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### Form 990-PF

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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

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

For cal-	endar year 2011, or tax year beginning	, 2011,	and ending	1	
	S AND VIOLA LANE FOUNDATION G.MORRISON; 4091 LUPINE PASS			A Employer identification nul 22-3087604	mber
	WALES, FL 33898			B Telephone number (see the 863-438-0667	instructions)
				C If exemption application is	pending, check here
<b>G</b> Che	ck all that apply Initial return	Initial Return of a form	mer public charity	D 1 Foreign organizations, che	ck here
	Address change	Name change		2 Foreign organizations mee here and attach computation	
<b>н</b> с	neck type of organization X Section 501 Section 4947(a)(1) nonexempt charitable t		orivate foundation	E If private foundation status	
		ounting method XCa Other (specify)	<u> </u>	under section 507(b)(1)(A)  F If the foundation is in a 60	
<b>►</b> \$	82,335. (Part I,	column (d) must be on		under section 507(b)(1)(B)	
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 investmen income	t (c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	(see instructions) )  1 Contributions, gifts, grants, etc, received (att sch)	1,355.			
~	2 Ck   X   if the foundn is <b>not</b> req to att Sch B 3 Interest on savings and temporary				
7107	cash investments 4 Dividends and interest from securities	3,131.	3,13	1. 3,131.	
<b>\$</b>	5a Gross rents b Net rental income				
څخه >_ R	or (loss)  6a Net gain/(loss) from sale of assets not on line 10				
REVE VE	b Gross sales price for all assets on line 6a  7 Capital gain net income (from Part IV, line 2)				
AN	Net short-term capital gain     Income modifications				
SCANNED	10a Gross sales less returns and				
	allowances  b Less Cost of goods sold				
Ø	c Gross profit/(loss) (att sch) 11 Other income (attach schedule).				
		4 406	2 12	1 2 121	
	12 Total. Add lines 1 through 11	4,486.	3,13	1. 3,131.	
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages				
	15 Pension plans, employee benefits		-		
А	16a Legal fees (attach schedule)				
Ď	<b>b</b> Accounting fees (attach sch) SEE ST 1	1,275.			
i N	c Other prof fees (attach sch)				
O I P S E T R R	17 Interest				
E T	18 Taxes (attach scheduleXsee instrs) SEE STM 2 19 Depreciation (attach	30.			
ŶŶ	sch) and depletion			THE D	<u> </u>
N V G E	20 Occupancy		DE COL	CEIVE	
_	<ul><li>21 Travel, conferences, and meetings</li><li>22 Printing and publications</li></ul>		142	9917 (0)	
A E N X D P	22 Printing and publications 23 Other expenses (attach schedule)		185 MI	1 9 3 5015 / 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
E	SEE STATEMENT 3	95.	M 1073		
S E	24 Total operating and administrative	1,400.	La de la company	THEN U	
S	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART XV	4,050.	1 1		4,050.
	26 Total expenses and disbursements. Add lines 24 and 25	5,450.	· · · <u>-</u> =·	0. 0.	4,050.
	27 Subtract line 26 from line 12:	3,430.		<u> </u>	1,030.
	a Excess of revenue over expenses and disbursements.	-964.			
	b Net investment income (if negative, enter -0 ).		3,13	1.	
	C Adjusted net income (if negative, enter -0-)			3,131.	

