•			
Ī		A D M		Accounting fees (at	•					1		
OCANN OCANN		ï N		Other prof fees (att								
₹	O P E	- 1	17	Interest			· · · ·					
ړ	Ŗ	S T R	18	Taxes (attach schedule)(s			·					**************************************
¥.)	Ą	A	19	Depreciation (a sch) and deple				,				
	Ň	¥	20	Occupancy	•							
	G	- 1	21		ences, and meetings .		<del></del>					-
	A N D	E X P	22 23	Printing and pu	s (attach schedule)			<del> </del>				<del> </del>
		E			See Statement 1	<u>.</u> ]	1,811.					
		Š	24	Total operating	g and administrative		1 011					
		Š	25		I lines 13 through 23. s, grants paid <b>Stmt 2</b>		1,811. 14,000.	17 ,4	Ja <b>rii</b> l A	3 TC - 11 MARK	4 1 2 2 3	14,000
				· •	s and disbursements.		<u> 14,000.</u>	<u> </u>			egge ( 1888, Million)	-
				Add lines 24 a	nd 25		15,811.		0		0	. 14,000
	_			Subtract line 2			ت ف الله فالله في الله		· 3 // ; ** i,			
			а	and disbursen	enue over expenses nents		987,110.		σ			
			b		ome (if negative, enter -0-)		, c. > %, .		3,091		18 16 38	是一个 <b>对</b> 对 100000000000000000000000000000000000
			c	Adjusted net incom	ne (if negative, enter -0-).	1.20.5 3	· .	18/11	1. 1.7.7.7		4,580	. NA LONG BE

3 Other increases not included in line 2 (itemize) 987,110. 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 987,110. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

8

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

	1 939-FF (2010) DEP AND MAP CHARITABLE FOUNDATION, INC 27-43				<sup>2</sup> age <b>4</b>					
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the	e inst	ructions)	12.83	. St					
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.		4							
	Date of ruling or determination letter (attach copy of letter if necessary — see instr.)									
ŀ	<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,									
_	check here. ► and enter 1% of Part I, line 27b		i jiya		4.3					
•	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	187		Trappa Labora						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	Ĕŝ	3.9							
		2			0.					
3	Add lines 1 and 2	3		_	62.					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0.					
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			62.					
6	Credits/Payments									
ā	2010 estimated tax pmts and 2009 overpayment credited to 2010.		a Kula	a party						
ŀ	Exempt foreign organizations — tax withheld at source 6b		#							
(	Tax paid with application for extension of time to file (Form 8868)		M 4.4							
•	Backup withholding erroneously withheld 6d	574°	7 h#	3 13	Jun salina					
7	Total credits and payments Add lines 6a through 6d	7			0.					
8	Enter any <b>penalty</b> 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			62.					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0								
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax	1								
Pai	t VII-A Statements Regarding Activities									
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		* * 1	Yes	No					
	participate or intervene in any political campaign?		1 a		X					
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes									
•	(see the instructions for definition)?		1 b		X					
-	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	shed	100	, , , , , , , , , , , , , , , , , , ,						
	or distributed by the foundation in connection with the activities			456						
	Did the foundation file Form 1120-POL for this year?		1 c		X					
•	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				3-7					
	(1) On the foundation		<u>0.</u>							
•	foundation managers • \$ 0.		134	1	35.4					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	3.30004	X					
	If 'Yes,' attach a detailed description of the activities		2,135	E 67						
_										
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	Anna Andrews	X					
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X					
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4b	_	/A					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X					
	If 'Yes,' attach the statement required by General Instruction T			7.4	5:52					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either									
	By language in the governing instrument, or			- 300						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that confi	flict			***************************************					
	with the state law remain in the governing instrument?	iict	6		X					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	Х						
8 8	Enter the states to which the foundation reports or with which it is registered (see the instructions)			Mr. S	4					
	N/A		\$7.,"							
ŀ	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		-11/4	- 14 miles						
•	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8b	X	<u> </u>					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49	942(1)	(5)	الناسة	4					
•	for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete F	Part X	ĩν <u>9</u>	ļ	X					
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nan	nes			1					
	and addresses. See Statement 6	5	10	X	Щ_					
BAA			Form 99	0-PF	(2010)					

