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# Form **990-PF**

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

OMB No 1545-0052

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Department of the Treasury Internal Revenue Service For calendar year 2011 or tax year beginning and ending Name of foundation A Employer identification number GENE & FLORENCE MONDAY FOUNDATION. 62-1518306 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 1810 AILOR AVENUE (865) 525-0238 City or town, state, and ZIP code C if exemption application is pending, check here 37921 KNOXVILLE, G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: Accrual If the foundation is in a 60-month termination (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here 4,131,393. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome 222,340. N/A Contributions, gifts, grants, etc., received Check \_\_\_\_\_ if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 169,400. 169,400 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 76,681 6a Net gain or (loss) from sale of assets not on line 10 235,653. 76,681 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 468,421 246,081 0 0. 13 14 Other employee salaries and wag Sysion Mans ethogy soft Selits 15 16a Legal fees SCANDIED AUG 7 2012 Acc<del>ountin</del> other plea 17 Interest STMT 2 4,576 0 18 19 Depreciation and depletion Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 3 8,475 0 Ō. 24 Total operating and administrative 13,051 0 expenses. Add lines 13 through 23 200,000. 200,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 0 213,051 200,000 Add lines 24 and 25 Subtract line 26 from line 12: 255,370. a Excess of revenue over expenses and disbursements 246,081 b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions.

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N/A

Ž	9 Prepaid expenses and deferred charges					
Ć	10a Investments - U.S. and state government obligations	;				
	b Investments - corporate stock	STMT	4	3,293,865.	3,140,401.	3,140,401.
	c Investments - corporate bonds	STMT	5	753,158.	957,725.	957,725.
	11 Investments - land, buildings, and equipment basis					
	Less accumulated depreciation					
	12 Investments - mortgage loans					
	13 Investments - other					
	14 Land, buildings, and equipment; basis ▶					
	Less accumulated depreciation					
	15 Other assets (describe ►		)			

4,173,998.

4,131,393.

10,000

20 21 22	Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable  Other liabilities (describe									
23	Total liabilities (add lines 17 through 22)	_			(	0.		10	, 0	00.
0.4	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		17	13	999	Ω	1	1 2 1	3	0.2

Unrestricted Net Assets or Fund Balance 25 Temporarily restricted 26 Permanently restricted ▶ □

•	1 ormanomay roomicad
	Foundations that do not follow SFAS 117, check here
	and complete lines 27 through 31.
,	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

31 Total liabilities and net assets/fund balances

16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses

18 Grants payable 19 Deferred revenue

8 Inventories for sale or use

4,173,998.	4,121,393.
4.173.998.	4,131,393.

## 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	$\top$	, ,
	(must agree with end-of-year figure reported on prior year's return)	1	4,173,998
2	Enter amount from Part I, line 27a	2	255,370
3	Other increases not included in line 2 (itemize)	3	0
4	Add lines 1, 2, and 3	4	4,429,368
5	Decreases not included in line 2 (itemize) ► UNREALIZED GAIN/LOSS ON INVESTMENTS	5	307,975
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	4,121,393

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4,131,393.

Part IV Capital Gains	and Losses for Tax on Ir	nvestment	Income					
	ibe the kınd(s) of property sold (e.g rehouse; or common stock, 200 sh			( <b>b)</b> Hov P - P D - C	v acquired urchase onation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a 76 SH DAVIS NE	1a 76 SH DAVIS NEW YORK VENTURE A P 1						3/10	02/24/11
b 266 SH DAVIS N					P	VARI		02/24/11
	NEW YORK VENTURE	A			P	04/1	7/09	02/24/11
<u>e</u>	(4) Democration officers of	(-) (	A Ab b i-	<u> </u>		/b\ C		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				Sain or (loss s (f) minus	(g)
a 2,662.			2,49					165.
ь 9,319.		<u> </u>	8,17					1,149.
c 223,672.			148,30	3.	<del></del>			75,367.
e				-	<del>- ·</del>		<del></del>	
	g gain in column (h) and owned by	the foundation	on 12/31/69		<del> </del>	(I) Gains ((	Col. (h) gaın	minus
	(i) Adjusted basis		cess of col. (1)	_	C	ol. (k), but	not less tha	n -0-) <b>o</b> r
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any			Losses	(from col. (	(n))
a								165.
b								1,149.
С								75,367.
d								
		<u> </u>		_				
2 Capital gain net income or (net ca	pital loss) $\begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0} \end{cases}$			}	2			76,681.
3 Net short-term capital gain or (los		nd (6):		\				
If gain, also enter in Part I, line 8,	column (c).			$ \cdot $			37/3	
If (loss), enter -0- in Part I, line 8  Part V   Qualification U	nder Section (1940/e) for	Paducad	Tay on Net	Inves	tment In	come	N/A	
						Come	<del> </del>	
(For optional use by domestic private	Touridations subject to the section (	4940(a) tax on	net investment in	come.)				
If section 4940(d)(2) applies, leave the	ns part blank.							
Was the foundation liable for the sect	on 4942 tax on the distributable am	nount of any ve	ar in the base per	od?				Yes X No
If "Yes," the foundation does not qual			•					
	ach column for each year; see instr			s.				
(a) Base period years	(b)			(c)			Distrib	(d) oution ratio
Calendar year (or tax year beginnir	ng in) Adjusted qualifying dis		Net value of no			1	(col. (b) div	rided by col. (c))
2010		8,686.			990,22			.049793
2009		0,752.			168,57			.055355
2008		7,898. 3,851.			359,35 348,92			.051058
2007		7,768.			36,87			.030278
2006	2 3	7,700.		<u> </u>	730,07	<del>                                      </del>		•043131
2 Total of line 1, column (d)						2		.255675
3 Average distribution ratio for the 5	5-year base period - divide the total (	on line 2 by 5.	or by the number	of vears		<u>-</u>		
the foundation has been in exister	•		o. 2,	,		3		.051135
	, , , , , , , , , , , , , , , , , , , ,							
4 Enter the net value of noncharitab	le-use assets for 2011 from Part X,	line 5				4		4,090,301.
5 Multiply line 4 by line 3						5		209,158.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6	<u> </u>	2,461.
								014 646
7 Add lines 5 and 6						7	ļ	211,619.
8 Enter qualifying distributions from	8 Enter qualifying distributions from Part XII, line 4					8		200,000.
If line 8 is equal to or greater than	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1% t	ax rate.			
See the Part VI instructions.				_				·

