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Form 990-PF

Department of the Treasury  
Internal Revenue ServiceReturn of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

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

OMB No 1545-0052

2011

For calendar year 2011, or tax year beginning , 2011, and ending , 20

Name of foundation AMARYLLIS FOUNDATION INC		A Employer identification number 52-1622346
Number and street (or P.O. box number if mail is not delivered to street address) 3461B SUNSET KEY CIRCLE	Room/suite	B Telephone number (see instructions) (301) 220-1152
City or town, state, and ZIP code PUNTA GORDA FL 33955		C If exempt application is pending, check here <input type="checkbox"/>
G Check all that apply	<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change	<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 163,913	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), & (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
R E V E N U E	1 Contributions, gifts, grants, etc., received (attach schedule)	27,150			
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B				
	3 Interest on savings and temp. cash investments	48	48	48	
	4 Dividends and interest from securities	1,673	1,673	1,673	
	5 a Gross rents				
	b Net rental income or (loss)				
	6 a Net gain/(loss) from sale of assets not on line 10	-925			
	b Gross sales price for all assets on line 6a 296,287				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications			0	
	10 a Gross sales less rtns. & allowances 0				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	27,946	1,721	1,721		
O P E R A T I N G & A D M I N I S T R A T I V E	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16 a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) #1	600	600	600	
	c Other professional fees (attach schedule) #2		4	4	
	17 Interest				
	18 Taxes (attach schedule) (see instructions) #3	219	219	219	
	19 Depreciation (attach sch.) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
23 Other expenses (attach schedule) #4	1,635	1,635	1,635		
24 Total operating and administrative expenses. Add lines 13 through 23	2,454	2,458	2,458	0	
25 Contributions, gifts, grants paid	10,000			10,000	
26 Total exp. & disbursements. Add lines 24 and 25	12,454	2,458	2,458	10,000	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	15,492				
b Net investment income (if neg., enter -0-)					
c Adjusted net income (if neg., enter -0-)					

For Paperwork Reduction Act Notice, see the Instructions.

Form 990-PF (2011)

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See inst.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
ASSETS	1	Cash -- non-interest-bearing		78,665	118,998	118,998
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less allowance for doubtful accts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments -- U S and state govt obligations (attach schedule)				
	b	Investments -- corporate stock (attach schedule)				
	c	Investments -- corporate bonds (attach schedule)				
	11	Investments -- land, buildings, and equipment basis ▶				
	Less accumulated depreciation (attach schedule) ▶					
12	Investments -- mortgage loans					
13	Investments -- other (attach schedule) #5	133,466	16,280	16,280		
14	Land, buildings, and equipment basis ▶ 28,635 #6		28,635	28,635		
	Less accumulated depreciation (attach schedule) ▶					
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers -- see the instructions Also, see page 1, item I)	212,131	163,913	163,913		
LIABILITIES	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)	0	0		
FUNDS	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted	212,131	163,913		
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, ck. here ▶ <input type="checkbox"/> 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 (see the instructions)	212,131	163,913		
	31	Total liabilities and net assets/fund balances (see the inst.)	212,131	163,913		

## 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	212,131
2	Enter amount from Part I, line 27a	2	15,492
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	227,623
5	Decreases not included in line 2 (itemize) ▶ SEE ATTACHMENT #7	5	63,710
6	Total net assets or fund balances at end of year (line 4 minus line 5) -- Part II, column (b), line 30	6	163,913

**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.)
<b>1a</b> SEE ATTACHMENT #8			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

(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)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

(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))
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	<b>2</b>	- 925
<b>3</b> 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) (see the instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	- 925

**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.

(a) Base period years Calendar year (or tax year beg. in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2010			
2009			
2008			
2007			
2006			

  

<b>2</b> Total of line 1, column (d)	<b>2</b>	
<b>3</b> 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	<b>3</b>	1
<b>4</b> Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	<b>4</b>	
<b>5</b> Multiply line 4 by line 3	<b>5</b>	
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	
<b>7</b> Add lines 5 and 6	<b>7</b>	
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	

