

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# 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

	endar year 2011, or tax year beginning	, 2011	, and ending	1-	,					
Name of fo	oundation LEY BRUCE DAVIS FOUNDATION ]	INC		<b>A</b>	Employer (dent) 27 - 37 5 9		mber			
Number at	nd street (or P O box number if mail is not delivered to stre		Room/suite B-1	В	Telephone numl					
City or tow	vn		ZIP code 73505-9200	С	If exemption an	nlication is	pending, check h	nore ►		
LAWTO		Initial Return of a form		1		•				
G Che	ck all that apply   Initial return   Final return	Amended return	ner public charity	D	1 Foreign organizations, check here					
	Address change	Name change			2 Foreign organizations meeting the 85% test, check					
H CI		(c)(3) exempt private for			here and attach			- 🗆		
	Section 4947(a)(1) nonexempt charitable tr			E	If private found under section 5		was terminated check here	▶ 🗍		
		ounting method X C	ash	F			-month terminati	^n		
<b>►</b> \$		column (d) must be on	cash basis )	<u>                                    </u>	under section 5			• <u> </u>		
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investme	ent	(c) Adjuste	ed net	(d) Disburs			
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income		incom	e	for char			
	sarily equal the amounts in column (a) (see instructions) )						(cash bas			
	1 Contributions, gifts, grants, etc, received (att sch)	101,000.								
	2 Ck ► If the foundn is not reg to att Sch B	n interest			John Broke		<i>".</i> "			
	3 Interest on savings and temporary cash investments						· ·			
	4 Dividends and interest from securities	2,488.	2,4	88.						
	<b>5a</b> Gross rents <b>b</b> Net rental income	****	_ *********				44.	-3.886		
R	or (loss)  6 a Net gain/(loss) from sale of assets not on line 10	1,356.	L-6a Stmt		/		``	5.2%		
E	b Gross sales price for all assets on line 6a 9,806.		& A* 1			<del>,                                    </del>				
V E N	7 Capital gain net income (from Part IV, line 2)	<b>*</b>	1,3	56.	4 % S					
N U	8 Net short-term capital gain				]	,356.				
Ĕ	9 Income modifications 10a Gross sales less returns and	**			,	42/	i ∢ <b>‰</b> °⁄	****		
	allowances		***							
	b Less Cost of goods sold									
	c Gross profit/(loss) (att sch)		* * * * * * * * * * * * * * * * * * * *		<del> </del>		*			
	11 Other income (attach schedule)									
	12 Total. Add lines 1 through 11	104,844.	3,8	44.	]	,356.	18.			
	13 Compensation of officers, directors, trustees, etc					8	SCEIVE	0		
	<ul><li>14 Other employee salaries and wages</li><li>15 Pension plans, employee benefits</li></ul>		<u> </u>		1		- OLIVE	S		
A	16a Legal fees (attach schedule)				, i	<b>60</b>	AV 1 9 2	012 0		
D M	<b>b</b> Accounting fees (attach sch)	985.				8. 10	AT 10 -	कु		
C N	c Other prof fees (attach sch)					101				
100 P	17 Interest 18 Taxes (attach schedule)(see instrs) EXCLSE TAX	5.		5.	–	-c	CADEIV.			
°R R ∉A∋ A	19 Depreciation (attach			<u> </u>						
ଶ୍ର	sch) and depletion				-					
×ĕ NE	20 Occupancy 21 Travel, conferences, and meetings				<del> </del> -					
A E	22 Printing and publications									
D P	23 Other expenses (attach schedule) See Line 23 Stmt	1,474.								
N S	24 Total operating and administrative	1,2/4.			<u> </u>	_				
S E	expenses. Add lines 13 through 23	2,464.		5.						
SCANNEDOLIAGNZG-B-B-AMPLE OMOZETEZE M<-12240-3	25 Contributions, gifts, grants paid	28,251.					2	8,251.		
Ñ	26 Total expenses and disbursements. Add lines 24 and 25	30,715.		5.			2	8,251.		
	27 Subtract line 26 from line 12:		-							
	a Excess of revenue over expenses and disbursements	74,129.								
	b Net investment income (if negative, enter -0-)		3,8	39.				j		
	C Adjusted net income (if negative, enter -0-)				<u> </u>	1,356.				

