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Form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

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

2011

OMB No 1545-0052

FOL	Jait	endar year 2011 or tax year beginning	, ai	na enaing				
Nam	e of t	oundation			A E	mployer identification nu	mber	
		NT GRANT PROGRAM INC.				22-3973	467	
Num	ber a	and street (or P O box number if mail is not delivered to street ad-	dress)	Room/suite	ВТ	elephone number (see inst	ructions)	
		EVEN GEER CPA 401 GILFORD AVE		BLDG 3		(603) 293-	0426	
City	or to	vn, state, and ZIP code			C if	exemption application is pe	ending, check here	▶ 🔲
GILF	OR	D	NH	03249				
G C	hec	ck all that apply: Initial return Initia	al return of a former p	oublic charity	D 1.	Foreign organizations, che	eck here	▶ 🔲
		☐ Final return ☐ Ame	ended return		2.	Foreign organizations mee	eting the 85% test.	
		Address change Nam	ne change			check here and attach cor		▶ 🔲
нс	hec	ck type of organization: X Section 501(c)(3) exe	mpt private foundation	on	E 14			
		tion 4947(a)(1) nonexempt charitable trust \(\bigcap \)	• •			private foundation status w nder section 507(b)(1)(A), c		▶□
		market value of all assets at end J Accounting	<u> </u>			the foundation is in a 60-m		
		ar (from Part II, col (c),	pecify)	i Accidai	7	nder section 507(b)(1)(B), c		▶ □
		16) ▶ \$ 84,285 (Part I, column (c		is)				
Part	1	Analysis of Revenue and Expenses (The total of	(a) Revenue and	-			(d) Disbursemer	
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net investm	ent	(c) Adjusted net	for charitable	
		the amounts in column (a) (see instructions))	books	income		income	purposes (cash basis only	v)
	1	Contributions, gifts, grants, etc , received (attach schedule)	35,000				, , , , , , , , , , , , , , , , , , , ,	
£'	2	Check ▶ if the foundation is not required to attach Sch B						
S 4 (%)	3	Interest on savings and temporary cash investments	552		552			
8	4	Dividends and interest from securities	0		0		Ey.	
0	5 a	Gross rents			0			
_ o	b	Net rental income or (loss)0			\Box	-0-11/1-0		
2	6 a	Net gain or (loss) from sale of assets not on line 10	0		V	CEIVED		
Revenue	b	Gross sales price for all assets on line 6a		(2)		S]
ୁଝ	7	Capital gain net income (from Part IV, line 2) .		1861	<u>A (0</u>			
الج	8	Net short-term capital gain		7-		190	-	
	9	Income modifications .			$\overline{\Delta}$	DOENT 1955		
125750		Gross sales less returns and allowances 0				שנים, שני		
őΙ		Less Cost of goods sold 0		-				
<u> </u>		Gross profit or (loss) (attach schedule)	0				-	
	1	Other income (attach schedule)	0		0	-		
-	2	Total. Add lines 1 through 11	35,552		<u>552</u>	0		
as i	3	Compensation of officers, directors, trustees, etc	0					
2]	4	Other employee salaries and wages .						
	5	Pension plans, employee benefits .						
_∐ ∐		Legal fees (attach schedule)	0		0	 	 	
Š		Accounting fees (attach schedule)	500		0			0
Operating and Administrative	7	Other professional fees (attach schedule) Interest	0		0	0		0
St	8	Taxes (attach schedule) (see instructions)	9		9	0		
ا ۱۳	9	Depreciation (attach schedule) and depletion	9		0		-	
튀	0	Occupancy						
ĕ 2		Travel, conferences, and meetings						
	2	Printing and publications				-		
E 2	3	Other expenses (attach schedule)	61		0	0		
. <u>⊑</u> 2	4	Total operating and administrative expenses.				<u> </u>		
Tat		Add lines 13 through 23	570		9	0		0
e 2	5	Contributions, gifts, grants paid	27,877			T Y	27	,877
0 2	6	Total expenses and disbursements. Add lines 24 and 25	28,447		9	0		,877
	7	Subtract line 26 from line 12	20,441				21	,.,
		Excess of revenue over expenses and disbursements .	7,105				•	
		Net investment income (if negative, enter -0-)			543			$\neg \neg$
		Adjusted net income (if negative, enter -0-)				0		

