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# Form **990-PF**

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

OMB No 1545 0052

2011

Department of the Treasury Internal Revenue Service Note The found For calendar year 2011, or tax year beginning

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

For cal	endar year 2011, or tax year beginning	, 2011,	and ending	, , , , , , , , , , , , , , , , , , , ,	
	AM FAMILY FOUNDATION			A Employer identification num 26-1482946	nber
	N. 44TH ST. #100 NIX, AZ 85008			B Telephone number (see the 602-955-2424	instructions)
				C If exemption application is	pending, check here 🕨 🔲
<b>G</b> Ch	eck all that apply Initial return	Initial Return of a form Amended return	er public charity	D 1 Foreign organizations, chec	ck here
<del> </del>	Address change	Name change		2 Foreign organizations meet here and attach computation	
<b>н</b> С	theck type of organization X Section 50 Section 4947(a)(1) nonexempt charitable tr	I(c)(3) exempt private fourust Other taxable pr		E If private foundation status	
		ounting method. X Car Other (specify)	sh Accrual	under section 507(b)(1)(A)	•
<b>►</b> \$		, column (d) must be on a	cash basis )	F If the foundation is in a 60 under section 507(b)(1)(B)	
Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	t (c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	91,000.			
	2 Ck I if the foundn is not req to att Sch B 3 Interest on savings and temporary				
	cash investments				
	4 Dividends and interest from securities 5a Gross rents				
	b Net rental income or (loss)		····		
R E V	6a Net gair/(loss) from sale of assets not on line 10 b Gross sales price for all				
ž	assets on line 6a  7 Capital gain riet income (from Part IV, line 2)				
E N U	8 Net short-term capital gain	<u> </u>			
U E	9 Income modifications				
_	10 a Gross sales less returns and allowances RECEIVED				
	b Less Cost of	8			
	c Gross profit/(lass) (lett sch) p 2 8 2012	RS-02-			
	12 Total. Add lines Image 1	91,000.		0.	
	13 Compensation of officers (introdes, trustees, etc.	0.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits 16a Legal fees (attach schedule)				
A D M	<b>b</b> Accounting fees (attach sch)				
i	c Other prof fees (attach sch)				
0 1	17 Interest				
P S T R A T	18 Taxes (attach schedule)(see instrs) 19 Depreciation (attach				
3 7 7	sch) and depletion				
N G E	20 Occupancy 21 Travel, conferences, and meetings				
SCANNED MAR 1 4 2012  OZP DZ-1P	22 Printing and publications 23 Other expenses (attach schedule)		-		
MA	24 Total operating and administrative				
ا م	expenses. Add lines 13 through 23	00.500			00.00
2	<ul><li>25 Contributions, gifts, grants paid PART XV</li><li>26 Total expenses and disbursements.</li></ul>	92,500.		-	92,500.
<b>a</b>	Add lines 24 and 25  27 Subtract line 26 from line 12:	92,500.		0.	92,500.
33	a Excess of revenue over expenses and disbursements	-1,500.			
	b Net investment income (if negative, enter 0)	1,300.		o .	
<u> </u>	C Adjusted net income (if negative, enter 0)			0.	5