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 97,195. 2 74,129. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 171,324. 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 171,324. 6

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

: Form <b>990-PF</b> (2011) <b>STANLEY BRUCE DAVIS</b>	FOUNDATION	INC		27 - 3	3759	756		P:	age 4
Part VI Excise Tax Based on Investme			)(b), 4940(e), or 4948						.go
1 a Exempt operating foundations described in section 4940(d)(				-1		1880.17	1 , 22,74	W. S. W.	119119
Date of ruling or determination letter	(attach copy of lett					<del></del>	<u>-</u>		
<b>b</b> Domestic foundations that meet the section 494	• • • • • • • • • • • • • • • • • • • •		,	F 1	1				38.
check here ► 🕱 and enter 1% of Part I, line		,				400000	42,	; }	4
c All other domestic foundations enter 2% of line 27b Exemp		er 4% of Part I. lin	e 12. column (b)			*. 4	1	*	
			, ,, _	-		,	5	5	
2 Tax under section 511 (domestic section 4947(a foundations only Others enter -0-)	1)(1) trusts and taxad	ые			2		*******		0.
3 Add lines 1 and 2					3				38.
4 Subtitle A (income) tax (domestic section 4947)	(a)(1) trusts and taxa	ble foundations	only Others enter -0	)-)	4				0.
5 Tax based on investment income. Subtract line				·	5				38.
6 Credits/Payments		•		l	_	W.X.:			
a 2011 estimated tax pmts and 2010 overpayment credited to	2011	1	6a			3		S	
<b>b</b> Exempt foreign organizations — tax withheld at		Ī	6Ь			- 67	3.5	À.	,
c Tax paid with application for extension of time		Ī	6c				· */*		q '
d Backup withholding erroneously withheld		Ī	6d			3		)	
7 Total credits and payments Add lines 6a through	ah 6d	<u>-</u>			7				
8 Enter any <b>penalty</b> for underpayment of estimate	_	If Form 222	20 is attached		8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, ei		_		▶	9				38.
10 Overpayment. If line 7 is more than the total of lines 5 and		paid		▶	10				0.
11 Enter the amount of line 10 to be Credited to 2012 estima	ted tax		Refunded	▶	11				
Part VII-A Statements Regarding Activit	ies								
1a During the tax year, did the foundation attempt		onal, state, or lo	ocal legislation or did	ıt				'es	No
participate or intervene in any political campaig							1 a		X
<b>b</b> Did it spend more than \$100 during the year (e (see the instructions for definition)?	ther directly or indire	ctly) for politica	l purposes				1 b		x
If the answer is 'Yes' to 1a or 1b, attach a deta or distributed by the foundation in connection w		activities and o	copies of any materia	ıls publi	shed				
c Did the foundation file Form 1120-POL for this							1c		X
d Enter the amount (if any) of tax on political exp									
(1) On the foundation \$ <b>e</b> Enter the reimbursement (if any) paid by the fo		oundation manage		sed on			<i>*</i>		
foundation managers	andation during the y	ear for political	experientare tax impo	/3Cu 011		}		Ì	
2 Has the foundation engaged in any activities th	at have not previously	y been reported	to the IRS?				2		X
If 'Yes,' attach a detailed description of the acti		,							
Has the foundation made any changes, not pre of incorporation, or bylaws, or other similar insi	viously reported to the	e IRS, in its gov	verning instrument, a	rticles			3		x
4a Did the foundation have unrelated business gro				.5			4a		x
b If 'Yes,' has it filed a tax return on Form 990-T		or more during	the year			<b>—</b>	4b		
5 Was there a liquidation, termination, dissolution, or substar		vear?				<b>—</b>	5		X
If 'Yes.' attach the statement required by Gener	•	, , , , , , , , , , , , , , , , , , , ,						$\neg$	
6 Are the requirements of section 508(e) (relating		ough 4945) sati	sfied either				1		
By language in the governing instrument, or	, 10 300110113 1311 1111	oug., 75 107 541.	oned onne					- 1	
								- 1	
<ul> <li>By state legislation that effectively amends the with the state law remain in the governing instance.</li> </ul>	e governing instrume trument?	ent so that no m	andatory directions t	nat conf	lict	-	6 :	x	
7 Did the foundation have at least \$5,000 in assets at any time		complete Part II co	lumn (c), and Part XV			-	<del>-   -</del>	x	
8a Enter the states to which the foundation reports				•			+	+	
OK - Oklahoma	T. Mar. Willow R. 13 To					_			
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished	a copy of Form 990-PF to	the Attorney Genera	al						
(or designate) of each state as required by General Instruct	on G <sup>7</sup> If 'No,' attach explan	ation				L	8Ы :	X	

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses 10

Form **990-PF** (2011)

9

BAA

Form 990-PF (2011)