Dа	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End o	of year
<u>г</u> а	ir ii	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	77,180	84,285	84,285
	3	Accounts receivable ► 0		1	
		Less allowance for doubtful accounts	0	0	0
	4	Pledges receivable ▶ 0			
		Less allowance for doubtful accounts	0	0	0
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			•
		disqualified persons (attach schedule) (see instructions)	o	0	0
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts		0	0
Ś	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges .			
ĄS	10 a	Investments—U S and state government obligations (attach schedule)	0	0	0
		nvestments—corporate stock (attach schedule) .	0	0	0
		Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	0	0	0
	12	Investments—mortgage loans	-		······
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis ► 0			
	' -	Less accumulated depreciation (attach schedule) ▶ 0	0	0	0
	15	Other assets (describe)	0	0	
	16	Total assets (to be completed by all filers—see the			
	'	instructions Also, see page 1, item I)	77,180	84,285	84,285
	17	Accounts payable and accrued expenses	11,100	0.,100	- 3,,_33
	18	Grants payable			,
<u>ies</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
ap	21	Mortgages and other notes payable (attach schedule)	0	0	
⊐	22	Other liabilities (describe ►)	0	0	, ,
	23	Total liabilities (add lines 17 through 22)	0	0	
				-	,
es		Foundations that follow SFAS 117, check here . And complete lines 24 through 26 and lines 30 and 31.			· •
lances	24	Unrestricted			7 4 1
	1	Temporarily restricted			1,1
m	26	Permanently restricted		,	
Б	20	Foundations that do not follow SFAS 117, check here			a
교		and complete lines 27 through 31.			• ,
Net Assets or Fund Ba	27	Capital stock, trust principal, or current funds	o	0	
Š	28	Paid-in or capital surplus, or land, bldg, and equipment fund.			
sel	29	Retained earnings, accumulated income, endowment, or other funds	77,180	84,285	
As	30	Total net assets or fund balances (see instructions)	77,180		1
¥	31	Total liabilities and net assets/fund balances (see	77,100	04,200	'
Ž	"	instructions)	77,180	84,285	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	11,100	04,200	L
		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must saree with	<u> </u>	<u> </u>
•		of year figure reported on prior year's return)	So (musi agree will)		77,180
2		amount from Part I, line 27a			7,180
		r increases not included in line 2 (itemize)		3	7,105
		ines 1, 2, and 3		. 4	84,285
		passes not included in line 2 (itemize)	•	5	04,285
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, o	olumn (h) line 30	6	
•	· Juai	not assets of fund balances at one of year time 4 finites line special if, t	oranini (b), ilile oo		84,285

(a) List and describe th	e kind(s) of property sold (e.g., real es se, or common stock, 200 shs MLC C	tate,	(b) How acquired P—Purchase	(c) Date a	•	(d) Date sold
	se, or common stock, 200 shs wile c		D—Donation	(mo , da	y, y,)	(mo , day, yr)
<u>1a</u>				 -		
b c				-		· · · · · · · · · · · · · · · · · · ·
	···		- 	1		
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	st or other basis expense of sale		(h) Gain o	
a 0	0		(0
_ b 0	0			o		0
<u>c</u> 0	0			<u> </u>		0
<u>d</u> 0	0			<u> </u>		0
<u>e</u> 0	0	<u> </u>		9		0
Complete only for assets show	ving gain in column (h) and owne	1	 	_		h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any	COI	Losses (fron	ess than -0-) or
a 0	0				203363 (1101	0
b 0	0	 				0
<u>c</u> 0	0			0		0
d 0	0					0
e 0	0					0
2 Capital gain net income or		also enter in)*!!*	
· -	(it (loss)	, enter -0- in		2		0
· · · · · · · · · · · · · · · · · · ·	or (loss) as defined in section					
	line 8, column (c) (see instru		· · ·			0
Part V Qualification Un	dor Section 4040(a) for D			3		0
(For optional use by domestic						
If section 4940(d)(2) applies, I Was the foundation liable for t If "Yes," the foundation does n	he section 4942 tax on the disot qualify under section 4940	(e). Do not c	omplete this part			
	ount in each column for each	year; see th	e instructions before	re making a	ny entries	
(a) Base period years	(b)		(c)		Distrik	(d) oution ratio
Calendar year (or tax year beginning	n) Adjusted qualifying distribution	ons Net va	ue of noncharitable-use	assets		ided by col (c))
2010	4	3,991	8	31,124		0.542269
2009	**	4,711		4,680		0.598701
2008	2	6,262	<u> 5</u>	9,592		0.440697
2007						0.000000
2006						0 000000
				2	<u> </u>	1 581667
	undation has been in existend					0.527222
4 Enter the net value of none	charitable-use assets for 2011	I from Part X	, line 5	4		77,325
5 Multiply line 4 by line 3				. 5	<u> </u>	40,767
6 Enter 1% of net investmen	t income (1% of Part I, line 27	7b)		6_	ļ	5
7 Add lines 5 and 6				. 7		40,772
	ns from Part XII, line 4					27,877
If line 8 is equal to or great the Part VI instructions.	er than line 7, check the box	ın Part VI, lir	e 1b, and complet	e that part u	sing a 1%	tax rate. See