Page 2

Part II   Balance Sheets   column should be feet all year encouse only   column should be feet all year encoused be feet all year encouse only   column should be feet all year encouse only   column should be feet all year encoused be feet all year encoused be feet all year encoused by   column should be feet all years   column should be feet al	Dar	. 11	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End o	f year
2 Savings and temporary cash investments 3 Accounts receivable Less allowance for doubtful accounts 4 Pedges receivable Less allowance for doubtful accounts 5 Grant's receivable Less allowance for doubtful accounts 6 Roberts and full accounts 7 Other retire and the second full accounts 8 Inventiones for sale or use 8 Inventiones for sale or use 9 Prepared expenses and deterred charges 10a investments—10.5 and stellar operament 1 Investments—10	Гаг	C III	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
A Recounts receivable Less allowance for doubtful accounts > A Pladges receivable Less allowance for doubtful accounts > Grants reservable Consider the feet and seek, deservable full reservable for the seek of the feet and seek of se		1	Cash - non-interest-bearing	3,385.	1,885.	1,885.
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Less allowance for doubtful accounts *		6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
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21   Mortgages and other notes payable (attach schedule)	В	19				
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D 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds 3, 385.  28 Paid in or capital surplus, or land, building, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions)  3, 385.  1, 885.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5			roundations that follow SFAS 117, Check here			
D 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds 3, 385.  28 Paid in or capital surplus, or land, building, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions)  3, 385.  1, 885.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5	ΝF	24	Unrestricted			
D 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds 3, 385.  28 Paid in or capital surplus, or land, building, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions)  3, 385.  1, 885.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5	EU	25	Temporarily restricted			
S N 28 Paid in or capital surplus, or land, building, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 3, 385. 1, 885.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5	D	26	Permanently restricted		-	
S N 28 Paid in or capital surplus, or land, building, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 3, 385. 1, 885.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5	S B S A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	X		
S N 28 Paid in or capital surplus, or land, building, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 3, 385. 1, 885.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5	EL	27	Capital stock, trust principal, or current funds	3,385.	1,885.	
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5  Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with a column (a), line 30 (must agree with	SN	28	Paid in or capital surplus, or land, building, and equipment fund		, ,,,	
R S 30 Total net assets or fund balances (see instructions) 3, 385. 1,885.  Total liabilities and net assets/fund balances (see instructions) 3, 385. 1,885.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 3,385.  2 Enter amount from Part I, line 27a 2 -1,500.  3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 4 1,885.  5 Decreases not included in line 2 (itemize) 5	0 E	29	Retained earnings, accumulated income, endowment, or other funds			
(see instructions)    Part   II   Analysis of Changes in Net Assets or Fund Balances   Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   1	RS	30		3,385.	1,885.	
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5		31		3 385	1 885	
Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  Enter amount from Part I, line 27a  Other increases not included in line 2 (itemize)  Add lines 1, 2, and 3  Decreases not included in line 2 (itemize)  5	Par	111			1,005.	<del></del>
end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5   1   3,385. 2   -1,500. 3   4   1,885.				·· <del>-</del> · · · · · · · · · · · · · · · · · · ·	ree with	
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5	•	end-	of-year figure reported on prior year's return)	umm (a), mie so (must agi		3,385.
3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 State of the increases not included in line 2 (itemize) 5 State of the increases not included in line 2 (itemize)	2		•		2	
5 Decreases not included in line 2 (itemize)	3	Other	increases not included in line 2 (itemize)	<b></b>	3	
	4	Add	lines 1, 2, and 3		4	1,885.
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II. column (b), line 30 6 1,885.	5	Decre	ases not included in line 2 (itemize)			
	6	Tota	I net assets or fund balances at end of year (line 4 minus line 5	) - Part II, column (b), lin	e 30 6	1,885.

Page 3

Pai	TIV Capital Gains and L	osses for Tax on Investmen	t Income		·	
•		e the kind(s) of property sold (e g , re se; or common stock, 200 shares ML		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
18	N/A					
t	)					
	<u> </u>		<del></del>			
	1		<del></del>		<u> </u>	-
	·			1	!	L
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	
	)					
	· · · · · · · · · · · · · · · · · · ·					
	1					
			_			
	Complete only for assets showing	ng gain in column (h) and owned by t	he foundation on 12/31/69		(I) Gains (Col	umn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (J), if ar		gain minus column (l nan -0-) or Losses (fi	
	)		-			
	)					
	<u> </u>					<del></del>
	Capital gain net income or (net	capital loss) If gain, also	enter in Part I, line 7			
	, ,	Lit (loss), ent	er -0 in Part I, line 7	2		
3	,	oss) as defined in sections 1222(5) a	```			
	If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see instructions) If (lo	oss), enter -0	3		
Pai		Section 4940(e) for Reduce	d Tax on Net Investme	ent Income	<del></del>	······
(For	optional use by domestic private	foundations subject to the section 49	40(a) tax on net investment	income )	N/A	
			•	•		
If se	ction 4940(d)(2) applies, leave th	is part blank				
Was	the foundation liable for the section	ion 4942 tax on the distributable amo	unt of any year in the base p	period?	Yes	No
If 'Ye	es,' the foundation does not quali	fy under section 4940(e) Do not com	plete this part			
1	Enter the appropriate amount in	each column for each year, see the	instructions before making a	ny entries		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets (col	<b>(d)</b> Distributior lumn (b) divided	
	2010		**************************************			
	2009					
	2008					
	2007					
	2006					
2	Total of line 1, column (d)			2		
3	, , ,	e 5-year base period – divide the tota	il on line 2 by 5, or by the			
	number of years the foundation	has been in existence if less than 5	years	3		
4	Enter the net value of noncharit	able-use assets for 2011 from Part X	, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distributions fro	m Part XII, line 4		8		
	If line 8 is equal to or greater th	an line 7, check the box in Part VI, lii	ne 1b, and complete that par	rt using a 1% ta	x rate See the	

