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

2011

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

and ending

Name of foundation THE JOHN B & MARGUERITE M OWENS FAMILY CHARITABLE FOUNDATION, INC		A Employer identification number 52-1611265
Number and street (or P O box number if mail is not delivered to street address) 1217 BERWICK ROAD	Room/suite	B Telephone number (410) 727-8619
City or town state and ZIP code TOWSON, MD 21204		C If exemption application is pending check here ☐
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1 Foreign organizations check here ☐ Foreign organizations meeting the 85% test 2 check here and attach computation ☐
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A) check here ☐
I Fair market value of all assets at end of year (from Part II col (c) line 16) \$ 207,786	J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I column (d) must be on cash basis)	F If the foundation is in a 60 month termination under section 507(b)(1)(B) check here ☐

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b) (c) and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions gifts grants etc received		100,304		N/A	
2 Check ☐ if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities		7,087	7,087		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		<6,471>			STATEMENT 1
b Gross sales price for all assets on line 6a		159,891			
7 Capital gain net income (from Part IV line 2)			84,913		
8 Net short term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total Add lines 1 through 11		100,920	92,000		
13 Compensation of officers directors trustees etc		0	0		0
14 Other employee salaries and wages					
15 Pension plans employee benefits					
16a Legal fees					
b Accounting fees STMT 3		750	0		0
c Other professional fees STMT 4		121	0		0
17 Interest					
18 Taxes STMT 5		121	0		0
19 Depreciation and depletion					
20 Occupancy					
21 Travel conferences and meetings					
22 Printing and publications					
23 Other expenses					
24 Total operating and administrative expenses Add lines 16 through 23		992	0		0
25 Contributions gifts grants paid		8,525			8,525
26 Total expenses and disbursements Add lines 24 and 25		9,517	0		8,525
27 Subtract line 26 from line 12		91,403			
a Excess of revenue over expenses and disbursements			92,000		
b Net investment income (if negative enter 0)					
c Adjusted net income (if negative enter 0)				N/A	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of year amounts only		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash non interest bearing				
	2	Savings and temporary cash investments		2,939.	2,494.	2,494.
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers directors trustees and other disqualified persons				
	7	Other notes and loans receivable ▶				
		Less allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments U S and state government obligations				
	b	Investments corporate stock	STMT 6	94,577	179,836	190,878
	c	Investments corporate bonds				
Liabilities	11	Investments land buildings and equipment basis ▶				
		Less accumulated depreciation ▶				
	12	Investments mortgage loans				
	13	Investments other	STMT 7	6,104	12,693	14,414
	14	Land buildings and equipment basis ▶				
		Less accumulated depreciation ▶				
	15	Other assets (describe ▶)				
	16	Total assets (to be completed by all filers)		103,620	195,023	207,786
	17	Accounts payable and accrued expenses				
	18	Grants payable				
Net Assets or Fund Balances	19	Deferred revenue				
	20	Loans from officers directors trustees and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)		0	0	
		Foundations that follow SFAS 117 check here ▶ ☒				
		and complete lines 24 through 26 and lines 30 and 31				
	24	Unrestricted		103,620	195,023	
	25	Temporarily restricted				
	26	Permanently restricted				
		Foundations that do not follow SFAS 117 check here ▶ ☐				
		and complete lines 27 through 31				
	27	Capital stock trust principal or current funds				
	28	Paid in or capital surplus or land bldg and equipment fund				
29	Retained earnings accumulated income endowment or other funds					
	30	Total net assets or fund balances		103,620	195,023	
	31	Total liabilities and net assets/fund balances		103,620	195,023	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year Part II column (a) line 30 (must agree with end of year figure reported on prior year's return)	1	103,620
2	Enter amount from Part I line 27a	2	91,403
3	Other increases not included in line 2 (itemize) ▶	3	0
4	Add lines 1 2 and 3	4	195,023
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5) Part II, column (b), line 30	6	195,023