P	Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	-see	instru	tion	s)	
1	1 a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on	ine 1		*			
	Date of ruling or determination letter (attach copy of letter if necessary—see instruct		-			_'.	
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check	´ }	1			11	
	here ▶ ☐ and enter 1% of Part I, line 27b		•			,	
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	J		Er			
_	of Part I, line 12, col (b)						
2	(-)(-)	-)	2			0	
3			3			11	
4	territorio della compania della contra contr)-)	4				
5			5			11	
6			- · · ·	- 왕조기 - 원		- ,	
	a 2011 estimated tax payments and 2010 overpayment credited to 2011	0			-		
	b Exempt foreign organizations—tax withheld at source			** - Ş	٠,	: -	
	c Tax paid with application for extension of time to file (Form 8868) . 6c	0	* `		Ţ., .	· -	
_	d Backup withholding erroneously withheld						
	7 Total credits and payments Add lines 6a through 6d		7			0	
8			8			. 0	
9			9			11	
	10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .	>	10			0	
		funded >	11			0	
P	Part VII-A Statements Regarding Activities						
1	1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	ıt			· FJ	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		Χ
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate	enals					
	published or distributed by the foundation in connection with the activities						- 3°
	c Did the foundation file Form 1120-POL for this year?				1c		Χ
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				٠,	, ja	Ξũ,
	(1) On the foundation ▶ \$(2) On foundation managers ▶ \$, .		
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important	sed			ेरदर्		1 2
	on foundation managers \$				- 4.		
2	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				4		-
3	5 - , governing mentaling in						
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es	•		3		<u>X</u>
4	4 a 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		X
5	,, ,,,				5	, 	X
c	If "Yes," attach the statement required by General Instruction T				T		
6	the me requirement of control of the meagn to the management of the meagn to the control of the meagn to the control of the meagn to the control of the cont				4° F.	, î	1
	By language in the governing instrument, or Ry state logislation that off advisely arranged the appropriate production of the control of the contr				- **	,'	-,-
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the government and the state law remains in the government.						
7	that conflict with the state law remain in the governing instrument?				6	Х	
7 ጸ	7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part 8 a Enter the states to which the foundation reports or with which it is registered (see instructions)	ı, coi (c), a	ına Pa	iπXV	7	Х	
J	FL				, #	ا بر ا	
	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney				ر <u>:</u> ا		_
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation					-	لـــا
9		(2)			8b	Х	
9	or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)	• •		ŀ			
	complete Part XIV	rii Yes,"			_	.	v
10	10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing		•	ŀ	9_		<u> </u>
. 5	their names and addresses				40	, ,	
_	unon manoo unu uuurooses		•	<u>·</u>	10	Х	

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ n/a			
14	The books are in care of ► Steven E. Geer, CPA Telephone no ► 603-293-04	26		
	Located at ► 401 Gilford Ave, Building 3 Gilford NH ZIP+4 ► 03249			
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		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country	- '	£, k	
Pa	rt 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)		,	٠.
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		F	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	اري الخاص ساري مستحص		,
	a disqualified person? Yes X No	je	·	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	7.7	3′⊃ ₂ γι ' _ *	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . Yes X No	- 34 - 31	· ·	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period	填		,
L	after termination of government service, if terminating within 90 days)		, '	
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	41-	NI/A	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	N/A	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	-/	- , (- <u> , (</u>	
2	that were not corrected before the first day of the tax year beginning in 2011? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c		X
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	7 4 3 7 2 4	1970	;
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?	- 1.07	- 12 /s	
	If "Yes," list the years 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)		,-+ <u>.</u> *	
	to all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	"	· 34	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business		* ,	,
Ja	enterprise at any time during the year? Yes X No	, Marci	, ,, ,==	- F
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation	37	, ē	
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved		. ,	ļ Ī
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)		. •	7.1
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine		<u>;</u> }	
_	if the foundation had excess business holdings in 2011)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	,	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable			
	purpose that had not been removed from leopardy before the first day of the tax year beginning in 2011?	1 4h l		Y

