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Form 990-PF

Department of the Treasury

CDAA

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

OMB No 1545-0052

2011

Internal Revenue Service Note The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2011 or tax year beginning , and ending Name of foundation Employer identification number WILLIAM H. FRIST FAMILY FOUNDATION c/o DEBORAH A. KOLARICH, CPA 62-6271800 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 2908 POSTON AVENUE 615-320-7888 City or town, state, and ZIP code If exemption application is pending, check here NASHVILLE TN 37203 G Check all that apply Initial return Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the Address change Name change 85% test, check here and attach computation H Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at X Cash J Accounting method Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c). Other (specify) line 16) ▶ \$ 2,562,876 (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income purposes the amounts in column (a) (see instructions)) books (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 Check ► X if the foundation is **not** required to attach Sch B 2 3 Interest on savings and temporary cash investments 44,021 44,021 44,021 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 22,655 6a Net gain or (loss) from sale of assets not on line 10 1,290,851 Gross sales price for all assets on line 6a 22,655 Capital gain net income (from Part IV, line 2) Net short-term capital gain q Income modifications 10a Gross sales less returns & allowarices Less Cost of goods sold b S Gross profit or (loss) (attach sededule) C Other income (attach schedule) DEC 1 0 11 12 Total. Add lines 1 through 11

13 Compensation of officers, directors, (ruste 3 et 1)

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

15 b Accounting fees (attach schedule)

16 c Other professional fees (attach schedule)

17 Interest

18 Taxes (attach schedule) (see instructions)

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (att sch)

24 Total operating and administrative expenses

25 Add lines 13 through 23

26 Total expenses and disbursements. Add lines 24 ard

27 Subtract line 26 from line 12

28 Excess of revenue over expenses and disbursements

29 b Net investment income (if negative, enter -0-)

20 c Adjusted net income (if negative, enter -0-)

20 For Paperwork Reduction Act Notice, see instructions. 12 66,676 66,676 44,021 Total, Add lines 1 through 11 Compensation of officers, directors, முள்தி செடு 0 Stmt 1 781 Stmt 2 11 Stmt 3 13,058 13,058 Total operating and administrative expenses. 13,850 13,058 0 185,500 185,500 199,350 13,058 0 185,500 Total expenses and disbursements. Add lines 24 and 25 -132,674 Excess of revenue over expenses and disbursements 53,618 44,021 Form 990-PF (20)