ar	TWVII-AT Statements Regarding Activities (Continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	.	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application.  Website address	n?	13	Х	
14	TO DEPOSIT TENSOR				
	Located at SAME  Located at SAME  ZIP + 4 SAME				<del>-</del>
15		<u>N</u>	N/A		<u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>			N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority overbank, securities, or other financial account in a foreign country?		16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name of the foreign country ►			1.5	
₽ar	tWII-B Statements Regarding Activities for Which Form 4720 May Be Required	1			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	\$ .	<b>*</b> ***	Yes	No
1:	a During the year did the foundation (either directly or indirectly)	[3]	15.1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No 🔄			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	No E			*
		No :	, ,	ν:,	
		No 3	9 .	. j.	
				¥.	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes	No .			เมเบาไ
•	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )  Yes	No			
١	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	_	1 b	N	<u>'A</u>
	Organizations relying on a current notice regarding disaster assistance check here	] [			
(	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?		1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	هار بر المار د د			
;	a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?	No			
	If 'Yes,' list the years ▶ 20, 20, 20	<b>-</b> [,			\$ 3
1	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer 'No' and attach statement — see the instructions)		2b	N	'A
•	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  20, 20, 20, 20	26. 25.			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	No 🤾			
l	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, Form 4720, to determine if the foundation had excess business holdings in 2010)	14 14 14	3b	N/	'A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
		[-	· , T.	, °3,	3,1,7,
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of			· .	
	the tax year beginning in 2010?		4b		<u> </u>
BAA		Form	1 <b>990</b>	-PF (2	2010)

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Form 990-PF (2010) JBP AND MKP CHARITABLE FOUNDATION,

Form 990-PF (2010)

Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities 1 a 512,317. 1 b 370,341. **b** Average of monthly cash balances c Fair market value of all other assets (see instructions) 1 c 882,658. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0 1 e (attach detailed explanation) 0. Acquisition indebtedness applicable to line 1 assets 3 882,658. Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1-1/2% of line 3 13,240. (for greater amount, see instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V. line 4 5 869,418. 6 43,471. Minimum investment return. Enter 5% of line 5 Partixis Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here 43,471. 1 Minimum investment return from Part X, line 6 2a Tax on investment income for 2010 from Part VI, line 5 2a 2b b Income tax for 2010 (This does not include the tax from Part VI) 2 c c Add lines 2a and 2b 43,409. 3 3 Distributable amount before adjustments Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 4 43,409. 5 6 6 Deduction from distributable amount (see instructions) 43,409. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 14,000. 1 a 1 b b Program-related investments - total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a 3 b **b** Cash distribution test (attach the required schedule) 14,000. 4 4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) 5 6 14,000. Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	<b>(b)</b> Years prior to 2009	<b>(c)</b> 2009	<b>(d)</b> 2010
Distributable amount for 2010 from line 7	Part XI,			£0, 4, 1 30	43,409.
2 Undistributed income, if any, as of the end of	of 2010.	3.0	***		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
a Enter amount for 2009 only		, 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.	3 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
<b>b</b> Total for prior years 20, 20, 2		11 44 4/4 1/4 1/4 1/4	0.	, 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3 Excess distributions carryover, if any, to 201	0.		( , v)	11/400 18 0 18 0 18 18 1. 2.	SECTION AND LANGUAGE
<b>a</b> From 2005		[일본연속 : 걸리스			
<b>b</b> From 2006					100
c From 2007					
<b>d</b> From 2008 <b>e</b> From 2009				E Kirja Kirjan	
f Total of lines 3a through e		0			***
4 Qualifying distributions for 2010 fro	om Part		* - / / / .4.4.4	( 8 1	P
	,000.				
a Applied to 2009, but not more than				0.	
<b>b</b> Applied to undistributed income of		, 1001		,, ,,	\$ 3 M 19 1
(Election required — see instruction	ns)		0.	- A A A A A A A A A A A A A A A A A A A	
c Treated as distributions out of corp	ous		1		rite, rities reli
(Election required – see instruction	ns)	0.			V 1660 16 3 1 60
<b>d</b> Applied to 2010 distributable amou			<i>i i i i i i i i i i</i>		14,000.
e Remaining amount distributed out		0.		100 C C C C C C C C C C C C C C C C C C	
5 Excess distributions carryover applied to 20 (If an amount appears in column (		0.		**************************************	0.
same amount must be shown in co	olumn (a).)				
6 Enter the net total of each column indicated below:	as				
a Corpus. Add lines 3f, 4c, and 4e. Subtract li	no 5	<u> </u>			
•			38		· E E
<b>b</b> Prior years' undistributed income line 4b from line 2b	Subtract		0.		
c Enter the amount of prior years' u	ndistribut-			AND SOME	
ed income for which a notice of de has been issued, or on which the	eticiency section				
4942(a) tax has been previously a			0.	, k	100000000000000000000000000000000000000
d Subtract line 6c from line 6b Taxa	able	3,			*, 1, 3, 7 , 1, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
amount — see instructions		7-7-1 - 3-1-1-1	0.	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
e Undistributed income for 2009 Subtract lin	e 4a from			_	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
line 2a. Taxable amount — see instructions		. 38			
f Undistributed income for 2010 Su	btract lines				
4d and 5 from line 1. This amount distributed in 2011.	must be				29,409.
7 Amounts treated as distributions of	out of	** * ***	in was 133		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
corpus to satisfy requirements imp	osed				
by section 170(b)(1)(F) or 4942(g) (see instructions)	(3)	0.			, , , , , , , , , , , , , , , , , , , ,
	m 2005 not				A CONTRACTOR OF THE PROPERTY OF THE PARTY OF
8 Excess distributions carryover from applied on line 5 or line 7 (see instance)	structions)	0.			
9 Excess distributions carryover to	2011.				
Subtract lines 7 and 8 from line 6a	a	0.			1
10 Analysis of line 9					[ 3 h ]
a Excess from 2006					* 3
b Excess from 2007		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,	1 . 2	Landing of the second
c Excess from 2008	<u></u>				1
d Excess from 2009 e Excess from 2010	· -		A AV		
E LACESS HOITI ZOTO		1.300 . 2. 2. 2. 2. 333	1 ws	1 × 1 × 1 × 2 × 2 × 2 × 2 × 2 × 2 × 2 ×	

