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'Form 990-PF

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

OMB No 1545-0052

2011

Internal Revenue Service

Treated as a Private Foundation Department of the Treasure 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 Employer Identification number Humanitarian Relief Foundation, Inc 20-4252033 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 1906 Gus Kaplan Drive 918-245-0848 City or town, state, and ZIP code If exemption application is pending, check here Alexandria LA 71301 G Check all that apply Initial return Initial return of a former public charity 1 Foreign organizations check here Final return Amended return 2. Foreign organizations meeting the Address change Name change 85% test, check here and attach computation H Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation section 507(b)(1)(A), check here I Fair market value of all assets at J Accounting method X Cash Accrual If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ 988,835 Part I (Part I, column (d) must be on cash basis Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chartable amounts in columns (b), (c), and (d) may not necessarily equal xpenses per income purposes the amounts in column (a) (see instructions)) books (cash basis only) 72,700 Contributions, gifts, grants, etc., received (attach schedule) ත 2 Check ▶ | if the foundation is not required to attach Sch B N 3 411 411 Interest on savings and temporary cash investments 411 Dividends and interest from securities 5a Gross rents SCRANNED Net rental income or (loss) -1,0476a Net gain or (loss) from sale of assets not on line 10 RECEIVED Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) lo Net short-term capital gain Income modifications က် 10a Gross sales less returns & allowances h Less Cost of goods sold OGDEN Gross profit or (loss) (attach schedule) Stmt 1 11 Other income (attach schedule) 14,360 14,360 12 Total. Add lines 1 through 11 87,471 411 14,771 13 Compensation of officers, directors, trustees, etc Operating and Administrative Expenses Other employee salanes and wages 14 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) Other professional fees (attach schedule) C 17 Interest 1,047 1,047 1,047 Taxes (attach schedule) (see instructions) Stmt 2 3,098 -7,051 10,149 21,762 Stmt 3 Depreciation (attach schedule) and depletion 6,474 20 Occupancy 29.794 -2,690 32,484 21 670 Travel, conferences, and meetings -1,5252,195 22 Printing and publications 23 Stmt 4 20,045 19,152 893 Other expenses (att sch) Total operating and administrative expenses. 1,047 Add lines 13 through 23 76,416 15,407 45,721 25 Contributions, gifts, grants paid 43,227 43,227 26 Total expenses and disbursements. Add lines 24 and 25 119,643 1,047 15,407 88,948 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -32,172 0

For Paperwork Reduction Act Notice, see instructions.

Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

Form 990-PF (2011)

O

,	Part II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	f year
_		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	21,847	31,835	31,835
	2	Savings and temporary cash investments	40,330		
	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 (attach schedule) (see			
		instructions)		_	
	7	Other notes and loans receivable (att schedule)			
		Less allowance for doubtful accounts ▶ 0			
इं	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
۷	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
	40	Less accumulated depreciation (attach sch.)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ► 799,709	720 605	727 010	057 000
	45	Less accumulated depreciation (attach sch) ► Stmt 5 61,797	738,695	737,912	957,000
Į	15 16	Other assets (describe)			
ı	10	Total assets (to be completed by all filers—see the	800,872	760 747	000 035
٦	17	Instructions Also, see page 1, item I) Accounts payable and accrued expenses	3,058	769,747 4,105	988,835
	18	Grants payable	3,036	4,105	
တ္ထ	19	Deferred revenue		,	
ij	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule) See Worksheet	17,500	17,500	
Ë	22	Other liabilities (describe >	17,500	17,500	
	23	Total liabilities (add lines 17 through 22)	20,558	21,605	
		Foundations that follow SFAS 117, check here	20,000	22,000	
Š		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted			
ala	25	Temporarily restricted			
ã	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
L		and complete lines 27 through 31.			
SO	27	Capital stock, trust principal, or current funds			
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds	780,314	748,142	
Net Assets or Fund Balan	30	Total net assets or fund balances (see instructions)	780,314	748,142	
~	31	Total liabilities and net assets/fund balances (see			
_		instructions)	800,872	769,747	
	Part I				
1		net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	igree with		700 214
•		f-year figure reported on prior year's return)		1	780,314
		amount from Part I, line 27a		2	-32,172
		ncreases not included in line 2 (itemize) ► nes 1, 2, and 3		3	748,142
		eases not included in line 2 (itemize)		5	140,142
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b),	line 30	6	748,142
_		Tartif, coulint (b),			