Part VII: B Statements Regarding Activit		n 4720 May Be Req	<u>uired (continued)</u>	
5a During the year did the foundation pay or incur			О., О	No.
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	(section 4945(e))?	∐ Yes X	NO
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	tion drive?		Yes X	No
(3) Provide a grant to an individual for travel,	study, or other sımılar p	urposes?	∐ Yes X	No
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	an a charitable, etc, org 4940(d)(2)? (see instru	anization described ctions)	Yes X	No S
(5) Provide for any purpose other than religiou educational purposes, or for the prevention			Yes X	No 2
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to qual a current notice regardi	ualify under the exception ng disaster assistance	ons	5b
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ □	
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsing if 'Yes,' attach the statement required by Regu	ibility for the grant?	·	Yes	No
6a Did the foundation, during the year, receive an on a personal benefit contract?	y tunas, afrectly or inain	ectly, to pay premiums	Yes	No
<b>b</b> Did the foundation, during the year, pay premit	ums, directly or indirectly	y, on a personal benefit	contract?	6b X
If 'Yes' to 6b, file Form 8870				144
7a At any time during the tax year, was the found	ation a party to a prohib	ited tax shelter transact	ion? Yes 🗓	No
b If 'Yes,' did the foundation receive any proceed				7 b
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	Employees,
and Contractors				<del></del>
1 List all officers, directors, trustees, foundation			uctions).	T
(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 account, other allowances
TRACIE J. DAVIS				
3225 NE SHELTER CREEK DR	PRESIDENT			
LAWTON OK 73507	5.00	0.	0.	0.
TIFFANY R. DAVIS				
3225 NE SHELTER CREEK DR	VICE PRES			
LAWTON OR 73507	1.00	0.	0.	0.
JOHN R. DAVIS				
3225 NE SHELTER CREEK DR	SEC/TREAS			
LAWTON OK 73507	1.00	0.	0.	0.
JACOB H. DAVIS				
3225 NE SHELTER CREEK DR	DIRECTOR			
LAWTON OK 73507	1.00	·	0.	0.
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1— see ins	tructions). If none, ent	er '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 account, other allowances
NONE			'	
0				
0				
0				
0				
	<u> </u>	]	<u> </u>	
Total number of other employees paid over \$50,000		12/05/11		Form <b>990-PF</b> (2011)
DAA	TEEA0306	12/03/11		1 01111 <b>330-FF</b> (2011)

27-3759756

Page 6

Form 990-PF (2011) STANLEY BRUCE DAVIS FOUNDATION INC

Form 990-PF (2011) STANLEY BRUCE DAVIS FOUNDATION INC 27	7-37597!	56 Page 8
PártiX Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)		
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes	<u> </u>	112 000
a Average monthly fair market value of securities	1 a	113,232.
<b>b</b> Average of monthly cash balances	1 b	11,148.
c Fair market value of all other assets (see instructions)	1 c	104 200
d Total (add lines 1a, b, and c)	1 d	124,380.
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	124,380.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,866.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	122,514.
6 Minimum investment return. Enter 5% of line 5	6	6,126.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► and do not complete this part.)	rating fou	
1 Minimum investment return from Part X, line 6	1	6,126.
2a Tax on investment income for 2011 from Part VI, line 5 2a 38.	<u>.</u>	
b Income tax for 2011 (This does not include the tax from Part VI)	_	
c Add lines 2a and 2b	2 c	38.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	6,088.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	6,088.
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	6,088.
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	28,251.
<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, purposes	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)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	28,251.

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

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)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

BAA

Form **990-PF** (2011)

38.