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Form	990-PF (2011) INGRAM FAMILY FOUNDATION	26-14829	146		<u> </u>	age 4
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see instruct	ions)			
1 a	Exempt operating foundations described in section 4940(d)(2), check here					
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)					
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V,	- 1				0.
	check here  ▶					
C.	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
	foundations only Others enter -0-)	2				0.
	Add lines 1 and 2	3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-					0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				0.
	Credits/Payments					
	2011 estimated tax pmts and 2010 overpayment credited to 2011	<b></b>				
	Exempt foreign organizations — tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld 6d					0
	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
**********	Enter the amount of line 10 to be Credited to 2012 estimated tax  VII-A Statements Regarding Activities	► 11 I				——
		<u> </u>			Yes	Ma
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did i participate or intervene in any political campaign?	l	<u> </u>	l a	res	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			ιь		Χ
	If the answer is 'Yes' to <b>1a</b> or <b>1b,</b> attach a detailed description of the activities and copies of any materials or distributed by the foundation in connection with the activities	published				
	Did the foundation file Form 1120-POL for this year?		-	1 c	]	Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation \(\bigs\) \(\b		0.		- 1	
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impost foundation managers $\blacktriangleright$ \$ 0.	sea on				
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
	If 'Yes,' attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, ar of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the change</i> :	icles		3		Х
	of incorporation, or bytaws, or other similar instruments? If Tes, attach a comorned copy of the change. Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•	<u> </u>	1a		X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?			1ь	N	/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If 'Yes,' attach the statement required by General Instruction T			-		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				1	
	By language in the governing instrument, or					
		at acoflict				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions the with the state law remain in the governing instrument?	at connict		5	<u>X</u>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	<b>-</b>				
-	AZ		.			
Ь	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 <i>General Instruction G<sup>2</sup> If 'No,' attach explanation</i>			3 Б	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3	) or 4942(j)(5	) [			v
	for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? <i>If 'Yes,' com</i> Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing th</i>		v   9	9		X
	and addresses.  SEE STATEN	MENT 1	10 Form	_	X PF (	2011
			1 01111	220	r (	(۱۱۱عـ

