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

2011

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

, and ending

Name of foundation COMMUNITY HEALTH SYSTEMS FOUNDATION		A Employer identification number 20-3323391
Number and street (or P.O. box number if mail is not delivered to street address) 4000 MERIDIAN BOULEVARD	Room/suite	B Telephone number 615-465-7000
City or town, state, and ZIP code FRANKLIN, TN 37067		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> Foreign organizations meeting the 85% test, 2. check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 7,849,293.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I 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 income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received			N/A	
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		0.	0.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees				
	c Other professional fees				
	17 Interest				
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses	100.	0.		0.
	24 Total operating and administrative expenses. Add lines 13 through 23	100.	0.		0.
	25 Contributions, gifts, grants paid	245,679.			245,179.
26 Total expenses and disbursements. Add lines 24 and 25	245,779.	0.		245,179.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	<245,779.>				
b Net investment income (If negative, enter -0-)		0.			
c Adjusted net income (If negative, enter -0-)			N/A		

Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	8,095,072.	7,849,293.	7,849,293.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
Liabilities	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other			
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	15 Other assets (describe ▶)			
	16 Total assets (to be completed by all filers)	8,095,072.	7,849,293.	7,849,293.
	17 Accounts payable and accrued expenses	2,300.	2,300.	
	18 Grants payable			
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	2,300.	2,300.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ <input checked="" type="checkbox"/>			
	24 Unrestricted	8,092,772.	7,846,993.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	8,092,772.	7,846,993.		
31 Total liabilities and net assets/fund balances	8,095,072.	7,849,293.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	8,092,772.
2 Enter amount from Part I, line 27a	2	<245,779.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	7,846,993.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	7,846,993.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	NONE		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2010	584,264.	7,990,000.	.073124
2009	188,048.	4,546,463.	.041361
2008	132,540.	3,701,773.	.035804
2007	145,403.	3,147,238.	.046200
2006	149,320.	1,936,114.	.077124

2 Total of line 1, column (d)	2	.273613
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.054723
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	7,814,468.
5 Multiply line 4 by line 3	5	427,631.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7 Add lines 5 and 6	7	427,631.
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.	8	245,179.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 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 <input type="checkbox"/> and enter 1% of Part I, line 27b	1	0.
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	0.
3	Add lines 1 and 2	3	0.
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	0.
6	Credits/Payments:		
a	2011 estimated tax payments and 2010 overpayment credited to 2011	6a	
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	0.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a 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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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.		X
1c Did the foundation file Form 1120-POL for this year?		X
d 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.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>TN</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
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 year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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Part 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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	X	
14	The books are in care of COMMUNITY HEALTH SYSTEMS Telephone no. 615-465-7000 Located at 4000 MERIDIAN BOULEVARD, FRANKLIN, TN ZIP+4 37067			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15	N/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country	16	Yes	No
				X

Part 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
1a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A	1b	
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 2011?	1c	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)):		
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years		
b	Are there any years listed in 2a for which the foundation is not 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 all years listed, answer "No" and attach statement - see instructions.) N/A	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	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.) N/A	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? ☐ Yes ☒ 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? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

▶ ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

6b

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(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) Expense account, other allowances
SEE STATEMENT 2		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

▶ 0

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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	1a 0.
b	Average of monthly cash balances	1b 7,933,470.
c	Fair market value of all other assets	1c
d	Total (add lines 1a, b, and c)	1d 7,933,470.
e	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 7,933,470.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 119,002.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 7,814,468.
6	Minimum investment return. Enter 5% of line 5	6 390,723.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1 390,723.
2a	Tax on investment income for 2011 from Part VI, line 5	2a
b	Income tax for 2011. (This does not include the tax from Part VI.)	2b
c	Add lines 2a and 2b	2c 0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 390,723.
4	Recoveries of amounts treated as qualifying distributions	4 0.
5	Add lines 3 and 4	5 390,723.
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	7 390,723.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a 245,179.
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:	
a	Suitability 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	4 245,179.
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	6 245,179.