Pa	rt VII-	B Statements Regarding Activities	es fo	r Which Form	47	20 May Be Re	quire	d (continued)				
5a	During	the year did the foundation pay or incur any	amo	unt to								
	(1)	Carry on propaganda, or otherwise attempt to	o influ	ence legislation (s	ect	ion 4945(e))?		Yes	X	lo 🗼		
	(2)	influence the outcome of any specific public	election	on (see section 49	55)	, or to carry				, v	7-4	1
		on, directly or indirectly, any voter registration	n drive	e? `				· Yes	X	10	,,,	
	(3)	Provide a grant to an individual for travel, stu	dy, or	other similar purp	ose	es?		X Yes		lo		
		Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section 494		_				· Yes	X	lo	-,	
	(5)	Provide for any purpose other than religious, educational purposes, or for the prevention o	chari	table, scientific, lite	erar	y, or		Yes		lo l	, ,	
h		answer is "Yes" to 5a(1)–(5), did any of the t		•			ns desc			•	· ·	
-		ations section 53 4945 or in a current notice								5b	<u> </u>	X
		izations relying on a current notice regarding	_	=			,	•	\Box			
С	_	answer is "Yes" to question 5a(4), does the fo							ш			
	tax be	cause it maintained expenditure responsibilit	y for t	the grant? .				. Yes	X	10		
_		s," attach the statement required by Regulation		•	•						1	
6a		e foundation, during the year, receive any fur	nds, d	lirectly or indirectly	/, to	pay		г	Ѿ.	.		
	•	ums on a personal benefit contract?					· ·	Yes	X		 	
D		e foundation, during the year, pay premiums, " to 6b, file Form 8870	, direc	ctly or indirectly, or	naı	personal benefit c	ontract	·		6b	: 1	X
7a	At any	time during the tax year, was the foundation	n a pa	rty to a prohibited	tax	shelter transactio	n?	Yes	X	۱o <u> </u>		
b	If "Yes	s," did the foundation receive any proceeds o		-						7b	l	X
P	art VI	Information About Officers,	Dire	ectors, Truste	es,	Foundation !	Manag	gers, Highly	Paid	Employ	rees,	
		and Contractors										
1	List a	Ill officers, directors, trustees, found							s).			
		(a) Name and address	l `í	Title, and average nours per week evoted to position		r) Compensation f not paid, enter -0-)	emp) Contributions to bloyee benefit plans eferred compensati		(e) Exper	ise acco	
Wil	liam F	. Pretsch	-	President								
122	Sincl	air SW Port Charlotte FL 33952		.00		0			0			0
Nor	ma Pr	etsch	Vice	-President								
122	Sincl	air SW Port Charlotte FL 33952		.00		0			0	·		0
		(Co-President/Secretary/Treasurer) ry Valley Gilford NH 03249	see	name .00		o			o			0
		lacCracken	Dire	ctor								
506	5 Gin	ger Circle Memphis TN 38118		.00		0			0			0
2		pensation of five highest-paid employ "NONE."	yees	(other than tho	se	included on lir	ne 1—s	see instructio	ns). If	none,		
(a)	Name a	and address of each employee paid more than \$50,	000	(b) Title, and average hours per week devoted to position	•	(c) Compensatio	n	(d) Contributions in employee benefit plans and deferre compensation	t	(e) Exper other a	nse acco	
NO	NE											
			· ·									
											•••	
		ther of other employees naid over \$50 (^^^						- I			

Form \$90-PF (2011) STUDENT GRANT PROGRAM INC.	22-39/346/ Page	1
Part VIII Information About Officers, Directors, Trustees, Foundation Ma	nagers, Highly Paid Employees,	
and Contractors (continued)		_
3 Five highest-paid independent contractors for professional services (see instructions). If n	one, enter "NONE."	
	e of service (c) Compensation	
NONE		
		0
		0
		0
		0
		0
Total number of others receiving over \$50,000 for professional services		
		_
Part IX-A Summary of Direct Charitable Activities		
List the foundation's faur largest direct shortable activities during the lay year leaked relevant statistical information	- I	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses	
1 The organization's charitable activity is to provide scholarships to students from families	of	_
General mond		
ilianciai need.		
	27,87	<u> </u>
2		
•		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	
1 n/a		

2	797-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	_
All other program-related investments See instructions		_
3		
×		
		_

Total. Add lines 1 through 3

Pai	Minimum Investment Return (All domestic foundations must complete this part. Foreigr see instructions.)	n foundation	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	25°	
	purposes		
а	Average monthly fair market value of securities	1a	78,503
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	78,503
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	78,503
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see		4 470
_	Instructions)	4	1,178
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	77,325
6	Minimum investment return. Enter 5% of line 5		3,866
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this part.)	141	0.000
1	Minimum investment return from Part X, line 6	1 H.	3,866
2a			
b	Income tax for 2011 (This does not include the tax from Part VI)		4.4
C	Add lines 2a and 2b	2c	11
3	Distributable amount before adjustments Subtract line 2c from line 1	3	3,855
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	3,855
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	_	
	line 1	7	3,855
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	27,877
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	S. 4.35	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	27,877
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		• • • • • • • • • • • • • • • • • • • •
	income Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,877
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four		
	qualifies for the section 4940(e) reduction of tax in those years		