Forn	n 990-PF (2011) INGRAM FAMILY FOUNDATION	26-1482	946	Р	age 5
	rt 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 disqualifier advisory privileges? If 'Yes,' attach statement (see instructions)	d person had	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption a Website address  N/A	pplication?	13	_ X	<u> </u>
14	The books are in care of ► JANET STEWART  Telephone	no ► 602	-955 <b>-</b> 2	424	
	Located at > 426 N. 44TH STREET STE 100 PHOENIX AZ ZIP + 4 >	85008			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		N/A	<b>.</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authbank, securities, or other financial account in a foreign country?	nority over a	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name foreign country ►	ne of the			
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
1 8	a During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No	o		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No	ŀ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes XN	P		
	(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	<b>o</b>		
	(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 after termination of government service, if terminating within 90 days )	Yes X No	o		
1	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶			
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?		1 c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
á	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?  [ If 'Yes,' list the years   20, 20, 20, 20	Yes X No	o		
	10 163, 113t tile years 20, 20, 20				
ı	• Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)) all years listed, answer 'No' and attach statement — see instructions.)		2 b	N	/A
•	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years her 20 , 20 , 20 , 20	е			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business				
	enterprise at any time during the year?  If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation	Yes X N	0		
'	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011).		3 b	N	/A
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?		46		Х
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Form 990-PF (2011) INGRAM FAMILY FOUL	NDATION		26-14	82946	Page 6
Part VII-B   Statements Regarding Activit	ies for Which For	n 4720 May Be Red	uired (continued)		
5a During the year did the foundation pay or incu	-				
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	n (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra		4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instruc	ganization described ctions)	Yes X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of to described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5ь	N/A
Organizations relying on a current notice regain	ding disaster assistanc	e check here	▶ [		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim exe sibility for the grant?	emption from the	N/A Yes	] No	
If 'Yes,' attach the statement required by Regu	ılatıons section 53 4945	-5(d)		'	
6a Did the foundation, during the year, receive are on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	Yes X	]No	
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefi	t contract?	6b	X
If 'Yes' to 6b, file Form 8870.				1	
7a At any time during the tax year, was the found	<u>=</u>			No 7b	
Part VIII Information About Officers, D					es
and Contractors	mootors, mastees	, r ourradion mane	igers, riigiliy r ala	Linploye	<b></b> ,
1 List all officers, directors, trustees, foundation	managers and their co	mpensation (see instru	ctions)		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	e account, owances
KEITH MICHAEL INGRAM	DIRECTOR	0.	0.		0
426 N. 44TH SDT SUITE 100 PHOENIX, AZ 85008	0				
SHEILA L. INGRAM	DIRECTOR	0.	0.		0
426 N. 44TH ST, SUITE 100 PHOENIX, AZ 85008	0				
<del></del>					
2 Compensation of five highest-paid employees	(other than those inclu	ided on line 1— see inst	ructions). If none, ente	r 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	
NONE			•		
Total number of other employees paid over \$50,000			<b>•</b>		0
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0.

Form 990-PF (2011)

Total. Add lines 1 through 3

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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.' (c) Compensation (a) Name and address of each person paid more than \$50,000 (b) Type of service NONE Total number of others receiving over \$50,000 for professional services. 0 Part IX-A | 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 Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc 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 All other program-related investments. See instructions

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a Expenses, commoditions, girls, etc — total from Fart 1, column (d), line 20	141	32,300.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. pu	urposes 2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3Ь	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XI	III, line 4 4	92,500.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inc Enter 1% of Part I, line 27b (see instructions)	come 5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	92 500

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Form **990-PF** (2011)

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
1 Distributable amount for 2011 from Part XI,				111.
line 7  2 Undistributed income, if any, as of the end of 2011				111.
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2011			• · · · · · · · · · · · · · · · · · · ·	
<b>a</b> From 2006				
<b>b</b> From 2007				
<b>c</b> From 2008 50,300.				
<b>d</b> From 2009 154, 752.				
e From 2010 239, 560.				
f Total of lines 3a through e	444,612.			
4 Qualifying distributions for 2011 from Part				
XII, line 4 \( \)			0	
a Applied to 2010, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2011 distributable amount				111.
e Remaining amount distributed out of corpus	92,389.			
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	537,001.		·····	
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-		,		
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		~~~~~
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		·
e Undistributed income for 2010 Subtract line 4a from			0	
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2011. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2012				0.
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2006 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	537,001.			
10 Analysis of line 9.	,		-	
a Excess from 2007				
<b>b</b> Excess from 2008 50, 300.				<u> </u>
<b>c</b> Excess from 2009 154, 752.				
<b>d</b> Excess from 2010 239, 560.				
e Excess from 2011 92, 389.				
BAA				Form <b>990-PF</b> (2011)

