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# Form, **990-PF**

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

OMB No 1545-0052

2011

Department of the Treasury Internal Revenue Service

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

	BEALL SR. CHARITABLE FOUND.		, and ending	Employer identification num 59-2851924	nber
	6 38TH AVE EAST DENTON, FL 34208		E	<del>.                                      </del>	instructions)
	·				
G CI	neck all that apply: Initial return	Initial Return of a fori		1 Foreign organizations, chec	
	Final return Address change	Amended return Name change		2 Foreign organizations meet	ing the 85% test, check
Н	Check type of organization: X Section 50	1(c)(3) exempt private for		here and attach computation	
<del></del>	Section 4947(a)(1) nonexempt charitable fair market value of all assets at end of year  J Ac		orivate foundation I	If private foundation status under section 507(b)(1)(A)	was terminated , check here
	(from Part II, column (c), line 16)	Other (specify)  I, column (d) must be or		If the foundation is in a 60 under section 507(b)(1)(B)	
Part		(a) Revenue and	(b) Net investment	1	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	evnences ner hooks	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	6,460.			
	2 Ck ► X if the foundn is <b>not</b> req to att Sch B 3 Interest on savings and temporary			10	
	cash investments 4 Dividends and interest from securities	85,884.	85,884		,
	5 a Gross rents  b Net rental uscome				
R	b Net rental income or (loss)  6 a Net gain/(loss) from sale of assets not on line 10	-34,625.			
E V	b Gross sales price for all assets on line 6a 427, 017				
E N	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain				
U E	9 Income modifications 10 a Gross sales less returns and				
	allowances h Less Cost of				
	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule) See Statement 3	50,401.			
	12 Total. Add lines 1 through 11	108,132.	85,896	85,896.	
	<ul><li>13 Compensation of officers, directors, trustees, etc</li><li>14 Other employee salaries and wages</li></ul>	0.			
	15 Pension plans, employee benefits	463			463.
1	16a Legal fees (attach schedule) See St 2 b Accounting fees (attach sch) See St 3				14,000.
	c Other prof fees (attach sch) See St		30,816	).	95,102.
O P E	17 Interest 18 Taxes (attach schedule)(see instrs) 19 See Stm 5	6,028.			6,028.
A	19 Depreciation (attach sch) and depletion				
N G	20 Occupancy		-		
_	21 Travel, conferences, and meetings		-		
	23 Other expenses (attach schedule)				
<u>ெ</u>	22 Printing and publications. 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23	146,409.	30,816	5.	115,593.
e) ~1	25 Contributions, gifts, grants paid Part XV	126,417.			126,417.
ACT	26 Total expenses and disbursements. Add lines 24 and 25	272,826.	30,816	<u>0.</u>	242,010.
	27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  b Net investment income (if negative, enter -0.)  c Adjusted net income (if negative, enter -0.)  For Paperwork Reduction Act Notice, see income (if negative, enter -0.)				<del>!</del>
	and disbursements	-164,694.	55,080	).	<u> </u>
<u>₩</u>	C Adjusted net income (if negative, enter -0-)		1 33,000	85,896.	
BAA	For Paperwork Reduction Act Notice, see in	structions.	Т	EEA0504L 12/05/11	Form <b>990-PF</b> (2011)

Day.		Balanca Shaata A	Attached schedules and amounts in the descrip column should be for end of-year amounts only	tion	Beginning of year		End of	year
Part		Balance Sheets	See instructions )		(a) Book Value	(b) Book Valu	ue eu	(c) Fair Market Value
	1	Cash - non-interest-b	earing		39,125.	66,5	587.	66,587.
	2	Savings and temporar	•		519,253.	421,9		421,947.
		Accounts receivable	<b>&gt;</b>			<del></del>		•••••••••••••••••••••••••••••••••••••••
	•	Less: allowance for do	oubtful accounts	1			1	
	4	Pledges receivable	<b></b>			······································		
	`	Less, allowance for do	oubtful accounts					
	5	Grants receivable		+				
	6	Receivables due from officer disqualified persons (attach	rs, directors, trustees, and other schedule) (see instructions).					
	7	Other notes and loans receiv						
A		Less allowance for do		7			]	
S	8	Inventories for sale or	use	+				
A S E T	9	Prepaid expenses and	d deferred charges					
Ś	10 a	Investments – U.S. ai obligations (attach sch	nd state government nedule)					
	l t	Investments — corporate sto	ock (attach schedule) Statement	6	2,308,682.	2,012,	591.	1,876,376.
	c	: Investments — corporate bo	ends (attach schedule) Statement	7	1,200,000.	1,394,2	252.	1,393,914.
	11	Investments – land, b equipment: basis	buildings, and					
		Less accumulated deprecial (attach schedule)	►					
	12	Investments - mortga	age loans					
	13	Investments - other (	attach schedule)		111.			
	14	Land, buildings, and e	equipment: basis ►				-	
		Less accumulated deprecial (attach schedule)	•					
	15 16	Total assets (to be co			4,067,171.	3,895,	477.	3,758,824.
L	17	Accounts payable and	accrued expenses		7,000.		ľ	
I	18	Grants payable	·					
A B	19	Deferred revenue						
ď	20	Loans from officers, directo	rs, trustees, & other disqualified persons					
<u>ī</u>	21	Mortgages and other notes p	payable (attach schedule)					
Ţ	22	Other liabilities (describe	e <b>-</b>					
Ė	22	Total liabilities (add li	non 17 through 22)	!	7,000.		0.	
	23		ow SFAS 117, check here	<b>▶</b>	7,000.	<del></del>	—"	
		and complete lines 24	through 26 and lines 30 and 31.					
N F E U	24	Unrestricted		-				
ΤN		Temporarily restricted		-				
A D	26	•		- IV				
A S B S A E L		and complete lines 27	not follow SFAS 117, check here 7 through 31.	► X				
TΑ	27	•	incipal, or current funds		4,060,171.	3,895,	477.	
S N C	28		or land, building, and equipment fund					
0 E			lated income, endowment, or other funds		4 060 171		477	
RS	30		nd balances (see instructions)	Ļ	4,060,171.	3,895,	4//.	
	31	(see instructions)	et assets/fund balances	1	4,067,171.	3,895,	477.	
Par	1111		ges in Net Assets or Fund B	alance				
	Tota	I net assets or fund bal	ances at beginning of year – Part I			ee with		4 060 171
	end-	of-year figure reported	on prior year's return)				1	4,060,171.
		er amount from Part I, I					2	-164,694.
3		increases not included in line	e 2 (Itemize)				3	2 005 433
4		lines 1, 2, and 3					4	3,895,477.
5		ases not included in line 2 (it			D-4111 (5)		5	2 005 477
6_	Lota	i net assets or fund bal	lances at end of year (line 4 minus l	ine 5) –	· Part II, column (b), lin	e 30	6	<u>3,895,477.</u>

