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50rm 990-PF

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

OMB No 1545-0052

2011

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 For calendar year 2011, or tax year beginning . 2011, and ending Name of foundation Employer identification number Helen E. Popa Masters in Nursing & District Three Ohio Nurses Association 03-0428686 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see the instructions) 5669 Mahoning Avenue (330) 799-4199 City or town ZIP code Youngstown C If exemption application is pending, check here OH 44515 G Check all that apply Initial return Initial Return of a former public charity D 1 Foreign organizations, check here Final return Amended return Address change 2 Foreign organizations meeting the 85% test, check Name change here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated under section 507(b)(1)(A), check here ı Fair market value of all assets at end of year Accounting method X Cash (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 164,164. (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income for charitable income columns (b), (c), and (d) may not necespurposes sarıly equal the amounts ın column (a) (cash basis only) (see instructions)) Contributions, gifts, grants, etc, received (att sch) Ck ► X if the foundn is not reg to att Sch B 1 45 Interest on savings and temporary cash investments Dividends and interest from securities 9,053 9,053 9,053 5a Gross rents b Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10 REVENUE **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 31 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances **b** Less Cost of goods sold × . c Gross profit/(loss) (att sch) 11 Other income (attach schedule) See Line 11 Stmt -579.Total. Add lines 1 through 11 8,474. 9,084 9,053. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) **b** Accounting fees (attach sch) S c Other prof fees (attach sch) Ŝ 17 Interest Taxes (attach schedule)(see instrs) Depreciation (attach sch) and depletion

ADMINISTRAT

20

21

Occupancy

Printing and publications 23 Other expenses (attach schedule) Total operating and administrative 24 expenses. Add lines 13 through 23 Contributions, gifts, grants paid 0. Total expenses and disbursements. Add lines 24 and 25 0 Subtract line 26 from line 12: a Excess of revenue over expenses 8,474 and disbursements 9,084. b Net investment income (if negative, enter -0) C Adjusted net income (if negative, enter -0-) 9,053.

BAA For Paperwork Reduction Act Notice, see instructions.

Travel, conferences, and meetings



TEEA0301 12/02/11 Form 990-PF (2011)

Form	990	PF (2011) Helen E Popa Masters	s in Nursing & District Three Ohio	Nurses Assoc	03-042	28686 Page 2
Pår	t II	Balance Sheets Attached schoolumn shou	nedules and amounts in the description ild be for end of-year amounts only	Beginning of year		of year
		(See instruct	ions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		16,485.	33,464.	33,464.
	2	Savings and temporary cash in	vestments			
	3	Accounts receivable	-		e state in a second sec	
		Less allowance for doubtful ac	counts •			
	4	· · · · · · · · · · · · · · · · · · ·	-	, '		b
		Less allowance for doubtful ac	counts ►			
	5	Grants receivable				
	6	Receivables due from officers, directors disqualified persons (attach schedule) (s, trustees, and other (see instructions)			
	7	Other notes and loans receivable (attac	h sch)	*	* ;	, ,
A S E T	ļ	Less allowance for doubtful ac	counts ►			
Š	8	Inventories for sale or use				
E	9	Prepaid expenses and deferred	charges			
Š	10	a Investments — U.S. and state of obligations (attach schedule)	overnment			
		b Investments — corporate stock (attach	schedule) L-10b Stmt	173,742.	165,237.	130,700.
		c Investments — corporate bonds (attach	schedule)			
	11	Investments — land, buildings, equipment basis	and •	y y ' y ' ' y ' ' ' ' ' ' ' ' ' ' ' ' '	* * * * * * * * * * * * * * * * * * * *	(
		Less accumulated depreciation (attach schedule)	-			
	12	Investments – mortgage loans				
	13	Investments - other (attach sc	hedule)			
	14	Land, buildings, and equipment	basis ►	*** * * * * * * * * * * * * * * * * * *	kkir 37 k	" s1,3
		Less accumulated depreciation (attach schedule)	>		- Commission and Comm	ment - where it is an Argelian -
	15	Other assets (describe ►)			
	16	Total assets (to be completed	by all filers -	100 007	100 701	164.464
1	17	see the instructions. Also, see		190,227.	198,701.	164,164.
ĩ			expenses			* * * * * * * * * * * * * * * * * * *
A B	18	Grants payable				, , , , , , , , , , , , , , , , , , ,
ĩ	19	Deferred revenue	0			***
Ļ	20	Loans from officers, directors, trustees,	, ,			
÷	21	Mortgages and other notes payable (att	ach schedule)			
Ţ	22	Other liabilities (describe ►				
E 	23	Total liabilities (add lines 17 th				
		Foundations that follow SFAS and complete lines 24 through	26 and lines 30 and 31.			
NE	24	Unrestricted				
N F E U T N	25	Temporarily restricted				
D	26	Permanently restricted				
A B A L A		Foundations that do not follow and complete lines 27 through	SFAS 117, check here ► X 31.			
ĔĹ	27	Capital stock, trust principal, or	current funds			
TA	28	Paid-in or capital surplus, or land, build				
С	29	Retained earnings, accumulated income	=: · · · · ·	190,227.	198,701.	
OERS	30	Total net assets or fund balance	· ·			
	31	Total liabilities and net assets/ (see instructions)		190,227. 190,227.	198,701. 198,701.	
Par	t III	Analysis of Changes in N	et Assets or Fund Balanc			<u> </u>
	Tota		peginning of year - Part II, colum		e with	190,227.
2		r amount from Part I, line 27a	,		2	8,474.
3		increases not included in line 2 (itemize)	•		3	0,3/3.
4		lines 1, 2, and 3			4	198,701.
5		ases not included in line 2 (itemize)	>		5	
6		-	end of year (line 4 minus line 5) -	- Part II, column (b) line		198,701.