Form 990-PF (2011) INGRAM FAMILY FO		metions and Par	t VII A guestia	26-1482946	N/A
Part XIV Private Operating Foundation has received a ruling or d					N/A
is effective for 2011, enter the date of the r	uling				7
<b>b</b> Check box to indicate whether the foundation		rating foundation de T		4942(j)(3) or	4942()(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2011	<b>(b)</b> 2010	Prior 3 years (c) 2009	(d) 2008	(e) Total
investment return from Part X for each year listed	(a) 2011	(b) 2010	(6) 2009	(u) 2008	(e) Total
<b>b</b> 85% of line 2a					
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter.					
(1) Value of all assets	•	-			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	,				
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		<u> </u>	<u> </u>		
Part XV   Supplementary Information assets at any time during the	(Complete this e year — see ir	s part only if the istructions.)	organization f	iad \$5,000 or mo	re in
Information Regarding Foundation Manage     List any managers of the foundation who he close of any tax year (but only if they have SEE STATEMENT 2      b List any managers of the foundation who is the foundation wh	ave contributed more to contributed more to contributed more to contribute more of the contribute of t	the stock of a corp	oration (or an equa		
a partnership or other entity) of which the f	oundation has a 10	0% or greater interes	st		
2 Information Regarding Contribution, Grant					
Check here $\blacktriangleright$ $\overrightarrow{X}$ if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d.	akes contributions gifts, grants, etc,	to preselected char (see instructions) to	itable organizations individuals or orga	and does not accept nizations under other	unsolicited conditions,
a The name, address, and telephone numbe	r of the person to v	vhom applications sl	hould be addressed		
•	•	, ,			
<b>b</b> The form in which applications should be s	ubmitted and inforr	mation and materials	s they should includ	е	
c Any submission deadlines		<del></del>			
d Any restrictions or limitations on awards, so	uch as by geograph	nical areas, charilab	le fields, kinds of in	stitutions, or other fa	clors
_					

3 Grants and Contributions Paid During the Yo		re Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		17-1-18 EF 7800E
a Paid during the year				
SEE STATEMENT 3				
				]
Total			► 3a	92,500.
<b>b</b> Approved for future payment				
Total	•		► 3b	

Page 12

Part XVI-A	Analycic	of Income	-Producing	Activities
I GILVIII	milarysis	OI IIICOIIIC	"I TOUGUING	ACHVILICS

Enter gree	ss amounts unless otherwise indicated	Unrolate	d business income	Evaluded	by section 512, 513, or 514	1
-		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
	gram service revenue		<del></del>	code	<del> </del>	
		<u> </u>	<del>- 111</del>			
		<u> </u>		+		<del></del>
		<del> </del>	<del></del>			
				1		
f						
g Fees	s and contracts from government agencies					
2 Men	mbership dues and assessments					
3 Intere	est on savings and temporary cash investments			14		
	dends and interest from securities		····			
	rental income or (loss) from real estate:					
	t-financed property			1	<del></del>	
	debt-financed property					
	rental income or (loss) from personal property					
	er investment income			+		
	or (loss) from sales of assets other than inventory		<del></del>			
	income or (loss) from special events ss profit or (loss) from sales of inventory			+ +		
	er revenue	-				
		<u> </u>		1 1		
					<del></del>	
				1		
e						
12 Subt	total Add columns (b), (d), and (e)		***			
12 Tal-	al. Add line 12, columns (b), (d), and (e)				12	0.
					13	0.
	sheet in line 13 instructions to verify calculation	ıs.)				<u> </u>
(See work			shment of Exem	pt Purpo		0.
(See work Part XV	Sheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	Accompli	<u> </u>	· · · ·	ses	
(See work	Sheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation  /I-B Relationship of Activities to the	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · · ·	ses	
(See work  Part XV  Line No.	Sheet in line 13 instructions to verify calculation	Accompli	<u> </u>	· · · ·	ses	

(602) 285-0500

Form 990-PF (2011)