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 the instructions)**

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

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1 a</b> 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?	<b>1a</b>	X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<b>1b</b>	X
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?	<b>1c</b>	X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
<b>2</b> 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	<b>2</b>	X
<b>3</b> 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	<b>3</b>	X
<b>4 a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<b>4a</b>	X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<b>4b</b>	N/A
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	<b>5</b>	X
<b>6</b> 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?	<b>6</b>	X
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the yr? If "Yes," complete Part II, col (c), & Part XV	<b>7</b>	X
<b>8 a</b> Enter the states to which the foundation reports or with which it is registered (see the instructions) <input type="checkbox"/> NONE		
<b>b</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	<b>8b</b>	X
<b>9</b> 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	<b>9</b>	X
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	<b>10</b>	X

**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 ► N/A	13	X	
14	The books are in care of ► SEE ATTACHMENT #9 Telephone no ► Located at ► ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> -- Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15			
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 ► <input type="checkbox"/>	1b	X
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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20 __, 20 __, 20 __, 20 __		
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement -- see instructions)	2b	X
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20 __, 20 __, 20 __, 20 __		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	X
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

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

<b>5a</b> 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))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? (see instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> 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)? Organizations relying on a current notice regarding disaster assistance check here	N/A <input checked="" type="checkbox"/>	5b	
<b>c</b> 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? If "Yes," attach the statement required by Regulations section 53.4945-5(d)	N/A <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		6b	X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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**

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(a) Name and address	(b) Title, and avg hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred comp	(e) Expense account, other allowances
SEE ATTACHMENT #10				
<b>2 Compensation of five highest-paid employees (other than those included on line 1 -- see instructions) If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and avg hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000</b>				0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services (see the instructions). 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

**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	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1	
2	
All other program-related investments See the instructions	
3	
<b>Total.</b> Add lines 1 through 3	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see the instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	
<b>b</b>	Average of monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of all other assets (see the instructions)	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	0
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see the instructions)	<b>4</b>	
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	

**Part XI Distributable Amount** (see the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	
<b>2a</b>	Tax on investment income for 2011 from Part VI, line 5	<b>2a</b>	
<b>b</b>	Income tax for 2011 (This does not include the tax from Part VI)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see the instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	0

**Part XII Qualifying Distributions** (see the instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. -- total from Part I, column (d), line 26	<b>1a</b>	10,000
<b>b</b>	Program-related investments -- total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	10,000
<b>5</b>	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 the instructions)	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	10,000

**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 the instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
<b>1</b> Distributable amount for 2011 from Part XI, line 7				0
<b>2</b> Undistributed income, if any, as of the end of 2011				
<b>a</b> Enter amount for 2010 only				
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2011				
<b>a</b> From 2006 42,951				
<b>b</b> From 2007				
<b>c</b> From 2008				
<b>d</b> From 2009 10,150				
<b>e</b> From 2010				
<b>f</b> Total of lines 3a through e	53,101			
<b>4</b> Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 10,000				
<b>a</b> Applied to 2010, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required -- see the instructions)				
<b>c</b> Treated as distributions out of corpus (Election required -- see the instructions)				
<b>d</b> Applied to 2011 distributable amount				
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	53,101			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b				
<b>c</b> 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				
<b>d</b> Subtract line 6c from line 6b Taxable amount -- see the instructions				
<b>e</b> Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount -- see the instructions				
<b>f</b> Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see the instructions)				
<b>8</b> Excess distributions carryover from 2006 not applied on line 5 or line 7 (see the instructions)				
<b>9</b> Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	53,101			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2007				
<b>b</b> Excess from 2008				
<b>c</b> Excess from 2009				
<b>d</b> Excess from 2010				
<b>e</b> Excess from 2011				

<p><b>1a</b> 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 <span style="float: right;">▶</span></p>	
---	--

- | b Check box to indicate whether the foundation is a private operating foundation described in section |   | 4942(j)(3) or | 4942(j)(5)    |           |          |
|---|---|---------------|---------------|-----------|----------|
| 2a  | Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed                         | Tax year      | Prior 3 years | (e) Total |          |
|   |   | (a) 2011      | (b) 2010      |           | (c) 2009 |
| 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 exempt act   |               |               |           |          |
| e   | Qualifying distributions made directly for active conduct of exempt activities<br>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 min 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 the instructions.)**

