

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

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

Department of the Treasc-y
Internal Revenue Service

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

OMB No 1545-0052

For	calend	dar year 2011 or tax year beginning , a	and ending				-	
N	ame of fo	undation		7	Empl	oyer identification number	- <u> </u>	
	ELLY MAR DECEMI CHARTMARIE MENGE							
		MAE BROWN CHARITABLE TRUST				-5370462		
		d street (or P O box number if mail is not delivered to street address) TEAGUE DRIVE		T T	-	hone number (see instructions)	
1800 TEAGUE DRIVE 301 903-816-2279 City or town, state, and ZIP code								
8	HER	MAN TX 75090		(If exer	mption application is pending,	check here	
G	Check	all that apply Initial return Initial return	rn of a former public c	harity () 1 Fc	reign organizations, check hei	re 🕨	
		Final return Amended				-		
		Address change Name cha				reign organizations meeting th % test, check here and attach	_	
Н.	Check	type of organization. X Section 501(c)(3) exempt private				•	· · ·	
$\ddot{\Box}$			le private foundation	["		ate foundation status was term n 507(b)(1)(A), check here	inated under	
I F		rket value of all assets at J Accounting method		rual F				
		rear (from Part II, col. (c), Other (specify)	Las Casii Acc	iua: F		oundation is in a 60-month ter section 507(b)(1)(B), check he		
	ne 16)		he on cash hasis \					
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	T			(d) Disbursements	
amounts in columns (b), (c), and (d) may not necessarily equal			expenses per	(b) Net investr	nent	(c) Adjusted net income	for chantable purposes	
	1	the amounts in column (a) (see instructions))	books	(11 0 0 -1		117	(cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach schedule)						
	2	Check ► X if the foundation is not required to attach Sch B						
	3	Interest on savings and temporary cash investments	16,927		,927	16,927	····	
	4	Dividends and interest from securities	14,397	14	,397	14,397		
	5á	Gross rents	- 					
ē	b	Net rental income or (loss)						
Ĕ	6a	Net gain or (loss) from sale of assets not on line 10	407					
Revenue	b	Gross sales price for all assets on line 6a 19,572	·····					
Ř	7	Capital gain net income (from Part IV, line 2)			407			
	8	Net short-term capital gain				168		
	 0 -	income modifications						
F-2	678							
À	_ b	tess Cost of goods sold	<u> </u>				······································	
} {	₹ °	Grass profit or (loss) (attach schedule)				201		
)	131	Other income (attach schedule) STMT 1	981	ļ	981	981		
Z	172	Total. Add lines 1 through 11	32,712	32	,712	32,473	······································	
- S	872412°	Compensation of officers, directors, trustees, etc	U					
LIII I	<u> </u>	Other employee salaries and wages						
디宫	1	Pension plans, employee benefits Legal fees (attach schedule) SEE STMT 2	2 004	-	,542		1 542	
Ä		Accounting fees (attach schedule)	3,084	-	, 542	-	1,542	
		Other professional fees (attach schedule) STMT 3	14,845	77	422		7 422	
and Administrativ	17	Interest	14,043	 	,423		7,422	
str.	18	Taxes (attach schedule) (see instructions) STMT 4	593		593			
Ë	19	Depreciation (attach schedule) and depletion	393		393			
<u>ء</u> •	20	Occupancy						
Y	21	Travel, conferences, and meetings						
1 2	22	Printing and publications						
ā	23	Other expenses (att. sch.) STMT 5	25		25			
Operating	24	Total operating and administrative expenses.	23	 				
a f	~~	Add lines 13 through 23	18,547	٥	,583	0	8,964	
e e	25	Contributions, gifts, grants paid	37,000		, , , , ,	<u></u>	37,000	
	26	Total expenses and disbursements. Add lines 24 and 25	55,547	***************************************	,583	o	45,964	
5 —	27	Subtract line 26 from line 12.	33,347	t	, , , , ,			
ñ	a	Excess of revenue over expenses and disbursements	-22,835	^ -	,			
	b	Net investment income (if negative, enter -0-)	22,000		,129		***************************************	
	C			 	,)	32,473	.,	
		1			- 1			