Form 990-PF (2010) JBP AND MKP CHAR				27-4371101	Page <b>10</b>
Part XIV Private Operating Foundation			<del></del>		N/A
1 a If the foundation has received a ruling or of is effective for 2010, enter the date of the	ruling			•	
<b>b</b> Check box to indicate whether the foundate		erating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	41.000	Prior 3 years	4 13 0007	
' investment return from Part X for each year listed	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
<b>b</b> 85% of line 2a			<u> </u>		<del></del> -
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		_			
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(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)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<ul> <li>(3) Largest amount of support from an exempt organization</li> </ul>					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the	organization ha	id \$5,000 or mor	e in
Information Regarding Foundation Managers at List any managers of the foundation who close of any tax year (but only if they have None	gers: have contributed m	ore than 2% of the	total contributions r section 507(d)(2))	eceived by the found	ation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the <b>None</b>	own 10% or more of foundation has a 1	of the stock of a corp 0% or greater intere	poration (or an equalist	ally large portion of t	he ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only r requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions is gifts, grants, etc,	s to preselected cha (see instructions) to	ritable organization: o individuals or orga	anizations under othe	
<b>a</b> The name, address, and telephone number	er of the person to	whom applications s	should be addressed	d	
<b>b</b> The form in which applications should be	submitted and info	rmation and materia	ls they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charita	ble fields, kinds of i	nstitutions, or other	factors
BAA	TE	EA0310L 02/16/11		Fo	orm <b>990-PF</b> (2010)

PartXV Supplementary Information (continued)								
3 Grants and Contributions Paid During the Year 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				
Name and address (home or business)	substantial contributor	recipient	Contribution					
<b>a</b> Paid during the year								
		!						
Total		L	► 3a					
<b>b</b> Approved for future payment								
		,						
		ĺ						
			<u> </u>					
Total			► 3b					