(a) List and descri	Losses for Tax on Investmen be the kind(s) of property sold (e.g., re- use; or common stock, 200 shares ML0	eal estate,	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	
1a See Statement 8					
b					
c					
d				ļ	
е			<u>,                                      </u>	<u> </u>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	
a					
b					
<u>C</u>					<del></del>
d e					
	ving gain in column (h) and owned by t	he foundation on 12/31/69	-	(I) Gains (Col	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	(ı) ny	gain minus column ( than -0-) <b>or</b> Losses (f	k), but not less
a					
	<del></del>				
<u> </u>					
d					
Capital gain net income or (ne	et capital loss) If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7	. 2		-34,625.
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) a	_			34,023.
		_			
If gain, also enter in Part I, Iir in Part I, line 8	e 8, column (c) (see instructions) If (li	oss), enter -u-	3		0.
	er Section 4940(e) for Reduce	d Tax on Net Investme	ent Income		
If 'Yes,' the foundation does not quant  1 Enter the appropriate amount  (a)  Base period years Calendar year (or tax year	ction 4942 tax on the distributable amoralify under section 4940(e). Do not comin each column for each year, see the (b)  Adjusted qualifying distributions	plete this part	any entries.	Yes  (d)  Distribution Distribution Distribution	
beginning in)	210 021	2 05	0 200		0.056962
2010	219,831. 163,815.		9,288. 3,720.		0.055461
2009 2008	109,897.		8,691.		0.033401
2008	157,171.		8,672.		0.031380
2006	199,340.		3,695.		0.038234
2 Total of line 1, column (d)			2	<del>-</del>	0.211275
3 Average distribution ratio for the number of years the foundation	the 5-year base period – divide the toto on has been in existence if less than 5	al on line 2 by 5, or by the years	3	-	0.042255
4 Enter the net value of noncha	aritable-use assets for 2011 from Part X	(, line 5	4		3,918,034
5 Multiply line 4 by line 3			5		165,557
6 Enter 1% of net investment ii	ncome (1% of Part I, line 27b)		6		551
7 Add lines 5 and 6			7		166,108
8 Enter qualifying distributions	from Part XII, line 4		8		242,010
If line 8 is equal to or greater Part VI instructions.	than line 7, check the box in Part VI, I	ine 1b, and complete that pa	art using a 1%	tax rate. See the	

Form 990-PF (2011) R.M. BEALL SR. CHARITABLE FOUNDATION 59-28519		Р	age <b>4</b>
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	ons)		
1 a Exempt operating foundations described in section 4940(d)(2), check here   ■			
Date of ruling or determination letter (attach copy of letter if necessary — see instrs)			
b Domestic foundations that meet the section 4940(e) requirements in Part V,			551.
check here ► X and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
foundations only. Others enter -0-)			0.
3 Add lines 1 and 2		5	551.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		<u></u>	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			551.
6 Credits/Payments:			
a 2011 estimated tax pmts and 2010 overpayment credited to 2011			
<b>b</b> Exempt foreign organizations – tax withheld at source			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld			_
7 Total credits and payments Add lines 6a through 6d 7			<u>0.</u>
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			<u>551.</u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Enter the amount of line 10 to be Credited to 2012 estimated tax Refunded 11			
Part VII-A   Statements Regarding Activities	<del></del>		
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No 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)?	1ь		x
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			
c Did the foundation file Form 1120-POL for this year?	1c		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	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?	2		Х
If 'Yes,' attach a detailed description of the activities			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3 1		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
<b>b</b> If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
If 'Yes,' attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
By language in the governing instrument, or			
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
with the state law remain in the governing instrument?	6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			
FL			
<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 <i>General Instruction G? If 'No,' attach explanation</i>	8ь	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	) V <b>9</b>		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		X
BAA	Form 99	0-PF	(2011)

Pa	t VII-A   Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		Χ_
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?	13	_X_	
14	Website address ► N/A  The books are in care of ► MICHAEL MADDALONI Telephone no ► (941)	747-	2355	<b>– –</b> –
	Located at ► 1806 38TH AVE. EAST BRADENTON FL ZIP + 4 ► 34208			
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	N/A	. •	∐ N/A
			Yes	No
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ▶			
Pa	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1:	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X 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 X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No			
	o If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1 c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
	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?			
	If 'Yes,' list the years ► 20 , 20 , 20			
	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		,,	
	all years listed, answer 'No' and attach statement — see instructions.)	2b	l N	/A
	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			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
	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
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	<b>b</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?	46		х
BA		Form <b>9</b> 9	0-PF	
				, ,

Part VII-B Statements Regarding Activit			59-28	51924	Page 6		
5a During the year did the foundation pay or incu		11 4/20 May De Rec	<u>uneu (commueu)</u>				
(1) Carry on propaganda, or otherwise attempt	=	n (section 4945(e))?	Yes X	No			
(2) Influence the outcome of any specific public on directly or indirectly, any voter registra	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes X No						
(3) Provide a grant to an individual for travel,		ourposes?		No			
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, org 4940(d)(2)? (see instruc	ganization described ctions)	Yes X	Yes X No			
(5) Provide for any purpose other than religioned educational purposes, or for the prevention	us, charitable, scientific, n of cruelty to children o	, literary, or or animals?	Yes X	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5 b	N/A		
Organizations relying on a current notice rega	rding disaster assistance	e check here	▶ [				
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure response	sibility for the grant?		N/A Yes	No			
If 'Yes,' attach the statement required by Regi	ulations section 53 4945	i-5(d)					
<ul><li>6a Did the foundation, during the year, receive are on a personal benefit contract?</li><li>b Did the foundation, during the year, pay premium.</li></ul>				No 6b	x		
If 'Yes' to 6b, file Form 8870	arns, directly or indirect	iy, on a personal bench	t contract:	05			
7a At any time during the tax year, was the found				No			
b If 'Yes,' did the foundation receive any procee				I/A 7b			
Part VIII Information About Officers, E and Contractors	rectors, Trustees	, roungauon wana	igers, nignly Palo	Employe	es,		
1 List all officers, directors, trustees, foundation	n managers and their co	mpensation (see instru	ctions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	se account, owances		
ROBERT M. BEALL, II	Board	0.	0.		0.		
1806 38TH AVE. E.	2.00			]			
BRADENTON, FL 34208	<del></del>						
BEVERLY BEALL	Board	0.	0.		0.		
1806 38TH AVE. E. BRADENTON, FL 34208	12.00						
BETTY B. SZYMANSKI	Board	0.	0.		<del></del>		
1806 38TH AVE. E.	2.00	· ·	· ·		٠.		
BRADENTON, FL 34208	2.00						
CLIFFORD L. WALTERS	Board	0.	0.		0.		
1806 38TH AVE. E.	2.00						
BRADENTON, FL 34208				L			
2 Compensation of five highest-paid employee	<del></del>						
(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		se account, lowances		
None			componsation		<del></del>		
	+						
	-			-	_		
	-						
	<u> </u>	<u></u>					
Total number of other employees paid over \$50,000		30/05/33	<b>&gt;</b>	Form 0	0		
DAA	TEEA0306L	12/05/11		rorm 9	<b>90-PF</b> (2011)		