Form 990-PF (2011) GENE & FLORENCE MONDAY FOUNDATION, INC. 62-Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	-15183( - see ins		Page 4
1a, Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.	T		
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		4,	922.
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, col. (b).	Í		
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		4,	922.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		4,	922.
6 Credits/Payments:			
a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 7,526.			
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 6d			_
7 Total credits and payments. Add lines 6a through 6d		7,	526.
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			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2,	604.
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax > 2,604. Refunded > 11			0.
Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Ye	s No
any political campaign?	<u>_1</u>	a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	<u>_1</u>	b	<u> </u>
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?	<u> </u>	С	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.		,	
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			}
managers. ► \$			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	<u> </u>	2	X
If "Yes," attach a detailed description of the activities.			1 1
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			JJ
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4		X
	· —	b	+
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u> </u>	<del>`</del>	X
If "Yes," attach the statement required by General Instruction T.			1 1
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
By language in the governing instrument, or      Dividetal legislation that offset with appendent to governing instrument on that no mandatory directions that conflict with the state legislation.			
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		3 X	-
remain in the governing instrument?	<u>-</u>		+
7 Did the foundation have at least \$5,000 in assets at any time during the year?	⊢'	1	+
If "Yes," complete Part II, col. (c), and Part XV  8a Enter the states to which the foundation reports or with which it is registered (see instructions)			
TN			
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)	<del></del>		
of each state as required by General Instruction G? If "No," attach explanation	8	b X	-  <b>-</b>
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	⊢°	<u>"   ^</u>	<del> </del>
year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV		<u></u>	- - <u>x</u> -
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	1	$\rightarrow$	$\frac{x}{x}$
2.0 cm, personal description of the description		90-PF	

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Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be	Required (contin	nued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or ind			
any voter registration drive?			es 🗶 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Y	es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	r for		
the prevention of cruelty to children or animals?	,		es X No	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unc	ler the exceptions described			
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		tained	'	
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.4945			"	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
	Day premiums on		es X No	
a personal benefit contract?	araanal hanafit aantraat?	· · · · ·	<del> </del>	6b X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonar benefit contract?		-	
If "Yes" to 6b, file Form 8870	L - M A		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		<b>T</b>		76
b If 'Yes," did the foundation receive any proceeds or have any net income attribu			•	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation M	anagers, Higni	У	
List all officers, directors, trustees, foundation managers and their	compensation			
List all Officers, directors, trustees, foundation managers and their	<del></del>	(c) Compensation	(d) Contributions to	(a) Eynense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid.	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	`enter'-0-)'	compensation	allowances
			۱ ,	•
SEE STATEMENT 6	. —	0.	0.	0.
<u> </u>				
2 Compensation of five highest-paid employees (other than those inc		e, enter "NONE."	T (all a	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Harrio and addition of sacin only 10,000 para more than \$00,000	' hours per week devoted to position	(C) compensuation	and deterred compensation	allowances
NONE				
	<u>_</u>			
			·	
			]	
Total number of other employees paid over \$50,000		<del></del>	<u> </u>	0
TOTAL THE TOTAL OF COLOR OTTEN PORT OF COLOR OTTEN PORT OF COLOR OTTEN PORT O			Form	990-PF (2011)
				\/

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Total. Add lines 1 through 3

[ [	withinfull investment Neturn (All domestic foundations must complete this part. Foreign fou	indations, s	ee instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	4,074,865. 77,725.
b	Average of monthly cash balances	1b	77,725.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	4,152,590.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,152,590.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	62,289.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,090,301.
6	Minimum investment return. Enter 5% of line 5	6_	204,515.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1 1	204,515.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 4,922.		<del></del>
Ь	Income tax for 2011. (This does not include the tax from Part VI.)		
_	Add lines 2a and 2b	2c	4,922.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	199,593.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	199,593.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	199,593.
·P	artXIII Qualifying Distributions (see instructions)		
<del>1</del>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Control of the Contro	1a	200,000.
b	- 10 miles	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	200,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	200,000.
	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

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4940(e) reduction of tax in those years.

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Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1. Distributable amount for 2011 from Part VI	Corpus	rears prior to 2010	2010	2011
Distributable amount for 2011 from Part XI, line 7				199,593.
2 Undistributed income, if any, as of the end of 2011	·-···		-	
a Enter amount for 2010 only			67,895.	
b Total for prior years:	-			
o your toy prior yours.		0.		
3 Excess distributions carryover, if any, to 2011:	<del></del>	· ··· ·	**************************************	······································
a From 2006				
<b>b</b> From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ►\$ 200,000.				
a Applied to 2010, but not more than line 2a			67,895.	
<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.			120 105
d Applied to 2011 distributable amount	0			132,105.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))				0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract	· · · · · · · · · · · · · · · · · · ·			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				•
assessed		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.		····
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				67 100
be distributed in 2012 7 Amounts treated as distributions out of				67,488.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010				
e Excess from 2011				Form <b>990-PF</b> (2011)

	FLORENCE MO				18306 Page 10
Part XIV Private Operating For			-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	•	•	·	14040(1)(0) -11 4(	240(2)(5)
b Check box to indicate whether the found		ig foundation described i		4942( <u>j)(</u> 3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2011	<b>(b)</b> 2010	Prior 3 years (c) 2009	(d) 2008	(e) Total
income from Part I or the minimum	(a) 2011	(0) 20 10	(6) 2009	(4)2000	(c) rotar
investment return from Part X for					
each year listed				_	
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	_				
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		<u> </u>	<del> </del>		
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,				ı	
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public	<u></u>				
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 Info	rmation (Comple	te this part only	if the foundatio	n had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	n Managers:				<del></del>
a List any managers of the foundation wh		than 2% of the total cont	ributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed n			•		•
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation	or an equally large por	tion of the ownership of a p	artnership or
other entity) of which the foundation ha					·
NONE					
2 Information Regarding Contribute	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:	<del></del>	
Check here ► X if the foundation of the foundation makes gifts, grants, etc.	nly makes contributions	to preselected charitable	organizations and does		
	<u> </u>			Jornphoto noma za, u, u, dill	
a The name, address, and telephone num	der of the person to who	n applications should be	addressed.		
SEE STATEMENT 7					
<b>SEE STATEMENT</b> 7 <b>b</b> The form in which applications should be	a cultimitted and informs	tion and materials they of	only include.	<del> </del>	
the form in which applications should to	e submitted and informa	don and materials they si	iodia iliciade.		
c Any submission deadlines:					
d Any restrictions or limitations on award	s such as hy geographic	al areas charitable fielde	kinds of institutions or	other factors	
a Any resultations of infiltations of award:	s, such as by geographic	a areas, enariable licius,	ando or monditions, U	Carol lactors,	
123601 12-02-11					Form <b>990-PF</b> (2011)