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2 story brick warehouse, or common stock, 200 shs, MLC Co.)	(b) How acquired P Purchase D Donation	(c) Date acquired (mo day yr)	(d) Date sold (mo day yr)
1a			
b SEE ATTACHED STATEMENT			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e 159,891		74,978	84,913

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j) if any	(l) Gains (Col (h) gain minus col (k) but not less than 0) or Losses (from col (h))
a			
b			
c			
d			
e			84,913

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I line 7
If (loss), enter 0 in Part I line 7 } **2** 84,913

3 Net short term capital gain or (loss) as defined in sections 1222(5) and (6)
If gain, also enter in Part I line 8 column (c)
If (loss), enter 0 in Part I, line 8 } **3** N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If Yes, the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year. See instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable use assets	(d) Distribution ratio (col (b) divided by col (c))
2010	6,886	119,967	057399
2009	8,843	133,544	066218
2008	7,000	164,745	042490
2007	10,957	193,027	056764
2006	8,500	197,661	043003

2 Total of line 1 column (d)	2	265874
3 Average distribution ratio for the 5 year base period. Divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years.	3	053175
4 Enter the net value of noncharitable use assets for 2011 from Part X line 5.	4	163,914
5 Multiply line 4 by line 3.	5	8,716
6 Enter 1% of net investment income (1% of Part I line 27b).	6	920
7 Add lines 5 and 6.	7	9,636
8 Enter qualifying distributions from Part XII line 4.	8	8,525

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.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2) check here ☐ and enter N/A on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V check here ☐ and enter 1% of Part I line 27b	1	1,840.
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I line 12 col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter 0)	2	0
3	Add lines 1 and 2	3	1,840
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter 0)	4	0
5	Tax based on investment income Subtract line 4 from line 3 If zero or less enter 0	5	1,840
6	Credits/Payments		
a	2011 estimated tax payments and 2010 overpayment credited to 2011	6a	
b	Exempt foreign organizations tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments Add lines 6a through 6d	7	0
8	Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	
9	Tax due If the total of lines 5 and 8 is more than line 7 enter amount owed	9	1,840
10	Overpayment If line 7 is more than the total of lines 5 and 8 enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ☐ Refunded ☐	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a 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?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is Yes to 1a or 1b attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
1c Did the foundation file Form 1120 POL for this year?		X
2 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		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If Yes attach a detailed description of the activities		X
3 Has the foundation made any changes not previously reported to the IRS in its governing instrument articles of incorporation or bylaws or other similar instruments? If Yes attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1 000 or more during the year?		X
b If Yes has it filed a tax return on Form 990 T for this year?		
5 Was there a liquidation termination dissolution or substantial contraction during the year? If Yes attach the statement required by General Instruction T		X
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 conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5 000 in assets at any time during the year? If Yes complete Part II col (c) and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ MD		
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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If Yes complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If Yes attach a schedule listing their names and addresses		X

N/A

**THE JOHN B & MARGUERITE M OWENS
FAMILY CHARITABLE FOUNDATION, INC**

52-1611265

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Part 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		X
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	X	
14	The books are in care of ► <u>HARTMANN, BLACKMON, & KILGORE, P C</u> Telephone no ► <u>(251) 928-2443</u> Located at ► <u>P O BOX 1469, FAIRHOPE, AL</u> ZIP+4 ► <u>36532</u>			
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	15	N/A	
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? See the instructions for exceptions and filing requirements for Form TD F 90 22 1 If "Yes," enter the name of the foreign country ►	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column unless an exception applies		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange or leasing of property with a disqualified person? ☐ Yes ☒ No		
(2)	Borrow money from lend money to or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3)	Furnish goods services or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
(4)	Pay compensation to or pay or reimburse the expenses of a disqualified person? ☐ Yes ☒ No		
(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 ☒ 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 ☒ No		
b	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)? Organizations relying on a current notice regarding disaster assistance check here	1b	N/A
c	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))		
a	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 ☒ No If "Yes" list the years ►		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed answer No and attach statement see instructions)	2b	N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a list the years here ►		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b	If "Yes" did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26 1969 (2) the lapse of the 5 year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest or (3) the lapse of the 10 15 or 20 year first phase holding period? (Use Schedule C Form 4720 to determine if the foundation had excess business holdings in 2011)	3b	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955) or to carry on directly or indirectly any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel study or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable etc organization described in section 509(a)(1) (2) or (3) or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious charitable scientific literary or educational purposes or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1) (5) did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4) does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If Yes attach the statement required by Regulations section 53.4945 5(d)