		arian Relief Foundat			20-4252033		_		Page
Part	(a) List and des	nd Losses for Tax on Investme cribe the kind(s) of property sold (e.g., real estate, rarehouse, or common stock, 200 shs. MLC Co.)	<u>nt Incom</u>	е	(b) How acquired P—Purchase		Date ecqu		(d) Date sold (mo , day, yr)
1a N	/A	,			D—Donation	, ·			()
b							_		
C									
d									
е									
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or plus exper			((h) Gain e) plus (f)	or (loss) minus (g)
<u>a</u>	 <u></u> -						_		
<u>b</u>	······································								
<u> </u>									
d									
<u>e</u>	alata astronomica								
Com	piete only for assets snowing	gain in column (h) and owned by the four	idation on 12	2/31/69				•	(h) gain minus
	(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess over col					ess than -0-) or m col (h))
<u>a</u>									
<u>b</u>									
<u>c</u>									
d e									
	tal gain net income or (net ca	If gain, also enter in F If (loss), enter -0- in F		7		2			
3 Net s	short-term capital gain or (los	ss) as defined in sections 1222(5) and (6)	arti, iiie i			_			
		column (c) (see instructions) If (loss), enti-	er -0- ın	٦					
	1, line 8					3			
Part \	V Qualification Ur	nder Section 4940(e) for Reduce	ed Tax or	Net Ir	vestment Incor	ne			
(For optic	onal use by domestic private	foundations subject to the section 4940(a)	tax on net i	nvestmer	nt income)				
If section	4940(d)(2) applies, leave thi	s part blank							
		ion 4942 tax on the distributable amount of fy under section 4940(e) Do not complete		the base	penod?				Yes X No
Line	(a)	each column for each year, see the instruct	ions before	making a	ny entries	ı			(d)
_	Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions		Net value	(c) of nonchantable-use assets				button ratio
	2010		,801		982,			(COI (D) Q	0.239935
	2009		,150		768,				0.126486
	2008		,302		895,				0.214805
	2007								
	2006								
_									
2 Tota	I of line 1, column (d)						2		0.581226
3 Aver	age distribution ratio for the 5	5-year base penoddivide the total on line	2 by 5, or b	y the			l		
numt	ber of years the foundation ha	as been in existence if less than 5 years					3		0.193742
4 Enter	r the net value of nonchantab	ole-use assets for 2011 from Part X, line 5					4		968,382
5 Multij	ply line 4 by line 3						5		187,616
6 Enter	r 1% of net investment incom	ne (1% of Part I, line 27b)					6		
	lines 5 and 6	•					7		187,616

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

88,948

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

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<u>. Ра</u>	Irt 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 ▶ and enter "N/A" on line 1		•		
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		_	
	here ▶ and enter 1% of Part I, line 27b				
С	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			
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				
а	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)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7			
8	Enter any penalty for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
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 ▶ Refunded ▶	11			
_ <u>Pa</u>	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				
	of the instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			i	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers \$				ł
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
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			1	
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 			1	
	conflict with the state law remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	LA				•
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				ł
	(or designate) of each state as required by General Instruction G? If "No," attach explanation See Stmt 6		8b		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		9	X	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				١
	names and addresses		10		X_

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<u>Pi</u>	art 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?		13	X	
	Website address ► N/A				
14	The books are in care of ▶ Sharon Burns Telephone no ▶ 3:	18-4	48-	107	8
	1906 Gus Kaplan Drive				
	Located at ▶ Alexandria ZIP+4 ▶ 7	1301	L		
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				
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority			Yes	No
	over a bank, securities, or other financial account in a foreign country?		16		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 ▶		<u> </u>		
Pa	art 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?	No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?	No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		ļ		
	the benefit or use of a disqualified person)?	No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the				l
	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)	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)?	A\N	1b		
	Organizations relying on a current notice regarding disaster assistance check here	· 🗌			
С	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?	$A \setminus R$	1c		
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)).				
а	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?	No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20				
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	_			
	·	A\N	2b		
С	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				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			l	
	at any time during the year?	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 penod (or longer penod 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	- /-			
		A\r	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			ļ	•
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?		4b	0.55	X
		- 1	om 99	ツーピト	(2011)