8 Enter qualifying distributions from Part XII, line 4

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 Part VI instructions.

91.

7

Add lines 5 and 6

Form	990-PF (2011) Helen E Popa Masters in Nursing & District Three Ohio Nurses Assoc 03-0428	686		F	Page 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruc				
1 a	Exempt operating foundations described in section 4940(d)(2), check here		· · · ·		
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V,				182.
	check here ☐ and enter 1% of Part I, line 27b	. 3 7 %		~ 3.7 %	n Cori un
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			3, 3,	4 - 3
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	·	,-		
	foundations only Others enter -0-)				0.
3	Add lines 1 and 2				182.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				182.
6	Credits/Payments	Section 12	٠ ١	The second is	
а	2011 estimated tax pmts and 2010 overpayment credited to 2011	marine a series	Ł ĺ	, i,	
	Exempt foreign organizations — tax withheld at source 6b	April 2	. 'a pi	PO A	', '\#\ ³
	Tax paid with application for extension of time to file (Form 8868)	E 21.25		<u> </u>	
d	Backup withholding erroneously withheld		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		££
7	Total credits and payments Add lines 6a through 6d				
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				<u> 182.</u>
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 2012 estimated tax				
Par	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 participate or intervene in any political campaign?		1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1ь		x
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	,	***	¥,¥	, v"
c	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	-	35		2 000
	(1) On the foundation \$ (2) On foundation managers \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	110	~ <u>*</u> *	¥ 4.	1.0
_	foundation managers \$		<u>.</u>	·	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<u> </u>	2		X
	If 'Yes,' attach a detailed description of the activities		, , ,	7	- 64
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	·	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<u> </u>	4a		X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	_	4b		<u> </u>
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			_	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		:	-	1
	By language in the governing instrument, or		- 1	_	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict		_	<u> </u>	
7	with the state law remain in the governing instrument?	- H-	6		X
	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	<u>-</u> -	7	<u>X</u>	
88	Enter the states to which the foundation reports or with which it is registered (see instructions)	_			
t	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) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(6) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV)?	(5) - <i>IV</i>	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10		
RAA				0.85	(2011)

	1930-FF (ZUII) Helen E. Popa Masters in Nursing & District Three Ohio Nurses Assoc	03-	042868	6		age 5
Pai	t VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified advisory privileges? If 'Yes,' attach statement (see instructions)	d person	had	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption website address N/A	applicatio	n ⁷	13	Х	
14	The books are in care of ► Linda Warino Telephone		(330)	533	 - 31	
	Located at ► 6151 Leffingwell Road Canfield OH ZIP+4 ►	444			- = -	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here					<u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year	►	15			<u> </u>
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other autbank, securities, or other financial account in a foreign country?	hority ove	er a	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the nar foreign country ▶	ne of the		*		\$
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		-		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			,		*
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No	,		**
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	16	" ;	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	,		
		1es	V 140		-	, ř.
	(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	X No	* ;	14,57112	
	(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			, **	, ,	2.5
	of government service, if terminating within 90 days)	Yes	X No	79		
ŀ	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 instructions)?			 1b	<u> </u>	
	Organizations relying on a current notice regarding disaster assistance check here	•				* *
(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 2011?			1 c	1	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))			,		, and the same of
	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d					٠, ا
	and 6e, Part XIII) for tax year(s) beginning before 2011? If 'Yes,' list the years 20 _ , 20 _ , 20 _ , 20	∐ Yes	X No			
				-		
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see instructions)	a)(2))(2) to		2 b		
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years have	ere			t	†
	► 20 ,20 ,20 ,20				ì	
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
ı	of If 'Yes,' did it have excess business holdings in 2011 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 2011)			3b		-
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		х
ı	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 2011?			4 b		X
BAA		_	F			(2011)