## Part XIII Undistributed Income (see instructions)

			(a) Corpus		Years pr	( <b>b)</b> ior to 201	10	<b>(c</b> 201	<b>)</b> 10		<b>(d)</b> 2011	
Distributable amount for 2011 from Part line 7	t XI,	<b>.</b>	"/ij,		,	,	堻。		6%			5,088.
2 Undistributed income, if any, as of the end of 201	, ŀ	æ				<del> </del>		*	<u> </u>			, 000.
a Enter amount for 2010 only	'							<del></del> -	0.			in his
<b>b</b> Total for prior years 20 , 20 , 20	ŀ				<u> </u>	····	- 4		,	<u>'</u>	~~~	√#, <del> </del>
3 Excess distributions carryover, if any, to 2011	-							ş				
a From 2006	0.	4	Maj	477	m 1/1/2	3 <sup>6</sup> 4.	*	#/#j/	· 6.	ng gr	77	1 the
<b>b</b> From 2007	0.	A E	<i>""</i>	1	1,1		*  `	14	1,0			14/
<b>c</b> From 2008	0.	\$ \$2*		12	ć. s.	hita	35.	260		,,,		in.
<b>d</b> From 2009	0.	[4]				3		Ping"	•	78g	, ,	
	720.	~1				,						
f Total of lines 3a through e			2,	720.	. 3	j,	<b>*</b>	- 4%/	4	Sales &	' "	10, 191 1
4 Qualifying distributions for 2011 from Pa	art	5/		<i>,</i>					······································			
XII, line 4 ► \$ 28,25		.//						. v				
a Applied to 2010, but not more than line		41,40		71	"	· i	-		0.	ogen, H	10	417
<b>b</b> Applied to undistributed income of prior	Ī						1					
(Election required — see instructions)	years	19.	•	, ,			0.	<b>-55</b> -	**	260	3.89	séite .
c Treated as distributions out of corpus					,	- ×4		ζ,		7	7	v
(Election required — see instructions)				0.	,	<i>ξ</i>						
d Applied to 2011 distributable amount	Ī	4(1)		<i>Ma</i>	\$ - # 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	: T	冷歇	.\ <b>\</b>	84 .		6	5,087.
e Remaining amount distributed out of co	rpus [		22,3	L64.		¥		Ā.				
5 Excess distributions carryover applied to 2011				0.	_				****			0.
(If an amount appears in column (d), th same amount must be shown in columr	ne [				,			•	******	in s	1, 300	
Same amount must be snown in column	' (a) )											,
6 Enter the net total of each column as indicated below:		N. C.	## <u>#</u>	~ J.				** ,,	*			* -
a Corpus Add lines 3f, 4c, and 4e Subtract line 5			24,8	384.								
<b>b</b> Prior years' undistributed income Subtr line 4b from line 2b	ract						0.		2	,	×	Ť
c Enter the amount of prior years' undistr ed income for which a notice of deficier has been issued, or on which the section 4942(a) tax has been previously assess	ncy in									ŧ	.W	460
d Subtract line 6c from line 6b Taxable	Ī	***	<b>\$</b> .	186				,				
amount — see instructions	ŀ			^			0.					
e Undistributed income for 2010 Subtract line 4a f	rom [								·			
line 2a Taxable amount — see instructions	[								0.	ê		
f Undistributed income for 2011 Subtract 4d and 5 from line 1 This amount must distributed in 2012												•
7 Amounts treated as distributions out of	}						_				<u> </u>	1.
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)												
8 Excess distributions carryover from 200 applied on line 5 or line 7 (see instructions)	06 not ons)			0.								
9 Excess distributions carryover to 2012 Subtract lines 7 and 8 from line 6a	2.		24,8	884.								
10 Analysis of line 9												
a Excess from 2007	0.											
<b>b</b> Excess from 2008	0.											
c Excess from 2009	0.											
d Excess from 2010 2,	720.									l		
<b>e</b> Excess from 2011 <b>22</b> ,	164.											
BAA										Fo	orm <b>990-i</b>	PF (2011)

art XIV Private Operating Founda	AVIS FOUNDATI Itions (see Instr		VII-A guestion	27-3759756 9)	P
1 a If the foundation has received a ruling or o	determination letter t			and the ruling	
is effective for 2011, enter the date of the	ruling				7
<b>b</b> Check box to indicate whether the foundate		ating foundation des T		4942(j)(3) or	4942(j)(
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(h) 0010	Prior 3 years	(4) 2009	(a) T.A
investment return from Part X for each year listed	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Tot
<b>b</b> 85% of line 2a			_	-	
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<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>			
art XV Supplementary Information assets at any time during t	(Complete this he year — see in	part only if the structions.)	organization ha	d \$5,000 or more	e in
1 Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they have JOHN R. DAVIS	have contributed mor	re than 2% of the to nan \$5,000) (See s	tal contributions rece ection 507(d)(2))	erved by the foundation	on before th
TRACIE J. DAVIS					
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the <b>NONE</b>	own 10% or more of foundation has a 10	the stock of a corpo % or greater interes	oration (or an equally st	r large portion of the	ownership
2 Information Regarding Contribution, Gra	nt, Gift, Loan, Schola	arship, etc. Progran	ns:		
Check here In the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d	makes contributions	to preselected chari	itable organizations a		
a The name, address, and telephone number TRACIE J. DAVIS	er of the person to w	hom applications sh	nould be addressed	-	
1401 SW PARK RIDGE BLVD, LAWTON	STE B-1 OK 7350	5 (59	30) 357-0220		
b The form in which applications should be					
APPLICATION FORM, REFERRA			-		
					<u> </u>
c Any submission deadlines NONE					

