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Form 990-PF

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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2011, or tax year beginning 2011, and ending Employer identification number FRANK W & BARBARA J. JENKINS 26-1723439 FAMILY FOUNDATION, INC. B Telephone number (see the instructions) 2187 HARITHY DRIVE DUNN LORING, VA 22027 C If exemption application is pending, check here Initial return Initial Return of a former public charity G Check all that apply: 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: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Accounting method: X Cash Fair market value of all assets at end of year (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis) Part | Analysis of Revenue and (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net Expenses (The total of amounts in expenses per books for charitable income income columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (seé instructions)) Contributions, gifts, grants, etc, received (att sch) 20,501 Ck ► X if the foundn is not req to att Sch B Interest on savings and temporary ₹´-) 14 14 14 cash investments € ⊃ 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, In Part Net short-term capital gain 9 Income modifications -106 10 a Gross sales less returns and allowances MAY 2 1 2G1Z b Less Cost of ш goods sold c Gross profit/(loss) (att sch) 11 Other income (attach sche Total, Add lines 1 through 11 20.51514 14 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule). 270 **b** Accounting fees (attach sch) SEE ST 1 c Other prof fees (attach sch) 17 Interest 35 SEE STM 2 Taxes (attach schedule)(see instrs). Depreciation (attach sch) and depletion 20 Occupancy 21 Travel, conferences, and meetings. Printing and publications 23 Other expenses (attach schedule) SEE STATEMENT 3 365. Total operating and administrative expenses. Add lines 13 through 23 24 670 25 Contributions, gifts, grants paid STMT 4 9,194 9,194. Total expenses and disbursements. 0 9,864 0 Add lines 24 and 25 9,194. 27 Subtract line 26 from line 12: a Excess of revenue over expenses 10,651 and disbursements 14 b Net investment income (if negative, enter -0-) 14 C Adjusted net income (if negative, enter -0-)

Par	F EE	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
F 41		Darance Sheets	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	bearing	5,150.	15,787.	15,787.
	2	Savings and tempora	ary cash investments	15,493.	15,507.	15,507.
	3	Accounts receivable	-			
		Less: allowance for o	doubtful accounts ►			
	4	Pledges receivable				
		Less: allowance for o	doubtful accounts ▶			
	5	Grants receivable				
	6	Receivables due from offic disqualified persons (attac	ers, directors, trustees, and other th schedule) (see instructions)			
	7	Other notes and loans rece	ervable (attach sch)			
S		Less: allowance for o	doubtful accounts ►			
A S E T	8	Inventories for sale of			·	
Ŧ	9	Prepaid expenses ar	nd deferred charges		· - · · · · · · · · · · · · · · · · · ·	
S	10 a	Investments – U.S. obligations (attach se	and state government chedule)			
	t	Investments — corporate :	stock (attach schedule)			
	٥	: Investments — corporate I	oonds (attach schedule)			
	11	Investments - land, equipment: basis	buildings, and			
		Less: accumulated depreci (attach schedule)	ation			
	12	Investments - morto	gage loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and				
		Less: accumulated deprect (attach schedule)	ation			
		Other assets (describ	pe ►) completed by all filers =) Also, see page 1, item I)	20 642	21 204	31 204
<u> </u>	17	Accounts payable ar		20,643.	31,294.	31,294.
Ţ	18	Grants payable	d accided expenses		· · · · · · · · · · · · · · · · · · ·	
A B	19	Deferred revenue				
. !	20		ors, trustees, & other disqualified persons.		<u> </u>	
ī	21		payable (attach schedule)			
Ţ	22	Other liabilities (descri				
Ė	22	Takal liabilikiaa /aud	lines 17 through 200	0		
	23	Total liabilities (add		0.	0.	
		and complete lines 2	low SFAS 117, check here 4 through 26 and lines 30 and 31.			
N F E U	24	Unrestricted				
TN	25	Temporarily restricte				
A D	26	Permanently restrict				
A B A L T A		and complete lines 2	not follow SFAS 117, check here			
EL	27		rıncıpal, or current funds			
SNC	28		or land, building, and equipment fund			
0 E	29	-	lated income, endowment, or other funds	20,643.	31,294.	
RS	30 31		und balances (see instructions) net assets/fund balances	20,643.	31,294.	
		(see instructions)		20,643.	31,294.	
Par	t III .	Analysis of Chan	ges in Net Assets or Fund Balanc	es	_	
1	Total	net assets or fund ba	lances at beginning of year – Part II, colum	nn (a), line 30 (must ag		22 515
•			on prior year's return)		1 2	20,643.
2 3		r amount from Part I,			2	10,651.
3 4		increases not included in lir lines 1, 2, and 3			· 3 4	31,294.
5		ases not included in line 2 (Itemize) ►		5	31, 234.
6			plances at end of year (line 4 minus line 5)	- Part II column (b) Ju		31,294.
BAA			at one of your time + minus line of	. a.c.i, column (b), ill		51,254.