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) )  
SEE ATTACHMENT # 11

- 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  
SEE ATTACHMENT # 12

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 the 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  
SEE ATTACHMENT # 13

- 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)				
<b>a</b> Paid during the year SEE ATTACHMENT #14				
<b>Total</b>			<b>▶ 3a</b>	10,000
<b>b</b> Approved for future payment				
<b>Total</b>			<b>▶ 3b</b>	

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See the instructions )
	(a) Business code	(b) Amount	(c) Excl code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees & contracts from government agencies					
<b>2</b> Membership dues and assessments					
<b>3</b> Interest on savings and temporary cash investments	525990	48			
<b>4</b> Dividends and interest from securities	525990	1,673			
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property					
<b>b</b> Not debt-financed property					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income					
<b>8</b> Gain or (loss) from sales of assets other than inventory	525900	-925			
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e)		796		0	0
<b>13</b> Total Add line 12, columns (b), (d), and (e)				13	796

(See worksheet in line 13 instructions to verify calculations )

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions )
	SEE ATTACHMENT #15

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

<b>1</b>	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?		<b>Yes</b>	<b>No</b>
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b>	Cash	<b>1a(1)</b>		X
<b>(2)</b>	Other assets	<b>1a(2)</b>		X
<b>b</b>	Other transactions			
<b>(1)</b>	Sales of assets to a noncharitable exempt organization	<b>1b(1)</b>		X
<b>(2)</b>	Purchases of assets from a noncharitable exempt organization	<b>1b(2)</b>		X
<b>(3)</b>	Rental of facilities, equipment, or other assets	<b>1b(3)</b>		X
<b>(4)</b>	Reimbursement arrangements	<b>1b(4)</b>		X
<b>(5)</b>	Loans or loan guarantees	<b>1b(5)</b>		X
<b>(6)</b>	Performance of services or membership or fundraising solicitations	<b>1b(6)</b>		X
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	<b>1c</b>		X
<b>d</b>	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.			

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

**2 a** 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

**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.

Signature of officer or trustee

Date

TRUSTEE

Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

**Paid Preparer Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name ▶ TAYLOR ACCOUNTING & TAX INC

Firm's EIN ▶ 20-1989595

Firm's address ▶ 604 W FRONTIER STREET

Phone no (928) 474-5615

## 990 SCHEDULE OF ACCOUNTING FEES

ATTACHMENT 1: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16B

OPEN TO PUBLIC  
INSPECTION

For calendar year 2011, or tax period beginning

, and ending

Name of Organization

Employer Identification Number

AMARYLLIS FOUNDATION INC

52-1622346

Accounting Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
ACCOUNTING FEES	600	600	600	
Total:	600	600	600	

**990 SCHEDULE OF OTHER PROFESSIONAL FEES**

ATTACHMENT 2: PAGE 1 - 990-PF PAGE 1, PART I, LINE 16C

OPEN TO PUBLIC  
INSPECTION

For calendar year 2011, or tax period beginning

, and ending

Name of Organization

Employer Identification Number

AMARYLLIS FOUNDATION INC

52-1622346

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
INVESTMENT FEES		4	4	
Total:		4	4	

**990 SCHEDULE OF TAXES PAID**

ATTACHMENT 3: PAGE 1 - 990- PF PAGE 1, PART I, LINE 18

OPEN TO PUBLIC  
INSPECTION

For calendar year 2011, or tax period beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of Organization

Employer Identification Number

AMARYLLIS FOUNDATION INC

52-1622346

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charity
US TREASURY	219	219	219	
Total:	219	219	219	

## 990 OTHER EXPENSES SCHEDULE

ATTACHMENT 4: PAGE 1 990-PF PAGE 1, PART I, LINE 23

OPEN TO PUBLIC  
INSPECTION

For calendar year 2011, or tax period beginning

, and ending

Name of Organization

AMARYLLIS FOUNDATION INC

Employer Identification Number

|52-1622346

Description of Activity	Revenue and Expenses	Net Investment Income	Adjusted Net Income	Disbursements for Charity
PROGRAM EXPENSES	1,635	1,635	1,635	
Total:	1,635	1,635	1,635	