Lanc	Am Chaistribatea mcor	ne (see manuchons)	······································			
1	Distributable amount for 2011 fi	rom Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				·	3,855
2	Undistributed income, if any, as	of the end of 2011				
а	Enter amount for 2010 only				0	
b	Total for prior years 20,	, 20, 20		0		
3	Excess distributions carryover,	if any, to 2011				
а	From 2006	0				
b	From 2007	0	Ì			
С	From 2008	23,326				
d	From 2009	41,021				
e	From 2010	39,953		•		
f	Total of lines 3a through e	00,00	104,300			
4	Qualifying distributions for 2011	from Part	101,000			
•	XII, line 4 > \$	27,877				
9	Applied to 2010, but not more ti				0	
	Applied to undistributed income		·····			
		· · · · · · · · · · · · · · · · · · ·		o		
_	(Election required—see instruct Treated as distributions out of c					
C		orbas (Election	ړ	-		
	required—see instructions)		0			0.055
d	• • • • • • • • • • • • • • • • • • • •		04.000		<u> </u>	3,855
	Remaining amount distributed of		24,022			
5	Excess distributions carryover a	``	0	· · · · · · · · · · · · · · · · · · ·		0
	(If an amount appears in column					
_	same amount must be shown in					
6	Enter the net total of each col	lumn as			_	`
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e		128,322	· -		
b	Prior years' undistributed incom	e Subtract				
	line 4b from line 2b .			0	-	
С	Enter the amount of prior years	' undistributed	1			
	income for which a notice of de-	ficiency has	1			
	been issued, or on which the se	ection 4942(a)				
	tax has been previously assess	ed .				
d	Subtract line 6c from line 6b Ta	axable				
	amount—see instructions	•		0		
е	Undistributed income for 2010.	Subtract line				
	4a from line 2a Taxable amoun	nt—see		i		'
	instructions				0	
f	Undistributed income for 2011	Subtract			·	
	lines 4d and 5 from line 1 This	amount must	}			
	be distributed in 2012		1			0
7	Amounts treated as distributions	s out of				
	corpus to satisfy requirements i	mposed by	1			
	section 170(b)(1)(F) or 4942(g)(,				
8	Excess distributions carryover fi		-			
-	not applied on line 5 or line 7 (s		o			
9	Excess distributions carryove	· · · · · · · · · · · · · · · · · · ·				
-	Subtract lines 7 and 8 from line		128,322	1		1
10	Analysis of line 9		120,322		·	
	•	ام				
a	Excess from 2007	0				
D	Excess from 2008	23,326	ļ		·	
C	Excess from 2009	41,021				
d	Excess from 2010	39,953				İ
<u>е</u>	Excess from 2011 .	24,022				

	n 990-PF (2011) STUDENT GRANT PROGR				22-397	
Pa	rt XIV Private Operating Foundations (s	see instructions ai	nd Part VII-A, q	uestion 9)		N/A
1 a	If the foundation has received a ruling or determin foundation, and the ruling is effective for 2011, entitle of the control o			>		
	Check box to indicate whether the foundation is a	private operating foun	ndation described in	n section	4942(j)(3) or	4942(J)(5)
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	year listed	0	0	0	0	0
	85% of line 2a	0	0	0	0	0
C	Qualifying distributions from Part XII, line 4 for each year listed	0	0	0	0	0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	0	0	0	0	0
С	"Support" alternative test—enter	T		<u>_</u>		
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization		, <u>, , , , , , , , , , , , , , , , , , </u>			0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Co	mplete this part	only if the fou	ndation had \$5,	000 or more in	
	assets at any time during the ye	ar-see instruct	ions.)			
	Information Regarding Foundation Managers of the foundation who have conbefore the close of any tax year (but only if they have	ntributed more than 29		•	the foundation	
	liam Pretsch					
	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which				ortion of the	
<u>NO</u>	INE Information Regarding Contribution, Grar	nt Gift Loan Scho	plarshin etc. Pr	rograms:		
_	Check here If the foundation only makes unsolicited requests for funds. If the foundation mother conditions, complete items 2a, b, c, and d.	contributions to pres	elected charitable	organizations and do	es not accept anizations under	
a	The name, address, and telephone number of the	person to whom appl	ications should be	addressed	·	·
	0 404 004 14 500 500 500					
	a Geer 401 Gilford Ave, Bldg 3 Gilford NH 032 The form in which applications should be submitte			ould include		
	ase write to request application forms Any submission deadlines					
N/A						
d	Any restrictions or limitations on awards, such as factors	by geographical areas	s, charitable fields,	kınds of ınstitutions,	or other	
Lim	ited to students from families in Charlotte Cou	unty, FL and Shelby	County, TN.			