Form 990-PF (2011) R.M. BEALL SR. CHARITABLE FOUNDATION	59-285	1924 Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Found	ation Managers, Highly Paid	Employees,
and Contractors (continued)  3 Five highest-paid independent contractors for professional services (see instru	ections) If none enter 'NONE '	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None	(4)	(o) componential
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in	formation such as the number of	
organizations and other beneficiaries served, conferences convened, research papers produced, etc	ioniation such as the named of	Expenses
1 SCHOLARSHIPS		
		100 222
2 DONATIONS		108,332.
2 DOMITIONS		
		18,085.
3		
Δ		
<sup>7</sup>		
Part IX-B Summary of Program-Related Investments (see instruct	tions)	
Describe the two largest program-related investments made by the foundation during	·	Amount
1	the tax year of fines i and 2.	Amount
N/A		
2		
All other program-related investments, See instructions.		
3		
Total. Add lines 1 through 3	<u> </u>	0.
BAA		Form <b>990-PF</b> (2011)

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: 3,940,220. a Average monthly fair market value of securities 1a 1b 37,479. **b** Average of monthly cash balances . 1 c c Fair market value of all other assets (see instructions) 3.977.699. 1 d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e 0. (attach detailed explanation) 0. 2 Acquisition indebtedness applicable to line 1 assets 3 3,977,699. Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1-1/2% of line 3 59,665. 4 (for greater amount, see instructions) 3,918,034. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 195,902. Minimum investment return. Enter 5% of line 5. 6 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here ▶ ☐ and do not complete this part.) 195,902. Minimum investment return from Part X, line 6 1 551 2a Tax on investment income for 2011 from Part VI, line 5 2a b Income tax for 2011. (This does not include the tax from Part VI.) 2Ы 551 c Add lines 2a and 2b 195,351 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 4 Recoveries of amounts treated as qualifying distributions 195,351 5 6 6 Deduction from distributable amount (see instructions) 7 195.351 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes. 242,010. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 1 b **b** Program-related investments - total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 3 Amounts set aside for specific charitable projects that satisfy the: За a Suitability test (prior IRS approval required) 3b **b** Cash distribution test (attach the required schedule) 242,010. 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. 5 551 Enter 1% of Part I, line 27b (see instructions) 6 241. 459. Adjusted qualifying distributions. Subtract line 5 from line 4

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

BAA

Form **990-PF** (2011)

### Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
1 Distributable amount for 2011 from Part XI, line 7				195,351.
2 Undistributed income, if any, as of the end of 2011				······································
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2011			-	
<b>a</b> From 2006 <b>b</b> From 2007				
<b>c</b> From 2008				
d From 2009 16,731.				
e From 2010 38,923.				
f Total of lines 3a through e	55,654.			
4 Qualifying distributions for 2011 from Part				
XII, line 4 ► \$ 242,010.				
a Applied to 2010, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2011 distributable amount				195,351.
e Remaining amount distributed out of corpus	46,659.			
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears ın column (d), the same amount must be shown ın column (a) )				
· · · · · · · · · · · · · · · · · · ·				
6 Enter the net total of each column as				
indicated below:  a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	102,313.			
·	102,313.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable			į	
amount – see instructions		0.		······································
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
Time 2a Taxable amount — See instructions				
f Undistributed income for 2011 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)	0.			······································
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	102,313.			
10 Analysis of line 9:				
a Excess from 2007	4		1	
b Excess from 2008	1		1	
c Excess from 2009 16,731.				
<b>d</b> Excess from 2010 38, 923. <b>e</b> Excess from 2011 46, 659.	1			
e Excess from 2011 46, 659.	<u> </u>	1 1		<del> </del>

Form 990-PF (2011) R.M. BEALL SR. C	HARITABLE FO	DUNDATION		59-285192	4 Page <b>10</b>
Part XIV Private Operating Founda		<del></del>			N/A
1 a If the foundation has received a ruling or is effective for 2011, enter the date of the	ruling				
<b>b</b> Check box to indicate whether the founda		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	41.0010	Prior 3 years	4 8 0000	4 N T A A
investment return from Part X for each year listed	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total
<b>b</b> 85% of line 2a					<u> </u>
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)		<del> </del>			
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	<u> </u>		<u> </u>		<u> </u>
Part XV Supplementary Informatio	n (Complete thi	s part only if the	e organization l	nad \$5,000 or m	ore in
assets at any time during t		nstructions.)			
1 Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they hav None	gers: have contributed m re contributed more	ore than 2% of the to than \$5,000). (See s	otal contributions re section 507(d)(2).)	eceived by the found	ation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the <b>None</b>	own 10% or more of foundation has a 1	of the stock of a corp 0% or greater intere	oration (or an equa st.	illy large portion of the	ne ownership of
					<u> </u>
2 Information Regarding Contribution, Gra Check here □ If the foundation only requests for funds. If the foundation mak complete items 2a, b, c, and d.	makes contribution:	s to preselected char	itable organizations		
a The name, address, and telephone numb	er of the person to	whom applications s	hould be addressed	 d:	
	·				
See Statement 9					
<b>b</b> The form in which applications should be	submitted and info	rmation and material	s they should includ	de:	
See Statement for Line 2a	·				
c Any submission deadlines					
See Statement for Line 2a					
<b>d</b> Any restrictions or limitations on awards,	such as by geogra	phical areas, charital	ole fields, kinds of I	nstitutions, or other	factors
See Statement for Line 2a			<u></u>		
BAA	٦	TEEA0310L 07/14/11			Form <b>990-PF</b> (2011)

3	3 Grants and Contributions Paid During the Year or Approved for Future Payment										
	Recipient		Foundation status of recipient	Purpose of grant or contribution	Amount						
		substantial contributor	recipient								
	Paid during the year Statement 10										
		ţ									
			;								
			:								
	Total			<u>►</u> 3a	126,417.						
Ī	• Approved for future payment										
		:									
	Total			► 3t	)						