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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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				390,723.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010	182,007.			
f Total of lines 3a through e	182,007.			
4 Qualifying distributions for 2011 from Part XII, line 4: ► \$	245,179.			
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2011 distributable amount				245,179.
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).)	145,544.			145,544.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	36,463.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see instr.			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)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	36,463.			
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010	36,463.			
e Excess from 2011				

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	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
a Paid during the year				
AMERICAN RED CROSS 129 WEST FOWLKES STREET, SUITE 100 FRANKLIN, TN 37064		PUBLIC	MATCHING GRANT OR GIFT	1,450.
ASSURANCE HOME 513 AVERWATER COURT FRANKLIN, TN 37067		PUBLIC	MATCHING GRANT OR GIFT	2,000.
BAYLOR UNIVERSITY ONE BEAR PLACE #97050 WACO, TX 76798-7050		PUBLIC	MATCHING GRANT OR GIFT	1,500.
BAYLOR UNIVERSITY; HIGHER SIMPSON ALTHETICS/ACADEMIC CENTER ONE BEAR PLACE #97050 WACO, TX 76798-7050		PUBLIC	MATCHING GRANT OR GIFT	5,000.
BEST BUDDIES TENNESSEE 116 WILSON PIKE CIRCLE BRENTWOOD, TN 37027		PUBLIC	MATCHING GRANT OR GIFT	1,000.
Total	SEE CONTINUATION SHEET(S)			245,179.
b Approved for future payment				
NONE				
Total				0.

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

- | | | | |
|---|--------------|------------|-----------|
| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | |
| (1) Cash | 1a(1) | | X |
| (2) Other assets | 1a(2) | | X |
| b Other transactions: | | | |
| (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | X |
| (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | | X |
| (3) Rental of facilities, equipment, or other assets | 1b(3) | | X |
| (4) Reimbursement arrangements | 1b(4) | | X |
| (5) Loans or loan guarantees | 1b(5) | | X |
| (6) Performance of services or membership or fundraising solicitations | 1b(6) | | X |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | X |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | | |

[illegible]

- 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b If "Yes," complete the following schedule.**

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign
Here**

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

Signature of officer or trustee

Date _____

Title

◆ VICE PRESIDENT

May the IRS discuss this return with the preparer shown below (see instr)?

☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature

Date _____

Check ☐ self-employed

PTIN

FRANCIS J. BEDARD

Francis Mulard
LLP

7/3/12

P00752421

Firm's name ► DELOITTE TAX LLP

Firm's EIN ► 86-1065772

Firm's address ▶ 424 CHURCH STREET, SUITE 2400
NASHVILLE, TN 37219

Phone no. 615-259-1800

Form 990-PF (2011)