<u>om</u>	990-PF(2011) Humanitarian Re	elief Foundation	<u>, Inc 20-4</u>	252033			Page 6
Pa	art VII-B Statements Regarding A	<u>Activities for Which Form</u>	4720 May Be Re	equired (contin	ued)		
5a	During the year did the foundation pay or incur	any amount to·					İ
	(1) Carry on propaganda, or otherwise attempt	to influence legislation (section 4	945(e))?		es 🗶 No		
	(2) Influence the outcome of any specific public	c election (see section 4955), or t	o carry on,				
	directly or indirectly, any voter registration of	inve?		Y	es 🗓 No		
	(3) Provide a grant to an individual for travel, s	tudy, or other similar purposes?		_ Y	es 🗓 No		
	(4) Provide a grant to an organization other that	an a chantable, etc , organization	described in				
	section 509(a)(1), (2), or (3), or section 494	10(d)(2)? (see instructions)		Y	es 🗓 No	1	
	(5) Provide for any purpose other than religiou	s, chantable, scientific, literary, or	educational				
	purposes, or for the prevention of cruelty to	children or animals?		Y	es 🗓 No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	he transactions fail to qualify unde	er the exceptions desc	cribed in	_		
	Regulations section 53 4945 or in a current not	ice regarding disaster assistance	(see instructions)?		N/A	5b	
	Organizations relying on a current notice regard	ling disaster assistance check he	re		▶ []		i
C	If the answer is "Yes" to question 5a(4), does the	ne foundation claim exemption fro	m the tax			1	
	because it maintained expenditure responsibilit	y for the grant?		N/A 🗌 Y	es No		İ
	If "Yes," attach the statement required by Regu	fations section 53 4945-5(d)					
6a	Did the foundation, during the year, receive any	funds, directly or indirectly, to pa	y premiums				
	on a personal benefit contract?			_ Y	es X No		
b	Did the foundation, during the year, pay premiu	ms, directly or indirectly, on a per	sonal benefit contract	?		6b	<u> </u>
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation	tion a party to a prohibited tax sh	elter transaction?	<u></u>	es 🗶 No		
b	If Yes, did the foundation receive any proceeds	or have any net income attributa	ble to the transaction?	<u> </u>	N/A	7b	
Pa	art VIII Information About Office	rs, Directors, Trustees, F	oundation Mana	gers, Highly P	aid Employee	es,	
	and Contractors					_	
1	ist all officers, directors, trustees, foundation	n managers and their compen	sation (see instructi	ons).		·	
			(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Eva	onco nocount
	(a) Name and address		hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred		ense account, allowances
			devoted to position		compensation		
Ja	mes D. Meyer	Sand Springs	President	<u> </u>		•	
12	14 Forest Drive	OK 74063	25.00	0	0		0
Sì	earon Burns	Alexandria	Secretary	1			
43	01 Wakefield	LA 71303	1.00	0	0	L	0
El	aine Rose	Alexandria	Vice Pres.				
19	08 Tenneyson Oaks Drive	LA 71301	10.00	0	0		0
			l l	İ			
		, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				<u> </u>	
2	Compensation of five highest-paid employe	es (other than those included	on line 1—see instru	uctions). If none, o	enter		
	"NONE."						
			(b) Title, and average	_	(d) Contributions to employee benefit	(e) Expe	ense account,
	(a) Name and address of each employee paid mor	e than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowances
_					compensation		
NC	NE		ļ	ļ į			
				 			
				 	<u></u>	-	
						_	
			}				
						 -	
				[
	h describeration					<u> </u>	
ı ota	I number of other employees paid over \$50,000					<u> </u>	0

огг	m 990-PF (2011) Humanitarian Relief Foundation, Inc 20-4252033	Page 7
P	art VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly F	Paid Employees,
	and Contractors (continued)	
	(a) Name and address of each person paid more than \$50,000 (b) Type of s IONE	service (c) Compensation
_		
		}
Tota	al number of others receiving over \$50,000 for professional services	
P	Part IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	Direct conduct and delivery of humanitarian relief to	
	communities.	
		27,101
2	Contributions to other 501(c)(3) organizations to provide	ì
	Humanitarian Relief Foundation, Inc. direct conduct and	
	delivery of humanitarian relief and aid to communities.	16,212
3		
4		
_ <u>P</u>	Part IX-B Summary of Program-Related Investments (see instructions)	
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	N/A	
2		
All	Il other program-related investments. See instructions	
3		
		1

Total. Add lines 1 through 3

2 purposes Amounts set aside for specific charitable projects that satisfy the: 3 Suitability test (prior IRS approval required) За а Cash distribution test (attach the required schedule) 3b b 88.948 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Enter 1% of Part I, line 27b (see instructions) 5

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

Adjusted qualifying distributions. Subtract line 5 from line 4

Form 990-PF (2011)