# Part XXI-A Analysis of Income-Producing Activities

Enter gros	s amounts unless otherwise indicated	Unrelated	i business income	Excluded	by section 512, 513, or 514	
,		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (see the instructions)
	ram service revenue:			code		(occ the matractions)
a NON	IE	<del> </del>		1 1		
b		<u> </u>		1		
с				1		
d					<u>-</u>	
е						·
f						
<b>g</b> Fees	and contracts from government agencies					
2 Mem	bership dues and assessments					
3 Interes	st on savings and temporary cash investments					2,691.
4 Divid	lends and interest from securities					400.
5 Net r	ental income or (loss) from real estate.			W 15		
a Debt	-financed property			T		
<b>b</b> Not o	debt-financed property					
6 Net re	ental income or (loss) from personal property				,,, -	
	r investment income		"	1		
	or (loss) from sales of assets other than inventory			1		-170.
	ncome or (loss) from special events			<del></del>		
	s profit or (loss) from sales of inventory			1	·	
	r revenue.	128.22.5		1 74	and the same at	
		A 77.02748 00 Arcin	B. C. AND PROPERS OF THE STREET OF THE STREE	学 第7 金融機能・	** NAMES OF TRANSPORT OF THE PARTY OF THE PA	
		<del></del>				
-		<del>                                     </del>		+	, <u>, , , , , , , , , , , , , , , , , , </u>	<del></del>
						·
				1		
e	atal Add adjusting (b) (d) and (a)					2 021
	otal Add columns (b), (d), and (e)	A Company of the State of the S				2,921. 2,921.
	I. Add line 12, columns (b), (d), and (e)				<sup>13</sup> .	2,921.
(See works	sheet in line 13 instructions to verify calculate	ions )				
Part XV	I-B Relationship of Activities to th	e Accomplis	shment of Exemp	ot Purpo	ses	
Line No.	Evaluation halous have each activity for which		ted to selven (a) of t	Dark VV/I /		
Line No. ▼	Explain below how each activity for which accomplishment of the foundation's exemp	ncome is repor at purposes (oth	ied in column (e) of i	funds for	such purposes) (See th	y to the ne instructions )
N/A			<u> </u>			
			· · · · · · · · · · · · · · · · · · ·			
						<del></del>
						<del> </del>
		<del> </del>				
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		·· <del>·····</del>			· · · · · · · · · · · · · · · · · · ·	
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						,. <u>.</u>
	<del> </del>					
	-		<del></del>	<u> </u>		
· · · · · · · · · · · · · · · · · · ·	<del> </del>					
	<u> </u>					Form <b>990-PF</b> (2010)
BAA		TEEAC	0502L 02/17/11			

# Form 990-PF (2010) JBP AND MKP CHARITABLE FOUNDATION, INC 27-4371101 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

describer relating  a Transfe (1) Cas (2) Other tr (1) Sale (2) Pure (3) Ren (4) Ren (5) Loa (6) Pere c Sharing  d If the art the good	ed in section 501 (c) to political organizers from the reportion is ansactions es of assets to a nechases of assets for a section intal of facilities, equipment arran ins or loan guarant formance of service of facilities, equipment ansactions of facilities, equipment of facilities, equipment of facilities, equipment of any of the ds. other assets.	c) of the Code (or zations? Ing foundation to concharitable exerging a noncharitation of the gements diees or membershoment, mailing lister services given	r assets  p or fundraising solicitates, other assets, or paid complete the following solicitates by the reporting foundations.	3) organizations organization of consemployees chedule Columnon. If the found	s) or in section 527,	arket value in
(a) Line no	(b) Amount involved		of noncharitable exempt organization		Description of transfers, transactions,	
2a Is the fo	oundation directly o	or indirectly affilia	ated with, or related to, o	one or more tax	-exempt organizations	
describe	ed in section 501(c	) of the Code (of	ther than section 501(c)(	3)) or in section	527?	Yes X No
	complete the follo					
	) Name of organiz	ation	(b) Type of orga	nization	(c) Description of	relationship
N/A						
		<del>-</del>	<del> </del>	<del></del>		
-			-			<del></del>
Sign Here	penalties of perjury, I dec , and complete Declarat	ion of preparer (other	then taxpayer or fiduciary) is base	panying schedules an ed on all information	d statements, and to the best of my know of which preparer has any knowledge  Preside Title	
	Print/Type preparer's	name	Preparer's signature		Date Check if	ıf PTIN
Paid	Anthony B.	Jacaruso	Anthony B.	Jacaruso	self-employed	P 00242911
	Firm's name	MOORE AND				5-0050989
Preparer Use Only			ANTIC BLVD		7 1111 3 2111	<u> </u>
OSE Offing	Firm's address	POMPANO BE		212	Phone no (9	54) 786-0999
BAA						Form <b>990-PF</b> (2010)