	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	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			
	2	Savings and temporary cash investments	40,420	15,435	15,435
	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			
B	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ř	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) SEE STMT 6	281,664	291,948	325,108
	С	Investments—corporate bonds (attach schedule) SEE STMT 7	329,747	335,766	374,313
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule) SEE STATEMENT 8	287,169	273,054	287,802
	14	Land, buildings, and equipment. basis			······································
į		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ► SEE STATEMENT 9)	550	512	512
	16 1	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	939,550	916,715	1,003,170
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
iit	20	Loans from officers, directors, trustees, and other disqualified persons			,
iat	21	Mortgages and other notes payable (attach schedule)			
۲	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
ces		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted	939,550	916,715	
Net Assets or Fund Balan	25	Temporarily restricted			
H	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
7 F		and complete lines 27 through 31.			
0	27	Capital stock, trust principal, or current funds			
iet	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ş	29	Retained earnings, accumulated income, endowment, or other funds			
t/	30	Total net assets or fund balances (see instructions)	939,550	916,715	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	939,550	916,715	
	Part II	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	st agree with	,	
		f-year figure reported on prior year's return)	-	1	939,550
2		amount from Part I, line 27a		2	-22,835
		ıncreases not included in line 2 (itemize) ▶		3	· · · · ·
		nes 1, 2, and 3		4	916,715
5	Decre	eases not included in line 2 (itemize)		5	
_6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (t	o), line 30	6	916,715

Part IV Capital Gains a	nd Losses for Tax on Investr	<u>nent Incol</u>	me				
(a) List and descr 2-story brick wa	(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.) SEE WORKSHEET (b) How acquired P—Purchase D—Donation					Date acquired to , day, yr)	(d) Date sold (mo , day, yr)
1a SEE WORKSHEET							
<u>b</u> .					ļ		
С					<u> </u>		
d	-				ļ		
<u>e</u>					ļ		
(e) Gross sales price	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (or allowable) plus expense of sale						n or (loss) (f) minus (g)
a					ļ		
<u>b</u>		<u> </u>		 	ļ		
_c							
_d					ļ		
e	s sain in salvers (h) and averad by the	form detre a	- 40/04/0		<u> </u>		
Complete only for assets snowing	g gain in column (h) and owned by the	toundation o			┨		(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess over col				•
_a	<u></u>				<u> </u>		
_b					<u> </u>		
_с							
d							
<u>e</u>		_1			<u> </u>		
2 Capital gain net income or (net ca	apital loss) If gain, also enter If (loss), enter -0-				2		407
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and	(6)·					
If gain, also enter in Part I, line 8,	column (c) (see instructions) If (loss)	, enter -0- in	7				
Part I, line 8			<u> </u>		3	,	168
Part V Qualification Ur	<u>ider Section 4940(e) for Redu</u>	uced Tax o	<u>on Net I</u>	<u>nvestment Inco</u>	ome		
	is part blank tion 4942 tax on the distributable amoi lify under section 4940(e). Do not com			ase period?	-		Yes X No
1 Enter the appropriate amount in e	each column for each year, see the ins	structions bef	ore makin	g any entries			
(a)	(b)			(c)		(d)	
Base penod years Calendar year (or tax year beginning in	Advicted avalitures distributes	ons	Net value	of noncharitable-use asse	nts		stribution ratio divided by col. (c))
2010	4:	8,748		975,	672		0.049964
2009	5	3,301		926,			
2008				904,	219		
2007							
2006							
2 Total of line 1, column (d)						2	0.107501
	5-year base period—divide the total or	n line 2 by 5,	or by the		ſ		
number of years the foundation h	as been in existence if less than 5 year	ars			-	3	0.053751
4 Enter the net value of noncharita	ble-use assets for 2011 from Part X, II	ne 5			-	4	1,020,171
5 Multiply line 4 by line 3]	5	54,835
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6	231
7 Add lines 5 and 6						7	55,066
8 Enter qualifying distributions from	n Part XII, line 4					8	45,964
If line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line	1b, and comp	olete that p	part using a 1% tax	rate Se	ee the	

