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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.

OMB No 1545-0052

For calendar year 2011 or tax year beginning , and ending Name of foundation A Employer identification number THE MUKAIYAMA-RICE FOUNDATION C/O LANCE EASTMAN 23-2949160 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 199 BOLIVAR DR (814)-362-5536 City or town, state, and ZIP code C if exemption application is pending, check here BRADFORD, PA 16701 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E if private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 3,481,584. (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income 18,225 N/A Contributions, gifts, grants, etc., received 2 Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments ,779 3,779 Statement 71,876 71,876 Statement Dividends and interest from securities 5a Gross rents March 1881 B b Net rental income or (loss) <4,72441 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0. Thus ST 7 Capital gain net income (from Part IV, line 2) `.x 8 Net short-term capital gain J, **8** 9 Income modifications 10a Gross sales less returns and allowances SCANNED MAY Źź ** b Less Cost of goods sold c Gross profit or (loss) 11 Other income 89,156 75,655 ڼ 12 Total. Add lines 1 through 11 13 Compensation of officers, directors trustees
14 Other employee salarids and wages <u>o.</u> 15 Pension plans employee benefits Administrative Expenses 16a Legal fees-1,000. <u>500.</u> 500. b Accounting fees c Other professional fees 17 Interes Stmt 4 2,920 1,638 15. 18 Taxes Depreciation and depletion 19 20 Occupancy Travel, conferences, and meetings Operating and 22 Printing and publications Stmt 5 4,383. 3,123. 1,260. 23 Other expenses 24 Total operating and administrative 8,303 1,775. 5,261 expenses. Add lines 13 through 23 139,687. 25 Contributions, gifts, grants paid 139,687. 26 Total expenses and disbursements. 147,990. 141,462. Add lines 24 and 25 5,261 27 Subtract line 26 from line 12: <58,834. 8 Excess of revenue over expenses and disbursements 70,394. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions. Form-**990-PF** (2011)

23-2949160 Page 2

Cach - non-interest-bearing Cach		_	Attached schedules and amounts to the description	Beginning of year	End	of year
Cash - non-interest-bearing 1.0	P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			
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			·	 አኒቲያውስ ሮጳፒክ /፣		
5 Decreases not included in line 2 (itemize) ► CHANGE IN UNREALIZED GAIN (LOSS) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 3,481,584.						
Form 990-PF (2011)	<u> </u>		not access or raine balances at one of your fine 4 milios line of - Falt II, of	oranin (D), into 30		

Page 3

	and Losses for Tax on I		Income				 	
(a) List and descr 2-story brick wa	(b) H P - D -	ow acquir Purchase Donation	red (d	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)			
1a VANGUARD TOT S'	TOCK IX ADMIRAL	 		┢	P		arious	10/25/11
b VANGUARD TOTAL	STOCK MKT IDX A	ADM			P		arious	10/25/11
c VANGUARD CAP GAIN DIST						V	arious	12/31/11
đ								
_e				Ц,				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or (los: (e) plus (f) minus	(g)
a 53,000.			56,62					<3,628.
ь 79,000.		<u> </u>	84,66	5.				<5,665.
<u>c</u>		<u> </u>		 }				4,569.
d								
Complete only for assets shown	g gain in column (h) and owned by	the foundation	on 12/21/60				lana (Oal (b) and	
Complete only for assets showin							iains (Col. (h) gaii (), but not less tha	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any	İ			osses (from col.	
		1		\dashv				<3,628.
a b		+		-+				<5,665.
C								4,569.
d		 						
e		 		_				
	∫ If gain, also ente	ar in Part I lina		7				
2 Capital gain net income or (net ca				- } [2			<4,724.
3 Net short-term capital gain or (los				1				
If gain, also enter in Part I, line 8,	, , ,	u (0).		J				
If (loss), enter -0- in Part I, line 8				<u>J</u>	3		N/A	<u> </u>
Part V Qualification U	nder Section 4940(e) fo	r Reduced	Tax on Net	t Inve	estmer	nt Inco	me	
Was the foundation liable for the sect	ify under section 4940(e). Do not c	omplete this pa	rt.		·	·		Yes X No
1 Enter the appropriate amount in (a)		ructions before	making any enuri					(0)
Base periód years Calendar year (or tax year beginnir			Net value of no		ritable-use assets (col. (b) divided by col. (c))			
2010		25,125.				605.	ļ	.043467
2009		42,119.				484.		.056118
2008		35,199. 53,957.				744. 757.		.015587
2007		31,669.			687,		 	.089943
2008		11,000.			007,	332.	 	1000043
2 Total of line 1, column (d)							2	.251468
3 Average distribution ratio for the 5	5-vear hase period - divide the total	on line 2 by 5	or by the number	of vea	rs	-		
the foundation has been in exister		on mic z by o,	or by the number	oi yea			3	.050294
Ioonaanon nao boon in oniotoi		•					 	
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5				4	3,638,531.			
		,		•				
Multiply line 4 by line 3				5	182,996.			
6 Enter 1% of net investment income (1% of Part I, line 27b)					6	704.		
Add lines 5 and 6						7	183,700.	
8 Enter qualifying distributions from Part XII, line 4					8	141,462.		
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.								
See the Part VI instructions.								
193591 19,09,11								Form 990-PF (2011)