## 990 SCHEDULE OF INVESTMENTS - OTHERS

ATTACHMENT 5: PAGE 1 - 990-PF PAGE 2, PART II, LINE 13

OPEN TO PUBLIC  
INSPECTION

For calendar year 2011, or tax period beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of Organization

AMARYLLIS FOUNDATION INC

Employer Identification Number

52-1622346

Description	Cost	FMV at Year End	Book Value	Fair Market Value
CHARLES SCHWAB		X	16,280	16,280
		Total:		

**990 SCHEDULE OF LAND, BUILDING & EQUIPMENT**

ATTACHMENT 6: PAGE 1 - 990-PF PAGE 2, PART II, LINE 14

OPEN TO PUBLIC  
INSPECTION

For Calendar year 2011, or tax year period beginning

and ending

Name of Organization		Employer Identification Number			
AMARYLLIS FOUNDATION INC		52-1622346			
Category or Description of Property	Cost or Other Basis	Accumulated Depreciation	End of Year Book Value	Ending FML (990-PF Only)	
EQUIPMENT	28,635		28,635	28,635	
Total:		28,635	28,635	28,635	

## 990 SCHEDULE OF OTHER DECREASES

ATTACHMENT 7: PAGE 1 - 990- PF PAGE 2, PART III, LINE 5

OPEN TO PUBLIC INSPECTION	For calendar year 2011, or tax period beginning _____, and ending _____
------------------------------	---

Name of Organization	Employer Identification Number
AMARYLLIS FOUNDATION INC	52-1622346

Description of Decrease	Total Amount
ASSET PURCHASE EQUIPMENT	28,635
PRIOR YEAR CHARLES SCHAWB ADJUSTMENT	35,075
<b>Total:</b>	<b>63,710</b>

# 990 PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ATTACHMENT 8: PAGE 1 - 990-PF PAGE 3, PART IV, LINE 1

OPEN TO PUBLIC INSPECTION		For calendar year 2011 or tax period beginning , and ending		
Name of Organization AMARYLLIS FOUNDATION INC				Employer Identification Number 52-1622346
	(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)
1	CHARLES SCHWAB INVESTMENTS	P	03-01-2011	06-03-2011
	(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)
1	296,287		297,212	-925
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(l) Gains (Col (h) Gain Minus Col (k), But Not Less Than -0-) or Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted Basis as of 12/31/69	(k) Excess if Col (i) Over Col (j), if Any	
1				-925

## SCHWAB

Print This Page Close

Accounts&gt; History

Print in landscape for best results.

## History

Transactions Statements &amp; Reports Realized Gain / Loss

View Unrealized Gain/Loss

Trades made today will not appear until tomorrow.  
Cost Basis Calculator Rules & Assumptions

Select Date Range

From:

To:

Search

Reporting Period: 01 Jan, 2011 to 31 Dec, 2011

	Proceeds	Cost Basis	Total Gain/Loss (\$  %)	Long Term Gain/Loss (\$  %)	Short Term Gain/Loss (\$  %)
Corporate 9431-9090					
<b>Total</b>	<b>\$296,286.88</b>	<b>\$297,211.61</b>	<b>-\$924.73</b>	<b>+\$0.00</b>	<b>-\$924.73</b>