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
BOY SCOUTS OF AMERICA 3414 HILLSBORO PIKE NASHVILLE, TN 37215		PUBLIC	MATCHING GRANT OR GIFT	1,600.
BOYS & GIRLS CLUB OF FRANKLIN/WILLIAMSON COUNTY PO BOX 1084		PUBLIC	MATCHING GRANT OR GIFT	2,500.
BOYS & GIRLS CLUB OF KENTUCKIANA PO BOX 4989 LOUISVILLE, KY 40204		PUBLIC	MATCHING GRANT OR GIFT	300.
BREAKTHROUGH OF GREATER PHILADELPHIA 34 WEST COULTER STREET PHILADELPHIA, PA 19144		PUBLIC	MATCHING GRANT OR GIFT	500.
BRENTWOOD ACADEMY 219 GRANNY WHITE PIKE BRENTWOOD, TN 37027		PUBLIC	MATCHING GRANT OR GIFT	1,800.
BREVARD MUSIC CENTER PO BOX 312 BREVARD, NC 28712		PUBLIC	MATCHING GRANT OR GIFT	5,000.
BRIGHTSTONE, INC. 140 SE PARKWAY CT FRANKLIN, TN 37064		PUBLIC	MATCHING GRANT OR GIFT	250.
CHARLES DAVIS FOUNDATION PO BOX 60464		PUBLIC	MATCHING GRANT OR GIFT	500.
CHRIST SCHOOL 500 CHRIST SCHOOL ROAD ARDEN, NC 28704		PUBLIC	MATCHING GRANT OR GIFT	5,000.
CMI MEDICAL MISSIONS PO BOX 1171 DICKSON, TN 37056		PUBLIC	MATCHING GRANT OR GIFT	700.
Total from continuation sheets				234,229.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
COMMUNITY FOUNDATION - TOM & MARY MILLER FAMILY ADVISED FUND 3833 CLEGHORN AVENUE #400 NASHVILLE, TN 37215		PUBLIC	MATCHING GRANT OR GIFT	10,000.
CROCKETT ELEMENTARY PTO 9019 CROCKETT RD BRENTWOOD, TN 37027		PUBLIC	MATCHING GRANT OR GIFT	300.
DREXEL UNIVERSITY 3141 CHESTNUT STREET, SUITE 310 PHILADELPHIA, PA 19104		PUBLIC	MATCHING GRANT OR GIFT	8,500.
DUDRICK MEDICAL EDUCATION FUND - YALE SCHOOL OF MEDICINE PO BOX 7611 NEW HAVEN, CT 06510		PUBLIC	MATCHING GRANT OR GIFT	25,000.
FIDELITY INVESTMENTS CHARITABLE GIFT FUND (ACCT: 1034581) PO BOX 77001 CINCINNATI, OH 45277		PUBLIC	MATCHING GRANT OR GIFT	20,000.
FRANKLIN & MARSHALL COLLEGE P.O. BOX 3003 LANCASTER, PA 17604-3003		PUBLIC	MATCHING GRANT OR GIFT	5,000.
FRIENDS IN GENERAL 1818 ALBION ST NASHVILLE, TN 37208		PUBLIC	MATCHING GRANT OR GIFT	1,000.
GEORGETOWN COLLEGE 400 EAST COLLEGE ST GEORGETOWN, KY 40324		PUBLIC	MATCHING GRANT OR GIFT	16,000.
GILDA'S CLUB LOUISVILLE INC. PO BOX 4061 LOUISVILLE, KY 40204-4061		PUBLIC	MATCHING GRANT OR GIFT	25,000.
HAND IN HAND MINISTRIES 2225 STEIER LN LOUISVILLE, KY 40218		PUBLIC	MATCHING GRANT OR GIFT	900.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
HIGH HOPES, INC. 1647 MALLORY LANE, SUITE 103 BRENTWOOD, TN 37027		PUBLIC	MATCHING GRANT OR GIFT	2,500.
INTERFAITH DENTAL CLINIC 1712 PATTERSON STREET NASHVILLE, TN 37203		PUBLIC	MATCHING GRANT OR GIFT	500.
KEVIN TURNER FOUNDATION 3171 GREEN VALLEY ROAD, SUITE 526 BIRMINGHAM, AL 35243-5239		PUBLIC	MATCHING GRANT OR GIFT	500.
LAFAYETTE COLLEGE 730 HIGH STREET EASTON, PA 18042-1761		PUBLIC	MATCHING GRANT OR GIFT	1,000.
LAFAYETTE INDUSTRIES 179 GAYWOOD DR. MANCHESTER, MO 63021		PUBLIC	MATCHING GRANT OR GIFT	500.
LEE UNIVERSITY PO BOX 3450 CLEVELAND, TN 37320-3450		PUBLIC	MATCHING GRANT OR GIFT	5,000.
LEGAL AID SOCIETY OF MIDDLE TENNESSEE AND THE CUMBERLANDS 300 DEADERICK ST. NASHVILLE, TN 37201		PUBLIC	MATCHING GRANT OR GIFT	500.
MAKE-A-WISH FOUNDATION OF AMERICA 4742 N 24TH ST STE 400 PHOENIX, AZ 85016-4862		PUBLIC	MATCHING GRANT OR GIFT	500.
MALONE UNIVERSITY - THE MALONE FUND 2600 CLEVELAND AVE, NW CANTON, OH 44709		PUBLIC	MATCHING GRANT OR GIFT	2,000.
MARCH OF DIMES, MUSIC CITY DIVISION 1101 KERMIT DR, STE 201 NASHVILLE, TN 37217		PUBLIC	MATCHING GRANT OR GIFT	750.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
MARTHA O-BRYAN CENTER 711 SOUTH SEVENTH STREET NASHVILLE, TN 37206-3895		PUBLIC	MATCHING GRANT OR GIFT	500.
METROPOLITAN OPERA AT LINCOLN CENTER 70 LINCOLN CENTER PLZ FL 6 NEW YORK, NY 10023		PUBLIC	MATCHING GRANT OR GIFT	1,000.
MINNIE PEARL FOUNDATION 310 25TH AVENUE NORTH STE 103 NASHVILLE, TN 37203		PUBLIC	MATCHING GRANT OR GIFT	250.
MORNING STAR SANCTUARY PO BOX 586 MADISON, TN 37116-0568		PUBLIC	MATCHING GRANT OR GIFT	500.
NASHVILLE OPERA 3622 REDMONT ST NASHVILLE, TN 37209		PUBLIC	MATCHING GRANT OR GIFT	5,000.
NASHVILLE PUBLIC RADIO 630 MAINSTREAM DRIVE NASHVILLE, TN 37228-1204		PUBLIC	MATCHING GRANT OR GIFT	250.
NASHVILLE RESCUE MISSION PO BOX 333229 NASHVILLE, TN 37203		PUBLIC	MATCHING GRANT OR GIFT	1,329.
NATIONAL MS SOCIETY - MID-SOUTH CHAPTER 214 OVERLOOK CIRCLE BRENTWOOD, TN 37027		PUBLIC	MATCHING GRANT OR GIFT	500.
NORTHWESTERN UNIVERSITY 1501 CENTRAL STREET EVANSTON, IL 60208		PUBLIC	MATCHING GRANT OR GIFT	500.
NORTHWESTERN UNIVERSITY 2020 RIDGE AVE, ROOM 230 EVANSTON, IL 60208		PUBLIC	MATCHING GRANT OR GIFT	1,000.
Total from continuation sheets				