6a Did the foundation during the year receive any funds directly or indirectly to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation during the year pay premiums directly or indirectly on a personal benefit contract?

6b

X

If Yes to 6b file Form 8870

7a At any time during the tax year was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers directors, trustees, foundation managers and their compensation

(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
JOHN B OWENS - DECEASED 02/04/2012 7425 PELICAN BAY BLVD #1604 NAPLES, FL 34108	CO-TRUSTEE 0 00	0	0	0
DAVID OWENS 1217 BERWICK ROAD TOWSON, MD 21204	CO-TRUSTEE 0 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1) If none enter "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				

Total number of other employees paid over \$50,000

0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services If none enter "NONE "		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations see instructions.)		
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	163,693.
b Average of monthly cash balances	1b	2,717
c Fair market value of all other assets	1c	
d Total (add lines 1a b and c)	1d	166,410
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2 Acquisition indebtedness applicable to line 1 assets	2	0
3 Subtract line 2 from line 1d	3	166,410
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount see instructions)	4	2,496
5 Net value of noncharitable use assets Subtract line 4 from line 3 Enter here and on Part V line 4	5	163,914
6 Minimum investment return Enter 5% of line 5	6	8,196

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)		
1 Minimum investment return from Part X line 6		1 8,196
2a Tax on investment income for 2011 from Part VI line 5	2a	1,840
b Income tax for 2011 (This does not include the tax from Part VI)	2b	
c Add lines 2a and 2b	2c	1,840
3 Distributable amount before adjustments Subtract line 2c from line 1	3	6,356
4 Recoveries of amounts treated as qualifying distributions	4	0
5 Add lines 3 and 4	5	6,356
6 Deduction from distributable amount (see instructions)	6	0
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	6,356

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	8,525.
b Program related investments total from Part IX B	1b	0
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable etc purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
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	8,525
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	5	0
6 Adjusted qualifying distributions Subtract line 5 from line 4	6	8,525

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI line 7				6,356
2 Undistributed income if any as of the end of 2011				
a Enter amount for 2010 only			0	
b Total for prior years		0		
3 Excess distributions carryover if any to 2011				
a From 2006				
b From 2007				
c From 2008				
d From 2009	205			
e From 2010	966			
f Total of lines 3a through e	1,171			
4 Qualifying distributions for 2011 from Part XII line 4 ▶ \$ 8,525				
a Applied to 2010 but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required see instructions)		0		
c Treated as distributions out of corpus (Election required see instructions)	0			
d Applied to 2011 distributable amount				6,356.
e Remaining amount distributed out of corpus	2,169			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d) the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f 4c and 4e Subtract line 5	3,340			
b Prior years undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years undistributed income for which a notice of deficiency has been issued or on which the section 4942(a) tax has been previously assessed		0		
d Subtract line 6c from line 6b Taxable amount see instructions		0		
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount see instr			0	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7	0			
9 Excess distributions carryover to 2012 Subtract lines 7 and 8 from line 6a	3,340			
10 Analysis of line 9				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009	205			
d Excess from 2010	966			
e Excess from 2011	2,169			

Part XIV Private Operating Foundations (see instructions and Part VII A question 9) **N/A**