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager or contribution recipient substantial contributor Name and address (home or business) a Paid during the year JAY KAULAY NONE ASSISTANCE TO 405 EAST MAIN INDIGENT INDIV OK 73005 NONE AFFECTED BY DRUGS 12,538. **ANADARKO** NONE ASSISTANCE TO DESIREE SANDOVAL INDIGENT INDIV 4611 BRIGHTON CT 250. LAWTON OK 73501 NONE AFFECTED BY DRUGS FRANKI DELUCA NONE ASSISTANCE TO 3301 NW ATLANTA INDIGENT INDIV OK 73505 NONE AFFECTED BY DRUGS 1,240. T.AWTON DANTE IRBY NONE ASSISTANCE TO 114 ELK DRIVE INDIGENT INDIV CACHE 73527 NONE AFFECTED BY DRUGS 6,485. OK NONE ASSISTANCE TO NINA M. BUJANDA INDIGENT INDIV 405 E MAIN STREET OK 73005 NONE AFFECTED BY DRUGS **ANADARKO** 3,236. MARISELA CONTRERAS NONE ASSISTANCE TO INDIGENT INDIV 4611 SE BRIGHTON CT NONE OK 73501 AFFECTED BY DRUGS 374. LAWTON NONE TAYLAR KEETEN ASSISTANCE TO 314 NW ARLINGTON INDIGENT INDIV LAWTON 73507 NONE AFFECTED BY DRUGS 1,053. HUTTO HIGH SCHOOL NONE STUDENTS AGAINST 200 COLLEGE STREET DRUNK DRIVERS NONE PROGRAM 2,000. HITTO TX 78634 MACARTHUR HIGH SCHOOL PTSA NONE DRUNK 4402 E GORE BLVD DRIVING LAWTON OK 73507 NONE **PROGRAM** 1,000. FIRST BAPTIST CHURCH NONE **401 WEST E AVENUE** NONE CHURCH CAMP 75. CACHE OK 73527 ightharpoons**Total** 3 a 28,251. b Approved for future payment

Total

► 3b

Page 12

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise ind	licated Unre	elated business income	Exclude	by section 512, 513, or 514	(e)
	(a) Busine code		(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions)
1 Program service revenue			code		<u></u>
a					<del></del>
b	l .	·	- <del> </del>		
C					
d	l .				
e	<del>-</del>		-		
g Fees and contracts from governmen	t agencies				
2 Membership dues and assessments			<del></del>		
3 Interest on savings and temporary cash invest		•			
4 Dividends and interest from securities		- + -	14	2,488.	
5 Net rental income or (loss) from rea	<del></del>		<b>14</b> (38)		office of the security of
a Debt-financed property	, , , , , , , , , , , , , , , , , , , ,	777,000	, , , , ,		/ *
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal pro	perty				
7 Other investment income	, ,				
8 Gain or (loss) from sales of assets other than	inventory		18	1,356.	
9 Net income or (loss) from special ev					
10 Gross profit or (loss) from sales of ii					
11 Other revenue		(*)	/ (R*)		, 7
a					
b					· · · · · · · · · · · · · · · · · · ·
c					
d					
e					
e Subtotal Add columns (b), (d), and	(e)	ê.	- <del>1</del>	3,844.	
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d),	(e), and (e)	ž Š	.3	3,844.	3,844.
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d),	(e), and (e)	9 E		· · · · · · · · · · · · · · · · · · ·	3,844.
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v	(e), and (e) verify calculations.)			13	3,844.
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the
e 12 Subtotal Add columns (b), (d), and 13 Total. Add line 12, columns (b), (d), (See worksheet in line 13 instructions to v  Part XVI-B Relationship of Acti  Line No. Explain below how each active	(e) , and (e) verify calculations.)	nplishment of Exem	1pt Purpo	DSes contributed importantly	to the