	1990-PF (2011) ELLA MAE BROWN CHARITABLE TRUST 20-5370462			. · F	age 4	
_P	art 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)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				463	
	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-)						
3 Add lines 1 and 2						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				463	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				463	
6	Credits/Payments				103	
a	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 975					
b						
c						
d						
7	Total credits and payments Add lines 6a through 6d				<u>975</u>	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				<u>512</u>	
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ 512 Refunded ▶ 11					
	rt VII-A Statements Regarding Activities					
1a	The state of the s	L		Yes	No	
_	participate or intervene in any political campaign?	Ļ	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)?	L	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?	L	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 ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				,	
	on foundation managers. • \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	İ	2		Х	
	If "Yes," attach a detailed description of the activities.	Г		,		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		-			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X	
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?		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.					
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?	İ	6	X	Ì	
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)		- 1			
-	TX					
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		o.	x	ĺ	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	-	8b	Δ.		
J			1	2	1	
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"				v	
40	complete Part XIV	\vdash	9		X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		.		v	
	names and addresses		10	0.55	X	
		For	m ササ	U-rt	(2011)	

Form 990-PF (2011) ELLA MAE BRO Part VII-B Statements Regardi	ng Activities for Which F		5370462 Required (cont	tinued)		Page
a During the year did the foundation pay or			2044		ПТ	
(1) Carry on propaganda, or otherwise a	ttempt to influence legislation (se	ection 4945(e))?		Yes X No		1
(2) Influence the outcome of any specific						1
directly or indirectly, any voter registr		•	Π,	Yes X No		
(3) Provide a grant to an individual for tra	avel, study, or other similar purpo	oses?	=	Yes X No		
(4) Provide a grant to an organization of			نے		1 1	
section 509(a)(1), (2), or (3), or section				res X No		
(5) Provide for any purpose other than re						
purposes, or for the prevention of cru		•		res X No		ĺ
b If any answer is "Yes" to 5a(1)–(5), did a	ny of the transactions fail to qual	ify under the exceptions of				
Regulations section 53 4945 or in a curre				N/A	5b	İ
Organizations relying on a current notice				▶ □	"	
If the answer is "Yes" to question 5a(4), of				,		
because it maintained expenditure respo			N/A 🗍	res No		-
If "Yes," attach the statement required by		d).				
Did the foundation, during the year, recei						
on a personal benefit contract?	are any carrier, and only or interesting	y, to pay promising		res X No		
Did the foundation, during the year, pay p	premiums, directly or indirectly of	n a personal henefit contr		163 [11] 110	6b	x
If "Yes" to 6b, file Form 8870.	recommended and early or manoonly, o	in a personal belieff conti	aot:		60	
At any time during the tax year, was the f	oundation a party to a prohibited	tay shelter transaction?		es X No		
If Yes, did the foundation receive any pro				N/A	7b	- 1
	icers, Directors, Trustee					
and Contractors	, 2, 1	o, i odiidation man	agers, mgmy	i ala Employ	ccs,	
List all officers, directors, trustees, foun	dation managers and their cor	npensation (see instruc	tions).		-	
		(b) Title, and average	(c) Compensation	(d) Contributions to		
(a) Name and ad	ddress	hours per week	(if not paid, enter	employee benefit		nse account,
		devoted to position	-0-)	plans and deferred compensation	outer a	allowances
SHERI SCRIBNER	SHERMAN	PRESIDENT	, 			
1800 TEAGUE DRIVE, SUITE 301	TX 75090	1.00	o	0		
DAWN CORDELL	SHERMAN	VICE PRESIDE				
1800 TEAGUE DRIVE, SUITE 301	TX 75090	1.00	o	o		
SHEILA SHEA	SHERMAN	SECRETARY		<u> </u>	i	
105 S TRAVIS, SUITE 100	TX 75090	1.00	0	o		
Compensation of five highest-paid em	ployees (other than those inclu	ided on line 1—see inst	ructions) If none	enter	l	
"NONE."			radions, ii non	, 01101		
		(b) Title, and average		(d) Contributions to		
(a) Name and address of each employee pa	aid more than \$50,000	hours per week	(c) Compensation	employee benefit		nse account,
		devoted to position		plans and deferred compensation	otner a	allowances
NONE				· · · · · · · · · · · · · · · · · · ·		
				·		
			'			
		į į				
		1	i i		l	
tal number of other employees paid over \$50	0.000		 -			