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation and the ruling is effective for 2011 enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities					
Subtract line 2d from line 2c					
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					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions)

1 Information Regarding Foundation Managers

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5 000) (See section 507(d)(2))

JOHN B OWENS - DECEASED 02/04/2012

- b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship etc , Programs

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts grants etc (see instructions) to individuals or organizations under other conditions complete items 2a b c and d

- a The name address and telephone number of the person to whom applications should be addressed

- b The form in which applications should be submitted and information and materials they should include

- c Any submission deadlines

- d Any restrictions or limitations on awards such as by geographical areas charitable fields kinds of institutions or other factors

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ASCPA 424 E 92ND ST NEW YORK, NY 10128	N/A	501(C)(3)	EDUCATION	100.
BALTIMORE MUSEUM OF ART 10 ART MUSEUM DR BALTIMORE, MD 21218	N/A	501(C)(3)	ART MUSEUM	150
BAY AREA RIDGE TRAIL COUNCIL 1007 GENERAL KENNEDY AVENUE SUITE 3 SAN FRANCISCO, CA 941291405	N/A	501(C)(3)	EDUCATION	200
ST MICHAELS (CHESAPEAKE BAY) MARITIME MUSEUM 213 N TALBOT ST ST MICHAELS, MD 21663	N/A	501(C)(3)	EDUCATION	500
DEERWOOD FOUNDATION 213 SOUTH ST PORTSMOUTH, NH 03801	N/A	501(C)(3)	EDUCATION	100.
Total	SEE CONTINUATION SHEET(S)			8,525.
b Approved for future payment				
NONE				
Total				0.

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

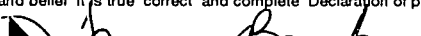
- | | | Yes | No |
|----------|--|-------|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527 relating to political organizations? | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of | | |
| | (1) Cash | 1a(1) | X |
| | (2) Other assets | 1a(2) | X |
| b | Other transactions | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | X |
| | (3) Rental of facilities equipment or other assets | 1b(3) | X |
| | (4) Reimbursement arrangements | 1b(4) | X |
| | (5) Loans or loan guarantees | 1b(5) | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | X |
| c | Sharing of facilities equipment mailing lists other assets or paid employees | 1c | X |
| d | If the answer to any of the above is "Yes" complete the following schedule. Column (b) should always show the fair market value of the goods other assets or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement show in column (d) the value of the goods other assets or services received. | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with or related to one or more tax exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b If Yes, complete the following schedule**

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here	Under penalties of perjury I declare that I have examined this return including accompanying schedules and statements and to the best of my knowledge and belief it is true correct and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge				May the IRS discuss this return with the preparer shown below (see instr)? ☐ Yes ☐ No		
	 Signature of officer or trustee		Date <u>10/15/12</u> Title <u>CPA</u>				
Paid Preparer Use Only	Print/Type preparer's name XAVIER A HARTMANN, III, CPA		Preparer's signature 		Date <u>11/1/12</u>	Check ☐ if self employed	PTIN P00058219
	Firm's name ▶ HARTMANN, BLACKMON & KILGORE, P C					Firm's EIN ▶ 63-1031732	
	Firm's address ▶ P O BOX 1469 FAIRHOPE, AL 36533-1469					Phone no (251) 928-2443	

Form **990-PF** (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

THE JOHN B & MARGUERITE M OWENS
FAMILY CHARITABLE FOUNDATION, INC

Employer identification number

52-1611265

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 private foundation☐

527 political organization

Form 990 PF

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule****Note** Only a section 501(c)(7) (8) or (10) organization can check boxes for both the General Rule and a Special Rule See instructions**General Rule**☒

For an organization filing Form 990 990 EZ or 990 PF that received during the year \$5 000 or more (in money or property) from any one contributor Complete Parts I and II