Form 9			M FAMILY F						26-1482			age 13
Part	XVII	Information R Exempt Orga	Regarding Tra	ansfers To a	nd Trans	actions	s and Rel	ationships V	Vith Nonch	aritable		
		··									Yes	No
<b>1</b> D	old the describe elating	organization directed in section 501(ction to the section 501(ction to the section 501) and the section to the	tly or indirectly e c) of the Code (o zations?	ngage in any o ther than sectio	f the followir on 501(c)(3)	ig with a organiza	ny other org tions) or in	ganization section 527,				
a T	ransfer	s from the reporti	ng foundation to	a noncharitable	e exempt or	ganizatic	n of					
(	<b>1)</b> Cas	h								1 a (1)		X
(2	<b>2)</b> Othe	er assets								1 a (2)		X
		ansactions										
•	-	es of assets to a n								1 b (1)		X
•	•	chases of assets f			ganization					1b (2)		X
•	•	tal of facilities, eq nbursement arran	•	1 255612						1b (3) 1b (4)		X
•	•	ns or loan guarant	•							1 b (5)		X
		ormance of service		iip or fundraisin	ig solicitation	าร				1 b (6)		X
		of facilities, equip			_					1 c		Х
d If	the an	swer to any of the ds, other assets, o saction or sharing	e above is 'Yes,' or services given	complete the fo	ollowing scho g foundation	edule Cr	olumn <b>(b)</b> sł oundation re	nould always sh eceived less tha	ow the fair ma in fair market	irket value value in	of	
(a) Line		(b) Amount involved		of noncharitable ex				r assets, or serv iption of transfers, t				
N/A		(b) / mount myored	(c) Hame	or noncharrable exc	ompt organizati	<del>"</del>	(4) 00301	iption of transfers, t	ransactions, and .	maring arran	gement	3
			-									
						_						
	_			·								
		<del></del>										
		<del></del>	<del>-  </del>		_							
		····										
				-						,		
									-			
							····					
ď	escribe	undation directly of d in section 501 (c complete the follo	) of the Code (ot	ated with, or rel her than section	ated to, one n 501(c)(3))	or more	tax-exemp tion 527?	t organizations		Yes	X	No
	(a)	Name of organiz	ation	<b>(b)</b> Ty	pe of organi	zation		(c) Des	cription of rela	tionship		
N/A			·						·			
		-										
			·					<del></del>				
	Under p	enalties of perjuty, I de	clare that I have exam	nined this return, inc	cluding accompa	nying sche	dules and state	ments, and to the be	est of my knowledg	ge and belief,	ıt ıs tru	е,
Sian	correct,	and complete Declara	ion of preparer (other	than taxpayer) is b	ased on all infor	mation of v	which preparer	has any kriowledge		May the I	DS dieci	
Sign Here		21 00 -5	152-e ~	,	17-1	1412	► DIRE	СТОВ		this return	n with th	ne
	Signa	ture of officer or trustee			Date	<u>&gt; 10</u>	Title	C 1 O1/		(see instr	uctions)	
		Print/Type preparer's	name	A Prepare	s signaure		Date	C	neck I if	PTIN	162	1110
Paid		CHARLES V.	MIHAYLO /	Harl	Mila	1.	CP4 2	- 10.10	If employed	P00444	288	
Prepa	rer	Firm's name ►	EDWARDS, 1	LARGAY, MI	HAYLO /	<b>)</b> CO.	, PLC			09057		
Use C		Firm's address		BORN ROAD,	SUIT	260						
			PHOENIX, A	Z 85012				Phone	no (602)	285-0	500	

BAA

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545 0047

2011

name of the organization		Employer Identification number						
INGRAM FAMILY FOUNDATION		26-1482946						
Organization type (check one)								
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organizati	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust no	t treated as a private foundation						
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust tre	ated as a private foundation						
	501(c)(3) taxable private foundation							
Check if your organization is covered by the Note. Only a section 501(c)(7), (8), or (10)	he <b>General Rule</b> or a <b>Special Rule</b> ) organization can check boxes for both the General	Rule and a Special Rule See instructions						
General Rule								
X For an organization filing Form 990, 99 contributor (Complete Parts I and II)	90-EZ, or 990-PF that received, during the year, \$5,0	000 or more (in money or property) from any one						
Special Rules								
509(a)(1) and 170(b)(1)(A)(vi), and red	ling Form 990 or 990-EZ that met the 33-1/3% suppo ceived from any one contributor, during the year, a c Part VIII, line 1h or (ii) Form 990-EZ, line 1 Comple	contribution of the greater of (1) \$5,000 or						
	ganization filing Form 990 or 990-EZ that received fr 0 for use <i>exclusively</i> for religious, charitable, scientif r animals Complete Parts I, II, and III							
contributions for use exclusively for re	ganization filing Form 990 or 990-EZ that received fri Higious, chantable, etc, purposes, but these contribu- total contributions that were received during the year parts unless the <b>General Rule</b> applies to this organiz	itions did not total to more than \$1,000 r for an <i>exclusively</i> religious, charitable, etc.						
religious, charitable, etc, contributions	of \$5,000 or more during the year	<b>▶</b> \$						
990-PF) but it must answer 'No' on Part I'	red by the General Rule and/or the Special Rules do V, line 2, of its Form 990, or check the box on line H eet the filing requirements of Schedule B (Form 990	of its Form 990-EZ or on Part I, line 2, of its						
BAA For Paperwork Reduction Act Notice	ce, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2011						