Form 990-PF (2011) ELLA MAE BROWN CHARITABLE TRUST	20-5370462	Page 7
Part VIII Information About Officers, Directors, Trustees, Fou	ndation Managers, Highly Paid E	mployees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see ins		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE -		
·		
	<u></u>	
Total number of others receiving over \$50,000 for professional services	·	<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information organizations and other beneficianes served, conferences convened, research papers produced, etc.	ion such as the number of	Expenses
1 THE TRUST PROVIDES FUNDING TO 501(C)(3)	ORGANIZATIONS THAT	
FOCUS ON THE SICK, AGED, HELPLESS AND NE	EEDY MEN, WOMEN AND	
CHILDREN IN GRAYSON COUNTY TEXAS.		37,000
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see ins	tructions)	· .
Describe 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 other program-related investments See instructions		
3		
Total. Add lines 1 through 3	<u> </u>	<u> </u>

Form 990-PF (2011)

45.964

3a

3b

4

5

purposes

3

5

Amounts set aside for specific charitable projects that satisfy the

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Suitability test (prior IRS approval required)

Enter 1% of Part I, line 27b (see instructions)

Cash distribution test (attach the required schedule)

P	art XIII Undistributed Income	(see instructions)				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI	l,	Corpus	Years prior to 2010	2010	2011
	line 7					50,546
2	Undistributed income, if any, as of the end	l of 2011				
	Enter amount for 2010 only		·		36,994	······
	Total for prior years: 20 , 20					
3	Excess distributions carryover, if any, to 2	011 [.]				
	From 2006					
	From 2007					
-	From 2008	 -				
	From 2009					
е	From 2010					
f	Total of lines 3a through e					
4	Qualifying distributions for 2011 from Part	XII,				× .
	line 4. ▶ \$ 45,964					
а	Applied to 2010, but not more than line 2a				36,994	
b	Applied to undistributed income of prior ye	ears	`		,	
	(Election required—see instructions)		···			
C	Treated as distributions out of corpus (Ele-	ction				
	required—see instructions)		·····			
d	Applied to 2011 distributable amount					8,970
е	Remaining amount distributed out of corpu	ıs				
5	Excess distributions carryover applied to 2	2011				
	(If an amount appears in column (d), the s	ame				
	amount must be shown in column (a))					
6	Enter the net total of each column as				1	
	indicated below:					
а	Corpus. Add lines 3f, 4c, and 4e Subtract	line 5				
b	Prior years' undistributed income. Subtrac	t				
	line 4b from line 2b					
C	Enter the amount of prior years' undistribu	ted .				
	income for which a notice of deficiency has	s	•			
	been issued, or on which the section 4942	(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b. Taxable					
	amount-see instructions		`			
е	Undistributed income for 2010 Subtract lin	ne				
	4a from line 2a Taxable amount—see					
	instructions					
f	Undistributed income for 2011 Subtract lin	nes				
	4d and 5 from line 1. This amount must be	•				
	distributed in 2012					41,576
7	Amounts treated as distributions out of col	rpus				
	to satisfy requirements imposed by section	n '				
	170(b)(1)(F) or 4942(g)(3) (see instructions	s)				
8	Excess distributions carryover from 2006 r	not				
	applied on line 5 or line 7 (see instructions					
9	Excess distributions carryover to 2012.	•				
	Subtract lines 7 and 8 from line 6a				1	
10	Analysis of line 9:					
a	Excess from 2007	į	,			
b	Excess from 2008		•		,	
c	Excess from 2009					
ď	Excess from 2010					
e	Excess from 2011					

GRANTS ONLY FOR INCREASING QUALITY OF HUMAN LIFE.

factors.