Special Rules☐

For a section 501(c)(3) organization filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor during the year a contribution of the greater of (1) \$5 000 or (2) 2% of the amount on (i) Form 990 Part VIII line 1h or (ii) Form 990 EZ line 1 Complete Parts I and II

☐For a section 501(c)(7) (8) or (10) organization filing Form 990 or 990 EZ that received from any one contributor during the year total contributions of more than \$1 000 for use *exclusively* for religious charitable scientific literary or educational purposes or the prevention of cruelty to children or animals Complete Parts I II and III☐For a section 501(c)(7) (8) or (10) organization filing Form 990 or 990 EZ that received from any one contributor during the year contributions for use *exclusively* for religious charitable etc purposes but these contributions did not total to more than \$1 000 If this box is checked enter here the total contributions that were received during the year for an *exclusively* religious charitable etc purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious charitable etc contributions of \$5 000 or more during the year ▶ \$ _____**Caution** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990 990 EZ or 990 PF) but it **must** answer **No** on Part IV line 2 of its Form 990 or check the box on line H of its Form 990 EZ or on Part I line 2 of its Form 990 PF to certify that it does not meet the filing requirements of Schedule B (Form 990 990 EZ or 990 PF)

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

Name of organization THE JOHN B & MARGUERITE M OWENS FAMILY CHARITABLE FOUNDATION, INC	Employer identification number 52-1611265
--	---

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No	(b) Name address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<u>JOHN B OWENS TRUST</u> <u>7425 PELICAN BAY BLVD APT 1604</u> <u>NAPLES, FL 34108-5507</u>	\$ <u>100,304</u>	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)

Employer identification number

FAMILY CHARITABLE FOUNDATION, INC

52-1611265

Part III Exclusively religious charitable etc individual contributions to section 501(c)(7) (8) or (10) organizations that total more than \$1,000 for the year Complete columns (a) through (e) and the following line entry For organizations completing Part III enter the total of exclusively religious charitable etc contributions of \$1 000 or less for the year (Enter this information once) ► \$ _____

Use duplicate copies of Part III if additional space is needed

123454 01 23 12

THE JOHN B & MARGUERITE M OWENS
FAMILY CHARITABLE FOUNDATION, INC

52-1611265

Part XV **Supplementary Information**

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FEED MY SHEEP P O BOX 847 PUUNENE, HI 96784	N/A	501(C)(3)	HEALTH RELIGIOUS	1,000.
FIRST UNITED METHODIST CHURCH OF OVIEDO 263 KING ST OVIEDO, FL 32765	N/A	501(C)(3)	CHURCH	200
FLORIDA KEYS SPCA 5230 COLLEGE ROAD KEY WEST, FL 33040	N/A	501(C)(3)	ANIMAL PROTECTION	500.
GILMAN SCHOOL 5407 ROLAND AVE #1 BALTIMORE, MD	N/A	501(C)(3)	EDUCATION	100.
KENYON COLLEGE 103 COLLEGE PARK DR GAMBIER, OH 43022	N/A	501(C)(3)	EDUCATION	100
MARYLAND HISTORICAL SOCIETY 201 W MONUMENT ST BALTIMORE, MD 21201	N/A	501(C)(3)	EDUCATION	150.
NANTUCKET HISTORICAL ASSOCIATION PO BOX 1016 NANTUCKET, MA 02554	N/A	501(C)(3)	EDUCATION	125
OPERATION SHOEBOX P O BOX 100 PORTLAND, OR 97207	N/A	501(C)(3)	HEALTHCARE	1,000
PACIFIC OAKS COLLEGE & CHILDREN S SCHOOL 5 WESTMORELAND PLACE PACSADENA, CA 91103	N/A	501(C)(3)	EDUCATION	100.
SANCHEZ ART CENTER 1220-B LINDA MAR PACIFICA, CA 94044	N/A	501(C)(3)	EDUCATION	125
Total from continuation sheets				7,475.