THE MUKAIYAMA-RICE FOUNDATION

Form 990-PF (2011) C/O LANCE EASTMAN		23-294			Page 4
Part VI Excise Tax Based on Investment Income (Section 494		948 - se	e instru	ction	าร)
1a Exempt operating foundations described in section 4940(d)(2), check here and e	1	1 1.			{
Date of ruling or determination letter: (attach copy of letter if ne		ļ			لـــــا
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1 1		1,4	08.
of Part I, line 27b					}
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49			······································		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -0-)	2		-	<u>0.</u>
3 Add lines 1 and 2		3		1,4	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	4			$\frac{0}{20}$
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		1,4	08.
6 Credits/Payments:	1 . 1 . 4 400	1.	*	*	
a 2011 estimated tax payments and 2010 overpayment credited to 2011	6a 1,120.	1			
b Exempt foreign organizations - tax withheld at source	6b	\$1 L	. "	*	Ş
c Tax paid with application for extension of time to file (Form 8868)	6c] ,			
d Backup withholding erroneously withheld	6d				~~_
7 Total credits and payments. Add lines 6a through 6d		7		1,1	<u> 20.</u>
8 Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is atta	ached	8			~~
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			88.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	la a sa	10			
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax	Refunded▶	11			
Part VII-A Statements Regarding Activities			- [V	
1a During the tax year, did the foundation attempt to influence any national, state, or local legi	siation or did it participate or intervent	e in	3	Yes	X
any political campaign?	/		1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo			1b	1 20	<u> </u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an	nd copies of any materials publish	ea or			1
distributed by the foundation in connection with the activities.					X
c Did the foundation file Form 1120-POL for this year?			1c		<u> </u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the				*	,
(1) On the foundation. \$\(\begin{align*}		-		***	
 e Enter the reimbursement (if any) paid by the foundation during the year for political expendence managers. ► \$ 	mure tax imposed on foundation			,	,1
2 Has the foundation engaged in any activities that have not previously been reported to the	IDea		2		X
If "Yes," attach a detailed description of the activities.	ino		<u> </u>		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument articles of incorporation	nr.	16.	, ',	, >†
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		וע	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?	ai :	N/A	4b		<u> </u>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	2	11/11	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 6	oither:				
By language in the governing instrument, or			,	,	
By state legislation that effectively amends the governing instrument so that no mandato	ny directions that conflict with the stat	e law			
remain in the governing instrument?	Ty directions that connet with the said	o iam	6	X	ــــا
7 Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
If "Yes," complete Part II, col (c), and Part XV.			- 		
8a Enter the states to which the foundation reports or with which it is registered (see instruction	nns) 🕨				
PA			-		
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					
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar					
year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV					
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a sched	-	_	10		X

Form **990-PF** (2011)

4a

X

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2011.)

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

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

(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other
		compensation	allowances
	 		L
		ļ.————	
	1		

Form **990-PF** (2011)

Information About Officers, Directors, Trustees, Foundation Managers, Hig Paid Employees, and Contractors (continued)	hly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of	service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Partix: Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ĺ	Expenses
		<u> </u>
1 N/A		
2		
3		
<u> </u>		
4		·····
Part X:B Summary of Program-Related Investments		
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		0.