Symbol	Name ( Full  Short)	Closed Date	Quantity	Proceeds	Cost Basis	Total Gain/Loss (\$  %)	Long Term Gain/Loss (\$  %)	Short Term Gain/Loss (\$  %)
NLY	ANNALY CAPIT	03/16/2011	200	\$3,559.53	\$3,501.75	+\$57.78	--	+\$57.78
NLY	ANNALY CAPIT	03/16/2011	100	\$1,779.79	\$1,759.37	+\$20.42	--	+\$20.42
NLY	ANNALY CAPIT..	03/16/2011	100	\$1,779.83	\$1,742.38	+\$37.45	--	+\$37.45
AZN	ASTRAZENECA	03/16/2011	100	\$4,504.96	\$4,647.95	-\$142.99	--	-\$142.99
AZN	ASTRAZENECA	06/03/2011	200	\$10,182.85	\$9,297.94	+\$884.91	--	+\$884.91
BMJ	BRISTOL-MYER	03/16/2011	200	\$5,032.95	\$5,186.95	-\$154.00	--	-\$154.00
BMJ	BRISTOL-MYER	06/03/2011	200	\$5,569.14	\$5,250.95	+\$318.19	--	+\$318.19
CTL	CENTURYLINK	02/16/2011	200	\$8,399.09	\$8,812.85	-\$413.76	--	-\$413.76
CTL	CENTURYLINK	03/16/2011	450	\$17,968.20	\$18,842.41	-\$874.21	--	-\$874.21
CTL	CENTURYLINK	06/03/2011	400	\$16,557.71	\$16,933.39	-\$375.68	--	-\$375.68
CTL	CENTURYLINK	06/03/2011	100	\$4,139.43	\$4,105.72	+\$33.71	--	+\$33.71
CTL	CENTURYLINK	06/03/2011	100	\$4,139.43	\$4,090.95	+\$48.48	--	+\$48.48
CAG	CONAGRA FOOD	03/31/2011	100	\$2,373.00	\$2,334.95	+\$38.05	--	+\$38.05
ED	CONSOLIDATED	03/15/2011	200	\$9,842.46	\$9,962.95	-\$120.49	--	-\$120.49
ED	CONSOLIDATED	03/16/2011	100	\$4,927.96	\$5,071.20	-\$143.24	--	-\$143.24
ED	CONSOLIDATED	06/03/2011	100	\$5,215.95	\$4,974.19	+\$241.76	--	+\$241.76
JNJ	JOHNSON & JO	03/16/2011	123	\$7,122.33	\$7,478.98	-\$356.65	--	-\$356.65
JNJ	JOHNSON & JO	03/16/2011	77	\$4,458.61	\$4,681.97	-\$223.36	--	-\$223.36
JNJ	JOHNSON & JO	06/03/2011	250	\$16,485.73	\$15,088.96	+\$1,396.77	--	+\$1,396.77

MSFT	MICROSOFT CO.	04/18/2011	200	\$4,983 15	\$5,114 95	-\$131 80	--	-\$131 80
NGG	NATIONAL GRI	03/14/2011	200	\$9,043 08	\$9,360 75	-\$317 67	--	-\$317 67
NGG	NATIONAL GRI ..	03/16/2011	400	\$17,522 71	\$18,609 17	-\$1,086 46	--	-\$1,086 46
NGG	NATIONAL GRI	05/23/2011	300	\$15,106 23	\$13,816 25	+\$1,289 98	--	+\$1,289 98
NGG	NATIONAL GRI	05/23/2011	200	\$10,071 03	\$9,870 82	+\$200 21	--	+\$200 21
NGG	NATIONAL GRI	05/23/2011	100	\$5,035 51	\$4,641 98	+\$393 53	--	+\$393 53
SPH	SUBURBAN PRO	06/03/2011	50	\$2,568.00	\$2,680 95	-\$112 95	--	-\$112 95
TEF	TELEFONICA S	05/23/2011	250	\$5,808 44	\$6,458 95	-\$650 51	--	-\$650 51
SO	THE SOUTHERN	03/16/2011	300	\$11,036 84	\$9,995 95	+\$1,040 89	--	+\$1,040 89
SO	THE SOUTHERN...	06/03/2011	200	\$7,858 90	\$7,340 95	+\$517 95	--	+\$517 95
UN	UNILEVER N V .	03/15/2011	100	\$2,917 66	\$3,047 47	-\$129 81	--	-\$129 81
UN	UNILEVER N V	03/15/2011	100	\$2,917 78	\$3,047 48	-\$129 70	--	-\$129 70
UN	UNILEVER N V	03/16/2011	300	\$8,762 88	\$9,120 94	-\$358 06	--	-\$358 06
UN	UNILEVER N V	06/03/2011	400	\$12,930 80	\$12,183 01	+\$747 79	--	+\$747 79
USB+G	USB CAP TR V	05/23/2011	100	\$2,521 00	\$2,508 95	+\$12 05	--	+\$12 05
WMT	WAL-MART STO	02/22/2011	200	\$10,634 85	\$10,986 95	-\$352 10	--	-\$352 10
WFC	WELLS FARGO	03/15/2011	200	\$6,315 33	\$6,800 95	-\$485 62	--	-\$485 62
WFC	WELLS FARGO ..	03/16/2011	200	\$6,294 93	\$6,946 57	-\$651 64	--	-\$651 64
WFC	WELLS FARGO ..	04/18/2011	300	\$8,837 88	\$10,107 59	-\$1,269 71	--	-\$1,269 71
WIN	WINDSTREAM C	03/16/2011	350	\$4,449 96	\$4,421 40	+\$28 56	--	+\$28 56
WIN	WINDSTREAM C	05/23/2011	300	\$3,989 97	\$3,832 39	+\$157.58	--	+\$157 58
WIN	WINDSTREAM C	06/03/2011	200	\$2,641 00	\$2,551 38	+\$89 62	--	+\$89 62