THE JOHN B & MARGUERITE M OWENS
FAMILY CHARITABLE FOUNDATION, INC

52-1611265

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ST JOSEPH S INDIAN SCHOOL P O BOX 100 CHAMBERLAIN, SD 57325	N/A	501(C)(3)	EDUCATION	100.
ST JAMES PARISH 5757 SOLEMONS ISLAND RD LOTHIAN, MD 207119707	N/A	501(C)(3)	CHURCH	1,000.
ST JOHN S COLLEGE P O BOX 1671 ANNAPOLIS, MD 21404	N/A	501(C)(3)	EDUCATION	500.
STONELEIGH-BURNHAM SCHOOL 574 BERNARDSTON RD GREENFIELD, MA 01301	N/A	501(C)(3)	EDUCATION	100
TRINITY COLLEGE 300 SUMMIT ST HARTFORD, CT 06106	N/A	501(C)(3)	EDUCATION	100.
U S LACROSSE 113 W UNIVERSITY PKWY BALTIMORE, MD 21210	N/A	501(C)(3)	SPORTS EDUCATION	200.
UNIVERISTY OF CALIFORNIA IRVINE UNIVERSITY OF CALIFORNIA IRVINE IRVINE, CA 92697	N/A	501(C)(3)	EDUCATION	100.
WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 200907180	N/A	501(C)(3)	EDUCATION	100
BROWN SPORTS FOUNDATION PO BOX 1925 PROVIDENCE, RI 02912	N/A	501(C)(3)	SPORTS EDUCATION	100
BROWN UNIVERSITY ANNUAL FUND PO BOX 1877 PROVIDENCE, RI 02912	N/A	501(C)(3)	EDUCATION	100
Total from continuation sheets				

THE JOHN B & MARGUERITE M OWENS
FAMILY CHARITABLE FOUNDATION, INC

52-1611265

Part XV **Supplementary Information**

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
CENTRAL FLORIDA ZOO 3755 NW HWY 17-92 SANFORD, FL 32773	N/A	501(C)(3)	ZOO	200.
CHESAPEAKE BAY FOUNDATION 6 HERNDON AVE ANNAPOLIS, MD 21403	N/A	501(C)(3)	FOUNDATION SUPPORT	100.
CORPORATION OF FINE ARTS MUSEUMS 50 HAGIWARA TEA GARDEN DR SAN FRANCISCO, CA 94118	N/A	501(C)(3)	MUSEUM	125
GETTYSBURG COLLEGE FUND 300 N WASHINGTON ST BOX 423 GETTYSBURG, PA 17325	N/A	501(C)(3)	EDUCATION	100
HABITAT FOR HUMANITY 121 HABITAT ST AMERICUS, GA 31709	N/A	501(C)(3)	SUPPORT ORGANIZATION	50
HOPE FOUNDATION UNKNOWN UNKNOWN, FL UNKNOWN	N/A	501(C)(3)	SUPPORT HOPE FOUNDATION	300.
LIVING CLASSROOMS FOUNDATION 802 SOUTH CAROLINA ST BALTIMORE, MD 21231	N/A	501(C)(3)	EDUCATION	100
NANTUCKET DREAMLAND FOUNDATION 17 SOUTH WATER ST NANTUCKET, MA 02554	N/A	501(C)(3)	SUPPORT PERFORMING ARTS FOUNDATION	100
NOTRE DAME DE NAMUR UNIVERSITY 1500 RALSTON AVE BELMONT, CA 94002	N/A	501(C)(3)	EDUCATION	100
YMCA YOUTH SCHOLARSHIP FUND UNKNOWN UNKNOWN, FL UNKNOWN	N/A	501(C)(3)	EDUCATION	300
Total from continuation sheets				