Page 8

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	3,496,632.
b	Average of monthly cash balances	1b	3,496,632. 197,308.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	3,693,940.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,693,940.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	55,409.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,638,531.
6_	Minimum investment return. Enter 5% of line 5	6	181,927.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	181,927.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 1,408.	40	
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,408.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	180,519.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	180,519.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	180,519.
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		141 460
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	141,462.
	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:	\mathcal{A}_{i}^{i}	
	Suitability test (prior IRS approval required)	3a	
Þ	Cash distribution test (attach the required schedule)	3b	414 160
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	141,462.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1 1	•
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	141,462.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for	the section

Form **990-PF** (2011)

Part XIII Undistributed Income (see instructions)

		(a Corp				Years	(b) prior)10			(c) 010				(d) 2011	
1 Distributable amount for 2011 from Part XI, line 7	¢									,							
2 Undistributed income, if any, as of the end of 2011					+									-	1	80	,519.
a Enter amount for 2010 only											1	30	723				
b Total for prior years:	<u> </u>		-		+					 		36,	123	•			
3 Excess distributions carryover, if any, to 2011:	<u></u>				$oldsymbol{\perp}$				0.				,				
a From 2006	,			,	İ		,	^		ļ		,					
b From 2007	4		,							i		ž			91		
c From 2008	∤ ′				ľ	^						•		`			
d From 2009	┨			,			<i>)</i> ,		£4.				٠	1 .		4	,
e From 2010	∤ . ,		,	,				٠			٧.				Á	٠,	,
f Total of lines 3a through e	<u> </u>		**	<u> </u>	-[ŗ	3 ^k ,,				Ť	,	%] "			
Qualifying distributions for 2011 from	79			0.	1 =				·-···	4%	₹₽	-%	A**	, 4	~s		*5'
	, ,,,		. do .	٥.	4		٨,				7.	13.	4.		4	, ,	验
	ik ik	são s	Cara	**	**	'wh.	*				· · · · · · · · · · · · · · · · · · ·	*	<i></i>] [,	*
a Applied to 2010, but not more than line 2a	2 -2		- -	<u></u>	ļ	<u> </u>	dij,	194 ₁	., 4		1.	<u> 38,</u>	723.	, <i>ij</i>	1,78	٧,	The state of
b Applied to undistributed income of prior	ľ.,		.5						_		æ	ж.	,				. 4.1
years (Election required - see instructions)	赛 家	- A	1		<u> </u>				0.	*		5.S.	rafi.	2 162	. «	*	, ", 4
c Treated as distributions out of corpus				_	3	**	Sp.	· ·	. , 14	**,"	4	j.	<u></u>	٤ ،	,4.		المراكب الم
(Election required - see instructions)	<u> </u>			0.	<u> </u>	•					7						ļ
d Applied to 2011 distributable amount	<u>♣</u> 🔞	43	riğ"	1. 2 m	13.25	^م کر'	, •	ඡ ,	12	\$ 5	~	,	3 17			2,	739.
e Remaining amount distributed out of corpus	<u> </u>			0.	¥5.44	`,,	ĸ	a*	4865	4 4		٠. ٠	-v	2 495	w.	di.	d _a
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount	R A			0.	1	,		2>	~t	,							0.
must be shown in column (a))	***	· -\fi	or the	- 1886 -1	. šy =	4 , 4 , 8	₿. • ÷	1		30 x x 1	•	136	· 3 · ·)	78	ÿ.	1.00	7
6 Enter the net total of each column as indicated below:	س ۱۰۰ څړ.	. ' & .	*, *,	47.	é *	*%\\$	Ž.	7	. •	ž,	4	Ŷ	13/2	¥ 35	`«	ž.	్సం (శ్రీ
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				0.	2255	4.		. %	<i>></i> .		ŝ	Alles	is .	\$0 %	v 3	*	£ 3
b Prior years' undistributed income. Subtract	曹 奎	5.		1.300							ş	.4	Å				
line 4b from line 2b	* T	· · · · · · · · · · · · · · · · · · ·	st.	***					0.	` `	34		P	\$ 13°	٠,		. 1
c Enter the amount of prior years' undistributed income for which a notice of	* u *	2ª	C _g	**						e p		,	<i>↔</i>	73,	, ć	33	7
deficiency has been issued, or on which the section 4942(a) tax has been previously	·	:		8 *						y \$	M	de	•	,	,	- %	şs.
assessed	~; *				<u> </u>	_			0.	٠	۸	\$		2			′ 1
d Subtract line 6c from line 6b. Taxable					i					_	¥		,	,			
amount - see instructions					<u> </u>				0.		<u> </u>						
e Undistributed income for 2010. Subtract line	72 2	,	t	A	<i>,</i> ,,			^	7					~ ~			
4a from line 2a. Taxable amount - see instr.					L								0.				
f Undistributed income for 2011. Subtract																	
lines 4d and 5 from line 1. This amount must	4		-						Į				,				
be distributed in 2012 7 Amounts treated as distributions out of											···-				1′	<u>77,</u>	780.
corpus to satisfy requirements imposed by				_													
section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2006				0.													
				ا ہ													;
not applied on line 5 or line 7				0.													
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a				ا ۾													
Le				0.													
10 Analysis of line 9:				ļ												·	
a Excess from 2007				Į													
b Excess from 2008				j													i !
c Excess from 2009									- 1								
d Excess from 2010				- [- [-
e Excess from 2011																	