PartXXV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or Foundation show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year BOYS & GIRLS CLUB OF THE TN VALLEY NONE PUBLIC CHARITY ENHANCE THE LIVES OF YOUTHS 220 CARRICK ST. 15,000. KNOXVILLE, TN 37917 BOYS & GIRLS CLUB OF THE TN VALLEY NONE PUBLIC CHARITY ACTIVITIES BUILDING AT 120 CARRICK STREET CASWELL AVE CLUB 10,000. KNOXVILLE, TN 37917 NONE PUBLIC CHARITY SHELTER TO DOM. CHILD & FAMILY TN VIOLENCE VICTIMS 901 EAST SUMMIT HILL DRIVE KNOXVILLE, TN 37915 7,500. EMERALD YOUTH FOUNDATION NONE PUBLIC CHARITY HELP THE CHRISTIAN 1718 N. CENTRAL STREET URBAN YOUTH MINISTRIES KNOXVILLE, TN 37917 5,000. FAMILY CARE FOUNDATION NONE PUBLIC CHARITY HUMANITARIAN RELIEF 1373 MARRON VALLEY ROAD WORLDWIDE FOR NEEDY FAMILIES 15,000. KNOXVILLE, TN 37917 SEE CONTINUATION SHEET(S) 200,000. ▶ 3a Total b Approved for future payment NONE ▶ 3b Total

Part XVI-A	Analys	is of Incon	ne-Producing	<b>Activities</b>
Part AVIA	Analys	is of incor	ne-Producing	Activities

nter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- slon	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Alliount	code	Amount	Tunction income
8			+		
b	_	<u> </u>			
C	_		+		
d	_				
e	_		<del>-  -  -</del>		
f	_		+		
g Fees and contracts from government agencies			+++		
2 Membership dues and assessments			$\perp$		
3 Interest on savings and temporary cash					
investments		<del>.</del>	1 1 1	160 400	
4 Dividends and interest from securities			14	169,400.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			+++		
6 Net rental income or (loss) from personal					
property		···			<del></del> .
7 Other investment income	-	<del> </del>	+		
8 Gain or (loss) from sales of assets other			18	76,681.	
than inventory			+ + 4	70,001.	<del> </del>
Net income or (loss) from special events     Gross profit or (loss) from sales of inventory			+ +		
1 Other revenue:	<del>                                     </del>		+ +-		
Other revenue.					
b	-	<del></del>	+ +		
			+++		
d				· · · · · · · · · · · · · · · · · · ·	
	- <del> </del>		-+		
2 Subtotal Add columns (b), (d), and (e)	-	(	<del>   -    </del>	246,081.	
3 Total. Add line 12, columns (b), (d), and (e)			· · I I	13	246,08
See worksheet in line 13 instructions to verify calculations.	١			·· <u> </u>	

### 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).
123621 12-02-11	Form <b>990-PF</b> (201

Form 99		011) <b>GENE</b>	& FLOREN	CE MOND	AY FOUNDATION	ON, INC.	62-1	<u>.518306</u>	Pa	ige 13
Part	XVII			nsfers To a	and Transactions	and Relation	ships With Non	charitable	•	
		Exempt Organ	<del>·</del>							
1 Did	the org	janızatıon directly or indii	rectly engage in any	y of the followin	ig with any other organizati	on described in sec	tion 501(c) of		Yes	No
the	Code (	other than section 501(c)	)(3) organizations)	or in section 52	27, relating to political orgai	nizations?				
a Tra	nsfers	from the reporting found	ation to a noncharit	able exempt or	ganization of:					
(1)	Cash							1a(1)		X
(2)	Other	assets						1a(2)		X
		sactions:								į
(1)	Sales	of assets to a noncharital	ble exempt organiz	ation				1b(1)		X
		ases of assets from a no						1b(2)		X
		of facilities, equipment,		organization.				1b(3)		X
		oursement arrangements						1b(4)		X
٠,		<u>=</u>						1b(5)		X
		or loan guarantees	mharahin ar fundre	voina naliaitatia						X
٠,		mance of services or me	•	•				1b(6)		X
	-	facilities, equipment, ma	-					<u> 1c</u>		
		•		-	dule. Column (b) should al				eis,	
		• • •			ed less than fair market vali	ue in any transactio	n or snaring arrangem	ient, snow in		
		) the value of the goods,								
(a)Line n	٥	(b) Amount involved	(c) Name o		e exempt organization	(0) Description	on of transfers, transaction	s, and sharing arr	angeme	nts
				N/A						
•										
		·-								
	Ì									
	1	******								
	1									
	+									
	+-		<u> </u>							
	+						<del></del>			
	-+					<del> </del>	<del></del>	<del></del>		
			<del> </del>				<del></del>			
			<u> </u>			<del></del>				
		•	-		or more tax-exempt organ	izations described				٦.
		501(c) of the Code (other		c)(3)) or in sect	tion 527?			Yes	LX.	No
<u> b lf "</u>	res," co	mplete the following scho			Lite to the second		<del></del>			
		(a) Name of org	janization		(b) Type of organization	ļ	(c) Description of rela	ationship		
		N/A								
			_							
				Λ						
-	Under	penalties of perjury, I declare	that I have examined the	his return, includin	ig accompanying schedules and n taxpayer) is based on all inforr	statements, and to th	best of my knowledge	May the IRS d	iscuss t	nis
Sign	and be	liet it is title, confect, in a con	A CONTROL OF	The later than	Triaxpayer) is based on all lillor	1		return with the shown below	e prepare	er
Here		Y 10Mmilla/11	1. MOlhs	W Meg	17/50/14	PRESI	DENT	X Yes		No
	Sign	ature of officer of trustee	1	17	Date	Title		<u> </u>		
		Print/Type preparer's na	ame	Preparer's si	gnature	Date	Check if F	PTIN		
				timbe	dru Van	7/24/12	self- employed			
Paid		KIM YOUNG		7000	eya Joy, CA	116115		P00745	372	
Prepa	arer	Firm's name ► PUG	H & COMPA	ANY, P.	c.	A	Firm's EIN ▶ 62			
Use (				•				<b>_</b>	_	
	-	Firm's address ▶ 31	5 N. CEDA	AR BLUF	F RD.	<del> </del>	1			