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold e.g. real estate 2 story brick warehouse or common stock 200 shs MLC Co		(b) How acquired P Purchase D Donation	(c) Date acquired (mo day yr)	(d) Date sold (mo day yr)
1a 1004 82 MFB NORTHERN FUNDS EMERGING MKTSEQTY INDE			VARIOUS	12/28/11
b 1998 28 MFB NORTHERN INTL EQTY INDEX FD			VARIOUS	12/28/11
c 650 ADP		D	06/14/90	04/08/11
d 1500 CISCO		D	11/16/94	04/08/11
e 1021 97 NORTHERN FUNDS BD INDEX FD			VARIOUS	04/14/11
f 602 24 MFB NORTHERN FUNDS EMERGING MKTSEQTY INDEX			VARIOUS	12/28/11
g 300 MFB NORTN HI YIELD FXD INC FD			09/10/07	04/14/11
h 1503 74 MFB NORTN INTL EQTY INDEX			VARIOUS	VARIOUS
i 1500 MICROSOFT		D	03/11/91	04/08/11
j				
k CAPITAL GAINS DIVIDENDS				
l				
m				
n				
o				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 10,199		12,643	<2,444 >
b 17,525		21,984	<4,459 >
c 34,098		4,056	30,042
d 26,429		2,802	23,627
e 10,700		10,211	489
f 6,113		5,432	681
g 2,250		2,361	<111 >
h 13,345		13,427	<82 >
i 39,119		2,062	37,057
j			0
k 113			113
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j) if any	(l) Losses (from col (h)) Gains (excess of col (h) gain over col (k) but not less than 0)
a			<2,444 >
b			<4,459 >
c			30,042
d			23,627
e			489
f			681
g			<111 >
h			<82 >
i			37,057
j			0
k			113
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I line 7
If (loss) enter 0 in Part I line 7 }

2

84,913

3 Net short term capital gain or (loss) as defined in sections 1222(5) and (6)
If gain, also enter in Part I line 8 column (c)
If (loss) enter 0 in Part I line 8 }

3

N/A

FORM 990-PF GAIN OR (LOSS) FROM SALE OF ASSETS STATEMENT 1

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
1004 82 MFB NORTHERN FUNDS EMERGING MKTSEQTY INDEX FD		VARIOUS	12/28/11

(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE OF SALE	(E) DEPREC	(F) GAIN OR LOSS
10,199	12,643	0	0	<2,444 >

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
1998 28 MFB NORTHERN INTL EQTY INDEX FD		VARIOUS	12/28/11

(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE OF SALE	(E) DEPREC	(F) GAIN OR LOSS
17,525	21,984	0	0	<4,459 >

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
650 ADP		06/14/90	04/08/11

(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE OF SALE	(E) DEPREC	(F) GAIN OR LOSS
34,098	32,331	0	0	1,767

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE OF SALE	(E) DEPREC	(F) GAIN OR LOSS
1500 CISCO	26,429	27,945	0	0	<1,516 >

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE OF SALE	(E) DEPREC	(F) GAIN OR LOSS
1021 97 NORTHERN FUNDS BD INDEX FD	10,700	10,211	0	0	489

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE OF SALE	(E) DEPREC	(F) GAIN OR LOSS
602 24 MFB NORTHERN FUNDS EMERGING MKTSEQTY INDEX FD	6,113	5,432	0	0	681

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE OF SALE	(E) DEPREC	(F) GAIN OR LOSS
300 MFB NORTHN HI YIELD FXD INC FD	2,250	2,361	0	0	<111 >

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
1503 74 MFB NORTHN INTL EQTY INDEX	13,345	13,427	0	0	VARIOUS	VARIOUS

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
1500 MICROSOFT	39,119	40,028	0	0	03/11/91	04/08/11

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED DEPREC	(F) DATE ACQUIRED GAIN OR LOSS	DATE SOLD
	0	0	0	0	0	0

CAPITAL GAINS DIVIDENDS FROM PART IV	113
TOTAL TO FORM 990-PF, PART I, LINE 6A	<6,471 >

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	2
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
NORTHERN TRUST BANK OF FLORIDA	7,200	113	7,087
TOTAL TO FM 990-PF, PART I, LN 4	7,200	113	7,087