Form 990-PF (2011) R.M. BEALL SR. CHARITABLE FOUNDATION 59-2851924 Page 12

nter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue.	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
•					
ab					
С					
d					
e					
f					
g Fees and contracts from government agencies			<del></del>	<del>-</del>	<u>.                                    </u>
2 Membership dues and assessments 3 Interest on savings and temporary cash investments	-		14	12.	
4 Dividends and interest from securities	-		14	85,884.	<del></del>
5 Net rental income or (loss) from real estate:		······································			
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	50,401.	04.60
8 Gain or (loss) from sales of assets other than inventory					-34,62
9 Net income or (loss) from special events	-		_		
Officer and a second of the se					
1 Other revenue					
ab	<del></del>				
С	I I				
d					
e					
Subtotal. Add columns (b), (d), and (e)				136,297.	-34,62
13 Total. Add line 12, columns (b), (d), and (e)				13	101,67
See worksheet in line 13 instructions to verify calculations  Part XVI-B Relationship of Activities to the		hment of Exem	pt Purpose	es	<u>-</u> .
Line No. Explain below how each activity for which is accomplishment of the foundation's exemption	ncome is reported t purposes (other	I in column (e) of P than by providing f	art XVI-A con	tributed importantly to purposes). (See insti	o the ructions.)
N/A		<u> </u>			
					-
	<u>-</u>				
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# Form 990-PF (2011) R.M. BEALL SR. CHARITABLE FOUNDATION 59-2851924 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							1	1	Yes	No
de	scribed	rganization directly of in section 501(c) of political organization	f the Code (other t	e in any of the following than section 501(c)(3) or	with any oth janizations)	ner organization or in section 52	7,			
	•	. •		ncharitable exempt orga	nization of					
	(1) Cash							1a(1)	ľ	Х
		r assets					ļ	1a (2)		X
		nsactions								
		s of assets to a nonc	charitable exempt	organization				16(1)		Х
٠.٠			•	exempt organization			•	1 b (2)		X
		al of facilities, equip		, ,			•	1b (3)		X
· · · · ·		bursement arrangen	•	,				1b (4)		X
٠,		s or Ioan guarantees					•	1b (5)		X
		•		fundraising solicitations			-	1b (6)		<u>X</u>
			•	ther assets, or paid emp	lovees			1c		X
<b>C</b> 31	iai ii iy t	n lacilities, equipine	int, maining lists, o	tilei assets, or paid emp	loyees		L			
the	e good:	s, other assets, or se	ervices aiven by th	plete the following sched he reporting foundation. in column <b>(d)</b> the value o	f the founda	ation received les	ss than fair market v	rket value /alue in	of	
(a) Line		(b) Amount involved		ncharitable exempt organization			sfers, transactions, and s	haring arran	gement:	<del></del>
N/A	110.	(b) ranount involved	(C) Name of non	ionaritable exempt organization		y becompained or daily	orono, transactionis, and o	taring arran	gomonic	
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				with, or related to, one of			tions	□v₂₃	. [⊽]	NI-
		` '	•	than section 501(c)(3)) of	in section :	52/:		Yes	X	NO
D II		complete the following		4) T	1	1	<b>&gt;</b> D = = = = + + = = + + = + = + + = + = + + = + = + + = +	L		
NT / R	(a)	Name of organization	on	(b) Type of organiza	ition	(c	) Description of rela	tionsnip	<del></del>	
N/A						<del> </del>				
		<del></del>	<del></del>			<del>                                     </del>	<del></del>			
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—						<u> </u>				
	Under po	enalties of perjury, I declar and complete. Declaration	re that I have examined i of preparer (other than	this return, including accompany taxpayer) is based on all inform	ring schedules a ation of which p	and statements, and t preparer has any knov	to the best of my knowledg vledge	e and belief	, it is tru	ie,
Sign			•					May the I		
Here		WM Saw	l .	3/13/2	012	Board of T	rustee	this retur	shown i	pelow
	Signal	ture of officer or trustee	<del></del>	Date		Title		(see insti	Yes	'_n₀
		Print/Type preparer's nar	me	Preparer's signature		Date	Check If	PTIN		
D~; ~			•	Self-Prepared	]		self-employed			
Paid		Firm's name		, , , , , , , , , , , , , , , , , , ,	<u> </u>		Firm's EIN			
Prepa		Firm's name			•					
Use O	nıy		<del></del> -				Phone no			
BAA	_	·			······································		1. Ashe no	Form 99	M-DE	(2011)
								7 01111 33	A-1. L	(2011)

2011	Federal Statements	Page 1
	R.M. BEALL SR. CHARITABLE FOUNDATION	59-2851924
Statement 1 Form 990-PF, Part I, Line 11 Other Income		
Other Investment Income	(a) (b) Net  Revenue Investment  per Books Income  \$ 50,401.  Total \$ 50,401.\$ 0.5	(c) Adjusted Net Income
Statement 2 Form 990-PF, Part I, Line 16a Legal Fees	3	
Bank Fees Legal Expense	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         Per Books       Income       Net Income         \$       8.       455.         Total       \$       463.       \$       0.	\$ 8. 455.
Statement 3 Form 990-PF, Part I, Line 16I Accounting Fees	b	
ACCOUNTING FEES	(a) (b) Net (c)  Expenses Investment Adjusted  per Books Income Net Income $\frac{$14,000.}{$14,000.}$ Total $\frac{$14,000.}{$0.}$	\$ 14,000.
Statement 4 Form 990-PF, Part I, Line 16 Other Professional Fees	c	
ADMINISTRATIVE EXPENSE INVESTMENT FEES	(a) (b) Net (c)  Expenses Investment Adjusted per Books Income Net Income  \$ 95,102.	(d) Charitable Purposes \$ 95,102. \$ 95,102.

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Page 2

R.M. BEALL SR. CHARITABLE FOUNDATION

59-2851924

Statement 5 Form 990-PF, Part I, Line 18 Taxes

TAXES

(a)	(b) Net	(c)	(d)
Expenses	Investment	Adjusted	Charitable
per Books	Income	<u>Net Income</u>	<u>Purposes</u>
\$ 6,028. Total \$ 6,028.	\$ 0.	\$ 0.	\$ 6,028. \$ 6,028.

Statement 6 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks

Corporate Stocks	Valuation <u>Method</u>	Book <u>Value</u>	Fair Market Value
ARTISAN FDS INTL VALUE FD ASTON FDS ASTON/RIVER RD DFA INVT DIMENSIONS GROUP US CORE DFA INVT DIMENSIONS GROUP EMERGING MKTS FIRST EAGLE FDS GOLD FD FIRST PACIFIC ADVISORS FDS CRESCENT HUSSMAN INVT TR STRAGEGIC GROWTH	Cost Cost Cost Cost Cost Cost Cost	\$ 279,863. 145,527. 323,486. 156,883. 0. 206,135. 160,000.	
IVA FIDUCIARY TR IVA WORLDWIDE FD PIMCO FDS COMMODITY REALRETURN SCHWAB CAP TR HEDGED EQUITY FD UNIFIED SER TR AUER GROWTH FD SPDR GOLD TR GOLD ETF	Cost Cost Cost Cost Cost	261,840. 86,728. 239,000. 68,706. 84,523. \$ 2,012,691.	238,018. 72,159. 245,319. 59,628. 75,995. \$ 1,876,376.