(865)769-0660 Form **990-PF** (2011)

KNOXVILLE, TN 37923

Phone no.

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Name of the organization

Employer identification number

62-1518306 GENE & FLORENCE MONDAY FOUNDATION, INC. Organization type (check one). Section: Filers of: 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

Employer identification number

CIDATE	_	EL ODEMOE	MONTONY	EOIDID A DEON	TNO
GEME	œ	LPOKENCE	MONDAI	FOUNDATION,	TIMC .

62-1518306

Part l	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GFM, INC.  P.O. BOX 1  KNOXVILLE, TN 37901	\$\$ 11,411.	Person X Payroll Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ROBERT N. STRONG HOME TRUST  1810 AILOR AVE  KNOXVILLE, TN 37921	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ROBERT N. STRONG HOME TRUST  1810 AILOR AVE  KNOXVILLE, TN 37921	\$192,428.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ \$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
122452 01.22		\$Schedule B /Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

## GENE & FLORENCE MONDAY FOUNDATION, INC.

62-1518306

art II	Noncash Property (see instructions) Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	MARKETABLE SECURITIES		
		  \$ 192,428.	12/21/11
(a)		(c)	
No. from Part I	(b)  Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
(a) No. from Part i	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		\$	<del></del> ,
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	<del>.</del>
		<del></del>	
453 01-23-			90, 990-EZ, or 990-PF) (

Employer identification number

	FLORENCE MONDAY FOUND	ATION, INC.	62-1518306
	Exclusively religious, charitable, etc., individual year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.  Use duplicate copies of Part III if addition	ridual contributions to section 501(c)( ne following line entry. For organization c., contributions of \$1,000 or less for the al space is needed.	7), (8), or (10) organizations that total more than \$1,000 for the s completing Part III, enter he year. (Enter this information once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee

# GENE AND FLORENCE MONDAY FOUNDATION SUITE 500, 612 GAY 5 FREET POST OFFICE BOX 1 KNOXVILLE, TLINNESSEE 37901

	GRANT APPLICATION	<u>ON FORM</u>
ORGANIZATION:		•
ADORESS:		
NAME OF CONTACT		
PERSON:	TITLE	TELEPHONE
GRANT REQUEST SERVICES IN THE	TED IN THE AMOUNT OF \$ IS T FOLLOWING CATEGORY (PLEASE CHECK)	O BE USED FROM TO FOR
	CHARITABLE  PROMOTE NON-SMOKING, NON-DRINKI  ASSIST NEEDY WITH FOOD, CLOTHING ENCOURAGE CHILDREN & YOUTH IN BA HELP RELIEVE SUFFERING BEYOND OL OTHER (Specily)  RELIGIOUS EDUCATIONAL	, SHELTER AND EMPLOYMENT ASIC MORAL VALUES
1 A PROG POPULA 2 BUDGE 3 CURREI 4 AUDIT F 5 LIST OF 6 COPY O 7 COPY O REVENU 8 COPY O APPROI	ATION TO BE HELPED I FOR THE PROGRAM NT FIANCIAL REPORT FOR MOST RECENT FISCAL YEAR BOARD MEMBERS AND OFFICERS OF THE APPLIC F MINUTES OF BOARD MEETING AUTHORIZING SU F LETTER OF DETERMINATION OF TAX EXEMPT S UE CODE.	S, OF HOW THESE FUNDS WILL BE USED AND THE  CANT ORGANIZATION  JEMISSION OF APPLICATION  TATUS UNDER SECTION 501(C)(3) OF THE INTERNAL  EXEMPT FROM INCOME TAX* FOR PREVIOUS FISCAL YEAR
	INDEDGEANDING	
	UNDERSTANDING AND	COMMITMENT
IN MAKING THIS APPLICAT	TION WE UNDERSTAND AND AGREE THAT SHOULD	O OUR REQUEST BE APPROVED WE WILL
B SUBMIT PROGR C KEEP B GRANT D NOT UE INFULU INFLUE CARRY	LESS OF THE GRANT LECORDS OF RECEIPTS AND EXPENDITURES AND OR AT REASONABLE TIMES SE ANY OF THE FUNDS TO LENCE LEGISLATION, NCE THE OUTCOME OF ELECTIONS, ON VOTER REGISTRATION DRIVES, SRANTS TO INDIVIDUALS OR OTHER ORGANIZATIO TAKE ANY NON-EXEMPT ACTIVITY	MANNER IN WHICH THE FUNDS ARE SPENT AND THE MAKE BOOKS AND RECORDS AVAILABLE TO THE
	CEDTIEICAT	TION
THIS IS TO CERTIFY THAT T	<u>CERTIFICAT</u> THE INFORMATION INCLUDED IN THIS REQUEST IS	TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.
IF APPROVED, THE GRAN	T WILL BE USED AS APPLIED FOR	
DATE		URE
	TITLE _	
	NOTICE	

GRANT APPLICATIONS SHOULD BE RECEIVED BY JULY 1 IN ORDER TO BE CONSIDERED FOR FUNDING IN THE NEXT CALENDAR YEAR

L /57985150/2006/1206 GRANT APPLICATION

December 1 - December 31, 2011

# ASSET DETAILS

This section shows the cash equivalents and/or securities in your account. It reflects market values as of the close of business December 31, 2011