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88,948

orm	990-PF (2011) Humanitarian Relief Fou	indation, In	c 20-425203	33	Page 9
Pa	rt XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years pnor to 2010	2010	2011
	line 7			•	
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only				
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2011				
а	From 2006	j			
b	From 2007				
Ç	From 2008]	İ		
d	From 2009				
е	From 2010				
f	Total of lines 3a through e				
4	Qualifying distributions for 2011 from Part XII,			·	
	line 4 ▶ \$88,948				
а	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2011 distributable amount				-
е	Remaining amount distributed out of corpus	88,948			
5	Excess distributions carryover applied to 2011				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))	[
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	88,948			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of pnor years' undistributed				
	income for which a notice of deficiency has	İ			
	been issued, or on which the section 4942(a)	l l			
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount—see instructions				
е	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount—see				
	Instructions				
f	Undistributed income for 2011 Subtract lines				
	4d and 5 from line 1. This amount must be	-			
	distributed in 2012				
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)				
9	Excess distributions carryover to 2012.				
_	Subtract lines 7 and 8 from line 6a	ļ			
0	Analysis of line 9				
a	Excess from 2007		1		
b	Excess from 2008				
C	Excess from 2009				
d	Excess from 2010	i I			

Excess from 2011

	11/14/2012 8 49 PM					
_	990-PF (2011) Humanitarian				33	Page 10
	ert XIV Private Operating Fou					
1a	If the foundation has received a ruling or d					C /10 /0F
_	foundation, and the ruling is effective for 2		-	▶ . ▽ ,,		6/10/05
b	Check box to indicate whether the foundat		g foundation described		942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	/h) 2040	Prior 3 years	(4) 2000	(e) Total
	investment return from Part X for	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
	each year listed	o	1	1	725	727
b	85% of line 2a	<u> </u>	1	<u>+</u>	616	
c	Qualifying distributions from Part XII,		-		010	010
	line 4 for each year listed	88,948	235,801	97,150	192,302	614,201
d	Amounts included in line 2c not used directly	00/010		5.,250	202/002	021,202
	for active conduct of exempt activities	27,015	64,596	16,000	51,000	158,611
е	Qualifying distributions made directly					
	for active conduct of exempt activities	1				
	Subtract line 2d from line 2c	61,933	171,205	81,150	141,302	455,590
3	Complete 3a, b, or c for the	, , , , , , , , , , , , , , , , , , , ,				,
	alternative test relied upon					
а	"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	32,279	32,759	25,603	29,841	120,482
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)					
	(3) Largest amount of support from	İ				
	an exempt organization	-				
Dr	(4) Gross investment income art XV Supplementary Inform	estion (Complete t	hio port only if th	a faundation ha	d &E 000 or more	in coccio et
ГС	any time during the ye	•	•	ie ioungation na	a \$5,000 or more	iii asseis ai
1	Information Regarding Foundation Mai	**	ons.)			
' a	List any managers of the foundation who h	_	nan 2% of the total con	tributions received by t	he foundation	
-	before the close of any tax year (but only i				ne iounuation	
	Elaine Rose	i incy nave contributed i	nore triair \$5,000) (Ge	c section 507 (0)(2))		
b	List any managers of the foundation who o	own 10% or more of the	stock of a corporation	(or an equally large po	rtion of the	······································
	ownership of a partnership or other entity)		•			
	None					
2	Information Regarding Contribution, G	rant, Gift, Loan, Schol	arship, etc., Program	ıs:		<u> </u>
	Check here ▶ if the foundation only	makes contributions to	preselected chantable	organizations and does	s not accept	
	unsolicited requests for funds. If the found	ation makes gifts, grants	s, etc (see instructions	s) to individuals or orga	nizations under	
	other conditions, complete items 2a, b, c,					
а	The name, address, and telephone number	er of the person to whon	n applications should b	e addressed		
	Sharon Burns					
	1906 Gus Kaplan Driv	e Alexandria	a LA 71301			
b	The form in which applications should be s	submitted and information	on and materials they s	hould include	<u></u>	
	See Statement 7					
С	Any submission deadlines					
	None		··· · · · · · · · · · · · · · · · · ·			
đ	Any restrictions or limitations on awards, s	such as by geographical	areas, chantable fields	s, kinds of institutions, o	or other	
	factors					

None

Form 990-PF (2011) Humanitarian Relief Foundation, Inc 20-4252033 Page 11 Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year World Hope International 625 Slaters Lane, STE 100 None N/A Alexandria VA 22314 Humanitarian relief projects 15,712 Food Bank 3142 Baldwin Ave None N/A Various projects for local relief Alexandria LA 71301 12,000 Salvation Army 4220 Lee Street None N/A Alexandria LA 71302 Project for local relief 5,000 Various Various N/A None Alexandria LA 71301 Contribution 10,515 43,227 **▶** 3a Total **b** Approved for future payment N/A