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

6

2,307,124

| Part IV Gapital Gains a | nd Losses for Tax on Investme | ent Income | | | | |
|--|---|----------------------|--|-------------|--------------|-----------------------------------|
| | ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.) | | (b) How acquired P—Purchase D—Donation | (c) Date ac | | (d) Date sold (mo , day, yr) |
| 1a Smith Barney | | - | P | Vario | us | Various |
| ь Equitable Trust | · | | P | Vario | | Various |
| c Equitable Trust | | | P | Vario | us | Various |
| d Equitable/Cap C | Bain Distrib | | | | | |
| <u>e</u> | | | | | | <u> </u> |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | or other basis pense of sale | | | or (loss) n minus (g) |
| _a 95 | | | 55 | | | 40 |
| ь 302,136 | | | 349,878 | | | -47,742 |
| <u>c</u> 937,729 | | | 918,263 | | | 19,466 |
| _d 50,891 | | | | | | 50,891 |
| <u>e</u> | <u> </u> | | | | | |
| Complete only for assets showing | ig gain in column (h) and owned by the fo | oundation on 12/31 | /69 | | | (h) gain minus |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | ess of col (i) ol (j), if any | col (| | less than -0-) or rom col (h)) |
| а | | | | | | 40 |
| b | | | | | | -47,742 |
| _ c | | | | | | 19,466 |
| d | | | | | | 50,891 |
| | | | | | | |
| 2 Capital gain net income or (net o | capital loss) If gain, also enter in If (loss), enter -0- in | | | 2 | | 22,655 |
| 3 Net short-term capital gain or (lo | oss) as defined in sections 1222(5) and (| _ | | | | |
| • • | 3, column (c) (see instructions) If (loss), | | | | | |
| Part I, line 8 | , | | | 3 | | |
| | nder Section 4940(e) for Reduc | ed Tax on Ne | t Investment Inco | me | | |
| (For optional use by domestic private | e foundations subject to the section 4940 |)(a) tax on net inve | estment income) | | | |
| If section 4940(d)(2) applies, leave t | his part blank | | | | | |
| , , , , , , | · | | | | | □., • |
| | ction 4942 tax on the distributable amour | | e base period? | | | Yes X No |
| If "Yes," the foundation does not qua | alify under section 4940(e) Do not comp | lete this part | | | | |
| 1 Enter the appropriate amount in | each column for each year, see the inst | ructions before ma | king any entries | | | |
| (a) Base period years | (b) | | (c) | | Dis | (d) stribution ratio |
| Calendar year (or tax year beginning t | | | stue of noncharitable-use asse | | (col (b) | divided by col (c)) |
| 2010 | | ,581 | 2,723, | | | 0.046846 |
| 2009 | | ,030 | 2,575, | | | 0.062129 |
| 2008 | | ,525 | 3,212, | | | 0.000475 |
| 2007 | | ,500 | 3,363, | | | 0.000446 |
| 2006 | 1 | ,500 | 2,957, | 301 | 1 | 0.000507 |
| | | | | _ | ŀ | 0 110402 |
| 2 Total of line 1, column (d) | | | | 2 | <u> </u> | 0.110403 |
| - | e 5-year base period—divide the total on | | ne | | 1 | 0 000001 |
| number of years the foundation | has been in existence if less than 5 year | S | | 3 | ├ | 0.022081 |
| | | _ | | | | 0 005 746 |
| 4 Enter the net value of noncharit | able-use assets for 2011 from Part X, lin | e 5 | | 4 | | 2,825,746 |
| | | | | _ | Ì | 60 205 |
| 5 Multiply line 4 by line 3 | | | | 5_ | - | 62,395 |
| | | | | | 1 | 526 |
| 6 Enter 1% of net investment inco | ome (1% of Part I, line 27b) | | | 6 | . . | 536 |
| | | | | | | CO 001 |
| 7 Add lines 5 and 6 | | | | 7 | | 62,931 |
| | | | | | | 105 500 |
| 8 Enter qualifying distributions fro | | | | 8_ | <u> </u> | 185,500 |
| | an line 7, check the box in Part VI, line 1 | b, and complete th | at part using a 1% tax | rate See th | е | |
| Part VI instructions | | | | | | |

| | 990-PF (2011) WILLIAM H. FRIST FAMILY FOUNDATION 62-6271800 | | Р | age 4 |
|----|--|-------------|-------|-------------|
| | irt VF Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions) | | | |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary—see instructions) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | <u>536</u> |
| | here ▶ X and enter 1% of Part I, line 27b | | | |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of | | | |
| | Part I, line 12, col (b) | | | _ |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | 0 |
| 3 | Add lines 1 and 2 | | | 536 |
| 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- | | | 536 |
| 6 | Credits/Payments | | | |
| а | 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 5,798 | | | |
| b | Exempt foreign organizations—tax withheld at source | | | |
| С | Tax paid with application for extension of time to file (Form 8868) | | | |
| d | Backup withholding erroneously withheld 6d 6d | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | 5, | <u> 798</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 | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | 5, | <u> 262</u> |
| 11 | Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 5, 262 Refunded ▶ 11 | | | |
| Pa | rt 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 | | Yes | No |
| | participate or intervene in any political campaign? | <u>1a</u> | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 | Ì | | |
| | of the instructions for definition)? | 1b | ļ | 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 | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1c | | X |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | 1 | | |
| | (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | 1 | | |
| | on foundation managers 🕨 \$ | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | X |
| | 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 | | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | ļ |
| 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, col (c), and Part XV | 7 | X | |
| 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) of each state as required by General Instruction G? If "No," attach explanation | 8b | 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 | 9 | | x |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | |
| | names and addresses | 10 | | x |
| | | Form 9 | 90-PI | |