#### 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

Name of the organization		Employer identification number
JBP AND MKP CHARITABLE FOUNDA	TION, INC	27-4371101
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priv	vate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	eneral Rule or a Special Rule	
<b>Note.</b> Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule and a S	Special Rule See instructions
General Rule	7 000 DE that recovered during the year \$5 000 or more	(in manay or proporty) from any one
contributor (Complete Parts I and II)	Z, or 990-PF that received, during the year, \$5,000 or more	(in money or property) from any one
(68.11)		
Sweetel Bules		
Special Rules		
For a section 501(c)(3) organization filing F	form 990 or 990-EZ, that met the 33-1/3% support test of the	e regulations under sections of the greater of (1) \$5,000 or
(2) 2% of the amount on (i) Form 990, Part	d from any one contributor, during the year, a contribution o VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I ai	nd II
For a section 501(c)(7), (8), or (10) organiz	ation filing Form 990 or 990-EZ, that received from any one	contributor, during the year,
aggregate contributions of more than \$1,00 the prevention of cruelty to children or anin	0 for use exclusively for religious, charitable, scientific, literals, Complete Parts I. II. and III.	ary, or educational purposes, or
	•	contributor, during the year
contributions for use exclusively for religiou	ation filing Form 990 or 990-EZ, that received from any one is, charitable, etc, purposes, but these contributions did not	aggregate to more than \$1,000
If this hox is checked, enter here the total of	contributions that were received during the year for an exclu- unless the General Rule applies to this organization becaus	usively religious, charitable, etc.
religious, charitable, etc, contributions of \$		s NA
-		¥
Caution: An organization that is not covered by	y the General Rule and/or the Special Rules does not file So e 2 of their Form 990, or check the box on line H of its Form	chedule B (Form 990, 990-EZ, or
990-PF, to certify that it does not meet the film	ig requirements of Schedule B (Form 990, 990-EZ, or 990-P	F)
BAA For Paperwork Reduction Act Notice, se		le B (Form 990, 990-EZ, or 990-PF) (2010)
990EZ, or 990-PF.		

JBP AND MKP CHARITABLE FOUNDATION, IN

Employer identification number

ODP AL	ID MAP CHARITABLE FOUNDATION, INC	27-43	3/1101
Partil	Contributors (see instructions )		-
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JAMES B PIRTLE  5700 GRIFFIN ROAD  DAVIE FL , FL 33314	\$1,000,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) Number	(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) Number	(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) Number	(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) Number	(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) Number	(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 )

Name of organization

JBP AND MKP CHARITABLE FOUNDATION, INC

Employer identification number

27-4371101

(a) · No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
- <del></del>		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
·			
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization

Employer identification number

JBP AND MKP CHARITABLE FOUNDATION, INC

27-4371101

	organizations aggregating more th	•		•	ne entry
,	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of exclusively religious, cha (Enter this information once See	ritable, etc, e instructioi	ns) <b>&gt; \$</b>	N/A
(a)	(b)	(c)		(d)	
No. from Part I	Purpose of gift	Use of gift		Description of how gift is	held
raiti	N/A		<del> </del>		
	Transferee's name, addres	(e) Transfer of gift	Pols	ationship of transferor to transfer	
	Transferee 3 name, address	3, 4114 211 1 4		addiship of transferor to transfer	
(a)	(b)	(c)	<del></del>	(d)	
No. from Part I	Purpose of gift	Use of gift		Description of how gift is	held ————
<del></del>					
		(e)		<u></u>	-
	Transferee's name, addres	Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transfer	e <b>e</b>
- (-)	45				
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d)  Description of how gift is held	
Part I					
		(e) Transfer of gift		* -	
	Transferee's name, addres		Relationship of transferor to transferee		
(a)	(b)	(c)		(d)	
No. from Part I	Purpose of gift	Use of gift		Description of how gift is I	held
Faiti					
		(e) Transfer of gift			
	Transferee's name, addres		Relationship of transferor to transferee		

**Federal Statements** 2010 · Page 1 Client 4999 JBP AND MKP CHARITABLE FOUNDATION, INC. 27-4371101 10/10/12 03 56PM Statement 1 Form 990-PF, Part I, Line 23 Other Expenses (b) Net (a) (c) (d) Investment Expenses Adjusted Charitable per Books Income Net Income Purposes INVESTMENT ADVISOR FEES 1,811. Total \$ 1,811. \$ 0. \$ Statement 2 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants Cash Grants and Allocations Class of Activity: Donee's Name: YOUNG AT ART CHILDREN'S MUSEUM Donee's Address: 11584 WEST STATE ROAD 84 DAVIE, FL 33325 Relationship of Donee: Organizational Status of Donee: 501C3 Amount Given: 2,500. Class of Activity: Donee's Name: NATL ASSOCIATION OF MINORURTY CONTRACTOR Donee's Address: The Ronald Reagan House Office Buil WASHINGTON , FL 20004 Relationship of Donee: Organizational Status of Donee: 501C3 Amount Given: 1,500. Class of Activity: EDU FOUNDATION OF MARTIN COUNTY Donee's Name: Donee's Address: PO BOX 291 STUART, FL 34995 Relationship of Donee: Organizational Status of Donee: 501C3 2,500. Amount Given: Class of Activity: EDU FOUNDATION OF PB COUNTY Donee's Name: 3300 FOREST HILL BLVD, BLDG E Donee's Address: WEST PALM BEACH, FL 33406 Relationship of Donee: Organizational Status of Donee: 501C3 2,500. Amount Given: Class of Activity: FAU FOUNDATION - PINE JOG 777 GLADES RAOD, ADM 295 Donee's Name: Donee's Address: BOCA RATON, FL 33431 Relationship of Donee: Organizational Status of Donee: 500. Amount Given:

Class of Activity:
Donee's Name:

BROWARD EDU FOUNDATION

Donee's Address: 110 EAST BROWARD BLVD, SUITE 750

2010 ·	Fe	deral Statem	ents				Page 2
Client 4999	JBP AND MKP	CHARITABLE FO	OUNDATIO	N, IN	С		27-437110
10/10/12							03 56P
Statement 2 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grar	nts						
		FORT LAUDERI	ALE, FL	3330	)1		
Relationship of Donee: Organizational Status of Amount Given:	Donee:	501C3				\$	3,500.
Class of Activity: Donee's Name: Donee's Address:		MIAMI EDUCAT 300 NORTHEAS MIAMI , FL 3	T SECOND				
Relationship of Donee: Organizational Status of Amount Given:	Donee:	,					500.
Class of Activity: Donee's Name: Donee's Address:		THE JIM MANI Sun Life Sta MIAMI GARDER	dium, 34	7 Dc	n Shula Dr	i	
Relationship of Donee: Organizational Status of Amount Given:	Donee:	501C3	,				500.
					Tota	1 \$	14,000.
Statement 3 Form 990-PF, Part II, Line 10c Investments - Corporate Bond	ls						
Corporate Bonds		= ,	aluation Method		Book Value	Fa	ir Market Value
CORPORATE BONDS		Со	st Total	\$ \$	423,002. 423,002.	\$ \$	432,556. 432,556.
Statement 4 Form 990-PF, Part II, Line 13 Investments - Other							
			aluation <u>Method</u>		Book Value	Fa:	ir Market Value
Other Publicly Traded Se	curities				<b></b>		
MUTUAL FUNDS		Со	st	\$	170,000.	\$	157,094.
			Total	Ś	170,000.	\$	157,094.

J

2010 ·

# **Federal Statements**

Page 3

Client 4999

JBP AND MKP CHARITABLE FOUNDATION, INC

27-4371101

10/10/12

03·56PM

Statement 5 Form 990-PF, Part IV, Line 1 Capital Gains and Losses for Tax on Investment Income

		(b) How	(c) Date	(d) Date
Item	(a) Description	Acquired	Acquired	Sold
$\overline{1}$	700 ALCOA BOND	Purchased	2/02/2011	6/28/2011
2	483 COLUMBIA VALUE AND RESTRUCT	Purchased	Various	7/12/2011
3	1000 FORD MOTOR BOND	Purchased	4/13/2011	10/25/2011
4	420 HARTFORD CAPITAL APPREC	Purchased	Various	5/16/2011
5	1327 MARISCO 21 CENTURY	Purchased	Various	7/12/2011
6	200 NATIONAL RURAL UTIL BOND	Purchased	1/21/2011	11/15/2011
7	468 SELECTED AMERICAN SHARES	Purchased	Various	7/12/2011

	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(1)
	Gross	Deprec.	Cost	Gain	FMV	Adj. Bas.	Excess	Gain
Item	Sales	<u> Allowed</u>	<u>Basis</u>	<u>(Loss)</u>	12/31/69	12/31/69	(i) - (i)	(Loss)
1	75,244.		73,755.	1,489.				\$ 1,489.
2	24,617.		25,000.	-383.				-383.
3	100,000.		100,000.	0.				0.
4	14,849.		15,000.	-151.				-151.
5	19,183.		20,000.	-817.				-817.
6	20,000.		20,000.	0.				0.
7	19,692.		20,000.	-308.				-308.
	·		•				Total	\$ -170.