▶ 3b

Total

_	Part XVI-A	Analysis of Income-Producing	g Activities				
En	ter gross amo	unts unless otherwise indicated		1 business income	Excluded by	section 512, 513, or 514	(0)
			(8)	(b)	(c)	(4)	(e) Related or exempt
			(a) Business code	(b) Amount	Exclusion	(d) Amount	function income
1	Program sen	vice revenue			code		(See instructions)
	a Direc	ct Operations					
		on Crossing			i i		14,360
	С						
	<u> </u>			_			
	е						
	f						
	g Fees and	d contracts from government agencies					-
2		Ţ Ţ	-				
		dues and assessments				444	
		avings and temporary cash investments			14	411	
		d interest from securities					
5		come or (loss) from real estate					
	a Debt-fina	anced property					
	b Not debt	-financed property			16	-1,047	
6	Net rental inc	come or (loss) from personal property					
7	Other investr	ment income					
8	Gain or (loss) from sales of assets other than inventory					
		or (loss) from special events					
		or (loss) from sales of inventory			-1		· · · · · ·
		ue a			- - - - - - - -		
	b						
					- 		
	d						
	<u> </u>						
42		d column (h) (d) 4 (c)	— 				14.050
		d columns (b), (d), and (e)			0	-636	14,360
		ne 12, columns (b), (d), and (e)				13	13,724
		n line 13 instructions to verify calculations.)					
_	Part XVI-B	Relationship of Activities to t					
	Line No.	Explain below how each activity for which in	come is reported in colu	mn (e) of Part XVI-A	A contributed	mportantly to the	
	V	accomplishment of the foundation's exempt	purposes (other than by	providing funds for	such purpose	es). (See instructions)	
	N/A					 	
							
					-		
							····
					· · ·		
_							
		-	 	· ·		.	
	·		 				
		·					
				·-··			
							
		<u> </u>				<u> </u>	
							
_	t						
_					<u>_</u>		

	Under penalties of penjury, I declare that I have examined this return, including	accompanying schedules and statements, and to the her	t of my knowledge and	helief it is true	
	correct, and complete Declaration of preparer (other than taxpayer) is based o		May to	he IRS discuss this n	
Sign Here	Signature of officer or trustee	11-15-12 Pate	resident		
	Print/Type preparer's name	Preparer's signature		Date	Check X if
Paid Preparer	Justin Meyers	Justin Meyers		11/14/12	self-employed
Jse Only	Firm's name Justin Meyers, CPA	,	PTIN	P01062	899
	Firm's address > 1793 E. 56th Street		Firm's EIN	•	
_	Tulsa, OK 74105		Phone no	918-71	2-9055
				Form 9	90-PF (2011)

Schedule B .(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Employer identification number

2011

Humanitarian Relief Foundation, Inc. 20-4252033 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt chantable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, chantable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

_ 3001 11/14/2012 8 49 PM Page 1 of 1 of Part I Schedule B (Form 990 990-EZ, or 990-PF) (2011) Name of organization **Employer identification number** Humanitarian Relief Foundation, Inc 20-4252033 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) No. Type of contribution Name, address, and ZIP + 4 **Total contributions** 1 Elaine Rose Person 1908 Tenneyson Oaks Drive Payroll 26,000 Noncash Alexandria LA 71301 (Complete Part II if there is a noncash contribution) (a) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 Lexington Retirement Corporation Person 1214 Forest Drive **Payroll** X 45,800 Noncash OK 74063 Sand Springs (Complete Part II if there is a noncash contribution) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person

\$

\$

\$

(c)

Total contributions

(c)

Total contributions

(Complete Part II if there is a noncash contribution)

Payroll

Person Payroll Noncash

Person Payroll

Noncash

Noncash

(Complete Part II if there is a noncash contribution)

(d)

Type of contribution

(Complete Part II if there is a noncash contribution)

(d)

Type of contribution

(a)

No.

(a)

No.

(b)

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

Page 1 of 1 of Part II

Employer identification number

Humanitarian Relief Foundation, Inc 20-4252033 Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) Items paid for by Lexington 2 12/31/11 45,800 \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) \$

3001 11/14/2012 8 49 PM				
990 / 990-PF		_	er Notes Payable	2011
Name	For calendar year 2011, o	or tax year beginning	, and ending	Employer Identification Number
· · · · · · · · · · · · · · · · · · ·				Employer identification realities
Humanitarian	Relief Foundat	ion, Inc	<u></u>	20-4252033
E 000-DE	Down II line	01 %44:4:		
FORM 990-PF,	Part II, Line	21 - Additio	onal Information	
	Name of lender		Relationship to d	isqualified person
(1) James D. M				
(2)				
(3)				
(4)				
(5)				
(6) (7)				
(8)				
(9)				
(10)				
Original amoun	nt	Maturity		Interest
borrowed	Date of loan	date	Repayment terms	rate
(1) 17,	500 07/01/10	06/30/12	Demand Note	6.000
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)		·		
(10)		<u></u>	L	
	· · · · · · · · · · · · · · · · · · ·			
;	Security provided by borrower		Purpose	of loan
(1) None	, p		Mission sponsorshi	
(2)				
(3)				
(4)				
(5)				
(6)			 	
(7)			 	
(9)				
(10)				
			Balance due at	Balance due at
	deration furnished by lender		beginning of year	end of year
(1)			17,500	17,500
(2)	····			
(3)				
(<u>4</u>) (<u>5</u>)			 	
				