	B (Form 990, 990-EZ, or 990-PF) (2011)		age 1 of 1 of Part 1
Name of org	A FAMILY FOUNDATION		imployer identification number
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional sp	pace is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KEITH M. INGRAM  426 N. 44TH ST, SUITE 100  PHOENIX, AZ 85008	\$4 <u>5</u> _!	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SHEILA INGRAM  426 N. 44TH ST, SUITE 100  PHOENIX, AZ 85008	\$4 <u>5,</u> 5	(Complete Part II if there is a noncash contribution)
(a) Number	(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) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a)	(b)	\$(c)	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
Number	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(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)

L to

of Part II

1

Employer identification number

Name of organization

INGRAM FAMILY FOUNDATION

26-1482946

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed (a) No. from Part I (d) (b) Date received Description of noncash property given FMV (or estimate) (see instructions) N/A (c) FMV (or estimate) (see instructions) (d) Date received (b) (a) Description of noncash property given No. from Part I (b)
Description of noncash property given (a) No. from (c) (d) FMV (or estimate) Date received (see instructions) Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) (a) No. from Part I Date received (c) FMV (or estimate) (see instructions) (a) No. from Part i (d) Date received Description of noncash property given (c) FMV (or estimate) (see instructions) (d) (a) No. from Part I (b) Date received Description of noncash property given BAA Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Page	Р	ao	e
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1 to

of Part III

Name of organization
INGRAM FAMILY FOUNDATION

Employer identification number 26-1482946

	FAMILI FOUNDATION			20-140294	
Part III	Exclusively religious, charitable, e organizations that total more than	etc, individual contributions \$1,000 for the year.Comp	ons to section	on 501(c)(7), (8), or (1) ough (e) and the following li	<b>0)</b> ne entry
	For organizations completing Part III, enter contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	total of <i>exclusively</i> religious, ch (Enter this information once Se space is needed	aritable, etc, ee instructions)	<b>►</b> \$	N/A
(a)	(b)	(c)		(d)	· · · · · · · · · · · · · · · · · · ·
No. from Part I	Purpose of gift	Use of gift		Description of how gi	ft is held
	N/A				<u> </u>
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relatio	onship of transferor to tran	sferee
(a) No. from	(b) Purpose of gift	(c) Use of gıft		(d) Description of how gi	ft ıs held
Part I					
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relation	onship of transferor to tran	sferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gi	ft is held
<del></del>					
	Transferee's name, addres	Relatio	Relationship of transferor to transferee		
(a) No. from Part I	(b) (c) Purpose of gift Use of gift		(d) Description of how		ft is held
<del></del>					<del></del>
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relatio	onship of transferor to tran	sferee
	t		I		

2011

#### **FEDERAL STATEMENTS**

PAGE 1

**INGRAM FAMILY FOUNDATION** 

26-1482946

**STATEMENT 1** FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

KEITH M. INGRAM

426 N. 44TH ST., SUITE 100

PHOENIX, AZ 85008

SHEILA L. INGRAM

426 N. 44TH ST., SUITE 100 PHOENIX, AZ 85008

STATEMENT 2 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

KEITH MICHAEL INGRAM SHEILA L. INGRAM

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	_	AMOUNT
BONITA PARK NAZARENE CAMP HC 71 BOX 1159 CAPITAN, NM 88316	NONE	501 (C) (3)	OUR MISSION IS TO FACILITATE SPIRITUAL ENRICHMENT, SOCIAL DEVELOPMENT, PHYSICAL AND MENTAL RENEWAL IN A CHRIST-CENTERED ATMOSPHERE ENCOURAGING WORSHIP, FELLOWSHIP, MEDITATION AND REFLECTION UPON THE WORD OF GOD.	\$	73,000.