Statement 7 Form 990-PF, Part II, Line 10c Investments - Corporate Bonds

Corporate Bonds	Valuation <u>Method</u>	Book Value	F	air Market <u>Value</u>
NORTHERN LTS FD TR ALTEGRIS TEMPLETON INCOME TR GLOBAL BD VANGUARD BD INDEX FD TOTAL BD MKT VANGUARD FIXED INCOME SECS FDS INFLATION VANGUARD FIXED INCOME SECS FDS ST UNIFIED SER TR IRON STRATEGIC INCOME	Cost Cost Cost Cost Cost Cost	\$ 200,000. 212,089. 412,612. 209,415. 205,136. 155,000. 1,394,252.	\$	193,670. 193,068. 429,077. 227,215. 202,861. 148,023. 1,393,914.

59-2851924

#### Statement 8 Form 990-PF, Part IV, Line 1 Capital Gains and Losses for Tax on Investment Income

					(b)	How (c	:) Date	(d) Date
Item	_	(a) Des	scription_		<u>Acqu</u>	<u>ired Ac</u>	<u>guired                                    </u>	Sold
1	2923.976 IV	A WORLDWII	DE-I		Purch		Various	8/03/2011
2	2763.194 FI				Purch		Various	9/21/2011
3	1085.776 DF					ased	Various	10/13/2011
4	3267.973 PI	MCO COMMOI	DITY REALRI	IN STRATEGY				
					Purch		Various	10/13/2011
5	3521.127 UN				Purch		Various	10/13/2011
6	1739.13 DF			E-I	Purch		Various	11/02/2011
7	6056.936 IV				Purch		Various	11/02/2011
8 9	895.415 DF				Purch		<u>V</u> arious	12/06/2011
9	4180.602 UN	NIFIED AUE	R GROWTH FI	)	Purch	ased	Various	12/06/2011
								/= \
	(e)	(f)	_(g)	(h)	<u>(i)</u>	(j)	_ (k)	(1)
	Gross	Deprec.	Cost	Gain	FMV	Adj. Bas.	Excess	Gain
<u>Item</u>	<u>Sales</u>	<u> Allowed</u>	<u>Basis</u>	(Loss)	12/31/69	<u>12/31/69</u>	<u>(i)-(j)</u>	(Loss)
1	50,000.		49,766.	234.				\$ 234.
2	102,017.		100,000.	2,017.				2,017.
3	30,000.		37,597.	-7,597.				-7,597.
4	25,000.		29,428.	-4,428.				-4,428.
5	20,000.		23,451.	-3,451.				-3,451.
3 4 5 6 7 8 9	50,000.		60,174.	-10,174.				-10,174.
/	100,000.		103,089.					-3,089. -5,294.
8	25,000.		30,294.	-5,294.				-2,843.
9	25,000.		27,843.	-2,843.			Total	
							Iotai	<del>- 54,025.</del>

### Statement 9 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

Name:

Care Of:

Street Address: City, State, Zip Code: Telephone: Form and Content:

Submission Deadlines:

PRESCRIBED APPLICATION FORM - SEE ATTACHED COPY

FOUNDATION ADMINISTRATOR

PATRICIA JOHNSON

1806 38TH AVE. EAST BRADENTON, FL 34208

NONE

SEE ATTACHED COPY Restrictions on Awards:

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ZUI	

Page 4

R.M. BEALL SR. CHARITABLE FOUNDATION

59-2851924

### Statement 10 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Just for Girls 936 14th St.W. Bradenton, FL 34205	NONE		DONATIONS	\$ 1,000.
Palma Sola Bay Yacht Club PO Box 14022 Bradenton, FL 34280	NONE		DONATIONS	250.
Manasota B.U.D.S. 8374 Market St. #113 Bradenton, FL 34202	NONE		DONATIONS	250.
University of Florida PO Box 117153 Gainesville, FL 32611	NONE		DONATIONS	3,000.
Briana Frazier 16832 Beach Road Perry, FL 32348	Employee Dependent		SCHOLARSHIP	2,500.
Chad Deskins 402 East Poinsettia Street Lakeland, FL 33803	Employee Dependent		SCHOLARSHIP	2,500.
Heidi Khlaaf 1540 Derringer Road Jacksonville, FL 32225	Employee Dependent		SCHOLARSHIP	5,000.
Morgan Carlton 356 Willow Lane Ellenton, FL 34222	Employee Dependent		SCHOLARSHIP	2,500.
Bradenton Country Club 4646 9th Avenue West Bradenton, FL 34209	NONE		DONATIONS	750.
Ashley Clark 628 Sea View Drive Destin, FL 32541	Employee Dependent		SCHOLARSHIP	313.
Ashley Jacobs 1024 Grandeur Street Palm Bay, FL 32909	Employee Dependent		SCHOLARSHIP	4,375.
Corey Daharsh 6482 Harold Avenue Cocoa, FL 32927	Employee Dependent		SCHOLARSHIP	1,875.
Dominique Walker 304 25th Street East Palmetto, FL 34221	Employee Dependent		SCHOLARSHIP	3,750.

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Page 5

R.M. BEALL SR. CHARITABLE FOUNDATION

59-2851924

#### Statement 10 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Nicolas Peters 217 Howey Road Sebring, FL 33872	Employee Dependent		SCHOLARSHIP	\$ 5,000.
Randee Pitkin 11057 Valencia Avenue Seminole, FL 33772	Employee Dependent		SCHOLARSHIP	2,500.
Zeta Phi Beta Sorority, Inc. PO Box 1255 Palmetto, FL 34220	NONE		DONATIONS	500.
13th Avenue Community Center 201 13th Avenue W Bradenton, FL 34205	NONE		DONATIONS	250.
Children's Academy of Southwest FL, Inc. 923 26th Street West Bradenton, FL 34205	NONE		DONATIONS	8,335.
Alexis Arrazcaeta 3128 Latrobe Street New Port Richey, FL 34655	Employee Dependent		SCHOLARSHIP	3,750.
Benjamin Speakman 3015 SW 23rd Terrace Miami, FL 34984	Employee Dependent		SCHOLARSHIP	5,000.
Cedrick Myrick 1815 3rd Avenue West Palmetto, FL 34221	Employee Dependent		SCHOLARSHIP	937.
Christina Miller 23020 SW Marine Boulevard Dunnellon, FL 34431	Employee Dependent		SCHOLARSHIP	1,250.
Emily Beltran 238 Heritage Isles Way Bradenton, FL 34212	Employee Dependent		SCHOLARSHIP	625.
Francisco Esparza 1917 Gerber Dairy Road Winter Haven, FL 33880	Employee Dependent		SCHOLARSHIP	2,500.
Jennifer Oakley 2996 Seasons Boulevard Sarasota, FL 34240	Employee Dependent		SCHOLARSHIP	625.