Part XV Supplementary Information**3** Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	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
PENNSYLVANIA ACADEMY OF THE FINE ARTS 128 N. BROAD ST PHILADELPHIA, PA 19102		PUBLIC	MATCHING GRANT OR GIFT	5,000.
RONALD MCDONALD HOUSE 2144 FAIRFAX AVE NASHVILLE, TN 37212		PUBLIC	MATCHING GRANT OR GIFT	2,000.
RUTGERS UNIVERSITY FOUNDATION WINATS HALL 7 COLLEGE AVE NEW BRUNSWICK, NJ 08901		PUBLIC	MATCHING GRANT OR GIFT	250.
SAINT XAVIER HIGH SCHOOL 1609 POPLAR LEVEL ROAD LOUISVILLE, KY 40217		PUBLIC	MATCHING GRANT OR GIFT	1,000.
SALVATION ARMY 631 DICKERSON PIKE NASHVILLE, TN 37207-5608		PUBLIC	MATCHING GRANT OR GIFT	3,500.
SCHWAB CHARITABLE FUND FUND ID #31-1640316 211 MARKET ST SAN FRANCISCO, CA 94105		PUBLIC	MATCHING GRANT OR GIFT	25,000.
SECOND HARVEST FOOD BANK 331 GREAT CIRCLE RD NASHVILLE, TN 37228		PUBLIC	MATCHING GRANT OR GIFT	1,500.
STOCKBRIDGE BOWL ASSOCIATION PO BOX 118 STOCKBRIDGE, MA 01262		PUBLIC	MATCHING GRANT OR GIFT	2,500.
ST. JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PUBLIC	MATCHING GRANT OR GIFT	1,000.
TENNESSEE FUND PO BOX 15016 KNOXVILLE, TN 37901		PUBLIC	MATCHING GRANT OR GIFT	8,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
TN COALITION AGAINST DOMESTIC & SEXUAL VIOLENCE 2 INTERNATIONAL PLAZA DRIVE, SUITE 425 NASHVILLE, TN 37217		PUBLIC	MATCHING GRANT OR GIFT	500.
TRANSYLVANIA UNIVERSITY 300 N. BROADWAY LEXINGTON, KY 40508		PUBLIC	MATCHING GRANT OR GIFT	500.
TRINITY AUXILIARY FUND 800 MONTCLAIR ROAD BIRMINGHAM, AL 35213		PUBLIC	MATCHING GRANT OR GIFT	500.
TRINITY UNIVERSITY ONE TRINITY PLACE #49, BOX 58 SAN ANTONIO, TX 78212-7200		PUBLIC	MATCHING GRANT OR GIFT	500.
TRINITY UNIVERSITY - CENTER FOR LEADERSHIP DEVELOPMENT/HEALTH ONE TRINITY PLACE #49, BOX 58 SAN ANTONIO, TX 78212-7200		PUBLIC	MATCHING GRANT OR GIFT	3,000.
UNION THEOLOGICAL SEMINARY (FOR THE POVERTY INITIATIVE) 3041 W. BROADWAY NEW YORK, NY 10027		PUBLIC	MATCHING GRANT OR GIFT	10,000.
UNIVERSITY OF KENTUCKY - NEW INITIATIVES FUND 125 STURGILL DEVELOPMENT BUILDING LEXINGTON, KY 40506-0015		PUBLIC	MATCHING GRANT OR GIFT	250.
UNIVERSITY OF MEMPHIS FOUNDATION 635 NORMAL ST, ALUMNI CENTER MEMPHIS, TN 38152-3750		PUBLIC	MATCHING GRANT OR GIFT	2,000.
UNIVERSITY OF TENNESSEE 600 HENLEY STREET, SUITE B022 KNOXVILLE, TN 37996		PUBLIC	MATCHING GRANT OR GIFT	1,000.
UNIVERSITY OF TN - SCHOOL OF NURSING 1200 VOLUNTEER BLVD KNOXVILLE, TN 37996		PUBLIC	MATCHING GRANT OR GIFT	1,000.
Total from continuation sheets				