| Form | 1990-PF(2011) WILLIAM H. FRIST FAMILY FOUNDATION 62-6271800 | | | P | age 5 |
|------|---|----------------|-----|-----|---------------|
| _Pa | irt 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) | L | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified | | | | |
| | person had advisory privileges? If "Yes," attach statement (see instructions) | | 12 | | _ X_ |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | Ĺ | 13 | X | |
| | Website address ► N/A | | | | |
| 14 | The books are in care of ▶ Deborah A. Kolarich, CPA Telephone no ▶ 615 | -32 | 0 - | 788 | 8 |
| | 2908 Poston Avenue | | | | |
| | Located at ▶ Nashville TN ZIP+4 ▶ 372 | 203 | | | . — |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here | | | | ▶ ∐ |
| | and enter the amount of tax-exempt interest received or accrued during the year 15 | | | | |
| 16 | At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority | ı | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | Ļ | 16 | | X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of | | | | |
| П- | the foreign country | | | | L |
| Fe | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | | <u> </u> |
| 4- | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | - | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | - 1 | : | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No. | o | Ī | | |
| | (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? Yes X N | | 1 | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X Ni | Ŀ | 1 | : | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | ۰ | 1 | | |
| | (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 N | ° [| 1 | | |
| | (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 N | ° | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | , | | | • |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/ | | 1b | | |
| _ | |] | | | |
| С | 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? N/ | , | . | | ŀ |
| 2 | | ^ - | 1c | | |
| 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(i)(3) or 4942(i)(5)) | | | | |
| _ | At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and | | | | |
| a | | | | | |
| | | ٠ | | | |
| ь | If "Yes," list the years ► 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | | | | |
| | all years listed, answer "No" and attach statement—see instructions) | , <u>a</u> | 2b | | Ì |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | ** | 20 | | |
| · | ► 20 , 20 , 20 , 20 | | | | |
| 3a | | | | | |
| - C | at any time during the year? | | | | |
| 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) | / _A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | - | 4a | | х |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | - | 74 | | - |
| ~ | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011? | | 4b | | х |

Form **990-PF** (2011)