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Page 6

R.M. BEALL SR. CHARITABLE FOUNDATION

59-2851924

#### Statement 10 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
Joaquin Mendoza 4526 Busti Drive Sarasota, FL 34232	Employee Dependent		SCHOLARSHIP	\$ 1,250.
Kari Truong 5309 36th Avenue Circle West Bradenton, FL 34209	Employee Dependent		SCHOLARSHIP	1,250.
Katelyn Gooden 2675 Bantry Bay Drive Tallahassee, FL 32309	Employee Dependent		SCHOLARSHIP	1,875.
Kyle Hemsley 9820 55th Way Pinellas Park, FL 33782	Employee Dependent		SCHOLARSHIP	1,250.
Leah Stewart 6350 Grand Oak Circle # 101 Bradenton, FL 34203	Employee Dependent		SCHOLARSHIP	2,500.
Myrline Joseph 1802 9th Avenue East Bradenton, FL 34208	Employee Dependent		SCHOLARSHIP	2,500.
Sarah Osoria - Ruiz 2807 31st Avenue East Bradenton, FL 34208	Employee Dependent		SCHOLARSHIP	937.
Sophie Pierre 919 38th Terrace East Bradenton, FL 34208	Employee Dependent		SCHOLARSHIP	2,187.
Zac Thaliath 4465 67th Street East Bradenton, FL 34203	Employee Dependent		SCHOLARSHIP	1,250.
CREED 201 Lake Village Drive McKinney, TX 75071	NONE		DONATIONS	250.
Adam Shealy 608 23rd Avenue W Bradenton, FL 34205	Employee Dependent		SCHOLARSHIP	2,500.
Anileidy Perry 13700 SW 147 Cir. Lane, Apt 4 Miami, FL 33186	Employee Dependent		SCHOLARSHIP	5,000.
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Page 7

R.M. BEALL SR. CHARITABLE FOUNDATION

59-2851924

#### Statement 10 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	;	Amount
Name and Address Arletys Garcia 1710 N. Pompano Ave Sarasota, FL 34234	Employee Dependent	_ scacus	SCHOLARSHIP	\$	1,250.
Carson Black PO Box 545 Lake Hamilton, FL 33851	Employee Dependent		SCHOLARSHIP		4,375.
Christopher Berg 420 Lake Ned Rd Winter Haven, FL 33884	Employee Dependent		SCHOLARSHIP		1,875.
Crystal Gutierrez 1107 19th Ave West Bradenton, FL 34205	Employee Dependent		SCHOLARSHIP		1,250.
Fernando Capula 2309 6th Ave Dr. E Bradenton, FL 34208	Employee Dependent		SCHOLARSHIP		1,250.
Jade Bento 1130 Juniper Hammock Ct. Winter Garden, FL 34787	Employee Dependent		SCHOLARSHIP		1,250.
Jimmy Leon 5001 23rd St. W., #B Bradenton, FL 34207	Employee Dependent		SCHOLARSHIP		833.
Jose Berlioz 4240 Day Bridge Place Ellenton, FL 34222	Employee Dependent		SCHOLARSHIP		1,250.
Jose Caceres 5310 14th St. W, Lot 41 Bradenton, FL 34207	Employee Dependent		SCHOLARSHIP		1,250.
Jose Capula 2309 6th Ave Dr. E Bradenton, FL 34208	Employee Dependent		SCHOLARSHIP		2,500.
Juliona Fuller 685 CR 13A South Elkton, FL 32033	Employee Dependent		SCHOLARSHIP		1,250.
Kaitlyn Jacobs 1024 Grandeur St. SE Palm Bay, FL 32909	Employee Dependent		SCHOLARSHIP		1,250.
Kerlange Bien-Aime 3810 5th St. E, Apt 310 Bradenton, FL 34208	Employee Dependent		SCHOLARSHIP		1,250.

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Page 8

R.M. BEALL SR. CHARITABLE FOUNDATION

59-2851924

### Statement 10 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant		Amount
Lindsey Mize 200 Sherwood Ln Kerrville, TX 78028	Employee Dependent	<u> </u>	SCHOLARSHIP	\$	2,500.
Lisa Orange 5734 18th Ave N. St. Petersburg, FL 33710	Employee Dependent		SCHOLARSHIP		1,250.
Luis Castro 1816 24th St. E Palmetto, FL 34221	Employee Dependent		SCHOLARSHIP		5,000.
Lyhomaliz Oliveras 5297 Rocking Horse Pl. Oviedo, FL 32765	Employee Dependent		SCHOLARSHIP		1,250.
Marlene Mendoza 233 Parkland Ave Sarasota, FL 34232	Employee Dependent		SCHOLARSHIP		1,250.
Nicholas Dine 823 Jacaranda Drive Oldsmar, FL 34677	Employee Dependent		SCHOLARSHIP		3,750.
Phucyen Ta 1607 Roslyn Ave Bradenton, FL 34207	Employee Dependent		SCHOLARSHIP		2,500.
Sarah Shealy 608 23rd Ave W Bradenton, FL 34205	Employee Dependent		SCHOLARSHIP		1,250.
Sarah Wyrzkowski 135 Seagrape Dr., #204 Jupiter, FL 33458	Employee Dependent		SCHOLARSHIP		1,250.
ArtCenter Manatee 209 9th St. W. Bradenton, FL 34205	NONE		DONATIONS		500.
Police Athletic League (Manatee) 202 13th Ave E Bradenton, FL 34208	NONE		DONATIONS		500.
Stetson University 421 North Woodland Blvd, Unit 8286 Deland, FL 32723	NONE		DONATIONS		2,500.
			m_ L	-1 <del>č</del>	100 717

Total \$ 126,417.

R.M. Beall, Sr. Charitable Foundation R.M. Beall, Sr. Charitable Operating Foundation Robert and Aldona Beall Family Foundation P.O. Box 25207 Bradenton, FL 34206-5207 941.744.4455 (Phone) 941.747.0857 (Fax) foundations@bealisinc.com

# Palmetto Youth Center Scholarship Program

### ± Sponsored by Beall's Foundations

The Palmetto Youth Center scholarship program, sponsored by the Beall's Foundations, is designed to give students with the will and ability, an opportunity to make the most of their educational career. The purpose is to ensure young people that have participated in the Palmetto Youth Center and have demonstrated drive and ability are able to take full advantage of their high school and college experience and earn an academic degree/diploma within four years.