22-3973467

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year

Name and address (home or business) a Paid during the year Charleston Bros High School Systom Wahut Grove Memphis TN 38 120 Estaos Biale College 2500 Aippert Messaspin Statu University FO Box 5328 Missaspin Statu University FO Box 5328 Cordovar TN 38016 St. Charles Bormene School 21505 Augusta Ave Port Charlotte FL 33952 Total Total Total Purpose of grant or contribution or contribution of contribution of contribution of contribution of contribution of contribution. Tuttion, fees, and books 744 Tuttion, fees, and books 748 Tuttion, fees, and books 748 Tuttion, fees, and books 749 Tuttion, fees, and books 749 Tuttion, fees, and books 740 Tu	3 Grants and Contributions Paid During		for Future	Payment	
Name and address (home of business) a Paid during the year Christian Bros High School 5900 Walnut Grove Memphis TN 38120 Edison State College 28300 Alprot Rd Punta Gorde FL 33950 Mississipil State University PO Box 5232 Mississipil State MN 39762 St. Benedict at Abundrale School 8250 Vanavas Cordova TN 38016 St. Charles Borromeo School 21505 Augusta Ave Port Charlotte FL 33952 Total Total Total Paperved for future payment	Recipient				Amount
a Paid during the year Christian Bros High School 5900 Wahrut Grove Memphis TN 38120 Edison State College 2800 Airport Rd Punts Gorda FL 33990 Missassippl State MS 39762 St. Senedict at Auburndale School 8250 Variansa Cordova TN 38016 St. Chaires Borromeo School 215096 Augusta Ave Port Charlotte FL 33952 Total Tutton, fees, and books 4,111 Tutton, fees, and books 744 4,867 Tutton, fees, and books 74,867 Tutton, fees, and book	Name and address (home or business)			contribution	
Edison State College 28300 Airport Rd Punta Gorda FL 33950 Missassippl State University PO Box 5328 Missassippl State University PO Box 5328 Missassippl State University PO Box 5328 Missassippl State MS 39762 St. Benedict at Aubumdale School 8250 Vanaveas Cordova TN 39016 St. Charles Borromeo School 21505 Augusta Ave Port Charlotte FL 33952 Tutton, fees, and books 14,550 Tutton, fees, and books 14,550 Tutton, fees, and books 2,802 Tutton, fees, and books 14,550 Approved for future payment	a Paid during the year Christian Bros High School 5900 Walnut Grove			Tuition, fees, and books	4,111
Missasippi State University PO Box 5328 Missasippi State MS 39762 St. Benedict at Aubumdale School 8250 Vamavas Cordova TN 38016 St. Charles Boromee School 21505 Augusta Ave Port Charlotte FL 33952 Total Total Total Approved for future payment Total Approved for future payment	Memphis TN 38120 Edison State College 26300 Airport Rd			Tuition, fees, and books	744
St. Benedict at Auburans St. Benedict at Auburans St. Charles Borromeo School St. Charles Borromeo School Turtion, fees, and books Turtion, fees, and books 14,550 Turtion, fees, and books 14,550 Turtion, fees, and books 14,550 Turtion, fees, and books 27,877 Total Total D Approved for future payment	Mississippi State University PO Box 5328			Tuition, fees, and books	4,867
Total ▶ 3a 27,877 b Approved for future payment	St. Benedict at Auburndale School 8250 Varnavas Cordova TN 38016			Tuition, fees, and books	3,605
b Approved for future payment	St. Charles Borromeo School 21505 Augusta Ave Port Charlotte FL 33952			Tuition, fees, and books	14,550
b Approved for future payment					
b Approved for future payment					
b Approved for future payment					
b Approved for future payment					
b Approved for future payment					
b Approved for future payment	Total		I	▶ 3a	27 877
	b Approved for future payment				
	Total	· · · · · · · · · · · · · · · · · · ·		▶ 3 b	0

Form 990-PF (2011) STUDENT GRANT PROGRAM INC.