# CASH EQUIVALENTS

	Approxinate Current	Anticipated Current Annualized Yield
CASH BALANCE	\$1,225 00	Income Percent
FEDERATED GOVERNMENT • CASH SER	\$28,070.97	\$281 0010%
Total Cash Equivalents	\$29,295.97	\$2.81

# **ASSETS HELD AT HILLIARD LYONS**

TAXABLE FIXED INCOME	Symbol/CUSIP Rating	Quantity	Average Unit Cost	Cost	Approximate Current Price	Approximate Current	Unrealized Gain/(Loss)	Anticipated Annualized	Current. Yield
BANK AMERICA CORP SENIOR NOTE B/E CPN 4 875% DUE 09/15/12 DTD 09/25/02 FC 03/15/03	060505AR5 S&P: A- Moody: BAA1	20,000	\$99.5341	\$49,767.05	\$100 8600	\$50,430 00	\$662.95	\$2,437.50.	4.833%
GOLDMAN SACHS NOTE B/E CPN 5.250% DUE 10/15/13 DTD 10/14/03 FC 04/15/04	38141GDQ4 S&P: A- Moody: A1	50,000	\$101 9750	\$50,987.50	\$102.3500	\$51,175.00	\$187.50	\$2,625 00	5.129%
MORGAN STANLEY GLOBAL SUBORDINATE NOTE SEMI CPN 4.750% DUE 04/01/14 DTD 03/30/04 FC 10/01/04	61748AAE6 S&P. BBB+ Moody. A3	20'000	\$99 1410	\$49,570.50	\$98 6400	\$49,320.00	(\$250.50)	\$2,375.00	4.815%
WELLS FARGO & COMPANY NEW SUBORDINATE NOTE B/E CPN 5.000% DUE 11/15/14 DTD 11/06/02 FC 05/15/03	949746CR0 S&P: A Moody A3	50,000	\$100.0160	\$50,008.00	\$107 0030	\$53,501.50	\$3,493.50	\$2,500.00	4 672%
KEY BANK NA MEDIUM TERM SUBORDINATED BANK NOTE B/E CPN 4.950% DUE 09/15/15 DTD 09/14/05 FC 03/15/06	49327XAA8 S&P: BBB+ Moody: BAA1	20,000	\$96.0780	\$48,039.00	\$105 2030	\$52,601.50	\$4,562.50	\$2,475.00	4.705%
BEAR STEARNS COMPANIES INC GLOBAL NOTE B/E CPN 5.300% DUE 10/30/15 DTD 10/31/05 FC 04/30/06	073902KF4 S&P A Moody; AA3	000'09	\$99,4376	\$49.718.80	\$107.5390	\$53,769 50	\$4,050 70	\$2,650.00	4.928%

P.O. Box 32760 Louisville, KY 40232

December 1 - December 31, 2011

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# ASSET DETAILS Continued

# ASSETS HELD AT HILLIARD LYONS Continued

ASSETS HELD AT HILLIAND LYONS Continued	ONS Continued	***							
TAXABLE FIXED INCOME	Symbol/CUSIP Rating	Quantity	Average Unit Cost	Cost	Approximale Current Price	Approximate Current	Unrealized Gain/(Loss)	Anticipated Annualized	Current Yield
CATERPILLAR FINL SVCS CORP MEDIUM TERM NOTE B/E CPN 5.500% DUE 03/15/16	14912L2Y6 S&P: A Moody: A2	20'000	\$98 9270	\$49,463.50	\$115.0300	\$57,515.00	\$8,051.50	\$2,750.00	4.781%
AMERN EXPR CENTURION BK SALT LAKE CITY UT CD FDIC ACT/365 SEMI CPN 3 500% DUE 12/02/16	02586T4U5	000'09	\$100.0160	\$50,008 00	\$105 2000	\$52,600.00	\$2,592 00	\$1,750.00	3 326%
DTD 12/02/09 FC 06/02/10  TARGET CORP NOTE  CPN 5.375% DUE 05/01/17  DTD 05/01/07 FC 11/01/07	87612EAP1 S&P. A+ Moody. A2	50,000	\$102.2220	\$51,111.00	\$116,9000	\$58,450.00	\$7,339.00	\$2,687 50	4 597%
BB&T CORP SUBORDINATE NOTE B/E CPN 4.900% DUE 06/30/17 DTD 06/30/05 FC 12/30/05	054937AG2 S&P. BBB+ Moody: A3	20,000	\$97.7150	\$48,857.50	\$106 4320	\$53,216.00	\$4,358.50	\$2,450.00	4.603%
AT&T INC GLOBAL NOTE CPN 5.500% DUE 02/01/18 DTD 02/01/08 FC 08/01/08	00206RAJ1 S&P: A- Moody: A2	50,000	\$100.5603	\$50,280.15	\$115 7200	\$57,860.00	\$7,579.85	\$2,750 00	4.752%
GENERAL ELECTRIC CAP CORP MEDIUM TERM NOTE B/F CPN 5.625% DUE 05/01/18 DTD 04/21/08 FC 11/01/08	36962G3U6 S&P AA+ Moody. AA2	90'09	\$97 0505	\$48,525 25	\$112,0000	\$56,000.00	\$7,474.75	\$2,812.50	5 022%
ABN AMRO BK NV AMSTERDAM BRANCH SUBORDINATED NOTE B/E CPN 4 650% DUE 06/04/18 DTD 12/04/03 FC 06/04/04	00080QAB1 S&P BBB- Moody A3	25,000	\$101,0601	\$25,265 03	\$91,0850	\$22,771 25	(\$2,493.78)	\$1,162 50	5 105%
BANK AMERICA CORP SUBORDINATED NOTE B/E CPN 5.490% DUE 03/15/19 DTD 03/15/07 FC 09/15/07	060505DB7 S&P: BBB+ Moody. BAA2	25,000	\$103 3860	\$25,846.50	\$86 1910	\$21,547.75	(\$4,298.75)	\$1,372.50	6 369%
DISNEY WALT COMPANY NEW MEDIUM TERM NOTES B/E CPN 5.500% DUE 03/15/19 DTD 03/16/09 FC 09/15/09	25468PCK0 S&P* A Moody: A2	20,000	\$104 2400	\$52,120.00	\$120 2500	\$60,125.00	\$8,005 00	\$2,750 00	4 573%