3 Grants and Contributions Paid During the Year (Continuation)**Total from continuation sheets**

FORM 990-PF	OTHER EXPENSES			STATEMENT	1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK FEES	100.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	100.	0.		0.	

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT	2
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
WAYNE T. SMITH	CHAIRMAN OF THE BOARD/PRES 1.00	0.	0.	0.
W.LARRY CASH	EXECUTIVE VICE PRESIDENT 1.00	0.	0.	0.
RACHEL A. SEIFERT	SENIOR VICE PRESIDENT/SECR 1.00	0.	0.	0.
MARTIN G. SCHWEINHART	SENIOR VICE PRESIDENT 1.00	0.	0.	0.
T. MARK BUFORD	VICE PRESIDENT 1.00	0.	0.	0.
JAMES W. DOUCETTE	VICE PRESIDENT & TREASURER 1.00	0.	0.	0.
LINDA K. PARSONS	VICE PRESIDENT 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

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

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

**Type or
print**File by the
due date for
filing your
return. See
instructions.

Name of exempt organization or other filer, see instructions.

Employer identification number (EIN) or

Community Health Systems Foundation

20-3323391

Number, street, and room or suite no. If a P.O. box, see instructions.

Social security number (SSN)

4000 Meridian Blvd.

City, town or post office, state, and ZIP code. For a foreign address, see instructions.

Franklin, TN 37067

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ 0 ☐ 4

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
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► CHS Tax Department

Telephone No. ► 615-465-7000FAX No. ► 615-465-3014

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 20 12, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☒ calendar year 20 11 or► ☐ tax year beginning _____, 20 _____, and ending _____, 20 _____.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b \$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c \$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2012)

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box. ☐

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the due date for filing your return. See instructions.	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or <input type="checkbox"/>
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN) <input type="checkbox"/>
City, town or post office, state, and ZIP code. For a foreign address, see instructions.		

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ ☐

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990	
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ☐ Telephone No. ☐ FAX No. ☐
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.
- 4 I request an additional 3-month extension of time until , 20 .
- 5 For calendar year , or other tax year beginning , 20 , and ending , 20 .
- 6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature R. Craig Pickard Title Authorized Rep. Date 5/9/12
 RCP
 Form 8868 (Rev. 1-2012)