iter gross amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by section	n 512, 513, or 514	(e)
I Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a		0		0	0
b	-	0		0	
c		0		0	С
d		0		0	C
e		0		0	
f		0		0	C
g Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash investments			14	552	
Dividends and interest from securities					
Net rental income or (loss) from real estate	्रे प्रदेश है । इस्ति है	は、大学の	生物 四月本	4.校后 案员	
a Debt-financed property					
b Not debt-financed property	1				
Net rental income or (loss) from personal property					
7 Other investment income			<u> </u>		
3 Gain or (loss) from sales of assets other than inventory				0	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue: a	_	. 0		0	(
b		0		0	-
C		0	•	0	
d	_	.0		0	
_		0		l o	1 (
e				<u> </u>	
Subtotal Add columns (b), (d), and (e)	Br. Bry B. H.		SPECIAL CONTROL	552	C
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	15 x 33 sy 28 c. 30.			<u> </u>	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations)	٠	0	23 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m	552	(
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Ad	complishment	of Exempt P	urposes	552 13	(
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations)	complishment	of Exempt P	urposes VI-A contributed แ	552	55:
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Address No. Explain below how each activity for which income	complishment	of Exempt P	urposes VI-A contributed แ	552	55:
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Address No. Explain below how each activity for which income	complishment	of Exempt P	urposes VI-A contributed แ	552	55:
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Adne No. Explain below how each activity for which income	complishment	of Exempt P	urposes VI-A contributed แ	552	55:
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Adne No. Explain below how each activity for which income	complishment	of Exempt P	urposes VI-A contributed แ	552	55.
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Address of the Address	complishment	of Exempt P	urposes VI-A contributed แ	552	55.
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Address of the Address	complishment	of Exempt P	urposes VI-A contributed แ	552	55.
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) Int XVI-B Relationship of Activities to the Address of the Address	complishment	of Exempt P	urposes VI-A contributed แ	552	55.
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Address of the Address	complishment	of Exempt P	urposes VI-A contributed แ	552	55:
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Address of the Address	complishment	of Exempt P	urposes VI-A contributed แ	552	55:
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Address of the Address	complishment	of Exempt P	urposes VI-A contributed แ	552	55.
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Adne No. Explain below how each activity for which income	complishment	of Exempt P	urposes VI-A contributed แ	552	55:
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Adne No. Explain below how each activity for which income	complishment	of Exempt P	urposes VI-A contributed แ	552	552
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Address No. Explain below how each activity for which income	complishment	of Exempt P	urposes VI-A contributed แ	552	552
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations) art XVI-B Relationship of Activities to the Addine No. Explain below how each activity for which income	complishment	of Exempt P	urposes VI-A contributed แ	552	552

Form 990-PF (2011) STUDENT GRANT PROGRAM INC. 22-3973467 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1		organization directly on 501(c) of the Code tions?							Yes	No
b	Transfers (1) Cash (2) Other Other tra (1) Sale: (2) Purc (3) Rent (4) Reim (5) Loan (6) Perfc Sharing of If the ans value of	s from the reporting for assets ansactions: s of assets to a nonce hases of assets from the facilities, equipments or loan guarantees for facilities, equipments of facilities of facili	charitable exemalar a noncharita ment, or othe ments . s or membersh nt, mailing lis ove is "Yes," ets. or servic	empt organizati able exempt or er assets 	on	s	in (b) should alw	ays show the f	n fair market	X X X X X X X
(a)	Line no	(b) Amount involved	(c) Name	of noncharitable exe	empt organization	(d) De	scription of transfers,	transactions, and s	haring arrangem	ents
	-	0					•			
		0								
		0								
		0								
		0		 						
		0								
		0								
		0								
		O			· · · · · · · · · · · · · · · · · ·			 		
		0								
		0				+		·		
		0								
		0	· · · · · · · · · · · · · · · · · · ·							
		0								
		0					· · · · · · · · · · · · · · · · · · ·			
	describe	undation directly or in d in section 501(c) o complete the followin	f the Code (c	ated with, or re other than secti	lated to, one on to	or more tax-or in section	exempt organiza 527?	tions	Yes X No	
		(a) Name of organization		(b) T	ype of organization	on	(c)	Description of relati	ionship	
				-			 			
Sid		r penalties of perjury, I declare th ct, and complete Declaration of p							ue, discuss this retu	
	re	aparture of officer or trustee	Deer	8/1/20	12 Tre	asurer		•	arer shown below	
_		Print/Type preparer's na		Preparent signatu			Date		PTIN	
Pa	id	Typo proparor a na		1000	1/0-	COA	-	Check X if	""	
	eparer	Steven Geer		() were.	Hell.	GP	8/1/2012	self-employed	P00705075)
	e Only	Firm's name ► Ste	ven E. Geer,	CPA	1/			Firm's EIN ► 2	20-8174547	
<u> </u>	- Ciny	Firm's address ► 401	Gilford Ave	, Bldg. 3, Gilfo	rd, NH 03249				3) 293-0426	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

OMB No 1545-0047

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

Employer identification number

STUDENT GRANT PROGRA	M INC.	22-3973467					
Organization type (check on	e):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation					
	527 political organization						
Form 990-PF X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ion					
	501(c)(3) taxable private foundation						
• •	covered by the General Rule or a Special Rule . '), (8), or (10) organization can check boxes for both the General Rule ar	nd a Special Rule. See					
General Rule							
	ling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 te contributor. Complete Parts I and II.	or more (in money or					
Special Rules							
sections 509(a)(1) an	3) organization filing Form 990 or 990-EZ that met the 33 1/3% support to d 170(b)(1)(A)(vi) and received from any one contributor, during the year % of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, li	r, a contribution of the greater					
the year, total contrib	7), (8), or (10) organization filing Form 990 or 990-EZ that received from utions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, so, or the prevention of cruelty to children or animals. Complete Parts I, II,	scientific, literary, or					
the year, contribution total to more than \$1, year for an exclusivel applies to this organia	7), (8), or (10) organization filing Form 990 or 990-EZ that received from s for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions is checked, enter here the total contributions that were received religious, charitable, etc., purpose. Do not complete any of the parts uncation because it received nonexclusively religious, charitable, etc., contributions.	ontributions did not eceived during the nless the General Rule ributions of \$5,000 or more					
	t is not covered by the General Rule and/or the Special Rules does not fi st answer "No" on Part IV, line 2, of its Form 990; or check the box on line						

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).