| | 1990-PF (2011) WILLIAM H. FRIST FAMILY FOUNDAT | - | 2/1800 | | | Pag | ge b |
|-----|--|------------------------|---------------------|--|------|-------------------------|-------------|
| Pa | irt VII-B < Statements Regarding Activities for Which Form 4 | 720 May Be R | equired (conti | nued) | | | |
| 5a | 3 · · , · · · · · · · · · · · · · · · · | | | | | | |
| | (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4 | 945(e))? | ∐ Y | es X No | | | |
| | (2) Influence the outcome of any specific public election (see section 4955), or to | o carry on, | | _ | | | |
| | directly or indirectly, any voter registration drive? | | <u> </u> | 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 | described in | | | | | |
| | section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) | | Y | es 🗓 No | | | |
| | (5) Provide for any purpose other than religious, charitable, scientific, literary, or | educational | | | | | |
| | purposes, or for the prevention of cruelty to children or animals? | | Y | es 🛛 No | | | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under | er the exceptions d | escribed in | | | | |
| | Regulations section 53 4945 or in a current notice regarding disaster assistance | (see instructions)? | | N/A | 5b | | |
| | Organizations relying on a current notice regarding disaster assistance check he | re | | ▶ 🗌 | | | |
| С | If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro | m the tax | | | | | |
| | because it maintained expenditure responsibility for the grant? | | N/A 🗌 Y | es 🗌 No | | | |
| | If "Yes," attach the statement required by Regulations section 53 4945-5(d) | | | | | | |
| 6a | Did the foundation, during the year, receive any funds, directly or indirectly, to pa | y premiums | | | | | |
| | on a personal benefit contract? | | _ Y | es 🛚 No | | | |
| b | Did the foundation, during the year, pay premiums, directly or indirectly, on a per | sonal benefit contr | act? | | 6b | | <u>x</u> _ |
| | If "Yes" to 6b, file Form 8870 | | | | | | |
| 7a | At any time during the tax year, was the foundation a party to a prohibited tax she | elter transaction? | Y | es 🛚 X No | | | |
| b | If Yes, did the foundation receive any proceeds or have any net income attributa | ble to the transacti | on? | N/A | 7b | ļ | |
| Pa | art VIII Information About Officers, Directors, Trustees, Fo | undation Mana | agers, Highly | Paid Employ | ees, | | |
| | and Contractors | | | | | | |
| 1 L | ist all officers, directors, trustees, foundation managers and their compens | ation (see instruc | tions). | | | | |
| | | (b) Title, and average | (c) Compensation | (d) Contributions to | | | |
| | (a) Name and address | hours per week | (If not paid, enter | employee benefit plans and deferred | | pense acc r allowand | |
| | | devoted to position | -0-) | compensation | | | |
| WI | LLIAM H. FRIST NASHVILLE | TRUSTEE | | | | | |
| c/ | o D. KOLARICH, CPA 2908 POSTON AVE TN 37203 | 0.25 | 0 | 0 | ļ | | 0 |
| K.P | RYN M. FRIST NASHVILLE | TRUSTEE | | | | | |
| c/ | O D. KOLARICH, CPA 2908 POSTON AVE TN 37203 | 0.25 | 0 | | | | 0 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2 | Compensation of five highest-paid employees (other than those included of | n line 1—see inst | ructions). If none | e, enter | | | |
| | "NONE." | | | | | | |
| | | (b) Title, and average | | (d) Contributions to | | | |
| | (a) Name and address of each employee paid more than \$50,000 | hours per week | (c) Compensation | employee benefit plans and deferred | | pense acc r allowand | |
| | | devoted to position | | compensation | | | |
| NC | ONE | | | | | | |
| _ | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | 1 | | | 1 | | |
| | | | | | | | |
| | | | | | | | |
| | I number of other employees hald over \$50,000 | • | | | · | . 1 | 0 |

Form 990-PF (2011)

| | 011) WILLIAM H. FRIST FAMILY FOUNDATION | 0 62-6271800 | Page 7 |
|---------------------|--|---------------------------------------|------------------|
| Part VIII | Information About Officers, Directors, Trustees, Foundand Contractors (continued) | ation Managers, Highly Paid E | mployees, |
| 3 Five highe | est-paid independent contractors for professional services (see instruc | ctions). If none, enter "NONE." | |
| | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | | |
| - | | | |
| | | | |
| | | | |
| · | | | |
| | | | |
| Total number of | others receiving over \$50,000 for professional services | | • |
| Part IX-A | Summary of Direct Charitable Activities | · · · · · · · · · · · · · · · · · · · | <u></u> |
| | s four largest direct chantable activities during the tax year. Include relevant statistical information si other beneficiaries served, conferences convened, research papers produced, etc | uch as the number of | Expenses |
| 1 N/A | | ·- | |
| | | | |
| 2 | | | |
| | | | |
| 3 | | | |
| | | | |
| 4 | | | |
| | | | |
| Part IX-B | Summary of Program-Related Investments (see instru | ctions) | 1 |
| | trgest program-related investments made by the foundation during the tax year on lines 1 and 2 | | Amount |
| 1 N/A | | | |
| | | | |
| 2 | | | |
| All other program-r | related investments. See instructions | | |
| 3 | | | |
| | | | 1 |