2-story brick warehouse or common stock 200 shares MI C Company)				(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	N/A					
b						
С		_				
d						
е						
	(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	
а						
b						
с						
d						
е						
	(i) Fair Market Value as of 12/31/69	g gain in column (h) and owned by t (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		(I) Gains (Coli gain minus column (k nan -0-) or Losses (fr), but not less
а						
b		<u> </u>			=	
c						
d						
е						
2	Capital gain net income or (net		enter in Part I, line 7 ler -0- in Part I, line 7	2		
3	Net short-term capital gain or (lo	oss) as defined in sections 1222(5) a	nd (6)			
	If gain, also enter in Part I, line in Part I, line 8	8, column (c) (see instructions) If (le	oss), enter -0-	- 3		
Par		Section 4940(e) for Reduce	d Tax on Net Investme	ent Income	l	
Was	s,' the foundation does not qualif	on 4942 tax on the distributable amo y under section 4940(e). Do not com	plete this part		Yes	☐ No
_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	sets (col	(d) Distribution lumn (b) divided	
	2010					
	2009					
	2008					
	2007					
	2006					
2	Total of line 1, column (d)			2		
3	Average distribution ratio for the number of years the foundation	5-year base period — divide the total has been in existence if less than 5	al on line 2 by 5, or by the years	3		
4	Enter the net value of noncharit	able-use assets for 2011 from Part X	line 5	4		
•	Enter the fiet value of floridistri	able ase assets for Early from y are y	,			
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 the Part VI instructions	an line 7, check the box in Part VI, I	ne 1b, and complete that pa	art using a 1% ta	ax rate. See the	