	sing & District Three Of		03-04:	28686	Page
Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)		· I .
5a During the year did the foundation pay or incu(1) Carry on propaganda, or otherwise attempt	-	(section 4945(e))?	Yes X	No '	
(2) Influence the outcome of any specific publi	ic election (see section				3.
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,		urnoses?	Yes X	No No	,
(4) Provide a grant to an organization other th	,	•	[] [C3 K]	*	£ '~"_ #
in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instru	ctions)	Yes X	No .	
(5) Provide for any purpose other than religion educational purposes, or for the prevention			Yes X	No C	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to quality a current notice regardi	ualify under the exception ng disaster assistance	ns	5t	
Organizations relying on a current notice rega	rding disaster assistance	e check here	▶ 🗌		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	sibility for the grant?		Yes	No	
If 'Yes,' attach the statement required by Regu					00% /s
6a Did the foundation, during the year, receive ar on a personal benefit contract?	y funds, directly or indir	ectly, to pay premiums	Yes X	No *	
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	ums, directly or indirectl	y, on a personal benefit	contract?	6 t	X
7a At any time during the tax year, was the found	lation a party to a prohib	ited tax shelter transact	on? Yes X	No	
Part VIII Information About Officers, Dand Contractors				7t mployee	-1 1
1 List all officers, directors, trustees, foundation	n managers and their co	ompensation (see instru			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expended other a	se account llowances
Linda Warino			compensation		
6151 Leffingwell Road	President				
Canfield OH 44406	40.00	0.	0.		0
	-				
	-				
	-	·			
0.0					
Compensation of five highest-paid employee (a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d) Contributions to	I	se accoun
paid more than \$50,000	hours per week	(c) compensation	employee benefit		llowances
•	devoted to position		plans and deferred compensation		
None	devoted to position				
	devoted to position				
	devoted to position				
0	devoted to position				
0	devoted to position				
0	devoted to position				
None 0 0 0 0	devoted to position				

Form 990-PF (2011) Helen E Popa Masters in Nursing & District Three Ohio Nurses Assoc Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	03-042 Managers, Highly Paid E	8686 Page 7 mployees,
3 Five highest-paid independent contractors for professional services (see instruction	ns). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
		7-1
Total number of others receiving over \$50,000 for professional services	>	None
Part IX-A Summary of Direct Charitable Activities	and a share when of	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informat organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ion such as the number of	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		_
Describe the two largest program-related investments made by the foundation during the ta	ax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions 3		
Total. Add lines 1 through 3		
BAA		Form 990-PF (2011)

Form	990-PF (2011) Helen E. Popa Masters in Nursing & District Three Ohio Nurses Assoc	03-0428686	Page 8
Par	Minimum Investment Return (All domestic foundations must complete this part see instructions.)	Foreign foundati	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		
	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1 b	
	Fair market value of all other assets (see instructions)	1c	
	Total (add lines 1a, b, and c)	1 d	
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
_	(attach detailed explanation)		
	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3		
	(for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Par			ons
	and certain foreign organizations check here ► and do not complete this part	.)	
	Minimum investment return from Part X, line 6	1	0.
2 a	Tax on investment income for 2011 from Part VI, line 5	32.	
b	Income tax for 2011 (This does not include the tax from Part VI)	Andrew &	
C	: Add lines 2a and 2b	2c	182.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts noud (including administrative expenses) to accomplish shortship, etc. purposes		
'a	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	
	Program-related investments — total from Part IX-B	1 b	
	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		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
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 (see instructions)	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 wheth qualifies for the section 4940(e) reduction of tax in those years	er the foundation	