Total. Add lines 1 through 3

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|------|--|--------|---------------------------------------|
| Pa | Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.) | n four | ndations, |
| 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 | 2,656,700 |
| b | Average of monthly cash balances | 1b | 212,078 |
| С | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 2,868,778 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | [| |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 2,868,778 |
| 4 | Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see | | |
| | instructions) | 4 | 43,032 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 2,825,746 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 141,287 |
| Pa | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating | | |
| | foundations and certain foreign organizations check here and do not complete this part) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 141,287 |
| 2a | Tax on investment income for 2011 from Part VI, line 5 | | |
| ь | Income tax for 2011 (This does not include the tax from Part VI) |] | |
| С | Add lines 2a and 2b | 2c | 536 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 140,751 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 140,751 |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| | line 1 | 7 | 140,751 |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| а | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 | 1a | 18 <u>5,5</u> 00 |
| b | Program-related investments—total from Part IX-B | 1b | |
| 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 | |

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2011)

5

185,500

184,964

| 2 Undistributed income, if any, as of the end of 2011 a Enter amount for 2010 only b Total for prior years 20 | Pa | rt XIII Undistributed Income (see instructions) | | | | |
|--|----|--|-------------|---------------------|---------|---------|
| In 7 In 7 In 7 In 7 In 8 In 7 In 8 In 7 In 8 | | | | (b) | | |
| 2 Undistributed mozeme, if any, as of the end of 2011 a Enter amount for 2010 only b Total for prior years 20 | 1 | Distributable amount for 2011 from Part XI, | Corpus | Years prior to 2010 | 2010 | 2011 |
| a Enter amount for 2010 only b Total for prior years 20 | | line 7 | | | | 140,751 |
| b Total for prior years 20 20 20 3 | | · | | | | |
| 3 Excess distributions carryover, if any, to 2011 a From 2007 c From 2009 d From 2009 e From 2010 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XIII. Inne 4 ▶ \$ 185,500 a Applied to 2010, but not more than line 2a b Applied to 2010, but not more than line 2a c Totaled as distributions out of corpus (Election required—see instructions) c Troated as distributions out of corpus (Election required—see instructions) d Applied to 2011 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2011 (If an amount appears in column (a)) the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add hines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 494(2) tax has been previously assessed d Subtract line 6 from line 6b Taxable amount—see instructions Undistributed income for 2010 Subtract line 4 af from line 2 a Taxable amount—see instructions Undistributed income for 2011 Subtract line 4 af from line 2 a Taxable amount—see instructions Undistributed income for 2011 Subtract line 4 af from line 2 a Taxable amount—see instructions Undistributed income for 2011 Subtract line 4 and 5 from line 1 This amount must be distributed in 2012 88, 6 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(Dity)(F) of 4942(G)(S) (see instructions) Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) Analysis of line 9 | а | Enter amount for 2010 only | | | 133,364 | |
| a From 2006 b From 2007 c From 2008 d From 2009 e From 2009 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII. line 4 ▶ \$ 185,500 a Applied to 2010, but not more than line 2a b Applied to undistributed income of pnor years (Election required—see instructions) C Treated as distributions out of corpus (Election required—see instructions) d Applied to 2011 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2011 (If an amount appears in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b Excess distribution come for 2010 Subtract line 4b from line 2b G Enter the native of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount—see instructions Undistributed income for 2010 Subtract line 4a from line 2 Taxable amount—see instructions Undistributed income for 2011 Subtract line 4a from line 2 Taxable amount—see instructions Undistributed income for 2011 Subtract line 4a from line 2 Taxable amount—see instructions Undistributed income for 2011 Subtract line 4a from line 2 Taxable amount—see instructions Undistributed income for 2011 Subtract line 4a from line 2 Taxable amount—see instructions Africant line 6c from line 6b Taxable amount—see instructions out of corpus to satisfy requirements imposed by section 170(b) (1/b) of 4942(a) (a) (ace instructions) Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2012. Subtract line 8 of line 9 distributions of line 9 distributions and fine 9 distributions of line 9 distributions of line 9 distributions of line 9 distributions of line 9 distributions of 2011 Subtract line 6a Analysis of line 9 distributions of 2011 Subtract line 6a Analysis of line 9 distributions of 2011 Subtract line 6a Analysis of | b | Total for prior years 20 , 20 , 20 | | | | |
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| 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 d Subtract line 6c from line 6b Taxable amount—see instructions e Undistributed income for 2010 Subtract line 4a from line 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 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 | þ | | | | | |
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| d Subtract line 6c from line 6b Taxable amount—see instructions e Undistributed income for 2010 Subtract line 4a from line 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 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 | | been issued, or on which the section 4942(a) | | | | |
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| 4a from line 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 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 | | amount—see instructions | | | | |
| instructions f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 | е | Undistributed income for 2010 Subtract line | | | | |
| f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 | | 4a from line 2a Taxable amount—see | | | | |
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| distributed in 2012 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 | f | Undistributed income for 2011 Subtract lines | | | | |
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| to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 | | distributed in 2012 | | | | 88,615 |
| 170(b)(1)(F) or 4942(g)(3) (see instructions) 8 | 7 | Amounts treated as distributions out of corpus | | | | |
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| Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 | 9 | · · · · · · · · · · · · · · · · · · · | | | | |
| 10 Analysis of line 9 | | • | | | | |
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| b Excess from 2008 | | | | | | |
| c Excess from 2009 | _ | | | | | |
| d Excess from 2010 | | | | | | |
| e Excess from 2011 | | | | | | |