			23439		F	age 4
Par		see inst	tructions	.)		
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)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	·	1			0.
	check here ► and enter 1% of Part I, line 27b.					
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
	foundations only Other's enter -0-)	_	2			<u>0.</u>
	Add lines 1 and 2	<u> </u>	3			<u>0.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u> </u> :	5			0.
	Credits/Payments:					
	2011 estimated tax pmts and 2010 overpayment credited to 2011					
	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 6d					_
	Total credits and payments. Add lines 6a through 6d		7			<u>0.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	<u> </u>	8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed.	<u> </u>	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> 10</u>	_			
11	Enter the amount of line 10 to be Credited to 2012 estimated tax	. 🕨 1	<u> </u>			
Par	VII-A Statements Regarding Activities			········		
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			1a	Yes	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1ь		Х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials or distributed by the foundation in connection with the activities	publish	ed			
С	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 $\$$ 0. (2) On foundation managers $\$$		0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impost foundation managers \Rightarrow \$ 0.	ea on				
2	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, art of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	cies		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b	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					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	t conflic	·+			
	with the state law remain in the governing instrument?	it corninc		6		X
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	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	VA					
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			8ь	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' comp	or 4942 olete Pai	<u>?(</u>)(5) rt ΧΙV	9	X	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the and addresses SEE STATEM	eir name IENT 5) .	10	Х	
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Par	t VII-A Statements Regarding Activities (CONTINUED)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? • N/A	13	X	<u> </u>
14	The books are in care of ► FRANK JENKINS Telephone no. ► 703-2	89-0	048	
	Located at ►DUNN_LORING_VA ZIP + 4 ►22027			· -
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year	N/A	•	∐ N/A
	-		Yes	No
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country			
Par	t 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 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			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(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?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No			
Ł	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 .			
ď	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?	1c		_x_
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? Yes X No			
	If 'Yes,' list the years ► 20 , 20 , 20			
ŀ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2b	N	/A
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		•	
	► 20, 20, 20			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
1	of 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011)	3b	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?	4b		х
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Part VII-B Statements Regarding Activit		n 4720 May Be Red	uired (continued)		
5a During the year did the foundation pay or incur	•				
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	∐ Yes X	No	
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	ic election (see section tion drive?	4955); or to carry		No	
(3) Provide a grant to an individual for travel,	study, or other sımılar p	ourposes?	∐ Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	ian a charitable, etc, or 4940(d)(2)? (see instruc	ganization described ctions)	Yes X	No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention			Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	ne transactions fail to qual current notice regard	ualify under the exception ing disaster assistance	ons 	5b	N/A
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ 🗀		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure respons	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 ar on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	Yes X	No	
b Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefit	t contract?	6ь	<u> </u>
If 'Yes' to 6b, file Form 8870		4		184.	
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any proceed				No 7b	
Part VIII Information About Officers, D					
and Contractors	1100(013, 1143(003	, i carradori mana	igors, riigiliy r ala	Linpioyou	. ,
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) Expense other allo	
FRANK W. JENKINS	PRES/FOUND.	0.	0.		0.
2187 HARITHY DRIVE	0				
DUNN LORING, VA 22027					
BARBARA J. JENKINS	VP/FOUND. MG	0.	0.		0.
2187 HARITHY DRIVE	0				
DUNN LORING, VA 22027					
2 Compensation of five highest-paid employees	other than those inclu	uded 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) Expense other allo	
NONE					
	-				
Total number of other employees paid over \$50,000		· · · · · · · · · · · · · · · · · · ·	•	-	0
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, ent	ter 'NONE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of s	
NONE	
Total number of others receiving over \$50,000 for professional services	<u>▶</u> 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 nu organizations and other beneficiaries served, conferences convened, research papers produced, etc.	umber of Expenses
1 <u>N/A</u>	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2. Amount
1	
<u>N/A</u>	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	▶ 0.
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	orm 990-PF (2011)	FRANK	W	&	BARBARA	Ĵ.	JENKINS
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Part X Minimum Investment Return (All domestic foundations must complete this part see instructions.)	. Foreign for	undations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:		
a Average monthly fair market value of securities	. 1a	
b Average of monthly cash balances .	1b	
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets .	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here ► X and do not complete this part.		ndations
1 Minimum investment return from Part X, line 6. N/A	1	
2a Tax on investment income for 2011 from Part VI, line 5		
b Income tax for 2011. (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions).	6	
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	9,194.
b Program-related investments — total from Part IX-B	1b	
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: a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	9,194.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,194.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth qualifies for the section 4940(e) reduction of tax in those years.		
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Zart XIII Undistributed income (see insti	ructions)	N/A		
	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
Distributable amount for 2011 from Part XI, line 7.				
2 Undistributed income, if any, as of the end of 2011:				
a Enter amount for 2010 only				
b Total for prior years 20, 20, 20				
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e			:	
4 Qualifying distributions for 2011 from Part				
XII, line 4: • \$:	
a Applied to 2010, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
 Treated as distributions out of corpus (Election required – see instructions) 			=	
d Applied to 2011 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2011				
(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				
b Prior years' undistributed income. Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b. Taxable amount — see instructions				
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount — see instructions				
f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2007	`			
b Excess from 2008				
c Excess from 2009				
d Excess from 2010				
e Excess from 2011				