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7	* *		. ,	0.
2 Undistributed income, if any, as of the end of 2011 a Enter amount for 2010 only	» '	22 B	0.	;
b Total for prior years 20 , 20 , 20	« ·,		·	* ** , * / /
3 Excess distributions carryover, if any, to 2011	ş s	4 , 10 40		,
a From 2006 0.	الهام بالله ولا يا يا	···. 9 " " " /	, , ,	, , , , , , , , , , , , , , , , , , ,
b From 2007 0.	* * *	* * " " "	* *	
c From 2008 0.	/* * * * *	,	· · · · · · · · · · · · · · · · · · ·	**
d From 2009 0.	* *		* * *	* , /
e From 2010 0.	*	, , , , , , , , , , , , , , , , , , ,	*	e * *
f Total of lines 3a through e	0.			, ,
4 Qualifying distributions for 2011 from Part	* * * *		** *	" As
XII, line 4 ► \$	٠,	***	*	y , 4 ×
a Applied to 2010, but not more than line 2a		,5 y* ,	and the control of th	. ; .// .
b Applied to undistributed income of prior years (Election required – see instructions)	*		ing at the space of	
c Treated as distributions out of corpus		.* * * * *	* , * * * * * * * * * * * * * * * * * *	, 0x.
(Election required — see instructions)		. N. W. Y. M. N.	****	·) / / /
d Applied to 2011 distributable amount	` , 考 . 《	~ ~ * % % ;	4.4.7	
e Remaining amount distributed out of corpus	0.	, , , , * * *,,	** **	** **
5 Excess distributions carryover applied to 2011		, , , ,	*	
(If an amount appears in column (d), the same amount must be shown in column (a))	*	, » «« »»	, , , ,	**
(-),	į.	* *		₩.
6 Enter the net total of each column as	,	,	4	· ·
indicated below:	n a w w house and a			; "
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	. 65 %		· '2 *
b Prior years' undistributed income Subtract line 4b from line 2b	,	0.	å u	"
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	•		در	
d Subtract line 6c from line 6b Taxable amount — see instructions	,	0.		
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012.				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2007 0.				
b Excess from 2008 0.				
c Excess from 2009 0.				
d Excess from 2010 0.				
e Excess from 2011 0.				

Orm 990-PF (2011) Helen E Popa Masters in N				03-042868	
Part XIV Private Operating Founda 1 a If the foundation has received a ruling or of					N/A
is effective for 2011, enter the date of the	ruling	riat it is a private of	perating foundation,	and the ruling	
b Check box to indicate whether the foundat	ion is a private oper	ating foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
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 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					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	organization ha	ad \$5,000 or mor	e in
assets at any time during the		structions.)			
1 Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have	nave contributed mo	re than 2% of the to nan \$5,000) (See s	otal contributions rec section 507(d)(2))	eived by the foundat	ion before the
b List any managers of the foundation who	own 10% or more of	the stock of a corn	oration (or an equal)	v large portion of the	ownership of
a partnership or other entity) of which the	foundation has a 10	% or greater interes	st	y large portion or the	ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only requests for funds If the foundation make	makes contributions	to preselected char	itable organizations	and does not accept	unsolicited conditions,
complete items 2a, b, c, and d a The name, address, and telephone number					
a The Hame, address, and telephone humbe	or the person to w	потт аррпсацонь ы	nould be addressed		
b The form in which applications should be	submitted and inform	nation and materials	s they should include	2	
c Any submission deadlines				·	
d Any restrictions or limitations on awards,	such as by geograph	nical areas, charitab	ole fields, kinds of in	stitutions, or other fa	ctors

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient Recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year None N/A N/A OH 44515 0 None 0. Total ▶ 3 a 0. **b** Approved for future payment Total 3 b