Name of organization Employer identification number STUDENT GRANT PROGRAM INC. 22-3973467

Part I	Contributors (see instructions). Use duplicate copies	pies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1	William F. Pretsch 122 Sinclair SW Port Charlotte FL 33952 Foreign State or Province Foreign Country.	\$35,000	Person X Payroll					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
2	Foreign State or Province Foreign Country.	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
3	Foreign State or Province. Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
4	Foreign State or Province Foreign Country	\$0	Person Payroll Oncash (Complete Part II if there is a noncash contribution)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
5	Foreign State or Province Foreign Country	\$0	Person Payroll Oncash (Complete Part II if there is a noncash contribution)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
6	Foreign State or Province ⁻ Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)					

Name of organization
STUDENT GRANT PROGRAM INC.

Employer identification number 22-3973467

Part II	Noncash Property (see instructions). Use duplicate co	pies of Part II if additional spa	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$o	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u>o</u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u>o</u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u>o</u>	

Name of org	ganization GRANT PROGRAM INC				Employer identification number 22-3973467					
Part III	Exclusively religious, charitable, etc., total more than \$1,000 for the year. Cor				(7), (8), or (10) organizations					
	For organizations completing Part III, enter the total of <i>exclusively</i> religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) > \$ Use duplicate copies of Part III if additional space is needed.									
(a) No. from Part I	(b) Purpose of gift	(c)) Use of gift	d) Description of how gift is held						
		(e) T	ransfer of gift	•						
	Transferee's name, address, and		Relationsh	ip of	transferor to transferee					
(a) No.	For Prov Country		<u> </u>	Τ						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) T	ransfer of gift							
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of	transferor to transferee					
	For. Prov Country									
(a) No. from Part I	(b) Purpose of gift	(c	(c) Use of gift		(d) Description of how gift is held					
	•••••									
	(e) Transfer of gift									
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee									
	For Prov Country									
(a) No. from Part I	(b) Purpose of gift	(с) Use of gift	(d) Description of how gift is held					
		(e) T	ransfer of gift							
	Transferee's name, address, and	ZIP + 4	Relationsh	elationship of transferor to transferee						
					•••••					
	For Prov Country									

STUDENT GRANT PROGRAM INC.	22-3973467
STATEMENT 1 - List of Substantial Contributors	. <u></u>
1. William F. Pretsch, 122 SW Sinclair, Port Charlotte, FL 33952	

Line 16b (990-PF) - Accounting Fees

0	Disbursements for Charitable	Purposes (Cash Basis Only)										
0		Şet										
		Adjusted Net Income										
0		ŧ						_				
		Net Investment Income										
200	pu	Jec .	200									
	Revenue and	Expenses per Books										
		Name of Organization or Person Providing Service	Steven E. Geer, CPA									
			1	2	3	4	2	9	7	8	6	10

Line 18 (990-PF) - Taxes

STUDENT GRANT PROGRAM INC

0		Г	<u> </u>		1				I		
	Disbursements for Charitable Purposes										
0	9										
	Adjusted Net Income										
6	ent		6								
	Net Investment Income										
6	se		တ								
	Revenue and Expenses per Books										
	Description		Tax on investment income	Income tax							
Ī		1	2	3	4	2	9	7	8	6	10

Line 23 (990-PF) - Other Expenses

STUDENT GRANT PROGRAM INC.

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

ge										
Average Hours										
Title	Co-President	/ice-Presiden	see name	Director						
Foreign Country										
Zip Code	33952	33952	NH 03249	38118						
State	FL	근	돌	Z						
City	Port Charlotte	Port Charlotte	Gilford	Memphis						
	122 Sinclaır SW	122 Sinclair SW	663 Cherry Valley	5065 Ginger Circle						
Check "X" if Business										
Name	William F. Pretsch	Norma Pretsch	Lisa Geer (Co-President/Secre	Charles MacCracken						
	-	2	3	4	5	9	7	8	6	10

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1	ı

STUDENT GRANT PROGRAM INC

	Explanation										
0	Expense Account										
0	Benefits										
0	Compensation										
·		1	2	3	4	5	9	7	8	6	10

- List of Substantial Contributors	
etsch, 122 SW Sinclair, Port Charlotte, FL 33952	
	1 - List of Substantial Contributors etsch, 122 SW Sinclair, Port Charlotte, FL 33952