☒ Total includes missing cost basis values for one or more lots

☐ The total Realized Gain/Loss for this account includes values for Short Positions held in the account. For more information on summary totals when there are Short Positions, please see the Help Section.

☒ Data for this holding has been edited

N/A Not Available

☒ Wash Sale activity has adjusted this cost For additional information, click here

Values for fixed income securities have been adjusted for amortization/accretion, with the exception of variable rate and mortgage-backed securities or for accounts with this preference turned off

Total Cash represents income and expenses as they occur, it may be inconsistent with values shown elsewhere on Schwab.com and on your monthly account statement

The Realized Gain/Loss page provides summary information of closed transactions. Not all closed transactions appear on this page

Please view the Cost Basis Disclosure Statement for additional information on cost basis methods choices and how Schwab reports adjusted cost basis information to the IRS

Please note that gains and losses realized in retirement accounts are not recognized for tax purposes. Rather, income may be recognized when you receive a cash distribution from these accounts. Please contact your tax advisor for further information

The total Realized Gain/Loss for this account includes values for Short Positions held in the account. For more information on summary totals when there are Short Positions, please see the Help Section

990 BOOKS ARE IN CARE OF

ATTACHMENT 9 - 990-PF PAGE 5, PART VII-A, LINE 14

OPEN TO PUBLIC INSPECTION	For calendar year 2011, or tax period beginning _____, and ending _____
Name of Organization AMARYLLIS FOUNDATION INC	Employer Identification Number 52-1622346
Part VII-A - Line 14	

Individual Name \_\_\_\_\_ BRUCE D LISLE  
or  
Business Name \_\_\_\_\_

Street Address \_\_\_\_\_ 3641B SUNSET KEY CIRCLE

U S Address

Zip code 33955 City PUNTA GORDA State FL

or

Foreign Address

City \_\_\_\_\_

Province or State \_\_\_\_\_

Country \_\_\_\_\_

Postal code \_\_\_\_\_

Phone Number (301) 220-1152

Fax Number \_\_\_\_\_

## 990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 10: PAGE 1 - 990-PF PAGE 6, PART VIII

OPEN TO PUBLIC INSPECTION	For calendar year 2011, or tax period beginning , and ending
------------------------------	--

Name of Organization

AMARYLLIS FOUNDATION INC

Employer Identification Number

52-1622346

(A) Name and Address	(B) Title and Average Hrs per Week	(C) Compensation (If not paid, enter 0)	(D) Cont to Employee Ben Plans & Def Comp	(E) Expense Account & Other Allowances
BRUCE D LISLE 3641B SUNSET KEY CIRCLE PUNTA GORDA, FL 33955	TRUSTEE 5.00	0	0	0

## 990 INFORMATION REGARDING FOUNDATION MANAGERS

ATTACHMENT 11: PAGE 1 - 990-PF PAGE 10, PART XV, LINE 1A

OPEN TO PUBLIC INSPECTION	For calendar year 2011, or tax period beginning , and ending
Name of Organization AMARYLLIS FOUNDATION INC	Employer Identification Number 52-1622346