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

86,215

6

Par	(a) List and describe	the kind(s) of property sold (e.g., rese, or common stock, 200 shares ML	eal estate.	(b) How acc	iase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1.0	N/A			D — Dona	tion		
<u>  a</u>  b							<del></del>
C C	· · · · · · · · · · · · · · · · · · ·						
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale	is e		(h) Gain or (e) plus (f) m	
а							
b							<del></del>
<u>c</u>							
d			<del></del>			<del></del>	<del></del>
е		L	the foundation on 12/21/60				
	(i) Fair Market Value	ng gain in column (h) and owned by  (i) Adjusted basis	(k) Excess of column		a	l) Gains (Colı) ا) ain minus column	
	as of 12/31/69	as of 12/31/69	over column (j), if ar			an -0-) or Losses (fr	
a			· · · · · · · · · · · · · · · · · · ·				<del></del>
b							
С							
d							
е			<u> </u>			<del></del>	
2	Capital gain net income or (net	capital loss) — If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7		2		
3	Net short-term capital gain or (	loss) as defined in sections 1222(5)	and (6)			ŀ	
	If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see instructions) If	(loss), enter -0-		3		
Par		Section 4940(e) for Reduce	d Tax on Net Investme	nt Inco	me		
	es,' the foundation does not qual	tion 4942 tax on the distributable an ify under section 4940(e) Do not co n each column for each year, see th	mplete this part		ies	Yes	X No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass			<b>(d)</b> Distribution umn (b) divided	
	2010	3,881.	82	2,641.			0.046962
	2009	4,032.		3,856.			0.051131
	2008	3,050.	82	2,067.			0.037165
	2007	4,399.	_:_ :_ : : : : : : : : : : : : : : : :	3,103.			0.049930
	2006	2,100.	84	1,537.		·	0.024841
2	Total of line 1, column (d)				2	:	0.210029
	, , ,	to E year base pared	stal on line 2 his 5 as his 45-	Ì	_		
3	number of years the foundation	ie 5-year base period — divide the to n has been in existence if less than 5	of the 2 by 5, or by the 5 years	}	3		0.042006
4	Enter the net value of nonchar	table-use assets for 2011 from Part	X, line 5	-	4		83,325.
5	Multiply line 4 by line 3			]	5		3,500.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		31.
7	Add lines 5 and 6				7		3,531.
8	Enter qualifying distributions fr	om Part XII, line 4			8		4,050.
	If line 8 is equal to or greater t Part VI instructions	han line 7, check the box in Part VI,	line 1b, and complete that p	oart using	a 1%	6 tax rate See th	<del></del> ne

Form 990-PF (2011) JAMES AND VIOLA LANE FOUNDATION		22-3087604		F	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 49	940(b), 4940(e), or 4948	<ul> <li>see instruction</li> </ul>	1s)		
1 a Exempt operating foundations described in section 4940(d)(2), check here	'N/A' on line 1				
Date of ruling or determination letter (attach copy of letter if necessary)	ary – see instrs)				
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,		- 1			31.
check here ► X and enter 1% of Part I, line 27b					1
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I,	line 12, column (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			<del></del>		
foundations only Others enter -0-)		2			0.
3 Add lines 1 and 2		3			31.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	<del>-</del>				<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, en	iter -0-	5			31.
6 Credits/Payments	1 1				į
a 2011 estimated tax pmts and 2010 overpayment credited to 2011	6a				ļ
<b>b</b> Exempt foreign organizations — tax withheld at source	6Ь				
c Tax paid with application for extension of time to file (Form 8868).	6c				1
d Backup withholding erroneously withheld	6d				
7 Total credits and payments Add lines 6a through 6d		7			<u>0.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2	2220 is attached	8			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ 9			<u>31.</u>
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1	▶ 10			
11 Enter the amount of line 10 to be Credited to 2012 estimated tax	Refunded	▶ 11			
Part VII-A   Statements Regarding Activities					
1 a During the tax year, did the foundation attempt to influence any national, state, participate or intervene in any political campaign?	or local legislation or di	d ıt	1 a	Yes	No X
b Did it spend more than \$100 during the year (either directly or indirectly) for pol (see the instructions for definition)?	itical purposes		1 b		Х
If the answer is 'Yes' to <b>1a</b> or <b>1b,</b> attach a detailed description of the activities a	and copies of any materi	als published			
or distributed by the foundation in connection with the activities					
c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) impose	d during the year		1 c		X
(1) On the foundation $\Rightarrow$ 0. (2) On foundation mai		0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the reimbursement (if any) paid by the foundation during the year for political terms are the political te			1		
foundation managers. $\blacktriangleright$ \$ 0.					
2 Has the foundation engaged in any activities that have not previously been repo	rted 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					
of incorporation, or bylaws, or other similar instruments / If 'Yes,' attach a confo		es	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more dur	ing the year?		4a	3.7	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b	IV.	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
If 'Yes,' attach the statement required by General Instruction T					1
<ul> <li>Are the requirements of section 508(e) (relating to sections 4941 through 4945)</li> <li>By language in the governing instrument, or</li> </ul>	satisfied either				
<ul> <li>By state legislation that effectively amends the governing instrument so that n with the state law remain in the governing instrument?</li> </ul>	o mandatory directions	that conflict	6	Χ	1
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II,	column (c), and Part XV		7	Χ	
8a Enter the states to which the foundation reports or with which it is registered (se NY	ee instructions)	<b>-</b>			-
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ger (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>	neral	<del>-</del>	8b		
9 Is the foundation claiming status as a private operating foundation within the me for calendar year 2011 or the taxable year beginning in 2011 (see instructions for calendar year).		(3) or 4942(j)(5) molete Part XIV	9		
10 Did any persons become substantial contributors during the tax year? If 'Yes,' a					···
and addresses BAA	· · · · · · · · · · · · · · · · · · ·	Fr	rm 990	).PF (	2011)