Form 990-PF (2011) FRANK W & BARBAR	A J. JENKINS			26-1723439	Page 10
Part XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question	9)	
1 a If the foundation has received a ruling or d is effective for 2011, enter the date of the	etermination letter th uling	at it is a private op	erating foundation, a	and the ruling	5/04/10
b Check box to indicate whether the foundation	on is a private opera	ting foundation des	cribed in section	X 4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	···	Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
each year listed .	0.				0.
b 85% of line 2a.					0.
c Qualifying distributions from Part XII, line 4 for each year listed.	9,194.	9,900.	9,300.		28,394.
d Amounts included in line 2c not used directly for active conduct of exempt activities.					0.
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 	9,194.	9,900.	9,300.		28,394.
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:				ļ	
(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)				25,065.	25,065.
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)				25,065.	25,065.
(3) Largest amount of support from an exempt organization.					0.
(4) Gross investment income					0.
Part XV Supplementary Information assets at any time during the	(Complete this)	part only if the	organization ha	ıd \$5,000 or mo	ore in
	<u>-</u>	trucuons.)			
Information Regarding Foundation Manag a List any managers of the foundation who had close of any tax year (but only if they have SEE STATEMENT 6	ave contributed more	e than 2% of the to an \$5,000). (See se	tal contributions rece ection 507(d)(2).)	erved by the founda	ation before the
b List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of the foundation has a 10% or the foundat	ne stock of a corpo o or greater interes	ration (or an equally t	large portion of th	e ownership of
2 Information Regarding Contribution, Gran Check here ► ☐ if the foundation only n requests for funds. If the foundation make complete items 2a, b, c, and d.				and does not accep zations under othe	t unsolicited r conditions,
a The name, address, and telephone number	er of the person to wh	om applications sh	ould be addressed:		
h The form in which applications should be	ubmitted and informa		the second second		

c Any submission deadlines:

Tark At Supplementary information (co				
3 Grants and Contributions Paid During the Yea	r or Approved for Futur	e Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
Lee Stalement 4				
				:
		!		
Total	,		► 3a	
b Approved for future payment				
Total		<u> </u>	► 3h	

	1		
Part XVI-A	Analysis	of Income-Producing	Activities

nter gross a	amounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program	m service revenue			code		(**************************************
a						
ь		-l				
_					· · · · · · · · · · · · · · · · · · ·	
						
é						
- Face 6	nd contracts from government agencies	 				
_	ership dues and assessments	<u> </u>		+ +		
	on savings and temporary cash investments					14
	nds and interest from securities					
	ntal income or (loss) from real estate:				***************************************	
	nanced property				***************************************	
	bt-financed property					
	al income or (loss) from personal property					
7 Other i	nvestment income					
8 Gain or (loss) from sales of assets other than inventory				·	
9 Net inc	come or (loss) from special events					
0 Gross	profit or (loss) from sales of inventory			\perp		
11 Other r	revenue	ļ				
		ļ	··			
b		 				
_		1				
a		1		t i		
e						1.0
e 12 Subtota	al Add columns (b), (d), and (e)					14
e	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e)				13	'
e Subtotal. See workshi	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation					
e Subtotal. See workshi	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e)		hment of Exem	npt Purpose		
e Subtota 3 Total. ee workshi art XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 13 Total. see workshi Part XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
e Subtota 3 Total. ee workshi art XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 13 Total. see workshi Part XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 13 Total. see workshi Part XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 13 Total. see workshi Part XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi art XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi art XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi eart XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 13 Total. see workshi Part XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi art XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi eart XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi eart XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi eart XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi eart XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi eart XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi art XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi art XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
2 Subtota 3 Total. ee workshi art XVI-I	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
e	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
e	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
e	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the
e	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculation. Relationship of Activities to the Explain below how each activity for which in	e Accomplis	d in column (e) of F	Part XVI-A con	es	to the