17,500

17,500

(6) (7) (8) (9)

(10) Totals

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Federal Statements

20-4252033 FYE: 12/31/2011

3001 Humanitarian Relief Foundation, Inc

- Other Income
Line 1
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Part
P.P.
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-
Statement

Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

Charitable Purpose	10,149	10,149
1	υ. 	
Adjusted Net	-7,05	-7,05
∢	က	w
Net Investment		0
<u>-</u>	က	w.
Total	3,098	3,098
	တ	ςς.
Description	Direct Operations	· Total

Statement 3 - Form 990-PF, Part I, Line 19 - Depreciation

	Description	ption						
Date Acquired	Cost Basis	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income	
Building 3/01/08 \$	458,068	\$ 17,178	S/L	08	\$ 5,726	 თ	s	<u> </u>
Furniture 3/01/08	23.764		1/8	10	7.377			20.2
Appliances 3/01/08	7,545	2,138	1/8	10	757		200	
Equipment 3/01/08	1,360	3885		10	136		7	. 04
Facility Improvements 3/01/08	vements 8,890	1,679		15	869		17	177
Land Improvements 1/01/08	nts 9,230	1,846		15	615		18	183
Sprinkler 1/01/08	5,152	1,041	S/L	15	343		10	102
Fence & Entrance 3/01/08	ce 10,095	1,907	S/L	15	673		200	0

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3001 Humanitarian Relief Foundation, Inc 20-4252033 FYE: 12/31/2011

Federal Statements

Statement 3 - Form 990-PF, Part I, Line 19 - Depreciation (continued)

	Net F		28		1,010		37	ן 1	1	244	Ċ	32	23		199		307		20		48		110	,	I KO				107	101	37
	Adjusted Net				7																										
		 	တ																												
	Net Investment Income		_{\$\text{\tin}\text{\tetx{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\\\ \text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\text{\text{\text{\texi}\text{\text{\text{\texi}\text{\text{\texi}\text{\text{\texi}\text{\text{\texi}\text{\texitt{\texit{\texi}\text{\texit{\text{\texi}\texitt{\texi}\text{\texi}\text{\texi}\texititt{\tex}																												
	Current Year Depreciation		69		3,396		124	703		821	7	80T	78		699		1,031		99		163		370	c	776 17				869	0.40	124
	Life		15 \$		15		10	-	9	10	7	0 1	15		15		40		10		10	,	10	<u>τ</u>	C T	0			ر ر	7	10
	Method			4.																											
			S/L	-	S/I		S/Γ	S /T.	i ì	S/Γ	,	7/c	S/I		S/I		S/I		$_{ m S/I}$		$^{ m S/I}$		$^{ m S/I}$	۲/ ۲	ر ا				2/1)	S/I
ption	Prior Year Depreciation	700 1 x00m	4 1 100mm \$ 125	idewalk/Bri	3,397		133	773		1,436	,	/J Heating units	5	condition	167	- Remodel	98		50		82	1		Dirt work/trees/rock	100			-3,912			
Description	Cost Basis	י) vements = 1,40	I	-,	Washer/Dryer	1,232	Add'1 5 076	Mower	8,207	Other CC	U9 Imnrovements – He	1	Improvements - Air		Improvements - Re	41,242	Brush hog	664	Tile machine	1,630	Mover equip.		1	*00 / *0	92,364	Non-charitable	0 4 0 8	18 844	Other CC	1,237
	Date Acquired	Facility Impr	5 40/11/0 1 1 mp. 1	Land Improvements		ı		Furniture - Ad 8/20/09		60		Facility Impr	_	Facility Impr	$10/0\overline{6}/10^{-}$	Facility Impr	12/01/10		10		10		,,	Land Improvements	Land	1/01/08	Allocated to	1011011	7/01/11	1	1/03/11