123581 12-02-11

THE MUKAIYAMA-RICE FOUNDATION

Form 990-PF (2011) C/O LANCE EASTMAN 23-2949160 Page 10 Partixiv Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (a) 2011 (b) 2010 (c) 2009 (d) 2008(e) Total income from Part I or the minimum investment return from Part X for each year listed **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 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 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 VV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. None Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year BEACON LIGHT BEHAVORIAL HEALTH NONE PUBLIC CHARITY SCHOLARSHIPS SYSTEMS 800 EAST MAIN ST BRADFORD, PA 16701 10,000. BOYS YOUTH BASKETBALL LEAGUE NONE PUBLIC CHARITY UNRESTRICTED 950 EAST MAIN STREET BRADFORD, PA 16701 1,000. BRADFORD AREA PUBLIC LIBRARY NONE PUBLIC CHARITY UNRESTRICTED 67 WEST WASHINGTON ST BRADFORD, PA 16701 6,000. BRADFORD COMMUNITY SOCCER LEAGUE NONE PUBLIC CHARITY UNRESTRICTED PO BOX 967 BRADFORD, PA 16701 1,000. BRADFORD EDUCATIONAL FOUNDATION NONE PUBLIC CHARITY SCHOLARSHIPS 300 CAMPUS DR BRADFORD, PA 16701 47,166. See continuation sheet(s) 139,687. Total ➤ 3a b Approved for future payment None 0. 3b Total

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Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	(a) Business	(b)	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
C					
d		_			
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	3.779.	
4 Dividends and interest from securities			14	3,779. 71,876.	
5 Net rental income or (loss) from real estate:	W 25	XX 1. 94, 225 T	7.5	" " " " " " " " " " " " " " " " " " "	3 , · 400 24 ·
a Debt-financed property		· · · · · · · · · · · · · · · · · · ·		·- · · · · · · · · · · · · · · · · · ·	
b Not debt-financed property					
6 Net rental income or (loss) from personal	 				
property					
7 Other investment income			-		
8 Gain or (loss) from sales of assets other	 		\vdash		
· · · · · · · · · · · · · · · · · · ·	1		18	<4,724.	
than inventory			10		
9 Net income or (loss) from special events	 		1		
10 Gross profit or (loss) from sales of inventory	 		\vdash		
11 Other revenue:			1 1		1
<u> </u>	-				
D	- }		1-1		
<u> </u>	-				
d	. -				
e	.				
12 Subtotal. Add columns (b), (d), and (e)	-16 - 36	0.	84.	70,931.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	70,931.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI:B. Relationship of Activities	to the Accor	mplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which inc			contrib	uted importantly to the accon	nplishment of
the foundation's exempt purposes (other than	by providing fund	is for such purposes).			
			_		
		·			
			_		
					