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P.O. Box 32760 Louisville, KY 40232

Page 6 of 16

# ASSET DETAILS Continued

# ASSETS HELD AT HILLIARD LYONS Continued

TAXABLE FIXED INCOME	Symbol/CUSIP Rating	Quantity	Average Unit Cost	Cost	Approximate Current Price	Approximate Current Value	Unrealized Gain/(Loss)	Anticipated Annualized Income	Current Yield Percent
EMERSON ELECTRIC COMPANY NOTE B/E CPN 5.000% DUE 04/15/19 DTD 04/17/09 FC 10/15/09	291011BA1 S&P A Moody: A2	000'05	\$101.1180	\$50,559.00	\$117 4670	\$58,733.50	\$8,174.50	\$2,500.00	4.256%
JPMORGAN CHASE & COMPANY NOTE B/E CPN 4.250% DUE 10/15/20 DTD 10/21/10 FC 04/15/11	46625ННU7 S&P A Moody: AA3	25,000	\$97.8010	\$24,450 25	\$100.4600	\$25,115.00	\$664.75	\$1,062.50	4.230%
GENL ELECTRIC CAP CORP MEDIUM TERM NOTE B/E CPN 4.625% DUE 01/07/21 DTD 01/07/11 FC 07/07/11	36962G4Y7 S&P: AA+ Moody AA2	25,000	\$100.8140	\$25,203.50	\$102.5500	\$25,637.50	\$434.00	\$1,156 25	4.509%
NUCOR CORP NOTE B/E CPN 4.125% DUE 09/15/22 DTD 09/21/10 FC 03/15/11 CALL 03/15/22 @ 100.000	670346AL9 S&P. A Moody: A2	25,000	\$100 3210	\$25,080 25	\$107 9100	\$26,977.50	\$1,897.25	\$1,031.25	3,822%
GOLDMAN SACHS GROUP INC MEDIUM TERM NOTE B/E CPN 5.000% DUE 03/15/23 DTD 03/23/11 FC 04/15/11	38141EY94 S&P: A- Moody A1	25,000	\$100 0360	\$25,009,00	\$95.3160	\$23,829.00	(\$1,180.00)	\$1,250.00	5.245%
TENNESSEE VALLEY AUTH ELECTRONOTES B/E SEMI SURVIVOR OPTION CPN 4 875% DUE 07/15/24 DTD 07/02/09 FC 01/15/10 CALL 07/15/12 @ 100.000	88059TES6 S&P·NR Moody: AAA	25,000	\$104.0360	\$26,009 00	\$101.4960	\$25,374.00	(\$635.00)	\$1,218.75	4.803%
BARCLAYS BANK PLC GLOBAL MEDIUM TERM NOTE SER A B/E STEP CPN 4.000% DUE 09/30/25 DTD 09/30/10 FC 03/30/11 CALL 03/30/12 @ 100.000	06740PNJ1 S&P: AA- Moody: AA3	25,000	\$95.2860	\$23,821.50	\$84.7030	\$21,175 75	(\$2,645.75)	\$1,000.00	4 722%
Total Taxable Fixed Income				\$699,700.28		\$957,724.75	\$58,024.47	\$44,766.25	

P.O. Box 32760 Louisville, KY 40232

# ASSETS HELD AT HILLIARD LYONS Continued

ASSET DETAILS Continued

MUTUAL FUNDS	Symbol/CUSIP	Quantity	Average Unit Cost	Cast	Approximate Current	Approximate Current	Unrealized	Antıripated Annualized	
EURO PACIFIC GROWTH FD CL A	AEPGX	4,968 729	\$41,4728	\$206,067.41	\$35 1600	\$174,700 51	(\$31,366.90)	\$2,832 17	
EURO PACIFIC GROWTH FD M	AEPGX	5,487 589	\$36 9545	\$202,791 30	\$35,1600	\$192,943.62	(\$9,847 68)	\$3,127.92	
GROWTH FUND AMER INC	AGTHX	4,944.086	\$23.0321	\$113,873.04	\$28.7300	\$142,043.59	\$28,170 55	\$1,211.30	,
GROWTH FUND AMER INC. M. CL.A.	АĞТНХ	15,935.685	\$26 6736	\$425,062 31	\$28 7300	\$457,832 23	\$32,769.92	\$3,904.24	1
INVESTMENT CO AMERICA CL A	AIVSX	5,825 854	\$22 3694	\$130,321 10	\$27 0900	\$157,822 38	\$27,501.28	\$3,029.44	
INVESTMENT CO AMERICA M	AIVSX	14,486 489	\$31,2439	\$452 615 50	\$27.0900	\$392,438.98	(\$60,176.52)	\$7,532.97	1
NEW PERSPECTIVE FD INC M	ANWPX	9,258,479	\$26 3891	\$244,323 01	\$26,1600	\$242,201.81	(\$2,121.20)	\$2,684 95	
SMALLCAP WORLD FD INC CL A	SMCWX	2,643 396	\$38.1260	\$100,782.38	\$33.1800	\$87,707 87	(\$13,074 51)	\$1,377.20	1
SMALLCAP WORLD FD INC M CL A	SMCWX	4,761.038	\$30.4816	\$145,124 48	\$33.1800	\$157,971.24	\$12,846 76	\$2,480 50	1
Total Mutual Funds				\$2,020,960.53		\$2,005,662.23	(\$15,298.30)	\$28,180.69	1
Total Assets held at Hilliard Lyons	rons			\$2,920,660.81		\$2,963,386.98	\$42,726.17	\$72,946.94	1

# Shared held in GFM, Inc, a corporation FMV at 12/31/11 = \$1,134,739

		Approximate		Anticipated
	,	Current	Unrealized	Annualized
	Cost	Value	Gain/(Loss)	Income
Total Account Value	52,920,660.81	\$2,992,682.95	\$42,726.17	\$72,949.75