Part XVI-A Analysis of Income-Producing Activities

 Enter gross	s amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	
1 Progr	ram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
•				code		
b				<u> </u>		
f						
g Fees	and contracts from government agencies					
2 Meml	bership dues and assessments					
3 Interes	t on savings and temporary cash investments					
4 Divide	ends and interest from securities					9,053.
5 Net re	ental income or (loss) from real estate		> v	·		, ,
a Debt-	financed property					
	lebt-financed property					
6 Net rer	ntal income or (loss) from personal property					
7 Other	r investment income					
8 Gain o	r (loss) from sales of assets other than inventory		<u>. </u>			
9 Net in	ncome or (loss) from special events					
10 Gross	s profit or (loss) from sales of inventory			_		
	r revenue	, , , , , , ,		3 3 3	* ** ***	at the first of the first of the
a Cap	ital Gain Distributions					72.
b						
С						
d						
е				1		
	otal Add columns (b), (d), and (e)		 _			9,125.
	l. Add line 12, columns (b), (d), and (e)				13	9,125.
·····	sheet in line 13 instructions to verify calculation					
Part XVI	-B Relationship of Activities to th	e Accomplis	hment of Exemp	ot Purpose	es	
Line No. ▼	Explain below how each activity for which is accomplishment of the foundation's exempt	ncome is reporte purposes (other	d in column (e) of Porthan by providing fu	art XVI-A co unds for such	ntributed importantly n purposes) (See ins	to the structions)
1	Provides loans for nurses	going into	accredited (graduate	programs	
			·= · · · · · · · · · · · · · · · · · ·			
		<u> </u>				
						_
					_	_
-						

Form 990-PF (2011) Helen E Popa Masters in Nursing & District Three Ohio Nurses Assoc 03-0428686 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		
1 Did the organization directly or indirectly engage described in section 501(c) of the Code (other the relating to political organizations?	e in any of the following with any other organization han section 501(c)(3) organizations) or in section 527,	Yes No
a Transfers from the reporting foundation to a nor	ncharitable exempt organization of	
(1) Cash		1 a (1) X
(2) Other assets		1a (2) X
b Other transactions		* · · · · · · · · · · · · · · · · · · ·
(1) Sales of assets to a noncharitable exempt of	organization	1 5 (1)
(2) Purchases of assets from a noncharitable e		1 b (1) X
• •		1 b (2) X
(3) Rental of facilities, equipment, or other asse	ets	1 b (3) X
(4) Reimbursement arrangements		1 b (4) X
(5) Loans or loan guarantees		1 b (5) X
(6) Performance of services or membership or	3	1 b (6) X
c Sharing of facilities, equipment, mailing lists, ot	her assets, or paid employees	1c X
the goods, other assets, or services given by the	lete the following schedule Column (b) should always show the fair re reporting foundation. If the foundation received less than fair marken column (d) the value of the goods, other assets, or services received	et value in
(a) Line no (b) Amount involved (c) Name of non-	charitable exempt organization (d) Description of transfers, transactions, a	nd sharing arrangements
· · · · · · · · · · · · · · ·		
		· · · · · · · · · · · · · · · · · · ·
2a Is the foundation directly or indirectly affiliated videscribed in section 501(c) of the Code (other the bill of Yes,' complete the following schedule	with, or related to, one or more tax-exempt organizations han section 501(c)(3)) or in section 527?	X Yes No
(a) Name of organization	(b) Type of organization (c) Description of	relationship
Ohio Nurses Association District Three 50		
		,
Sign Here	his return, including accompanying schedules and statements, and to the best of my knowl axpayer) is based on all information of which preparer has any knowledge	May the IRS discuss this return with the preparer shown below (see instructions)?
Signature of officer or trustee	Date Title	X Yes No
Print/Type preparer's name	Preparer's signature Date Check X	f PTIN
Paid Eric A. Clark	Eric A. Clark 05/09/12 self-employed	
Preparer Firm's name ERIC A. CLAR		
Use Only Firm's address ► 5694 COLGATE		
YOUNGSTOWN		30) 799-8353
	OT 440TO-4740 Lunie uo (2	
BAA		Form 990-PF (2011)

Form 990-PF, Page 1, Part I, Line 11 Line 11 Stmt

Other income.	Rev/Exp Book	Net Inv Inc	Adj Net Inc
Capital Gain Distributions	72.		
Unrealized Gain	-651.		

Total

<u>-579.</u>

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

	End of	Year
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value
Annaly Capital Management Inc	11,183.	9,576.
Hospitality Properties REIT Trust	17,777.	9,192.
American High Income Trust-Class A	30,157.	25,152.
Capital Income BLDR-Class A	33,172.	30,967.
Income Fund of America-Class A	43,201.	36,056.
Alpine Total Dynamic Dividend Fund	10,403.	2,190.
BAC Capital Trust V PFD 6%	9,364.	7,427.
Wells Fargo Capital VII Trups 5.85%	9,980.	10,140.
Total	165,237.	130,700.