Contributing Manager
BRUCE D LISLE

## 990 INFORMATION REGARDING FOUNDATION MANAGERS

ATTACHMENT 12: PAGE 1 - 990-PF PAGE 10, PART XV, LINE 1B

OPEN TO PUBLIC INSPECTION	For calendar year 2011, or tax period beginning , and ending
Name of Organization AMARYLLIS FOUNDATION INC	Employer Identification Number 52-1622346
Shareholder Manager	
N/A	

## 990 APPLICATION SUBMISSION INFORMATION

ATTACHMENT 13: PAGE 1 990-PF PAGE 10, PART XV, LINE 2

OPEN TO PUBLIC

For Calendar year 2011, or tax year period beginning

and ending

Name of Organization

AMARYLLIS FOUNDATION INC

Employer Identification Number

52-1622346

Name	Phone Number	Info and Materials Included	Submission Deadlines	Restrictions on Awards
BRUCE D LISLE 3416B SUNSET KEY CIRCLE PUNTA GORDA FL 33955	301-220-1152	LETTER FORM WITH SUPPORTING DOCUMENTATION	NONE	NONE

# 990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 14: PAGE 1 990-PF PAGE 11, PART XV LINE 3A

OPEN TO PUBLIC  
INSPECTION

For calendar year 2011, or tax period beginning

, and ending

Name of Organization

AMARYLLIS FOUNDATION INC

Employer Identification Number

52-1622346

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)				
ST JOHNS CHURCH & SCHOOL 889 BUTTERFLY LANE FREDERICK MD 21703		501 (C) (3)	DONATION	10,000
<b>Total.</b>				10,000

**990 SCHEDULE OF RELATIONSHIP OF ACTIVITIES  
TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES**

ATTACHMENT 15: PAGE 1 990-PF PAGE 12, PART XVI-B

OPEN TO PUBLIC INSPECTION	For calendar year 2011, or tax period beginning , and ending
Name of Organization AMARYLLIS FOUNDATION INC	Employer Identification Number 52-1622346

Line Number	Briefly Describe How the Activity Reported In Column (E) of Part VII Specifically Contributed to the Accomplishment of The Organization's Exempt Purposes (other than by providing funds for such purposes)
1	N/A

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury  
Internal Revenue Service

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on *e-file for Charities & Nonprofits*.

## **Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ☐

*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

		Enter filer's identifying number, see instructions	
Type or print  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or	
	AMARYLLIS FOUNDATION, INC	<input checked="" type="checkbox"/> 52-1622346	
	Number, street, and room or suite number. If a P.O. box, see instructions	Social security number (SSN)	
	3461B SUNSET KEY CIRCLE	<input type="checkbox"/>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions		
	PUNTA GORDA	FL	33955

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ 04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
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 (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► THE FOUNDATION

Telephone No ► (301) 220-1152 FAX No ► \_\_\_\_\_

- 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.

- I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15, 20 12, to file the exempt organization return for the organization named above.  
The extension is for the organization's return for:  
► ☒ calendar year 20 11 or  
► ☐ tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_.

- If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return  
☐ Change in accounting period

3 a 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.	3 a \$	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.	3 b \$	0.
c <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3 c \$	0.

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

**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).

Enter filer's identifying number, see instructions

<b>Type or print</b>  File by the extended due date for filing the return. See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	AMARYLLIS FOUNDATION, INC	<input checked="" type="checkbox"/> 52-1622346
	Number, street, and room or suite number. If a P.O. box, see instructions	Social security number (SSN)
	3461B SUNSET KEY CIRCLE	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	PUNTA GORDA FL 33955	

Enter the Return code for the return that this application is for (file a separate application for each return) . . . . . **04**

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 (section 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.**

- The books are in care of **THE FOUNDATION**  
Telephone No. **(301) 220-1152** FAX No. \_\_\_\_\_
- 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 Nov 15, 20 12
- 5 For calendar year 2011, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_
- 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 . . . ALL OF THE INFORMATION NECESSARY TO FILE AN ACCURATE RETURN IS NOT YET AVAILABLE.

<b>8a</b> 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 . . . . .	<b>8a</b>	\$	0.
<b>b</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. . . . .	<b>8b</b>	\$	0.
<b>c Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. . . . .	<b>8c</b>	\$	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

BAA

FIFZ0502 07/29/11

Form 8868 (Rev 1-2012)