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient 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 CASA OF GRAYSON COUNTY 1518 S AUSTIN NONE ACTIVE SHERMAN TX 75090 CHILD ADVOCACY 5,000 GRAYSON CO WOMENS CRISIS PO BOX 2112 NONE ACTIVE SHERMAN TX 75091 WOMEN'S SHELTER 12,000 GREATER TEXOMA HEALTH CLI 900 NORTH ARMSTRONG NONE ACTIVE DENISON TX 75020 INDIGENT CARE 10,000 MEALS ON WHEELS 4114 AIRPORT DRIVE INONE ACTIVE DENISON TX 75020 SENIOR NUTRITION 10,000 37,000 Total ▶ 3a Approved for future payment N/A Total ▶ 3b

Part XVI-A	Analysis of Income-Producing Ac	ctivities				
Enter gross amour	nts unless otherwise indicated	(a) Business code	d business income (b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program service	ce revenue			code		(See instructions)
a	· · · · · · · · · · · · · · · · · · ·					
						
						
f		-				
g Fees and o	contracts from government agencies	-		 		
	ues and assessments			 		
	rings and temporary cash investments			14	16,927	
	interest from securities			14	14,397	
	me or (loss) from real estate				14,337	
	-		<u></u>			
	ced property					
	nanced property					
	me or (loss) from personal property					
7 Other investme		 		14	981	
, ,	from sales of assets other than inventory	<u> </u>		26	407	
	(loss) from special events			_		
	(loss) from sales of inventory					
11 Other revenue	а	_				
		_ \		_		
C						
d						
е						
12 Subtotal Add	columns (b), (d), and (e)			0	32,712	0
	12, columns (b), (d), and (e)				13	
	line 13 instructions to verify calculations.)					
Part XVI-B	Relationship of Activities to the A	ccomplishme	ent of Exempt I	Purposes		··
	Explain below how each activity for which incom				d importantly to the	
	accomplishment of the foundation's exempt purp					ns)
N/A						
		·				
	·					
						
						· · · · · · · · · · · · · · · · · · ·
						
	.					
,l_						
						,
					·	
	·					
					 	

AL GUES	*##1	Exempt Organiza		ansiers to and	ı mansacılo	nis and relationships w	tii Nonchantable		
1 Did	the orga			ge in any of the follo	owing with any o	other organization described		Yes	No
ın s	ection 5	01(c) of the Code (othe	r than section	on 501(c)(3) organi	zations) or in se	ection 527, relating to political			
orga	anizatior	15?							
a Tra	nsfers fr	om the reporting found	ation to a no	oncharitable exemp	ot organization o	f			
	Cash						1a(1)		<u> </u>
	Other a						1a(2)	├ —┤	X
	er trans								i
• •		f assets to a noncharite	•	•	_		1b(1)		X
• •		ses of assets from a no			on		1b(2) 1b(3)	\vdash	X
(3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 1b(3) X 1b(4) X									
• •	(5) Loans or loan guarantees								
							X		
						X			
						mn (b) should always show the fa	air market		
						the foundation received less than			
valu	ue in any	transaction or sharing	arrangemer	nt, show in column	(d) the value of	the goods, other assets, or servi	ces received		
(a) Lin	e no	(b) Amount involved	(c) Name	e of nonchantable exemp	t organization	(d) Description of transfers, tr	ansactions, and sharing arrangeme	ents	
I/A			<u> </u>						
									
. <u> </u>									
						 			
							 		
				· · · · · · · · · · · · · · · · · · ·					
				·					
									
		 							
									
									
2a Istl	he found	ation directly or indirec	tly affiliated	with, or related to,	one or more tax	-exempt organizations			
des	cribed in	section 501(c) of the	Code (other	than section 501(c)(3)) or in section	n 527?	. 🗌 Y	es 🗓	No
b If "	Yes," cor	mplete the following sci	nedule		·				
		a) Name of organization		(b) Type of or	rganization	(c) Descrip	otion of relationship		
<u> N/2</u>	<u> </u>								
									