FORM 990-PF	ACCOUNTING FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	750	0		0	
TO FORM 990-PF, PG 1, LN 16B	750	0		0	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
NORTHERN TRUST BANK MANAGEMENT FEES	121	0		0	
TO FORM 990-PF, PG 1, LN 16C	121	0		0	

FORM 990-PF	TAXES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES	121	0.		0	
TO FORM 990-PF, PG 1, LN 18	121	0		0	

FORM 990-PF	CORPORATE STOCK		STATEMENT	6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
MFB NORTHERN HIGH YIELD	19,913	19,011		
MFB NORTHERN FDS BD INDEX FD	41,090	43,920		
MFB NORTHERN FUNDS STK INDEX FD	54,106	62,349		
MFB NORTHERN MID CAP INDEX FD	5,757	7,006		
MFB NORTHERN FUNDS SMALL CAP INDEX FD	7,253	7,428		
MFB NORTHERN INTL EQUITY INDEX FD	0	0		
MFB NORTHERN EMERGING MARKETS EQUITY FUND	0	0		

MFC VANGUARD INTL EQUITY INDEX FDS	27,573	27,755
MFO DFA INVT DIMENSIONS GROUP INC	17,360	17,523
MFB NORTHERN FDS GLOBAL REAL ESTATE INDEX FD	6,784	5,886
TOTAL TO FORM 990-PF, PART II, LINE 10B	179,836	190,878

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	7
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MFC SPDR GOLD TR GOLD SHS	COST	7,801	9,119
MFO PIMCO FDS PAC INVT MGMT SER	COST		
COMMODITY REALRETURN STRATEGY F		4,892	5,295
TOTAL TO FORM 990-PF, PART II, LINE 13		12,693	14,414

• If you are filing for an **Additional (Not Automatic) 3 Month Extension**, complete only **Part II** and check this box ☒

Note Only complete Part II if you have already been granted an automatic 3 month extension on a previously filed Form 8868

• If you are filing for an **Automatic 3 Month Extension** complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time Only file the original (no copies needed)

Type or print File by the due date for filing your return See instructions	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer see instructions THE JOHN B & MARGUERITE M OWENS FAMILY CHARITABLE FOUNDATION, INC	Employer identification number (EIN) or ☒ 52-1611265
	Number street and room or suite no If a P O box see instructions 1217 BERWICK ROAD	Social security number (SSN) ☐
	City town or post office state and ZIP code For a foreign address see instructions TOWSON, MD 21204	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990 BL	02	Form 1041 A	08
Form 990 EZ	01	Form 4720	09
Form 990 PF	04	Form 5227	10
Form 990 T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990 T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868

HARTMANN, BLACKMON, & KILGORE, P C

• The books are in the care of ☒ **P O BOX 1469 - FAIRHOPE, AL 36532**

Telephone No ☒ **(251) 928-2443**

FAX No ☒ **(251) 928-6921**

• If the organization does not have an office or place of business in the United States check this box ☐

• If this is for a Group Return enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3 month extension of time until **NOVEMBER 15, 2012**

5 For calendar year **2011** or other tax year beginning _____ and ending _____

6 If the tax year entered in line 5 is for less than 12 months check reason ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO GATHER SUFFICIENT INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN

8a If this application is for Form 990 BL 990 PF 990 T 4720 or 6069 enter the tentative tax less any nonrefundable credits See instructions	8a	\$	0
b If this application is for Form 990 PF 990 T 4720 or 6069 enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0
c Balance due Subtract line 8b from line 8a Include your payment with this form if required by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	0

Signature and Verification must be completed for Part II only

Under penalties of perjury I declare that I have examined this form including accompanying schedules and statements and to the best of my knowledge and belief it is true correct and complete and that I am authorized to prepare this form

Signature

Title

Date

Form 8868 (Rev 1 2012)