က

3001 Humanitarian Relief Foundation, Inc 20-4252033 FYE: 12/31/2011	ո Relief Found	dation, Inc	Federal Statements	tements		11/1	11/14/2012 8:49 PM	<u></u>
		Statement 3 - Form 990	n 990-PF, Part I, Line 19	ne 19 - Deprec	- Depreciation (continued)	(pai		
	Description	otion						_
Date Acquired	Cost Basis	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income	
Furniture 7/01/11 \$	200	VԴ	S/L	10 \$	25	٠	\$	
Equipment 7/01/11 Allocation to No	397 to Non-charitable		T/S	10	20		9	
Total \$	798, 666	3,912 \$ 40,035		·	21,762	O O	\$ 6,474	·
		Statement 4 - Form	Form 990-PF, Part I	Line 23 -	Other Expenses			
Desc	Description	1.	Total	Net Investment		Adjusted Net	Charitable Purpose	
Direct Operations Office expense Cost of Goods	s e Sold	ጥ	15 18,828	ഗ	w	-34 18,828	49	_
Canyon Crossing Bank fees Telephone Miscellaneous Advertising Supplies			159 913 100 14			47 272 30 30	112 641 11 70 10	,
Canyon Non-Charitable Bank Service Fees Telephone Misc Total	table Fees	\ .v ₂	20,045	v	, o	19,152	(°)	
							3.4	

3001 Humanitarian Relief Foundation, Inc 20-4252033 FYE: 12/31/2011

Statement 5 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Description	ш <i>-</i> _	leginning Vet Book	ပ	End ost / Basis	End	d Accumulated Depreciation		Net FMV
Furniture and Fixtures Machinery and Equipment Buildings	٠ V	21,430 21,390 440,890	ς	29,340 27,643 458,068	Ś	10,319 7,304 22,904	φ	20,000 17,000 600,000
Improvements Land		162, 621 92, 364		192,294 92,364		21,270		190,000 130,000
Total	ဟ ။	738,695	ဟ မ	799,709	S	61,797	_ν	957,000

3001 Humanitarian Relief Foundation, Inc 20-4252033 **Fed**

Federal Statements

FYE: 12/31/2011

11/14/2012 8:49 PM

Statement 6 - Form 990-PF, Part VII-A, Line 8b - Not Filing with Attorney General Explanation

Description

There is no requirement to file Form 990-PF with the Louisiana Department of Revenue

3001 Humanitarian Relief Foundation, Inc 20-4252033 **Federal Statements**

11/14/2012 8:49 PM

FYE: 12/31/2011

Name of Manager	Amount
Elaine Rose	\$
Total	\$ 0
Form 990-PF, Part XV, Line 1b - Man	agers Who Own 10% or More Stock
Name of Manager	Amount
None	\$
Total	\$0
Statement 7 - Form 990-PF, Part XV, Line 2b - Description	
Applications should be in letter form with details as to how the foundation can prove	ide humanitarian t of the project
and a brief narrative describing the scope	t.
aid. In addition, an estimate of the cost and a brief narrative describing the scope man hours required to complete the project Form 990-PF, Part XV, Line	t.
and a brief narrative describing the scope man hours required to complete the project	t.

Description

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

20-4252033

Department of the Treasury Internal Revenue Service

179 ► See separate instructions. ► Attach to your tax return. Name(s) shown on return identifying number