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								Yes	No
des	the organization directly cribed in section 501(c) iting to political organization	of the Code (other	jage in any of the f er than section 501	following with an (c)(3) organizati	y other organization ons) or in section 5	ı 27,	\$9 m.	4	41 \$2
	nsfers from the reporting		noncharitable exer	nnt organization	of		i in a		
	Cash	, roundation to a	nonananasio exer	npt organization	0.		1a (1)	44.4	X
• • •	Other assets						1a (2)		x
	er transactions							X.g	/ 🕸
	Sales of assets to a no	ncharitable exem	pt organization				1 b (1)		X
• • •	Purchases of assets fro			ition			1 b (2)		Х
(3)	Rental of facilities, equi	pment, or other a	assets				1 b (3)		X
	Reimbursement arrange						1 b (4)		X
(5)	Loans or loan guarante	es					1 b (5)		Х
(6)	Performance of service	s or membership	or fundraising soli	citations			1 b (6)		_X
<b>c</b> Sha	iring of facilities, equipm	ient, mailing lists	, other assets, or p	oald employees			1c		X
		-1 12/ 1			/1-> -11			- 4	
the	ne answer to any of the a goods, other assets, or transaction or sharing a	services given by	the reporting four	ndation If the foi	undation received les	ss than fair market	value in	OI	
(a) Line ni	T		noncharitable exempt o	1		nsfers, transactions, and		ngement	<u></u>
				_					
						<del></del> .			
			<del></del>						
		<del></del>							
		<u> </u>							
2a Is ti	he foundation directly or cribed in section 501(c)	indirectly affiliate of the Code (other	ed with, or related	to, one or more	tax-exempt organiza	ations	□Yes	<b>x</b>	Nο
	es,' complete the follow	•	31 111011 30011011 001	(0)(0)) 0, 11, 500					
	(a) Name of organiza	_ <del>-</del>	(b) Type of	organization	1 (	(c) Description of re	lationship		
	<u></u>								
	<u>-</u>								
Ų	Inder penalties of perjury, I declaration	are that I have examin	ed this return, including	accompanying sched	iles and statements, and t	to the best of my knowled	ge and belief, i	t is true,	,
Sign (			an payer, is based of	a an intermediation of wi	nen preparer has any know	meage	May the I	IRS disci	uss
Here			/ 101	5/15/12	CECDETADY	/TREASURER	this return	n with the shown b	ne pelow
ileie	Signature of officer or trustee	//	Dat		Title	ATABOREK	— (see instr	ructions) Yes	No
	Print/Type preparer's n	ame	Preparer's sign		Date	Check If	PTIN	162	
المنط	Carl Welsh	•		(1), 0.1	05/14/12	_	P000-	761	.3
Paid		WM E BARNE	S PC CPA	· ·····	100/11/1	Firm's EIN > 73	-14419	387	
Prepare	·		rkridge Blv	d Ste Bl			<u> </u>	<u>,                                    </u>	
Use On	·· <b>'</b>	Lawton		OK	73505	Phone no (586	0) 357-	0220	)
BAA						,	Form <b>99</b>		
							23	(	,

#### 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
STANLEY BRUCE DAVIS FO	OUNDATION INC	27-3759756
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust <b>not</b> to 527 political organization	
Form 990-PF	<ul> <li>501(c)(3) exempt private foundation</li> <li>4947(a)(1) nonexempt charitable trust treate</li> <li>501(c)(3) taxable private foundation</li> </ul>	ed as a private foundation
Check if your organization is covere <b>Note.</b> Only a section 501(c)(7), (8),	ed by the <b>General Rule</b> or a <b>Special Rule</b> or (10) organization can check boxes for both the General Ri	ule and a Special Rule See instructions
General Rule  X For an organization filing Form of contributor (Complete Parts I a	990, 990-EZ, or 990-PF that received, during the year, \$5,000 nd II)	D or more (in money or property) from any one
Special Rules		
509(a)(1) and $170(b)(1)(A)(vi)$ .	ation filing Form 990 or 990-EZ that met the 33-1/3% support and received from any one contributor, during the year, a cor m 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete	ntribution of the greater of (1) \$5,000 or
total contributions of more than	(10) organization filing Form 990 or 990-EZ that received from \$1,000 for use exclusively for religious, charitable, scientific, fren or animals. Complete Parts I, II, and III	n any one contributor, during the year, literary, or educational purposes, or
contributions for use exclusively If this box is checked, enter here	(10) organization filing Form 990 or 990-EZ that received from for religious, charitable, etc., purposes, but these contribution the total contributions that were received during the year for the parts unless the <b>General Rule</b> applies to this organization.	ns did not total to more than \$1,000 or an <i>exclusively</i> religious, charitable, etc.
religious, charitable, etc, contrib	outions of \$5,000 or more during the year	<b>▶</b> \$
990-PF) but it <b>must</b> answer 'No' on	covered by the General Rule and/or the Special Rules does Part IV, line 2, of its Form 990, or check the box on line H of not meet the filing requirements of Schedule B (Form 990, 990, 990, 990, 990, 990, 990, 990	f its Form 990-EZ or on Part I, line 2, of its
BAA For Paperwork Reduction Ac 990EZ, or 990-PF.	t Notice, see the Instructions for Form 990,	Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2011

1 of Part 1

STANLEY BRICE DAVIS FOUNDATION INC.