Form 990-PF (2011) FRANK W & BARBARA J. JENKINS 26-1723439 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de	escribed ii	anization directl n section 501(c) political organiza) of the Code (o	ngage in any of ther than sectio	f the following with n 501(c)(3) organi	n any othe zations) o	er organization or in section 52	7,			Yes	No
		-		a noncharitable	e exempt organiza	ition of:						
(1) Cash									1 a (1)		Х	
(2) Other assets								1 a (2)		Х		
b O	ther trans	actions:										
(1) Sales o	of assets to a no	oncharitable exe	empt organization	on					1 b (1)		х
-	-	ses of assets fr								1 b (2)		X
-	-	of facilities, equ			,		·			1 b (3)		X
•	•	ursement arrand	•						ľ	1 b (4)		X
•	•	or Ioan guarante	•							1 b (5)		X
		nance of service		no or fundraisin	a solicitations				ŀ	1 b (6)		X
					s, or paid employe	es				1c		X
				,	, от рала отприод с				L			
th	e goods,	other assets, or	r services given	by the reporting	ollowing schedule. g foundation If th (d) the value of th	e foundati	on received le	ss than fair	market v	rket value ⁄alue ın	of	
(a) Line	no (b) Amount involved	(c) Name	of noncharitable exe	empt organization	(d)	Description of tran	sfers, transact	ons, and s	haring arran	gement	s
N/A				·		1			•		×	
							·== ··					
						}						
				_								
						1	-					
		•										
						1						
	ĺ											
				··-		1						
					-						-	
de	escribed i	dation directly on section 501(c)) of the Code (o	ated with, or rel ther than sectio	ated to, one or m n 501(c)(3)) or in	ore tax-ex section 52	empt organiza 27? .	tions		Yes	X	No
	(a) N	ame of organiza	ation	(b) Ty	pe of organization		(c) Descriptio	n of rela	tionship		
N/A				·								
							•					
			٨	<u> </u>								
	Under pena	lities of penury, I dec	care that I have exam	nined this return, in	luding accompanying s ased on all information	chedules and	statements, and t	o the best of m	y knowledo	je and belief,	it is tru	ıe,
Sign Here			Comprehensive Control	(tian (axpayer) is u	13 V.		RESIDENT	vieuge		May the I this return preparer	RS disci	uss
	Signature	of officer or trustee	: 1		Date	Titl				(see instr	uctions) Yes	
		nnt/Type preparer's i		Preparge	s signature		Date	Check	☐ ıf	PTIN	103	No
ם ב: בו		\	STRAUSS	Sielle		-2	5/10/12	self-emple	_ :	P00218	326	
Paid	 	rm's name	JUDITH A.	STRAUSS,	CPA, PC		0,10,12			66975	<u> </u>	
Prepa		rm's address		GATE COURT				. um 2 EBV -	J + 13			
Use O	יחוץ	3 8441533		22015				Dhone	(702)	425-3	303	
BAA			zoraw, vn					Phone no	(703)			
										Form 99	v-rr ((2011)

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 FRANK W & BARBARA	J. JENKINS	Employer identification number
FAMILY FOUNDATION	, INC.	26-1723439
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a positive formula of the second secon	private foundation
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva 501(c)(3) taxable private foundation	ite foundation
Check if your organization is covered by the Ge Note . Only a section 501(c)(7), (8), or (10) organ	neral Rule or a Special Rule. nization can check boxes for both the General Rule and a Sp	ecial Rule. See instructions.
General Rule		
	or 990-PF that received, during the year, \$5,000 or more (in	n money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi), and received	orm 990 or 990-EZ that met the 33-1/3% support test of the reform any one contributor, during the year, a contribution of the line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and	the greater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) organizatotal contributions of more than \$1,000 for u the prevention of cruelty to children or animal transfer.	ation filing Form 990 or 990-EZ that received from any one co se <i>exclusively</i> for religious, charitable, scientific, literary, or als. Complete Parts I, II, and III.	ntributor, during the year, educational purposes, or
contributions for use exclusively for religious of this box is checked, enter here the total contributions for use exclusively for religious of the contributions for use exclusively for religious for the contribution for the c	ition filing Form 990 or 990-EZ that received from any one co s, charitable, etc, purposes, but these contributions did not to ontributions that were received during the year for an <i>exclusi</i> inless the General Rule applies to this organization because	otal to more than \$1,000. Ively religious, charitable, etc.
religious, charitable, etc, contributions of \$5	,000 or more during the year	► \$
990-PF) but it must answer 'No' on Part IV, line	the General Rule and/or the Special Rules does not file Sch 2, of its Form 990; or check the box on line H of its Form 99 e filing requirements of Schedule B (Form 990, 990-EZ, or 99	0-EZ or on Part I, line 2, of its
BAA For Paperwork Reduction Act Notice, see 990EZ, or 990-PF.	e the Instructions for Form 990, Schedule B	(Form 990, 990-EZ, or 990-PF) (2011)