		Humanit	arian Reli	ef Foundat	ion, Inc	.=		<u>-425</u>	2033
	•	which this form relates	-						
_		Crossing	Ot-1- D		170				
Pa	rt i	Election To Expens	-	-		omplete F	ort I		
1	Maximum	Note: If you have ar amount (see instructions)		r, complete rait v	v belote you d	ompiete r	all I.	1	500,000
2		of section 179 property pl	•	inetructions)				2	300,000
3		cost of section 179 proper			uctions)			3	2,000,000
4		in limitation. Subtract line	-	•	uctionsy			4	<u> </u>
5		ation for tax year Subtract line			d filmo separately, se	e instructions		5	
6		(a) Description) Cost (business use on		(c) Elected cos	it	
	-								
						-			
7	Listed pro	perty Enter the amount fr	om line 29			7			
8	Total elec	ted cost of section 179 pro	operty Add amounts	ın column (c), lines 6	and 7			8	
9	Tentative	deduction Enter the sma	ller of line 5 or line 8					9	
0	Carryove	r of disallowed deduction f	rom line 13 of your 2	010 Form 4562				10	
1	Business	income limitation. Enter th	e smaller of busines	s income (not less tha	n zero) or line 5 (s	see instructi	ons)	11	
2		79 expense deduction Ad			an line 11			12	
13		of disallowed deduction t			<u> </u>	13	 .		
_		se Part II or Part III below f							
	rt II	Special Depreciation					listed prop	eπy.) (See instructions)
14		epreciation allowance for o		ner than listed propert	y) placed in servic	е		144	
	_	e tax year (see instructions	•					14	
15 16		subject to section 168(f)(1)	•					15	21,762
	rt III	oreciation (including ACRS MACRS Depreciati		ide listed propert	V) (See instru	otione)		1 10	21,102
<u> </u>		MACKS Depreciati	IOII (DO NOL IIICIL	Section		Stions.)	- 		
7	MACRS	deductions for assets place	ed in service in tay ve					17	0
8		ecting to group any assets placed in	·			. .		ı ⊢"	<u> </u>
	102 0.0 0.0			rvice During 2011 T			Depreciation	System	
	(a) Cla	ssification of property	(b) Month and year placed in service	(c) Basis for depreciat (business/investment usionly-see instructions	(d) Recovery	(e) Conver			(g) Depreciation deduction
19a	3-year p	roperty							
b	5-year p	roperty							
С	7-year p	roperty							<u> </u>
d	10-year p	roperty							
e	15-year p	roperty				<u> </u>			
f	20-year p								
g					25 yrs	 		<u>/L</u>	
h	Residenti property	al rental	<u> </u>		27 5 yrs	MM		<u>/L</u>	<u> </u>
		_ 			27 5 yrs	MM		<u>/L</u>	
i	Nonreside property	ential real		-	39 yrs	MM		<u>/L</u>	
	property	Section C. Ac	eate Placed in Son	l vice During 2011 Tax	y Year Hoing the	Altornativo	S. S. S. S. S. S. S. S. S. S. S. S. S. S		<u> </u>
200	Class life		sets riaced in Ser	Tice During 2011 182	k rear Osing the	Aiterriauve			<u>" </u>
	12-year		1	, -	12 yrs	 		<u>/L</u> /L	
	40-year		 			MM		<u>/L</u>	
	rt IV	Summary (See inst	tructions)		1 40 yrs	I IVIIVI		, <u>_</u>	
<u> </u>		operty Enter amount from				<u>, </u>		21	
22		d amounts from line 12, lir		nes 19 and 20 in colur	nn (o), and line 21	Enter here		<u>-</u> -	
	and on th	e appropriate lines of your	return Partnerships	and S corporations-	-see instructions			22	21,762
23		ts shown above and place f the basis attributable to s	-	e current year, enter t	uie.	23			
	F					:			1

Form 8868 (Rev. 1-2012)				Page 2
• If you are filing for an Additional (Not Automatic) 3	3-Month Exten	sion, complete only Pa	rt II and check this box .	▶ 🛭
Note. Only complete Part II if you have already been	granted an aut	omatic 3-month extension		
 If you are filing for an Automatic 3-Month Extension 				
Part II Additional (Not Automatic) 3-Mont	h Extension			
			er filer's identifying number	
Type or Name of exempt organization or other filer, s		,	Employer identification nu	
print Humani tarian Pelie Number, street, and room or suite no. If a P.	f Found	lation Inc.	X 20-425203	.3
rile av the		1	Social security number (SS	SN)
due date for filing your City, town or post office, state, and ZIP code	rive			
		ddress, see Instructions.		
instructions. Hexandria, LA 713	30 L	····	 	
Enter the Return code for the return that this applicat	ion is for (file a	separate application for	each return)	614
Application	Return	Application		Return
Is For	Code	Is For		Code
Form 990	01	13101		
Form 990-BL				08
Form 990-EZ	02	Form 1041-A 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 alread				
Telephone No. ► ALS - DLUS If the organization does not have an office or place If this is for a Group Return, enter the organization's for the whole group, check this box Ist with the names and EINs of all members the extension of the tax year entered in line 5 is for less than Change in accounting period State in detail why you need the extension	s four digit Gro I . If it is for par nsion is for. ime until inning 12 months, ch	up Exemption Number (0 t of the group, check this November 5 , 20 , 20 eck reason: Initial re	abox ▶ ☐ ar , 20 ¹७	If this is and attach a
8a If this application is for Form 990-BL, 990-PF, nonrefundable credits. See instructions. b If this application is for Form 990-PF, 990-	, 990-T, 4720,	or 6069, enter the tentat	ive tax, less any 8a \$	-0-
estimated tax payments made. Include any amount paid previously with Form 8868.	prior year ove	erpayment allowed as a	credit and any 8b \$	_0-
c Balance due. Subtract line 8b from line 8a. Inclue (Electronic Federal Tax Payment System). See ins		t with this form, if required	, by using EFTPS 8c \$	_0_
_		t be completed for Pa	-	
Under penalties of perjury, I declare that I have examine knowledge and belief, it is true, correct, and complete, and	•	. , ,	dules and statements, and t	o the best of my
Signature > \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Title ▶	CPA	Data > 8/1	2 /12
Signature Justin Mayers	1143	<u> </u>		2/12 3868 (Bev. 1-2012)

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