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient PUBLIC CHARITY PROVIDING A VARIETY OF FOUNTAIN CITY ART CENTER NONE ART TO THE PUBLIC. 213 HOTEL AVENUE 1,000. KNOXVILLE, TN 37918 KNOXVILLE ACADEMY OF MEDICINE NONE PUBLIC CHARITY PROVIDE HEALTH CARE FOR UNINSURED LOW 115 SUBURBAN ROAD INCOME RESIDENTS 10,000. KNOXVILLE, TN 37923 PUBLIC CHARITY FUNDING FOR SIMPLE. KNOXVILLE HABITAT FOR HUMANITY NONE DECENT AFFORDABLE 1501 WASHINGTON AVE HOUSING FOR LOW INCOME KNOXVILLE, TN 37917 16,000. NONE PUBLIC CHARITY PROMOTE LEADERSHIP IN KNOXVILLE LEADERSHIP FOUNDATION 901 E. SUMMIT HILL DRIVE THE KNOXVILLE AREA 7,500. KNOXVILLE, TN 37915 NONE PUBLIC CHARITY PROVIDE PROPER LADIES OF CHARITY NUTRITION TO HUNGRY 1031 N. CENTRAL STREET ADULTS AND CHILDRE√ 5,000. KNOXVILLE, TN 37917 PUBLIC CHARITY YOUTH SUICIDE MENTAL HEALTH ASSOCIATION OF EAST TN NONE PREVENTION PROGRAM P.O. BOX 32731 KNOXVILLE, TN 37931 5,000. OLD GRAY CEMETARY PUBLIC CHARITY TO SUPPORT THE NONE PO BOX 806 CEMETARY 2,900. KNOXVILLE, TN 37901 SUPPORT NEEDY WITH SECOND HARVEST FOOD BANK OF EAST TN NONE PUBLIC CHARITY FOOD, CLOTHING, AND 922 DELAWARE AVE KNOXVILLE, TN 37921 SHELTER 10,000. SHANGRI-LA THERAPEUTIC ACADEMY OF NONE PUBLIC CHARITY HORSE RELATED ACTIVITIES FOR PERSONS RIDING WITH DISABILITIES 11800 HIGHWAY 11E LENOIR CITY, TN 37772 5,000. PUBLIC CHARITY SUPPORT MIDDLE SCHOOL SOAR YOUTH MINISTRIES NONE PILOT" PROGRAM P.O. BOX 51611 15,000. KNOXVILLE, TN 37950 147,500. Total from continuation sheets

Pertissy Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor VOLUNTEER MINISTRY CENTER NONE PUBLIC CHARITY SUPPORT PROGRAMS FOR 103 S. GAY STREET THE HOMELESS 15,000. KNOXVILLE, TN 37901 BIG BROTHERS BIG SISTERS OF EAST NONE PUBLIC CHARITY ENABLE YOUTH TO TENNESSEE REALIZE THEIR 119 W. SUMMITT HILL DRIVE, STE 101 POTENTIAL KNOXVILLE, TN 37902 7,500. CHERISH THE CHILD FOUNDATION NONE PUBLIC CHARITY PROVIDE ASSISTANCE AND 449 MCCARN CIRCLE INCREASED AWARENESS FOR THE SMOKY MOUNTAIN SEVIERVILLE, TN 37864 CHILDRENS HOME 5,000. NONE PUBLIC CHARITY INTERVENTION AND HAVEN HOUSE 101 W. BROADWAY, SUITE 209 PREVENTION OF DOMESTIC 3,000. MARYVILLE, TN 37801 VIOLENCE PUBLIC CHARITY JUNIOR ACHIEVEMENT OF EAST TENNESSEE NONE TO INSPIRE AND PREPARE 2135 NORTH CHARLES G. SEVIERS BLVD YOUNG PEOPLE TO CLINTON, TN 37716 SUCCEED IN A GLOBAL ECONOMY. 2,500. LOST SHEEP MINISTRY NONE PUBLIC CHARITY PROVIDE SUPPORT TO 1444 BREDA DRIVE COMMUNITY KNOXVILLE, TN 37918 2,100. OPEN ARMS MINISTRY NONE PUBLIC CHARITY PROVIDE SUPPORT TO P.O. BOX 422 COMMUNITY CARRYVILLE, TN 37714 10,000. THE PHILADELPHIANS PRISON MINISTRY NONE PUBLIC CHARITY PROVIDE CHRISTIAN SUPPORT AND OUTREACH 4531 OLD BROADWAY TO PRISONERS KNOXVILLE, TN 37918 5,000. NONE PUBLIC CHARITY TENNESSEE BAPTIST ADULT HOMES PROVIDE RESIDENTIAL P.O. BOX 728 AND PROGRAM SERVICES TO SENIOR AND BRENTWOOD, TN 37024 DEVELOPMENTALLY DISABLED ADULTS, 10,000. NONE PUBLIC CHARITY PROVIDE TRAINING TO YOUTH TRANSITIONS, INC 301 CHESIRE DRIVE DEVELOPMENTALLY DISABLED STUDENTS KNOXVILLE, TN 37919 3,500. Total from continuation sheets

PartXV Supplementary Informatio				
3 Grants and Contributions Paid During the	Year (Continuation)		T	<u> </u>
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	recipient	contribution	
YOKE YOUTH MINISTRIES	NONE	DIIDI.IC CUADITY	UNDERWRITE REQUIREMENT	
P.O. BOX 3492	NONE	TOBBIC CIBACITI	AND TRAINING OF	
KNOXVILLE, TN 37927			VOLUNTEERS	6,500
				. <u>.</u>
Total from continuation sheets				

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT	_	TAL GAINS	COLUMN (A AMOUNT	)
GFM, INC. HILLIARD LYONS	•		106,589.		0.	106,58 62,8	
TOTAL TO FM 990-PF, PART I, I	LN 4		169,400.		0.	169,40	00.
FORM 990-PF		TAX	ES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
EXCISE TAX FOREIGN TAX ON DIVIDENDS		2,908.		0.			0.
TO FORM 990-PF, PG 1, LN 18		4,576.		0.			0.
FORM 990-PF	0	THER E	XPENSES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
ANNUAL REPORT FEE ATTORNEY FEES ACCOUNTING FEES		20. 5,815. 2,640.		0. 0. 0.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 23		8,475.		0.			0.
FORM 990-PF	CO	RPORAT	E STOCK			STATEMENT	4
						FAIR MARKE	r
DESCRIPTION				ВО	OK VALUE	VALUE	
DESCRIPTION  GFM, INC. HILLIARD LYONS - MUTUAL FUNDS	S				L,134,739.	1,134,73 2,005,60	