<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) all years listed, answer 'No' and attach statement — see instructions)	!) ) to
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	
► 20 , 20 , 20 , 20	

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

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)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

**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?

3b N/A
4a X

N/A

2b

Yes X No

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Part VII-B   Statements Regarding Activity		1 4720 May Be Req	uired (continued)	<del></del>	
5a During the year did the foundation pay or incu	•	40454.33			
(1) Carry on propaganda, or otherwise attempt			∐ Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registration	ation drive?			No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes /	∐ Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, oi 4940(d)(2)? (see instri	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio	n of cruelty to children	or animals?		No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ [		1
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	] No	
If 'Yes,' attach the statement required by Regi	ulations section 53 494	5-5(d)			
6a Did the foundation, during the year, receive an on a personal benefit contract?			∐Yes X	No	
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b	X
7a At any time during the tax year, was the found	dation a party to a prob	ibited tax shelter transa	ction? Yes X	No	
<b>b</b> if 'Yes,' did the foundation receive any proceed				N/A 7b	
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	Employees	,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		
(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 other allo	
VIOLA LANE	TRUSTEE	0.	0.		0.
4091 LUPINE PASS LAKE WALES, FL 33898	0				<u>.</u>
2 Compensation of five highest-paid employee				1	
(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 other allo	
NONE			,		
			<del></del>		
	1			-	
Total number of other employees and ever #50 000		L			
Total number of other employees paid over \$50,000 BAA	TEEA0306L	12/05/11		<u> </u>	- <b>PF</b> (2011)

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All other program-related investments. See instructions

Total. Add lines 1 through 3

BAA

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

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

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

BAA

5

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

Adjusted qualifying distributions. Subtract line 5 from line 4

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4,050.

019.

4

5

6

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
1 Distributable amount for 2011 from Part XI, line 7				4,135.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			4,050.	Ì
<b>b</b> Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2011				
a From 2006				
<b>b</b> From 2007				1
c From 2008				
<b>d</b> From 2009				
e From 2010				•
f Total of lines 3a through e.	0.			
4 Qualifying distributions for 2011 from Part				
XII, line 4 ► \$ 4,050.				
a Applied to 2010, but not more than line 2a			4,050.	
•				
<ul> <li>Applied to undistributed income of prior years (Election required – see instructions)</li> </ul>		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
<b>d</b> Applied to 2011 distributable amount				0.
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))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		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 instructions			0.1	
f Undistributed income for 2011 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2012.				4,135.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				4,133.
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	0.			į
10 Analysis of line 9				
a Excess from 2007				
<b>b</b> Excess from 2008	]			ì
c Excess from 2009	]		Ì	
d Excess from 2010	]			1
e Excess from 2011				
ВАА				Form <b>990-PF</b> (2011)