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Statement 5 185,500 185,500 Total ▶ 3a b Approved for future payment N/A Total ▶ 3b

| Ent | er gross amo | unts unless otherwise indicated | Unrelate | d business income | Exclude | d by section 512, 513, or 514 | (e) |
|-----------|--|--|----------------------|---|--|-------------------------------|--------------------------------------|
| • | • | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income |
| | Program serv | | | | ļ | | (See instructions) |
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| | · | d contracts from acyorpment acongos | | | | | |
| 2 | | d contracts from government agencies dues and assessments | | | | <u> </u> | · |
| | - | avings and temporary cash investments | ··· | | | | |
| | | d interest from securities | | | 14 | 44,021 | |
| | | come or (loss) from real estate | | | † | | |
| • | | anced property | | *************************************** | 1 | | |
| | | -financed property | | | | | |
| 6 | | come or (loss) from personal property | | | 1 | | |
| | Other investr | | | | | | , |
| | |) from sales of assets other than inventory | | | 18 | 22,655 | |
| | | or (loss) from special events | | | | | |
| | | or (loss) from sales of inventory | | | | | |
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| | | | | | | | |
| 12 | Subtotal Add | d columns (b), (d), and (e) | | (|) | 66,676 | |
| 13 | Total. Add lii | ne 12, columns (b), (d), and (e) | | |) | 66,676 13 | |
| 13 (Se | Total. Add lii e worksheet i | ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) | | | | 13 | |
| 13 (Se | Total. Add lii e worksheet i art XVI-B | ne 12, columns (b), (d), and (e) In line 13 instructions to verify calculations) Relationship of Activities to the Ac | | ent of Exempt F | urpose | 13 <u> </u> | 66,676 |
| 13 (Se | Total. Add lii e worksheet i art XVI-B Line No. | ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) | is reported in c | ent of Exempt F | urpose | 13es | 66,676 |
| 13 (Se | Total. Add line worksheet lart XVI-B | ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the Activities to the Activity for which income | is reported in c | ent of Exempt F | urpose | 13es | 66,676 |
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| Part XVII | Information Rega | _ | nsfers To and | Transactio | ns and Relationships V | Vith Nonch | aritable | | <u> </u> |
|---|--|---|--|---|---|---------------------------------------|-----------------------|---------|-------------|
| ın section 5 organizatio | i01(c) of the Code (otherns? | r than section | n 501(c)(3) organiz | zations) or in se | other organization described ction 527, relating to political | | | Yes | No |
| (1) Cash | rom the reporting found | ation to a non | icharitable exemp | t organization of | t e e e e e e e e e e e e e e e e e e e | | 1a(1) | | X |
| (2) Other a | | | | | | | 1a(2) | | |
| b Other trans | actions of assets to a noncharita | able evemnt o | rganization | | | | 1b(1) | | x |
| ` ' | ses of assets from a no | • | _ | n | | | 1b(2) | | X |
| • • | of facilities, equipment, | | | | | | 1b(3) | | X |
| (4) Reimbi | ursement arrangements | ; | | | | | 1b(4) | | X |
| (5) Loans | or loan guarantees | | | | | | 1b(5) | | X |
| , , | nance of services or me | • | = | | | | 1b(6) | | X |
| - | facilities, equipment, m | • | • | | | | 1c | | X |
| | · · · · · · · · · · · · · · · · · · · | | | | mn (b) should always show the | | | | |
| | • | _ | | _ | the foundation received less to the goods, other assets, or se | | | | |
| (a) Line no | (b) Amount involved | | of noncharitable exemp | • | (d) Description of transfers | | | ents | |
| N/A | | | | | | | | | |
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| described | dation directly or indired in section 501(c) of the complete the following so | Code (other t | han section 501(c | (3)) or in section | on 527? | | | es X | |
| N/A | (a) Name of organization | | (b) Type of or | rganization | (c) Des | scription of relations | пр | | |
| M/A | - | | | | | | | | |
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| Sign Here | enalties of perjury, I declare the and complete Declaration of the period of the perio | nat I have examin preparer (other it | ed this return, including pan taxpayer) is based | g accompanying sch on all information of Date | edules and statements, and to the bes which preparer has any knowledge TRY Title | May th | e IRS discuss this of | return | No |
| | <u> </u> | | | Preparer's signatu | | | Date | T | |
| Paid | Type preparer's name orah A. Kolari | ah CDA | | | | | 12/03/12 | self-en | X if |
| | | | Kolarich | , CPA | v a. Kalaice | PTIN | P0142 | | 5 |
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Charitable Purpose Charitable Charitable Purpose Purpose ጭ Adjusted Net Adjusted Net Adjusted Net Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses Statement 2 - Form 990-PF, Part I, Line 18 - Taxes Ω. Investment Investment Investment Federal Statements Net 781 781 Total Total Total ጭ Accounting/Tax Preparation Foreign Taxes - Equitable Description Description Description Total Total 62-6271800