Statement 6 Form 990-PF, Part VII-A, Line 10 Substantial Contributors During the Tax Year

Name of Substantial Contributor Address of Substantial Contributor

JAMES B PIRTLE

5700 GRIFFIN ROAD SUITE 200 DAVIE, FL 33314

2010		ŭ	Federal Worksheets	Vorkshe	ets				<b>_</b>	Page 2
Client 4999		JBP AND MKP CHARITABLE FOUNDATION, INC	KP CHARIT	ABLE FOU	INDATION,	INC				27-4371101
10/10/12										03.56PM
Average Monthly Fair Market Value of Securities Form 990-PF, Part X, Line 1a	et Value of Securities Ia	10								
Security December	January February	March	April	May	June	July	August	September	October N	November
BONDS AND MUTUAL FUNDS Averages 0	606,926 607,620 606,926 607,620	604,847 604,847	607,716 607,716	815,006 815,006	811,269 811,269	807,876 807,876	651,537 651,537	635,003 635,003	0	0
Totals 6,147,800	Number of Months	hs sh	12							
Average Monthly Fair Market Value	t Value 512,317									

2010		LĽ	Federal Worksheets	Vorkshe	ets				•	Page 3
Client 4999		JBP AND MKP CHARITABLE FOUNDATION, INC	KP CHARIT	ABLE FOU	NDATION, I	NC			. 27	27-4371101
10/10/12								i		03-56PM
Average Monthly Cash Balances Form 990-PF, Part X, Line 1b										· ·
Cash Bal. December January	y February	March	April	May	June	July	August	September	October	November
BONDS AND MUTUAL FUNDS 1,000,000 391,682 Averages 1,000,000 391,682	2 385,182 2 385,182	385,182 385,182	385,182 385,182	178,442	178,442	178,442	322,475 322,475	322,475 322,475	322, 475 322, 475	394,108 394,108
Totals 4,444,087	Number of Months	ths ===	12							
Average Monthly Cash Balances	370,341									
										-
										•
										-

# Form **8868** (Rev January 2011)

# Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

OMB No 1545-1709

Form **8868** (Rev 1-2011)

	e filing for an Automatic 3-Month Extension, cor				► [X]
	e filing for an Additional (Not Automatic) 3-Mont			•	_
Electronic fil	plete Part II unless you have already been grante ling (e-file). You can electronically file Form 8868 equired to file Form 990-T), or an additional (no extension of time to file any of the forms listed in	R if you need	d a 3-month automatic extension of tim	e to file (6 months	for a m 8868 to
Associated V	xtension of time to file any of the forms listed in Vith Certain Personal Benefit Contracts, which ming of this form, visit www.irs.gov/efile and click of	ust be sent	to the IRS in paper format (see instruc	nformation Return tions) For more de	for Transfers etails on the
Part I A	utomatic 3-Month Extension of Time.	Only subm	nit original (no copies needed).		
A corporation	n required to file Form 990-T and requesting an a	automatic 6	-month extension - check this box and	complete Part I or	nly ►
All other corp income tax r	porations (including 1120-C filers), partnerships, eturns	REMICS, a	nd trusts must use Form 7004 to reque	st an extension of i	time to file
	Name of exempt organization			Employer identification	on number
Type or print	TER AND MUR CUARTERING POINTS		70		
File by the	JBP AND MKP CHARITABLE FOUNDAT		IC	04-3523567	
due date for filing your	5700 GRIFFIN ROAD #200	istructions	RECEN	/ED	
return See instructions	City, town or post office, state, and ZIP code For a foreign add	ress, see instru	ctions		
	DAVIE, FL 33314-4507			2012	
~ ~ ~ ~ ~ ~	<del>*</del> · · · · · · · · · · · · · · · · · · ·			/ <del>4 D 1                                  </del>	
Enter the Re	turn code for the return that this application is fo	or (file a sep	parate application for each return) OGDEN	I, UT	03
Application Is For		Return Code	Application Is For		Return Code
Form 990		01	Form 990-T (corporation)		07
Form 990-BL		02	Form 1041-A		08
<u>-Form 990-EZ</u>		03	Form 4720		09
Form 990-PF		04	Form 5227		10
	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (	(trust other than above)	06	Form 8870		12
• The books	s are in the care of				
Telephone	a No. ►	FAX No	<b>、▶</b>		
•	panization does not have an office or place of but	_			▶ □
-	for a Group Return, enter the organization's four		, , , , , , , , , , , , , , , , , , ,	f this is for the who	انا ale aroun
	· —		and attach a list with the names		•
	nsion is for				
1 I reque	st an automatic 3-month (6 months for a corpora	ation require	ed to file Form 990-T) extension of time		
untıl _	7/15 , 20 12 _ , to file the exempt org	janization re	eturn for the organization named above		
	tension is for the organization's return for				
▶ ∐	calendar year 20 or				
►  X	tax year beginning 12/01 , 20 10	, and endin	g <b>11/30</b> , 20 <b>11</b>		
	ax year entered in line 1 is for less than 12 mont ange in accounting period	hs, check re	eason Initial return Fi	nat return	
				<del></del>	<del></del>
<b>3a</b> If this a nonrefu	application is for Form 990-BL, 990-PF, 990-T, 47 undable credits. See instructions	720, or 6069	, enter the tentative tax, less any	3a \$	0.
<b>b</b> If this a paymer	application is for Form 990-PF, 990-T, 4720, or 60 nts made. Include any prior year overpayment al	069, enter a lowed as a	ny refundable credits and estimated ta credit	3 в \$	0.
c Balance EFTPS	e due. Subtract line 3b from line 3a Include you (Electronic Federal Tax Payment System). See	r payment w instructions	with this form, if required, by using	3c \$	0.
Caution. If yo	ou are going to make an electronic fund withdray	val with this	Form 8868, see Form 8453-EO and Fo	rm 8879-EO for	