Name of orga			Employer identification number
FRANK	W & BARBARA J. JENKINS		26-1723439
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	ace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
1_	FRANK JENKINS		Person X Payroll
	2187 HARITHY DR	\$ <u>10,</u>	251. Noncash (Complete Part II if there
(a)	DUNN LORING, VA 22027 (b)	(c)	is a noncash contribution.)
Number	Name, address, and ZIP + 4	Total contribution	Type of contribution
2	BARBARA JENKINS		Person X Payroll
	2187 HARITHY DR	\$ <u>10,</u>	250. Noncash (Complete Part II if there
	DUNN LORING, VA 22027		is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(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 contribution	(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 contribution	(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 contribution	(d) Type of contribution ns
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2011)

Page

1 of

1 of Part 1

Page

1 to 1 of Part II Employer identification number

Name of organization

FRANK W & BARBARA J. JENKINS

26-1723439

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) lo. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I	Description of noncast property given	(see instructions)	Dute received
		\$\$	
(a) lo. 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
		\$	

	(Farm 990, 990-EZ, or 990-PF) (2011)			Page 1 to 1 of Part III		
Name of organia FRANK W	zation & BARBARA J. JENKINS			Employer Identification number 26–1723439		
Part III	Exclusively religious, charitable, e organizations that total more than	\$1,000 for the year.Compl	ete cols (a) th	tion 501(c)(7), (8), or (10) trough (e) and the following line entry.		
	For organizations completing Part III, enter to contributions of \$1,000 or less for the year. (Use duplicate copies of Part III if additional states and the second	Enter this information once. Se	aritable, etc, e instructions	.) • \$ <u>N/I</u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	N/A					
		(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4			ationship 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, 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, and ZIP + 4			ationship 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, addres	Rel	ationship of transferor to transferee			

2011	FRANK	RAL STATE W & BARBARA ILY FOUNDATION	PAGE 1 26-172343		
5/10/12			- • - • - · · · · · · · · · · · · · · ·		06:4
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES					
		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CPA	TOTAL	\$ 270. \$ 270.	\$ 0.	\$ 0.	\$
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES					
		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SCC	TOTAL	\$ 35.		\$ 0.	
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES					
		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
DUES/MEMBERSHIPS POSTAGE		\$ 356.			
	TOTAL	\$ 365.	\$ 0.	\$ 0.	\$
STATEMENT 4 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GI CASH GRANTS AND ALLOCATIONS CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		RECONSTRUCT SMILE TRAIN P.O. BOX 96			
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DO AMOUNT GIVEN:	ONEE:	WASHINGTON, NONE PUBLIC CHAI	, DC 20090		\$ 500
CLASS OF ACTIVITY:		CANCER RESI		SEARCH HOSPITA	ıT.

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

ST. JUDES CHILDRENS RESEARCH HOSPITAL 401 ST. JUDE PLACE MEMPHIS, TN 38105

NONE PUBLIC CHARITIES

1,000.