	· 				
					
					
ı					

123621 12-02-11

ran /	/A11	Exempt Organi		siers 10 a	no Transactions a	ina Helationsi	nps with Nonci	naritable	•	
1 Did	the oraș			d the followers	with any other organization	a described in section	20 501(a) of		Vac	No
				-	, with any other organization, relating to political organ		או סט ו(ט) טו		162	140
		om the reporting founda				izations,				ł
	Cash	om the reporting loanua	mon to a noncharman	ne exempt org	anzation of.			10/1)		х
	Other a	reate						1a(1)		$\frac{\lambda}{X}$
	er transa							1a(2)		
			nie avemnt ornanizati	ńs.				1b(1)		х
(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization										X
. ,		of facilities, equipment, (1b(2) 1b(3)		X		
		rsement arrangements	or other assets					1b(4)		X
• ,		r loan guarantees	- • -			1b(5)		X		
• •		nance of services or me	mbershin or fundrais	ing solicitation	าร			1b(6)		X
		acilities, equipment, mai	•	•				1c		X
	-				dule. Column (b) should al	vavs snow the fair m	arket value of the cond		ete	
					d less than fair market value				ota,	
		the value of the goods, o				,		.,		
(a)Line n) () Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	of transfers, transactions, a	ind sharing ar	rangeme	ents
	1			N/A		 	··· -· -· ·	············		
	+							·		
	1-									
	\top					+				
										
							· · · · · · · · · · · · · · · · · · ·			
	1									
	—				······································					
	1									
2a ist	he found	abon directly or indirect	lly affiliated with, or re	elated to. one	or more tax-exempt organ	zations described				_
in s	ection 5	01(c) of the Code (other	than section 501(c)	(3)) or in sect	on 527?			Yes	LX	ON [
b 11 "	Yes," con	plete the following scho								
		(a) Name of org	anization		(b) Type of organization		(c) Description of relation	onship		
		N/A								
						}				
										
	Hager o	englises of normal Arteclare	that I have examined this	s return unchud n	g accompanying schedules and	statements and to the	host of my knowledge -			
Sign					taxpayer) is based on all infor			May the IRS return with th	discuss e prepa	tris rer
Sign Here		Lance En	true		105/04/12	PRESID	אפאות	shown below	(see in	sy)?
11616	Signa	tire of officer or trustee			Date	Title	PINI	X Yes	· L	No
	1	Print/Type preparer's na		Preparer s si		T Date	Check If PT	IN		
	-	Time type preparer one			_	Julio .	self- employed	•		
Paid Rosemarie Steeb						54/12		01231	016	,
Prep	arer	Firm's name > CHI				ER LLP	Firm's EIN ▶ 16-			
Use	- 1	and manie - CIII					I IIII J LIN P X O			
		Firm's address > 45	BRYANT W	OODS N	ORTH					
			HERST, NY				Phone no. 716	-630-	240	0
	-									

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

THE MUKAIYAMA-RICE FOUNDATION

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

OMB No 1545-0047

2011

Employer identification number

C/O LANCE EASTMAN 23-2949160 Organization type (check one): Filers of: Section: Form 990 or 990-FZ 501(c)() (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt chantable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization THE MUKAIYAMA-RICE FOUNDATION C/O LANCE EASTMAN

Employer identification number

23-2949160

PaiXI	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MR KATSUHIKO KICHIJI A309 7-2 KASHING HACHIOJI-SHI, TOKYO, JAPAN 192-0353	\$ 18,225.	Person X 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
		- - - -	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
		- \$ - \$	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
		- - -	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
		-	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
123452 01-2		Schedule B /Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2011)

Name of organization
THE MUKAIYAMA-RICE FOUNDATION
C/O LANCE EASTMAN
Employer identification number
23-2949160

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

	KAIYAMA-RICE FOUNDATIO	N	Employer identification number
Parilli Parilli	NCE EASTMAN Exclusively religious, charitable, etc., individual year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	ridual contributions to section 501(c)(7), he following line entry. For organizations c c., contributions of \$1,000 or less for the	23-2949160 (8), or (10) organizations that total more than \$1,000 for the ompleting Part III, enter year. (Enter this information once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	om \ (b) Purpose of gift \ (c) Use of c		(d) Description of how gift is held
(e) Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee

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Form 990-PF Interest on Savi	ngs and Tem	porary Ca	ash Ir	nvestments	Statement	_1
Source					Amount	
FIRST NATIONAL BANK					3,779.	
Total to Form 990-PF, Part I,	line 3, Co	olumn A		:	3,7	79.
Form 990-PF Dividend	s and Inter	rest from	Secur	rities	Statement	2
Source	Gross	a Amount		ital Gains ividends	Column (A Amount)
BANKERS TRUST #0140320839 BRADFORD CAPITAL VANGUARD	<u> </u>	1,352. 10,103. 60,421.		0. 0. 0.	1,3 10,1 60,4	03.
Total to Fm 990-PF, Part I, 1	n 4	71,876.		0.	71,8	76.
Form 990-PF	Accounti	ng Fees			Statement	3
Description	(a) Expenses Per Books	(b) Net Inve ment Inc		(c) Adjusted Net Incom		
TAX PREPARATION FEE	1,000.	- 	500.			00.
To Form 990-PF, Pg 1, ln 16b	1,000.	-	500.		5	00.
Form 990-PF	Тах	:es			Statement	4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income		(c) Adjusted Net Incom		
FOREIGN TAXES PAID FEDERAL EXCISE TAXES PA FILING FEE	1,638. 1,267. 15.		,638. 0. 0.			0. 0. 15.
To Form 990-PF, Pg 1, ln 18	2,920.	1	,638.			15.

PartXV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient BRADFORD FAMILY YMCA NONE PUBLIC CHARITY UNRESTRICTED 59 BOYLSTON STREET BRADFORD PA 16701 6,000. BRADFORD HOSPITAL FOUNDATION NONE PUBLIC CHARITY UNRESTRICTED PO BOX 1228 BRADFORD, PA 16701 1,000. BRADFORD LADY OWLS BASKETBALL NONE PUBLIC CHARITY UNRESTRICTED BOOSTERS 50 MUNN ROAD BRADFORD, PA 16701 100. NONE BRADFORD LITTLE LEAGUE BASEBALL PUBLIC CHARITY UNRESTRICTED PO BOX 1242 BRADFORD PA 16701 1,000. BRADFORD LITTLE LEAGUE FOOTBALL NONE PUBLIC CHARITY UNRESTRICTED 7 EDGEWOOD ROAD 1,000. BRADFORD, PA 16701 BRADFORD OWLS BASKETBALL BOOSTERS NONE PUBLIC CHARITY UNRESTRICTED 710 WEST WASHINGTON STREET BRADFORD, PA 16701 100. BRADFORD OWLS BASKETBALL BOOSTERS NONE PUBLIC CHARITY UNRESTRICTED 320 INTERSTATE PARKWAY BRADFORD, PA 16701 120. BRADFORD OWLS SOCCER BOOSTERS NONE PUBLIC CHARITY UNRESTRICTED ASSOCIATION PO BOX 24 BRADFORD, PA 16701 100. BRADFORD SWIM TEAM BOOSTERS NONE PUBLIC CHARITY UNRESTRICTED 38 NILES HOLLOW BRADFORD PA 16701 101. BRADFORD XC AND TRACK & FIELD BOOSTER NONE PUBLIC CHARITY UNRESTRICTED CLUB 49 CONSTITUTION AVENUE BRADFORD PA 16701 100. 74,521. Total from continuation sheets