### Scholarship Rules

#### Selection Criteria

Selection will be determined based on the following factors:

- Extent of involvement with the Palmetto Youth Center
- Academic achievement
- ♦ Involvement in extracurricular activities
- Financial need
- Correctly completed scholarship application and accompanying information
- ♦ Interview with the Palmetto Youth Center Scholarship Committee

#### Description of Scholarship Program and Benefits

Each year the Beall's Foundations may select students to receive a scholarship award. The Trustees of the Foundation may award up to \$2,500 (per year) to help fund college education for the first two years and up to \$5,000 for years three and four. The scholarship can be used for room and board, tuition, fees, and books.

Any interested student can request a Scholarship Application Form from the Foundation or from the Palmetto Youth Center. The form must be submitted by the deadline determined by the Palmetto Youth Center to be considered. A decision will be made in April or May

#### Eligibility Requirements for a Foundation Scholarship

#### Applicant must:

- . Be a member of the Palmetto Youth Center
- → Have a minimum of 2.5 GPA (A=4 0)
- Be formally accepted to a Florida Secondary, two-year or four-year accredited institution

Completed applications should be returned to:

Scholarship Committee Chairperson Palmetto Youth Center PO Box 608 Palmetto, FL 34220

R M. Beall, Sr. Charitable Foundation R.M. Beall, Sr. Charitable Operating Foundation Robert and Aldona Beall Family Foundation P.O. Box 25207 Bradenton, FL 34206-5207 941 744.4455 (Phone) 941.747.0857 (Fax) foundations@beallsinc.com

### Qualifications for Continuing Eligibility of a Foundation Scholarship

- 1. Recipients will be at risk of losing the scholarship if they fail to maintain at least a 2.5 (A=40) GPA each semester and overall. Demonstrated effort as well as the difficulty of school and major will be considered.
- 2. Suspension or expulsion will automatically terminate scholarship assistance.
- 3. Convictions in court of law may terminate scholarship assistance.
- 4. The student must maintain a full course load (generally 12 hours) as specified by the school recipient is attending.
- 5. The student must have official transcripts sent directly from the school to Beall's Foundations at the end of each grading period.
- 6 The student must send a copy of their new class schedule for the next grading period to Beall's Foundations.
- The student must volunteer at minimum of 10 hours at the Palmetto Youth Center annually. The volunteer hours must be performed during the period August July of each year. If the student does not fulfill the minimum requirement, they may lose their scholarship funding.
- 8 The student must attend the Annual Martin Luther King banquet sponsored by the Palmetto Youth Center. The banquet is held in January of each year.
- 9 The student must attend mandatory Scholarship Retreats that will be held twice a year.
- 10. During June and December of each year that the student is eligible and wants to continue receiving the scholarship for the next academic year, he or she must complete the scholarship certification form. This form details scholarship eligibility requirements, due dates, and other pertinent information. In addition to completing the form, the following must be attached
  - ♦ Official Transcript

- Class Registration Schedule
- Financial Aid Award Letter or Summary
- ♦ College Acceptance Letter (new students)

While it is the intent of the Foundations is to continue the funding of qualified recipients for four years, this is not guaranteed and is at the discretion of the Foundation and the availability of funds. Additionally, the Palmetto Youth Center Scholarship Committee will evaluate the program annually and may make changes to program at that turne.

#### Mentor Program

The mentor program was designed to provide an opportunity for constructive dialogue and sharing of wisdom that will enhance the student's ability to have a successful college career. Below are guidelines for the program.

- Each student will be assigned a mentor of the same gender.
- The mentor and student should meet before and after each grading period. Frequent meetings should help develop a rapport between the student and the mentor. The mentor should discuss the student's class schedule including number of classes the student is taking, grades, etc.
- The student is required to inform mentor any time there is a schedule or major subject change.
- Mentors should make a student status report to the board after each grading period.

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Acknowledgment	
I acknowledge that I have read the above scholarship rules with the rules my scholarship assistance may be terminated.	and will abide by them. I understand that if I do not comply
Applicant	Date
Parent(s) or Guardian(s) of Applicant	Date

NOTE: Copies of the signed acknowledgement form should be given to the student and the Palmetto Youth Center Chairperson. The original document will be placed in the student's scholarship file maintained by the Foundation Administrator.

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# Palmetto Youth Center Scholarship Program

Sponsored by Beall's Foundations

	Scholarship Application
Name:	Last, First, Middle
Address:	Street or Box Number
	City, State Zip Code
Home Ph	none #:
Social Se	ecurity #:
Date of I	Birth:
Require	d Information
1. Pleas	se provide a one-page summary stating why you wish to attend school (high school or college) and why need financial assistance.
2 Pleas	se provide a transcript of your high school and, if applicable, college scholastic record.
3. Plea	se indicate the school you plan to attend.
4 Pleas	se indicate the major course of study you will be pursuing.
5. Plea	se list other assistance applied for and status
6 Plea	se list extracurricular activities:

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7.	Please list activities as a member of the Palmetto Yo		
Fa	mily Information		
1.	Parent/Guardian employed by Beall's: (If applicable)  Last, First, Mid	die	Date of Hire
2.	Ages of dependent children in your family besides yo		
3.	Father (or Legal Guardian's Name.		
	Mother's Name:		
4.	Father or Legal Guardian's Gross Income:*  Mother's Gross Income *		
5.	Father or Legal Guardian's Employer & Address:		r & Address:
*If	you live in a single parent household, please indicate if financial s		ent
Ed	ucation		
l	Schools Attended		
	Elementary School:	Dates-	
	High School:	Dates:	GPA:
	College	Dates:	GPA

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	Current Job:		Average Hours W	orked:		
	Company Name:					
	Phone Number:					
	From Month/Year	To Month/Year	Position Title	Salary Start/Enc		
	Brief description of duties					
	Previous job		Average Hours Worked:			
	Company Name:		Address:	Address:		
	Phone Number:		Supervisor:			
	From Month/Year	To Month/Year	Position Title	Salary Start/End		
	Bnef description of duties.					
	-ences wo character references not re	elated to you – teachers, cl	ıb/team leaders, employer:	s or religious leaders.		
	a Name	Relationship	b. Name	Relations		
	Street or Box Number		Street or Box Number			
	City, State, Zip Code		City, State, Zip Code			