13,058

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Investment Management Expense

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Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

| Name | Address | | | |
|---------------------------------|------------------------|---------------------------|------------|--------|
| Address | Relationship Sta | Status | Purpose | Amount |
| Big Brothers of Nashville | 295 Plus Park Bl | Blvd #106 | | |
| | 501(c) | General Fund | | 15,000 |
| Bridges of Understanding | 1630 Crescent Place NW | | | , |
| Washington DC 20009 | | General Fund | | 2,000 |
| Centerstone | 1101 6th Avenue North | | | |
| Nashville TN 37208 | 501(c) | Not Alone Program | gram | 2,000 |
| Community Fdn of Middle IN | 3833 Cleghorn Avenue | #4 | | |
| Nashville TN 37215 | 501(c) | Advised Funds | | 20,000 |
| Community Fdn of Middle IN | 3833 Cleghorn Avenue | #4(| | |
| Nashville TN 37215 | 501(c) |) Angel Fund | | 21,000 |
| Mending Hearts | 4305 Albion Street | | | |
| ΙÏ | 501 (c) | General Fund | | 2,000 |
| Middle Tennessee Baseball Fdn | PO Box 110375 | | | |
| Nashville TN 37222 | 501(c) |) Scholarship Fund | nnd | 4,000 |
| Middle Tennessee Baseball Fdn | PO Box 110375 | | | |
| Nashville TN 37222 | 501(c) | Field Refurbishment | shment | 4,000 |
| New Mexico State University Fdn | PO Box 3590 | | | |
| Las Cruces NM 88003 | 501(c) |) The Domenici Institute | Institute | 10,000 |
| Oasis Center | 1704 Charlotte Ave | #200 | | |
| Nashville TN 37203 | 501(c) | General Fund | | 10,000 |
| Rooftop | 3511 Gallatin Rd #202 | | | |
| Nashville TN 37216 | 501(c) | General Fund | | 15,000 |
| Safe Haven Family Shelter | 1234 Third Ave South | outh | | |
| Nashville TN 37210 | 501(c) | General Fund | | 11,000 |
| Samaritan Ministries | 1041 28th Ave North | | | |
| Nashville TN 37203 | 501(c) | General Fund | | 15,000 |
| The Contributor | PO Box 332023 | | | |
| Nashville TN 37203 | 501(c) | General Fund | | 1,000 |
| The Nashville Ballet | 3630 Redmon Street | | | |
| Nashville TN 37209 | 501(c) |) 2012 Ballet Ball | all | 2,500 |
| The Nashville Food Project | 3605 Hillsboro Pike | | | |
| Nashville TN 37215 | | General Fund | | 10,000 |
| Vanderbilt University | 2301 Vanderbilt Place | | | |
| Nashville TN 37240 | 501(c) |) Nashville Mobile Market | ile Market | 2,000 |
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|--------------------|---|-------|---------------------|---------|--|------|-------|------|--|------|------|------|
| | | , | Amount | 185,500 | | | | | | | | , |
| nts | and Contributions Paid During the | | Purpose | | | | | | | | | |
| Federal Statements | Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued) | Addre | Relationship Status | | | | | | | | | |
| | Statement 5 - | Name | Address | | | | | | | | | |
| 62-6271800 | | | | Total | | | | | | | | |