**BAA** For Paperwork Reduction Act Notice, see Instructions.

Form 8868	3 (Rev 1-2011)				Page 2	
• If you	are filing for an Additional (Not Automatic) 3-Mon	th Extensio	n, complete only Part II and check t	his box.	<b>►</b> X	
Note. Only	complete Part II if you have already been granted	d an automa	itic 3-month extension on a previous	sly filed Form 8868	_	
	are filing for an Automatic 3-Month Extension, co					
Part(II:	Additional (Not Automatic) 3-Month Ext	<u>ension of</u>	Time. Only file the original (r			
•	Name of exempt organization			Employer identification number	r	
Type or print	JBP AND MKP CHARITABLE FOUNDAT	ION, INC		04-3523567		
<b></b>	Number street, and room or suite number. If a P.O. box, see ins	tructions		<u> </u>		
File by the extended due date for filing the	MOORE AND CO CPA 2318 E ATLANTIC BLVD					
return See instructions	City, town or post office, state, and ZIP code. For a foreign address	ss, see instructi	ons			
	POMPANO BEACH, FL 33062-5212					
Enter the I	Return code for the return that this application is for	or (file a sej	parate application for each return)		03	
Application Is For	n	Return Code	Application Is For		Return Code	
Form 990		01			1911	
Form 990-	BL	02	Form 1041-A	CANAGE AND A SECOND AND AND A SECOND	08	
Form 990-	EZ	03	Form 4720		09	
Form 990-	PF	04	Form 5227		10	
Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069						
Form 990-T (trust other than above) 06 Form 8870						
STOP! Do	not complete Part II if you were not already grant	ed an autor	natic 3-month extension on a previ	ously filed Form 8868.		
<ul><li>The bo</li></ul>	oks are in care of					
•	none No	FAX No P				
	organization does not have an office or place of bu				▶ [	
	is for a Group Return, enter the organization's four	-			is for the	
•		roup, check t	this box 🏲 🔲 and attach a list wil	th the names and EINs o	of all	
	the extension is for	46/45			<del></del>	
	uest an additional 3-month extension of time until		, 20 <u>12</u>	1 /20 00 1		
	calendar year , or other tax year beginning				<u>.</u> _	
_	e tax year entered in line 5 is for less than 12 mon	iths, check r	eason	Final return		
	Change in accounting period	ro	sportfully romiosts ad-	ditional timo t	•	
	e in detail why you need the extension					
<u> 9a</u>	ther information necessary to fi	Te a co	mbiere and accurace ra	X TECULII.		
	s application is for Form 990-BL, 990-PF, 990-T, 4	720, or 606	9, enter the tentative tax, less any	8a \$	<del></del>	
	is application is for Form 990-PF, 990-T, 4720, or 6	SOGO ontor	any refundable credits and estimate	182 m * 'e **		
payn	nents made Include any prior year overpayment a Form 8868			a .a k x"		
	nce due. Subtract line 8b from line 8a Include yoi PS (Electronic Federal Tax Payment System) See			8c \$		
			d Verification			
Under penalti correct, and c	es of pernery, I declare that have examined this form, including accomplete, and that I am authorized to prepare this form	companying sch	edules and statements, and to the best of my kr	nowledge and belief, it is true.	/	
_	(8/18) She are	(P	<i>'</i> F	. 1/1	3/17	
Signature	Title	· <u> </u>		Date Date	7/10	
BAA	V	FIFZ0502L	_ 11/15/10	Form <b>8868</b> (	Rev 1-2011)	