Employer identification number 27-3759756

SIMIL	SI BRUCE DAVIS FOUNDATION INC		33,30
Partil	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 contributions	(d) Type of contribution
1	JOHN R. & TRACIE J. DAVIS  3225 NE SHELTER CREEK DR  LAWTON OK 73507	\$100,000.	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
		\$	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)
(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
			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)

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

# Form **4562**

Department of the Treasury Internal Revenue Service

**Depreciation and Amortization** (Including Information on Listed Property)

Attach to your tax return. ► See separate instructions.

2011

OMB No. 1545 0172

Attachment Sequence No

Identifying number

STANLEY BRUCE DAVIS FOUNDATION INC 27-3759756 Business or activity to which this form relates Form 990-PF page 1 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (C) Elected cost 6 (a) Description of property (b) Cost (business use only) 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 1/11/2000 6-41 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) Part II Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property ) (See instructions ) 17 MACRS deductions for assets placed in service in tax years beginning before 2011 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Assets Placed in Service During 2011 Tax Year Using the General Depreciation System Section B (a) Classification of property (C) Basis for depreciation (f) Method (d) (b) Month and (e) (g) Depreciation year placed in service (business/investment use Recovery period only - see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L 25 yrs g 25-year property MM S/L h Residential rental 27.5 yrs property 27.5 yrs MM S/L i Nonresidential real 39 yrs MM S/L property MM S/L Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 20 a Class life S/L 12 yrs S/L b 12-year c 40-year 40 yrs S/L Part IV | Summary (See instructions ) 21 Listed property Enter amount from line 28 21 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instructions 22 For assets shown above and placed in service during the current year, enter

**Partivos** Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement)

		(a) through (c) n A – Deprecia								or limi	ts for p	passen	ger auto	mobiles	;)_															
24	Do you have eviden	ce to support the b	usiness/investme	nt use claim	ed?	[	Yes		No 24b	If 'Yes	,' is the	evidence	written?		Yes	N														
Ту	(a) pe of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost other I	or	(busine	(e) or depreca ess/anvestr ase only)	ation nent	Recover perio	ery d		d) hod/ ention	Depa	(h) reciation duction	El sect	(i) ected ion 179 cost														
25	Special depreci		e for qualified				ervice o	durin	g the tax	year	and	25			###	74														
26	Property used r			,		51137						1 20	<u> </u>			SP KILTUR V K														
27	Property used 5	0% or less in a	qualified bus	iness use		1					-		Ι		N. Act															
				-											- 70															
					•																									
28	Add amounts in	column (h), lin	nes 25 through	27 Ente	r here ar	nd on lin	e 21, pa	age 1				28			**	* *														
29	Add amounts in	column (ı), line	e 26 Enter he	re and on	ı lıne 7, p	page 1								29	<u>,                                     </u>															
	-1-1- 111				B – Info						1-4				نواني استان	-1														
	plete this section our employees, fi															cies														
			<u>'</u>	Τ (	(a)	(1	b)	ΓĖ	(c)		(d)	)	(	e)	(1	<u></u>														
30	Total business/ during the year commuting mile	(do not include		1 '	Vehicle 1		cle 2	Vehicle	Vehicle 3		Vehicle 3	Vehicle 3	• •	` '		ele 3 Vehicl		` '		` '		Vehicle 4		Vehicle 4		` '		icle 5	1	cle 6
31	Total commuting m	-	he year																											
32	Total other pers	sonal (noncomn	muting)																											
33	Total miles driv lines 30 through		ear Add																											
				Yes	No	Yes	No	Ye	es No	<u>,                                    </u>	Yes	No	Yes	No	Yes	No														
34	Was the vehicle during off-duty		ersonal use																											
35	Was the vehicle than 5% owner	e used primarily or related pers	by a more on?					_																						
36	ls another vehic personal use?	cle available for	r																											
			C — Question							-																				
Ansı 5% (	ver these question where or related	ons to determine I persons (see i	e if you meet a instructions)	an except	ion to co	mpletin	g Sectio	in B	for vehic	les us	ed by	employ	ees who	o are no	t more t	nan														
37	Do you maintain by your employ		cy statement t	hat prohib	oits all pe	ersonal i	use of v	ehicl	es, ınclu	ding c	ommu	tıng,			Yes	No														
38	Do you maintaii employees? Se	n a written polic e the instruction	cy statement the	hat prohib used by	oits perso	nal use e officer	of vehics, direc	cles, tors,	except of	ommi	uting, t	oy your																		
39	Do you treat all	use of vehicles	by employee	s as pers	onal use	?																								
40	Do you provide vehicles, and re				yees, obt	aın ınfo	rmation	from	your en	nploye	es abo	out the	use of t	he																
41	Do you meet the Note: If your ar											es				\$ 4.4- <u>1</u> .5														
Pa	Amort					,									· ************************************	MARIA TOR														
- DOO,	1-70-1828/86	(a)			(b)		(c)			(d)			(e)		<b>(f)</b>															
	Des	cription of costs			mortization egins		Amortizab amount			Code section		pe	rtization riod or centage		Amortizatio for this yea															
42	Amortization of	costs that begi	ıns durıng you	r 2011 tax	year (s	ee instru	uctions)					·		·																
				<del> </del>					-			-		<del> </del>																
43	Amortization o	f costs that ben	ian before vou	r 2011 ta:	x vear		<u>.</u>		<u> </u>			1	43	<del> </del>		353														
		nunts in column	•		•								100	$\vdash$		353														