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Have you been convicted of any offense within the last five years?	o Yes	o No	
If your answer is "yes," on a separate sheet of paper explain the disposition of the case.	details and in	dicate when, when	re and
I certify that I have not knowingly withheld any facts of circumstances further agreed that any misrepresentation by me in this application wapplication. I authorize The Beall's Foundations to conduct an investigand will not hold anyone liable who supplies information.	ill be sufficien	nt cause for rejection	ng the
Student's Signature	Date		
Parent/Guardian Signature	Date		

Return the fully completed application and accompanying information to:

Scholarship Committee Chairperson Palmetto Youth Center PO Box 608 Palmetto, FL 34220

R.M. Beall, Sr. Charitable Foundation R.M. Beall, Sr. Charitable Operating Foundation Robert and Aldona Beall Family Foundation P.O. Box 25207 Bradenton, FL 34206-5207 941.744.4455 (Phone) 941.747.0857 (Fax) foundations@beallsInc.com

#### SCHOLARSHIP APPLICATION - EMPLOYEES

Nam	٥٠			Local Phone#:		
Henr	Last	Fust	Middle	Social		
Addr	ess	t or Bax Number		Security#:		
				Email Address:		
	City	State	Zip	Present		
Birth	date:			Age		
Regi	uired Informa					
1.			nary stating why you	wish to attend college and	why you need financial assistance	
2.	Please prov	ide a transcript of you	ur high school and, if	applicable, college scholasi	tic record	
3.	Please indic	ate the school you pl	an to attend			_
4	Please indic	ate the major course	of study you will be p	oursuing.	<del></del>	
5	Please list o	ther assistance appli	ed for and status:			
6	Places list o	vtracuracular activitie				<del></del>
G	riease iist e	XII acti II cuiai activitie				
Fami	ily Informatio			- 10		
1	Parent/Gua	rdian employed by Be	eal <sup>r</sup> s Name		Date of Hire	_
	Employee #		Retabonship		Store Number/Department/Title	-
2		l ages of dependent o	children in your family	besides yourself:		_
3	Father's Na	me		Mother's Name.		1
4.	*Father's Ar	nual Gross Income**		*Mother's Annual Gros.	s Income**	ļ
5	Father's Em	ployer & Address		Mother's Employer & A	ddress.	
6.	I am the first t	o go to college in my	family Yes	No		
	•	single parent household p is income before taxes an		s not provide financial support		
Educ	ation					
	Schools atte	nded				
	High School			Dates	GPA	
	College			Dates	GPA	

Sevised. 02/06

<sup>\$ /</sup>rmpsrfnd/scholarships/applications/Scholarship Application Beall's

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### SCHOLARSHIP APPLICATION - EMPLOYEES, continued

Work History						
<u>Current Job:</u>		Average Hours Worked	t:			
Name:		Address:				
Phone#		Supervisor.				
Eroni Month Year	To Month Year	Position Etle	Salary Stand Ind			
Brief description of dubes:						
Previous Job		Average Hours Worked:				
Name:	<del></del>	Address.				
Phone#.		Supervisor.				
Brief description of duties:			Salay-Start/End			
References  List two character references not related to you - teachers, club/team leaders, employers or religious leaders (Reference letters are attached)						
Name	Relationship	b Name	Relationship			
Street or Box Number		Street or Box Number				
City State	Zφ	City S	iale Zip			

Revised: 02/06

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### SCHOLARSHIP APPLICATION - EMPLOYEES, continued

•	ed of any offense within the last five years					
misrepresentation by me in this	withheld any facts of circumstances in completing this application will be sufficient cause for rejecting the application and will not hold anyone liable who sufficient cause.	lication I authorize Beall's, Inc. to conduct				
Student's Signature	Parent/Guardian Signature	Date				
Return the fully completed application to: R. M. Beall, Sr. Charitable Foundation						
,	P. O. Box 25207					
	Bradenton, Florida 34206-5207					
		i				

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R.M. Beall, Sr. Charitable Foundation R.M. Beall, Sr. Charitable Operating Foundation Robert and Aidona Beall Family Foundation

P.O Box 25207 Bradenton, FL 34206-5207 941,744.4455 (Phone) 941.747.0857 (Fax) foundations@beallsinc.com

#### REFERENCE

Date
Name
Address
Address
Dear
(Student) has given your name as a reference in applying for a college scholarship. We would appreciate your assistance in our selection process by answering a few questions and returning this letter to us at the following address:
R.M. Beall, Sr. Charitable Foundation 1806 38 <sup>th</sup> Avenue E. Bradenton, FL 34208
Thank you very much.
Sincerely, Patricia A. Johnson
R.M. BEALL, SR. CHARITABLE FOUNDATION Patricia A Johnson Charitable Foundation Administrator
How long have you known the student?
In what capacity?
What, in your opinion, is his/her capacity for academic success in college?
Excellent Moderate Poor Don't know
How well do his/her accomplishments match his/her ability?
<ul> <li>▶ Works unusually hard to achieve</li> <li>▶ Achievement generally reflects ability</li> <li>▶ Tends to underachieve</li> <li>▶ Don't know</li> </ul>
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REFERENCE - Page 2

How would you rate his/her integrity?
High Moderate Low Don't know
Do you recommend him/her for a scholarship?
Yes, strongly Yes, with some reservations No
Additional Remarks:
I hereby certify that the information I have provided on these pages is accurate and true
Signature Date

R.M. Beall, Sr. Charitable Foundation R.M. Beall, Sr. Charitable Operating Foundation Robert and Aldona Beall Family Foundation P.O. Box 25207 Bradenton, FL 34206-5207 941.744.4455 (Phone) 941.747.0857 (Fax) foundations@beallsinc.com

#### REFERENCE

Name
Address
Address
Dear:
(Student) has given your name as a reference in applying for a college scholarship. We would appreciate your assistance in our selection process by answering a few questions and returning this letter to us at the following address:
R.M. Beall, Sr. Charitable Foundation 1806 38 <sup>th</sup> Avenue E. Bradenton, FL 34208
Thank you very much.
Sincerely,
Patricia A. Johnson
R.M BEALL, SR. CHARITABLE FOUNDATION Patricia A. Johnson Charitable Foundation Administrator
How long have you known the student?
In what capacity?
What, in your opinion, is his/her capacity for academic success in college?
Excellent Moderate Poor Don't know
How well do his/her accomplishments match his/her ability?
<ul> <li>Works unusually hard to achieve</li> <li>Achievement generally reflects ability</li> <li>Tends to underachieve</li> <li>Don't know</li> </ul>

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Reference Page 1

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REFERENCE - Page 2

How would you rate his/her integrity?	
High Moderate Low Don't know	
Do you recommend him/her for a scholarship?	
Yes, strongly Yes, with some reservations No	
Additional Remarks:	
	- -
	-
I hereby certify that the information I have provided on these pages is accurate and true.	
Signature: Date	