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Part XIV   Private Operating Foundat					N/A
1a If the foundation has received a ruling or one is effective for 2011, enter the date of the	ruling	ř	•	· • • • • • • • • • • • • • • • • • • •	1
b Check box to indicate whether the foundat		erating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(h) 2010	Prior 3 years	(4) 2000	(a) T-4-1
investment return from Part X for each year listed	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(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 an exempt organization					- · · · · · · · · · · · · · · · · · · ·
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the	(Complete this e vear – see in	part only if the structions.)	organization ha	d \$5,000 or more	ein
Information Regarding Foundation Managera List any managers of the foundation who is close of any tax year (but only if they have VIOLA LANE	gers:	ore than 2% of the	total contributions re section 507(d)(2))	eceived by the founda	ation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a corp 0% or greater interes	poration (or an equa est	lly large portion of the	ne ownership of
2 Information Regarding Contribution, Gran Check here ☐ If the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d	nakes contributions	s to preselected cha	ritable organizations		
a The name, address, and telephone number	r of the person to	whom applications s	should be addressed		
ODE OMANDADAM E					
SEE STATEMENT 5  b The form in which applications should be:	submitted and infor	mation and materia	uls they should include		
•	addinicted and into	mation and materia	ns they should melac		
SEE STATEMENT FOR LINE 2A  c Any submission deadlines	<u> </u>				<del></del>
,					
SEE STATEMENT FOR LINE 2A  d Any restrictions or limitations on awards, :	such as by geograp	phical areas, charita	ble fields, kinds of in	nstitutions, or other fa	actors
	Julia by geograp	ar areas, charita	2.3 Holds, Killus Of II	or other h	20.010
SEE STATEMENT FOR LINE 2A					

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Contribution	
Name and address (home or business)  a Paid during the year  SEE STATEMENT 6	substantial contributor	recipient		
		1		
Total		1	► 3a	4,050.
b Approved for future payment  Total			► 3b	

### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated			business income		section 512, 513, or 514	(e)	
		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions)	
=	n service revenue			code			
а h		<del>                                     </del>					
				1			
						· ·	
f							
q Fees ar	nd contracts from government agencies						
-	rship dues and assessments						
3 Interest o	n savings and temporary cash investments			14		<u> </u>	
4 Dividen	ds and interest from securities			14	3,131.	<u>– – </u>	
5 Net ren	tal income or (loss) from real estate						
a Debt-fir	nanced property					_	
<b>b</b> Not deb	ot-financed property					. <u></u>	
6 Net renta	l income or (loss) from personal property						
7 Other II	nvestment income						
•	oss) from sales of assets other than inventory						
	ome or (loss) from special events	<del></del>				<del>-</del>	
-	profit or (loss) from sales of inventory			_			
11 Other r		-					
		<del>                                     </del>					
		<del>                                     </del>	<del></del>	<del>      -</del>			
		<del>                                     </del>		<del>-   -   -</del>			
		+ +	· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>			
e	al Add columns (b), (d), and (e)	+			3,131.		
	Add line 12, columns (b), (d), and (e)	<u></u>			13	3,131	
	eet in line 13 instructions to verify calculati	ons )					
			hmant of Evan	nt Durnoss			
	Relationship of Activities to the						
Line No. E	Explain below how each activity for which is accomplishment of the foundation's exempt	ncome is report purposes (othe	ed in column (e) of er than by providing	Part XVI-A co funds for suc	ontributed importantly high purposes (See in	y to the istructions)	
M/A		-					
N/A							
N/A							
N/A							
IV/A							
IV/A							
N/A							
N/A							
N/A							
N/A							
N/A							
N/A							
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N/A							
N/A							