3 Grants and Contributions Paid During the `	ear (Continuation)			<u> </u>
Recipient	If recipient is an individual, show any relationship to Foundation any foundation manager status of		Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
DUORG GOIDINY DEDEODWING ADMG GENMED	MONTE			
BUCKS COUNTY PERFORMING ARTS CENTER (BCPAC)	NONE	PUBLIC CHARITY	UNRESTRICTED	ļ
TEN MARILYN HORNE WAY				
BRADFORD, PA 16701				5,000
				3,440
GARE TOO GULLDOW	tour		Lam nama roman	
CARE FOR CHILDREN	NONE	PUBLIC CHARITY	UNRESTRICTED	i
20 RUSSELL BOULEVARD				[
BRADFORD, PA 16701		 		5,000
ELF FUND	NONE	PUBLIC CHARITY	UNRESTRICTED	Ì
PO BOX 287				
BRADFORD, PA 16701		ļ		1,000
FIRST NIGHT BRADFORD	NONE	PUBLIC CHARITY	UNRESTRICTED	}
PO BOX 706				
BRADFORD, PA 16701		 		4,000
FRIENDSHIP TABLE	NONE	PUBLIC CHARITY	UNRESTRICTED	
21 EAST CORYDON STREET				
BRADFORD, PA 16701			ļ	10,000
				: -
FUTURES REHABILITATION CENTER, INC.	NONE	PUBLIC CHARITY	UNRESTRICTED	
ONE FUTURES WAY				
BRADFORD, PA 16701		<u> </u>		5,000
	İ]		
GIRLS YOUTH BASKETBALL LEAGUE	NONE	PUBLIC CHARITY	UNRESTRICTED	
44 PATTERSON LANE		Ì		
BRADFORD, PA 16701	 		<u> </u>	1,000
		1		1
KIWANAS CLUB OF BRADFORD	NONE	PUBLIC CHARITY	UNRESTRICTED	
PO BOX 183		}		1
BRADFORD, PA 16701	 	ļ		175
				<u> </u>
MCKEAN COUNTY HABITAT FOR HUMANITY	NONE	PUBLIC CHARITY	UNRESTRICTED	1
54 EAST CORYDON STREET				}
BRADFORD, PA 16701	 			6,000
MCKEAN COUNTY SPECIAL OLYMPICS	NONE	PUBLIC CHARITY	UNRESTRICTED	
557 INTERSTATE PARKWAY		1		1
BRADFORD, PA 16701	ĺ	1]	100

Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient MCKEAN COUNTY SPCA NONE PUBLIC CHARITY UNRESTRICTED GLENWOOD AVENUE BRADFORD, PA 16701 6,000. MUSIC OWL BOOSTERS NONE PUBLIC CHARITY UNRESTRICTED PO BOX 982 BRADFORD, PA 16701 125. UNITED WAY NONE PUBLIC CHARITY UNRESTRICTED 161 MAIN ST BRADFORD, PA 16701 10,500. PUBLIC CHARITY UNRESTRICTED YWCA NONE 24 WEST CORYDON STREET BRADFORD, PA 16701 6,000. ZACHARY BIGLIOTTA SCHOLARSHIP FUND NONE PUBLIC CHARITY UNRESTRICTED 50 MAIN STREET 5,000. BRADFORD, PA 16701 Total from continuation sheets

Form 990-PF	Other E	xpenses	Statement		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
D&O INSURANCE	1,260.	0.		1,260	
Bradford Capital - INVESTMENT EXPENSE	3,123.	3,123.		0	
To Form 990-PF, Pg 1, 1n 23	4,383.	3,123.		1,260	
	Footnotes		S	tatement (

SECURITY DETAILS 990PF PART II LINE 13 AVAILABLE ON REQUEST

Form 990-PF	Other Investments		State	ement 7	
Description	Valuation Method	Book Value		Fair Market Value 2,683,619. 65,933. 546,681.	
VANGUARD MUTUAL FUNDS BANKERS TRUST COMPANY BRADFORD CAPITAL	FMV FMV FMV	2,683,619 65,933 546,681	•		
Total to Form 990-PF, Part	II, line 13	3,296,233	3,	296,233.	
	I - List of Officers, D ees and Foundation Mana		State	ement 8	
Name and Address	Title and Avrg Hrs/Wk	Compen- Be		Expense Account	
LANCE E. EASTMAN 338 HAWTHORN LANE ALLEGANY, NY 14706	PRESIDENT & BO	ARD MEMBER 0.	0.	0.	
LESTER RICE 2 VISTA AVENUE EXTENSION BRADFORD, PA 16701	BOARD MEMBER 1.00	0.	0.	0.	
TIMOTHY D. RICE 809 HURON COURT GIBSONIA, PA 15044	BOARD MEMBER 1.00	0.	0.	0.	
SCOTT RICE 199 BOLIVAR DRIVE BRADFORD, PA 16701	BOARD MEMBER 1.00	0.	0.	0.	
JEFF RICE 49 NOOKSIDE LANE BRADFORD, PA 16701	SECRETARY / TR 1.00	EASURER & BO 0.	0.	0.	
TOM CONKLIN 2066 MICHAELS WAY ALLEGANY, NY 14706	BOARD MEMBER 1.00	0.	0.	0.	
Totals included on 990-PF,	Page 6, Part VIII	0.	0.	0.	