FORM 990-PF	CORPORATE BONDS		STAT	EMENT 5
DESCRIPTION		BOOK VALUE		MARKET ALUE
HILLIARD LYONS - FIXED INCOME		957,72	5.	957,725.
TOTAL TO FORM 990-PF, PART II	, LINE 10C	957,72	5.	957,725.
	LIST OF OFFICERS, DE AND FOUNDATION MANA		STAT	EMENT 6
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
RON CUNNINGHAM P.O. BOX 1 KNOXVILLE, TN 37901	PRESIDENT 1.00	0.	0.	0.
WILLIAM E. MONDAY III 208 BUSBEE ROAD KNOXVILLE, TN 37920	VICE PRESIDENT 1.00	/ DIRECTOR 0.	0.	0.
KENNETH W. HOLBERT P.O. BOX 1 KNOXVILLE, TN 37901	TREASURER 1.00	0.	0.	0.
JOAN VESTAL ELLIS 7914 GLEASON DR, APT. 1053 KNOXVILLE, TN 37919	SECRETARY 1.00	0.	0.	0.
JAMES S. MONDAY 208 BUSBEE ROAD KNOXVILLE, TN 37920	DIRECTOR 0.00	0.	0.	0.
ROBERT W. MONDAY 902 KERMIT DRIVE KNOXVILLE, TN 37912	DIRECTOR 0.00	0.	0.	0.
JOHN LACY, MD 1932 ALCOA HWY KNOXVILLE, TN 37920	DIRECTOR 0.00	0.	0.	0.
JAMES STOGNER 1044 CRAIGLAND COURT KNOXVILLE, TN 37919	DIRECTOR 0.00	0.	0.	0.

GENE & FLORENCE MONDAY FOUNDATION	ON, INC.		62-15	18306
WILLIAM E. MONDAY IV 208 BUSBEE ROAD KNOXVILLE, TN 37920	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

RON CUNNINGHAM, PRESIDENT P.O. BOX 1 KNOXVILLE, TN 37901

TELEPHONE NUMBER

865-525-0238

FORM AND CONTENT OF APPLICATIONS

SEE THE ATTACHED GRANT APPLICATION FORM.

### ANY SUBMISSION DEADLINES

APPLICATIONS ARE DUE JULY 1, BUT ARE ACCEPTED IF REC'D BEFORE THE GRANTS COMMITTEE MEETING IN SEPT.

RESTRICTIONS AND LIMITATIONS ON AWARDS

AWARDS MUST BE USED FOR CHARITABLE, RELIGIOUS OR EDUCATIONAL PURPOSES. SEE THE ATTACHED GRANT APPLICATION FORM.

# Form **8868**

(Rev. January 2012) Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No. 1545-1709

• If yo	u are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			<b>▶</b> X
If yo	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of t	this form).		
Do not	complete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	ly filed Fo	rm 8868.	
Electro	onic filing <sub>(e-file)</sub> . You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of tin	ne to file (	6 months for	a corporation
equire	d to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fi	le Form 8	868 to reque	est an extension
of time	to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for 1	ransfers.	Associated \	Vith Certain
Persor	al Benefit Contracts, which must be sent to the IRS in pag	er format	(see instructions). For more details of	n the ele	ctronic filing	of this form,
visit wi	ww.irs gov/efile and click on e-file for Charities & Nonprofits	S.				
Part	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies nee	eded).		
4 corp	oration required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		
Part I d	only					<b>▶</b> ∐
	er corporations (including 1120-C filers), partnerships, REM	fICs, and t	rusts must use Form 7004 to reques	t an exter	ision of time	
to file i	ncome tax returns					
Туре с	Name of exempt organization or other filer, see instru	ictions.		Employe	r identificatio	on number (EIN) or
print	GENE & FLORENCE MONDAY FOUNDATION, INC. X 62-151830					
Eila by th						18306
Number, street, and room or suite no. If a P.O. box,			tions.	Social se	curity numb	er (SSN)
iling you eturn Si						
nstructio	ns City, town or post office, state, and ZIP code. For a fo	oreign add	fress, see instructions.			
	KNOXVILLE, TN 37921					
Enter t	he Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
	<u></u>	<del>,</del>	_			<del></del>
Applic	ation	Return	Application			Return
s For	····	Code	Is For			Code
Form 9	90	01	Form 990-T (corporation)			07
Form 9	90-BL	02	Form 1041-A			08
Form 9	90- <u>EZ</u>	01	Form 4720			09
Form 9	90·PF	04	Form 5227			10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	90-T (trust other than above)	06	Form 8870			12
	KENNETH W. HOLI					
	books are in the care of ▶ 1810 AILOR AVE	NUE -	KNOXVILLE, TN 379	21		
Tele	phone No. ► (865) 525-0238		FAX No. ▶			
	e organization does not have an office or place of business	s in the Ur	nited States, check this box			ightharpoons
lf th	is is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) . I	f this is fo	r the whole g	group, check this
оох 🕨	. If it is for part of the group, check this box	and atta	ich a list with the names and EINs of	all memb	ers the exte	nsion is for.
1 1	request an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until		
_	AUGUST 15, 2012 , to file the exemp	t organiza	tion return for the organization name	d above.	The extension	on
	s for the organization's return for.					
)	►X calendar year 2011 or					
)	tax year beginning	, an	d ending			
	· <del></del>				_ <del>_</del>	
<b>2</b> I	the tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return I	inal retur	n	
	Change in accounting period					
	<u>-</u> ·					
3a	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
<u>r</u>	onrefundable credits. See instructions.			3a	\$	7,526.
b i	f 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 overp	oayment a	llowed as a credit	3b	\$	<u>7,</u> 526.
_	Balance due. Subtract line 3b from line 3a. Include your pa					
	by using EFTPS (Electronic Federal Tax Payment System).	-		3с	\$	0.
	n. If you are going to make an electronic fund withdrawal v				EO for paym	ent instructions.
LIA	For Brivery Act and Denorwork Reduction Act Notice					969 (Pov. 1 2012)

123841 01-04-12