Name

### **Net Gain or Loss From Sale of Assets**

2011

Employer Identification Number

STANLEY BRUCE DAVIS FOUNDATION INC 27-3759756 **Asset Information:** 100 SHS CATERPILLAR INC **Description of Property** 09/14/11 Date Acquired How Acquired Purchased 12/01/11 Name of Buyer TD AMERITRADE Date Sold 9,788. Cost or other basis (do not reduce by depreciation) 8,394. Sales Price 0. Valuation Method Sales Expense Cost 1,394. Accumulation Depreciation Total Gain (Loss) POWERSHARES DB COMMODITY INDEX K-1 Description of Property Date Acquired 01/21/11 How Acquired Purchased POWERSHARES DB COMMODITY INDEX Date Sold 12/31/11 Name of Buyer 18. Cost or other basis (do not reduce by depreciation) 56. Sales Price Sales Expense 0. Valuation Method Cost -38. Accumulation Depreciation. Total Gain (Loss) Description of Property How Acquired Date Acquired: Name of Buyer Date Sold Sales Price Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method Accumulation Depreciation Total Gain (Loss) Description of Property Date Acquired How Acquired. Date Sold Name of Buyer. Cost or other basis (do not reduce by depreciation) Sales Price Sales Expense Valuation Method Total Gain (Loss) Accumulation Depreciation Description of Property Date Acquired How Acquired: Name of Buyer Date Sold Sales Price Cost or other basis (do not reduce by depreciation) Valuation Method Sales Expense Accumulation Depreciation Total Gain (Loss) Description of Property How Acquired Date Acquired Date Sold Name of Buyer Cost or other basis (do not reduce by depreciation) Sales Price Valuation Method Sales Expense Total Gain (Loss) Accumulation Depreciation Description of Property How Acquired **Date Acquired** Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method Accumulation Depreciation Total Gain (Loss) Description of Property How Acquired Date Acquired Date Sold Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method. Total Gain (Loss) Accumulation Depreciation

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb_
Amortization	353.			
Telephone	1,027.			
Office Expenses	26.			
Other Deductions	68.			

Total

1,474.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
200 ISHARES-AUSTRALIA (EWA)	5,024.	4,288.
300 ISHARES-LATIN AMERICA (ILF)	14,325.	12,771.
200 ISHARES-S&P INDEX (IVV)	25,014.	25,192.
100 ISHARES-MIDCAP 400 IDX (IJH)	9,165.	8,761.
100 ISHARES-S&P SMALLCAP VALUE (IJS)	7,129.	6,976.
300 POWERSHARES-DB COMM INDFD (DBC)	8,271.	8,052.
800 VANGUARD FUNDS MSCI (VWO)	34,379.	30,568.
1000 GENERAL ELECTRIC CO (GE)	19,670.	17,910.
400 POWERSHARES QQQ (QQQ)	22,698.	22,332.
2000 BANK OF AMERICA (BAC)	11,508.	11,120.
Total	157,183.	147,970.

Form 990-PF, Page 2, Part II, Line 15

**Other Assets Stmt** 

Line 15 - Other Assets:	Beginning	End of Year	
	Year Book Value	Book Value	Fair Market Value
ORGANIZATION COSTS, NET	5,235.	4,882.	4,882.
Total	5,235.	4,882.	4,882.