				<u> </u>					
							*		
Т	Under per	naities of penury 1 declare the	at I have exami	ned this return, including	accompanying sch	edules and statements, and to the best of	my knowledge and belief, it is tru	e.	
- 1						which preparer has any knowledge	May the IRS discuss this		\neg
-	<	\neg A \subset		1			with the preparer shown t		_
		\mathcal{N} .	× m.	/.	117	_	(see instructions)?	Yes	No
ign	A	(DODA (N///1	Must	(' ' (15 12 PRES	IDENT		
tere	Sign	ature of officer or trustee		010-0	Date				
	Pont/Ty	/pe preparer's name			Preparer's signatu	re -	Date	T	$\overline{\Box}$
ald	, ,,,,,,,,	the highway a rigitio			n l		",	Check self-em	iploved
reparer	HARO	LD B. ROGERS	III		Ken	old Brocows !!!	11/12/12		. •- -
se Only	-		R ROGE	ERS LLP		0	PTIN P0000	2054	<u> </u>
		address ▶ 217 W		ECAN STREE	ET		Firm's EIN ▶ 45-384		
		SHERM	IAN, T	X 75090-5	5847		Phone no 903-86	8-2	403
							Form 9	90-PF	(2011)

Federal Statements

20-5370462

Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

Description	Revenue per Books	Net I	Net Investment Income	Adju	djusted Net Income
CAPITAL GAIN DISTRIBUTION	\$ 981	ψ,	981	৵	981
TOTAL	\$ 981	w	981	w w	981

Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees

Charitable Purpose	\$ 1,542 \$ 1,542
Adjusted Net	w w
Net Investment	\$ 1,542
Total	\$ 3,084
Description	LEGAL FEES TOTAL

Form 990-PF, Part I, Line 16b - Accounting Fees

	\
Adjusted Net	\$ \$
Net Investment	v v
Total	\$ \$
Description	ACCOUNTING TOTAL

Charitable Purpose

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Charitable Purpose	\$ 7,422 \$ 7,422
Adjusted Net	w w
Net Investment	\$ 7,423
Total	\$ 14,845
Description	AGENCY INVESTMENT FEES TOTAL

	Charitable Purpose	w w	Charitable Purpose \$
	kes Adjusted Net	w w	Adjusted Net
Federal Statements Statement 4 - Form 990-PF, Part I, Line 18 - Taxes Net Total Investment	art I, Line 18 - Tax Net Investment	63 530 593	rm 990-PF, Part I, Line 23 - Other Expenses Net Ad Investment \$ \$ \$ 25 \$ 25 \$ 25 \$ 25 \$
	63 \$ 530 593 \$	rm 990-PF, Part I, Total \$ 25 25 \$	
	w w	Statement 5 - For	
20-5370462	Description	FOREIGN TAX PAID EXCISE TAX TOTAL	Description EXPENSES BANK CHARGES TOTAL

		Fair Market Value	\$ 325,108 \$ 325,108		Fair Market Value	\$ 374,313		Fair Market Value
	Investments	Basis of Valuation	COST	Investments	Basis of Valuation	COST	ments	Basis of Valuation
nts	Corporate Stock	End of Year	291,948 291,948	Corporate Bond	End of Year	335,766 335,766	13 - Other Invest	End of Year
Federal Statements	- Form 990-PF, Part II, Line 10b - Corporate Stock Investments	Beginning of Year	\$ 281,664 \$	- Form 990-PF, Part II, Line 10c - Corporate Bond Investments	Beginning of Year	\$ 329,747 \$	Statement 8 - Form 990-PF, Part II, Line 13 - Other Investments	Beginning of Year
20-5370462	Statement 6 - Form	Description	WELLS FARGO ACCOUNTS TOTAL	Statement 7 - Form	Description	WELLS FARGO ACCOUNTS TOTAL	Staten	Description

Fair Market Value	\$ 85,772 202,030	\$ 287,802
Basis of Valuation	COST	
End of Year	66,600 206,454	273,054
	w	w.
Beginning of Year	287,169	287,169
"	ស	လူ
Description	WELLS FARGO MUTUAL FUNDS 0623 WELLS FARGO MUTUAL FUNDS 8040	TOTAL

20-5370462

Federal Statements

Statement 9 - Form 990-PF, Part II, Line 15 - Other Assets

Description	Description Beginning of Year		End of Year		Fair Market Value	
PREPAID INCOME TAXES	\$	550	\$	512	\$	512
TOTAL	\$	550	\$	512	\$	512