2011

## **FEDERAL STATEMENTS**

PAGE 2

**INGRAM FAMILY FOUNDATION** 

26-1482946

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
SKY RANCH FOUNDATION P.O. BOX 8420 FREDERICKSBURG, VA 22404	NONE	501 (C) (3)	TO PROVIDE EFFECTIVE HELP TO TROUBLED AND DELIQUENT BOYS AND GIRLS BETWEEN AGES 11 AND 18 IN ORDER FOR THEM TO BECOME MORE PRODUCTIVE AND RESPONSIBLE ADULTS	\$ 5,000.
CELEBRITY FIGHT NIGHT FOUNDATION 2111 EAST HIGHLAND AVE, SUITE 135 PHOENIX, AZ 85016	NONE	501 (C) (3)	TO PROMOTE ONGOING EFFORTS TO ELIMINATE SICKNESS AND POVERTY BY CONTRIBUTING TO RESEARCH AIMED AT FINDING A CURE FOR CATASTROPHIC DISEASES AND PROVIDE FUNDING TO NON-PROFIT ORGANIZATIONS THAT CREATE OPPORTUNITIES FOR YOUTHS	5,000.
TRAGEDY ASSISTANCE PROGRAM FOR SURVIVORS 1777 F STREET NW, SUITE 600 WASHINGTON, DC 20006	NONE	501 (C) (3)	TO PROVIDE COMFORT AND CARE TO ANYONE WHO HAS SUFFERED THE LOSS OF A MILITARY LOVED-ONE THROUGH COMPREHENSIVE SERVICES AND PROGRAMS INCLUDING PEER-BASED EMOTIONAL SUPPORT, CASE WORK ASSISTANCE, CRISIS INTERVENTION, AND TRAUMA RESOURCES.	3,000.

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## **FEDERAL STATEMENTS**

PAGE 3

**INGRAM FAMILY FOUNDATION** 

26-1482946

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	Al	MOUNT
THE NEW LIFE SOCIETY 201 W. COOLIDGE PHOENIX, AZ 85013	NONE	501 (C) (3)	TO PROVIDE ASSISTANCE TO INDIVIDUALS IN THE STATE OF ARIZONA WHO HAVE RECEIVED AN ORGAN TRANSPLANT AS WELL AS THOSE INDIVIDUALS WAITING FOR AN ORGAN TRANSPLANT, THEIR FAMILIES, AND CAREGIVERS.	\$	1,000.
BREWSTER SCHOLARSHIP FOUNDATION, INC. 4912 NW 36TH OKLAHOMA CITY, OK 73122	NONE	501 (C) (3)	TO PROVIDE EDUCATIONAL ASSISTANCE AND SCHOLARSHIP SERVICES AND AWARDS TO STUDENTS IN NEED		500.
FAMILY TALK 540 ELKTON DR. #201 COLORADO SPRINGS, CO 80907	NONE	501 (C) (3)	AND PROMOTE THE INSTITUTION OF THE FAMILY AND THE BIBLICAL PRINCIPLES ON WHICH IT IS BASED, AND TO SEEK TO INTRODUCE AS MANY PEOPLE AS POSSIBLE TO THE GOSPEL OF JESUS CHRIST. SPECIFICALLY, THE FOCUS OF THE MINISTRY IS ON MARRIAGE, PARENTHOOD, EVANGELISM, THE SANCTITY OF HUMAN LIFE AND ENCOURAGING RIGHTEOUSNESS IN THE CULTURE.		5,000.
			TOTAL	\$	92,500.