## Form 990-PF (2011) JAMES AND VIOLA LANE FOUNDATION 22-3087604 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	· · · · · · · · · · · · · · · · · · ·						Υe	s No
des	the organization direct cribed in section 501(c) ting to political organiz	) of the Code (other						.3 10
	nsfers from the reporting		noncharitable exempt	organization	of		_	
(1)	Cash					16	a (1)	Х
(2)	Other assets					1:	a (2)	X
<b>b</b> Oth	er transactions							
(1)	Sales of assets to a no	oncharitable exem	pt organization			11	b (1)	X
` '	Purchases of assets fr		, •	ı		11	b (2)	X
(3)	Rental of facilities, equ	uipment, or other a	issets				b (3)	X
` '	Reimbursement arrang					· · · · ·	b (4)	X
, ,	Loans or loan guarante					<u> </u>	b (5)	X
` '	Performance of service	•	•			<del> </del>	b (6)	X
<b>c</b> Sha	iring of facilities, equip	ment, mailing lists	, other assets, or paid	employees		10	<u>-                                    </u>	X
the	goods, other assets, or	r services aiven by	the reporting founda	tion If the fou	umn <b>(b)</b> should always should	n faır market valı	et value o ue in	of
(a) Line no			oncharitable exempt organia		(d) Description of transfers, tra		g arrangem	ents
N/A								
							_	
						<del></del>		<del></del>
								<del></del>
			<u> </u>		· · · · · · · · · · · · · · · · · · ·			
			··					
			· <u>-</u> .		·· ·			
							<u> </u>	
			-					
						<del></del>		
	he foundation directly c cribed in section 501(c 'es,' complete the follo		ed with, or related to, er than section 501(c)	one or more t (3)) or in sect	ax-exempt organizations ion 527?		Yes [	XNo
D II I	(a) Name of organization		(b) Type of orga	anization	(c) Descri	iption of relations		
N/A	(a) Name of organize	311011	( <b>2)</b> Typo or orgo	anization.	(0) 500011	p		
U	inder penalties of perjury, I dec orrect, and complete Declarati	clare that I have examine ion of preparer (other that	d this return, including accom in taxpayer) is based on all in	npanying schedule:	s and statements, and to the best on preparer has any knowledge	of my knowledge and b	elief, it is tr	rue,
Sign		0				Ma	y the IRS d	liscuss
Here	Dusin &	Lane-	1	)	TRUSTEE	pre	s return with eparer show	n below
	Signature of officer or trustee		Date		Title	(se	e instructio	No No
	Print/Type preparer's i	name	Preparer's signature		Date / / Cher	ck If PTIN		
Paid	RICHARD S.	WOODS		<u> </u>	4/22/11	ا ليا	19635	7
Prepare			INSKY, CPA'S,	PC	Firm's Ei			
Use On	II	41 SOUTH MA	IN STREET					
	<u></u>	ONEONTA, NY	13820		Phone no	(607) 43	32-346	52
BAA						For	m <b>990-P</b> l	<b>F</b> (2011)

2011 .	FEDERAL STATEMENTS	PAGE 1
CLIENT B3102	JAMES AND VIOLA LANE FOUNDATION	22-3087604
4/20/12  STATEMENT 1  FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		11 36AM
ACCOUNTING FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME  \$ 1,275. \$ 1,275. \$ 0.	(D) CHARITABLE PURPOSES  0.
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES		
EXCISE TAX ON INVESTMENT	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES		
BANK FEES FILING FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 45. 50. TOTAL \$ 95. \$ 0. \$ 0.	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 4 FORM 990-PF, PART II, LINE 100 INVESTMENTS - CORPORATE E	C BONDS	
CORPORATE BONDS BOND FUND OF AMERICA CLAS OPPENHEIMER INTL BOND FUN	<u>METHOD</u> <u>VALUE</u> S A COST \$ 40,008.\$	FAIR MARKET VALUE 36,483. 40,671. 77,154.
STATEMENT 5 FORM 990-PF, PART XV, LINE 2 APPLICATION SUBMISSION INF	A-D FORMATION	
NAME OF GRANT PROGRAM: NAME: CARE OF: STREET ADDRESS:	VIOLA LANE GLORIA MORRISON 4091 LUPINE PASS	

2011

### **FEDERAL STATEMENTS**

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### JAMES AND VIOLA LANE FOUNDATION

22-3087604

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### STATEMENT 5 (CONTINUED) FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

CITY, STATE, ZIP CODE:

LAKE WALES, FL 33898

TELEPHONE:

863 438-0667

FORM AND CONTENT:

N/A

SUBMISSION DEADLINES:

N/A

RESTRICTIONS ON AWARDS:

N/A

#### **STATEMENT 6** FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	A	MOUNT
AMERICAN HEART ASSOCIATION	NONE	N/A	SCIENTIFIC	\$	100.
,	NONE	14, 11	Detailitie	Ψ	100.
AUTISM SOCIETY OF AMERICA	NONE	N/A	SCIENTIFIC		100.
CARE	NONE	N/A	CHARITABLE		100.
MACULAR DEGENERATION RESEARCH	NONE	N/A	SCIENTIFIC		100.
MAKE A WISH FOUNDATION	NONE	N/A	CHARITABLE		100.
MARCH OF DIMES	NONE	N/A	SCIENTIFIC		100.
TOYS FOR TOTS	NONE	N/A	CHARITABLE		100.
FEEDING AMERICA	NONE	N/A	CHARITABLE		100.
NATIONAL WILDLIFE FEDERATION	NONE	N/A	SCIENTIFIC		100.
NEWPAPER WITH A HEART FUND	NONE	N/A	CHARITABLE		100.
PARALYZED VETERANS OF AMERICA	NONE	N/A	CHARITABLE		100.
PLANNED PARENTHOOD	NONE	N/A	SCIENTIFIC		50.

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4/20/12

### **FEDERAL STATEMENTS**

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### JAMES AND VIOLA LANE FOUNDATION

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STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AM	IOUNT
PARKINSONS RESEARCH FOUNDATION	NONE	N/A	SCIENTIFIC	\$	100.
SALVATION ARMY	NONE	N/A	CHARITABLE		100.
SHRINERS HOSPITAL FOR CHILDREN	NONE	N/A	SCIENTIFIC		100.
SMILE TRAIN	NONE	N/A	CHARITABLE		100.
ST JUDES RESEARCH HOSPITAL	NONE	N/A	SCIENTIFIC		100.
SOLDIERS ANGELS	NONE	N/A	CHARITABLE		100.
THE LEUKEMIA AND LYMPHOMA SOCIETY	NONE	N/A	SCIENTIFIC		100.
CHRISTOPHER & DANA REEVE FOUNDATION	NONE	N/A	CHARITABLE		100.
GIRLS & BOYS TOWN	NONE	N/A	CHARITABLE		50.
UNITED CEREBRAL PALSY	NONE	N/A	SCIENTIFIC		100.
ORLANDO UNION RESCUE MISSION	NONE	N/A	CHARITABLE		100.
CHRISTIAN APPALACHIAN PROJECT	NONE	N/A	CHARITABLE		100.
FLORIDA ASSOC. OF STATE TROOPERS	NONE	N/A	CHARITABLE		100.
SOUTHWEST INDIAN RELIEF COUNCIL	NONE	N/A	CHARITABLE		100.
HABITAT FOR HUMANITY	NONE	N/A	CHARITABLE		100.

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### **FEDERAL STATEMENTS**

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### JAMES AND VIOLA LANE FOUNDATION

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### STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT	
ASPCA	NONE	N/A	CHARITABLE	\$ 5	50.
HUMANE SOCIETY OF POLK CTY	NONE	N/A	CHARITABLE	5	50.
THE SUNSHINE FOUNDATION	NONE	N/A	CHARITABLE	5	50.
AMERICAN FOUNDATION FOR THE BLIND	NONE	N/A	CHARITABLE	10	0.
AMERICANS HELPING AMERICANS	NONE	N/A	CHARITABLE	5	50.
NATIONAL DIABETIC FUND	NONE	N/A	CHARITABLE	10	0.
ADOPT A PLATOON	NONE	N/A	CHARITABLE	10	00.
FEED THE CHILDREN	NONE	N/A	CHARITABLE	10	00.
AMERICAN RED CROSS	NONE	N/A	CHARITABLE	10	0.
EASTER SEALS	NONE			10	00.
ALZHEIMERS DISEASE RESEARCH	NONE			10	00.
NATIONAL ASSOCIATION CHIEFS OF POLICE	NONE			10	00.
FOOD FOR THE POOR	NONE			10	00.
COLLEGE OF THE OZARKS	NONE			10	00.
UNITARIAN UNIVERSALIST SOCIETY	NONE			10	00.
MDA	NONE			5	50.

2011 **FEDERAL STATEMENTS** PAGE 5 **CLIENT B3102** JAMES AND VIOLA LANE FOUNDATION 22-3087604 4/20/12 11 36AM STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR FOUND-PURPOSE OF DONEE ATION NAME AND ADDRESS RELATIONSHIP STATUS GRANT AMOUNT \$ 50. BRAILLE INSTITUTE NONE N/A CHARITABLE 50. HELP HOSPITALIZED VETERANS NONE TOTAL \$ 4,050.