2011

5/10/12

FEDERAL STATEMENTS

FRANK W & BARBARA J. JENKINS **FAMILY FOUNDATION, INC.**

PAGE 2

26-1723439

500.

200.

200.

100.

500.

500.

06:43AM

STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

CLASS OF ACTIVITY:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CANCER RESEARCH

AMERICAN CANCER SOCIETY

P.O. BOX 22718

OKLAHOMA CITY, OK 73123

NONE

PUBLIC CHARITIES

HEART DISEASE

AMERICAN HEART ASSOCIATION

7272 GREENVILLE AVE

DALLAS, TX 75231

NONE

PUBLIC CHARITIES

DISASTER RESPONSE AMERICAN RED CROSS P.O. BOX 4002018

DES MOINES, IA 50340

NONE

PUBLIC CHARITIES

100.

DISASTER RESPONSE

DOCTORS WITHOUT BORDERS

333 SEVENTH AVE, 2ND FLOOR

NEW YORK, NY 10001

NONE

PUBLIC CHARITIES

FAMILY ASSISTANCE THE SALVATION ARMY

615 SLATERS LANE, P.O. BOX 269 ALEXANDRIA, VA 22313

NONE

PUBLIC CHARITIES

CANCER ASSISTANCE CAPITAL CARING 2900 TELESTAR CT FALLS CHURCH, VA 22042

NONE

PUBLIC CHARITIES

MEDICAL ASSISTANCE

CHILDRENS HOSPITAL FOUNDATION

901 ROEDER ROAD #300 SILVER SPRING, MD 20910

NONE

PUBLIC CHARITIES

HISTORICAL PRESERVATION

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FEDERAL STATEMENTS

FRANK W & BARBARA J. JENKINS **FAMILY FOUNDATION. INC.**

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200.

5/10/12

06:43AM

STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

COLONIAL WILLIAMSBURG FOUNDATION P.O. BOX 1776

WILLIAMSBURG, VA 23187

NONE

PUBLIC CHARITIES

EDUCATION

THE SMITHSONIAN INSTITUTION P.O. BOX 37012 MRC 712

WASHINGTON, DC 20013

NONE

PUBLIC CHARITIES

MARINE LIFE SUPPORT MONTEREY BAY AQUARIUM 7700 SANDHOLDT RD MOSS LANDING, CA 95039

NONE

PUBLIC CHARITIES

CANCER ASSISTANCE

THE LEUKEMIA LYMPHOMA SOCIETY

P.O. BOX 4072 PITTSFIELD, MA 01202

NONE

PUBLIC CHARITIES

FAMILY ASSISTANCE RONALD MCDONALD HOUSE CHARITIES

ONE KROC DRIVE OAK BROOK, IL 60523

NONE

PUBLIC CHARITIES

ANIMAL PROTECTION

BEST FRIENDS ANIMAL SOCIETY

5001 ANGEL CANYON RD KANAB, UT 84741

NONE

PUBLIC CHARITIES

CANCER ASSISTANCE SUSAN G. KOMEN RACE FOR THE CURE P.O. BOX 650309

DALLAS, TX 75265

NONE

PUBLIC CHARITIES

ANIMAL PROTECTION ASPCA ORGANIZATION 300.

2011

FEDERAL STATEMENTS

FRANK W & BARBARA J. JENKINS **FAMILY FOUNDATION. INC.**

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5/10/12

11:54AM

STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

P.O. BOX 96929

WASHINGTON, DC 20090

NONE

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

PUBLIC CHARITIES

200.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS: PROGRAM SUPPORT

WOUNDED WARRIOR PROJECT 4899 BELFORT RD #300 JACKSONVILLE, FL 32256

NONE

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC CHARITIES

500.

TOTAL \$

9,194.

STATEMENT 5 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

FRANK JENKINS

2187 HARITHY DRIVE DUNN LORING, VA 22027

BARBARA JENKINS

2187 HARITHY DRIVE DUNN LORING, VA 22027

STATEMENT 6 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

FRANK W. JENKINS BARBARA J. JENKINS