Form '8868 (Rev January 2012) '

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-170

| (Rev January 201 | 2) | | | | | | 0.1.0 1.0 10 10 11 05 |
|---|-------------------|---|---------------|---|------------|---------------------------------------|-----------------------|
| Department of the Internal Revenue S | | ▶ File a | a separate a | application for each return. | | | |
| | | tomatic 3-Month Extension, comple | | ···· | | · · · · · · · · · · · · · · · · · · · | ▶ X |
| • If you are | filing for an Ac | Iditional (Not Automatic) 3-Month Ex | tension. co | omplete only Part II (on page 2 of this i | form) | | |
| | | | | 3-month extension on a previously filed | • | 88 | |
| Electronic fili | ing (a-fila). Vo | uu can electronically file Form 8868 if ye | ou need a 2 | -month automatic extension of time to f | ilo /C mon | the for | |
| | | | | onth extension of time. You can electro | • | | |
| | | | | art II with the exception of Form 8870, | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | on | |
| | | | | h must be sent to the IRS in paper form | • | . | |
| Part I | | | | gov/efile and click on e-file for Charities | | ofits | |
| | | | | omit original (no copies needed) extension-check this box and complete | | | |
| Part I only | required to me | Form 990-1 and requesting an automa | auc o-monu | extension-check this box and complete | е | | ⊾ □ |
| • | anationa (make | June 1120 C filese) medicareline DEMI | 0 | | | | |
| | | ing 1120-C filers), partnerships, REMIC | Us, and trus | ts must use Form 7004 to request an e | xtension (| of time | |
| to file income | tax returns | | | | | | |
| - | | | | Enter filer's | | | er, see instructions |
| Type or | | empt organization or other filer, see ins | | m T O V | Emplo | yer identifica | ition number (EIN) or |
| print | I _ | M H. FRIST FAMILY I | | TION | - ca | 60.51 | |
| File by the | | BORAH A. KOLARICH, | | | | -6271 | |
| due date for filing your | Number, str | ctions | Social | secunty nun | nber (SSN) | | |
| return See | | POSTON AVENUE | | · | | | |
| instructions | 1 | r post office, state, and ZIP code For a | _ | | | | |
| | NASHV | LLE IN | 37203 | <u> </u> | | | |
| Enter the Ret | urn code for th | e return that this application is for (file a | a separate a | ipplication for each return) | | | 04 |
| Application | 1 | | Return | Application | | | Return |
| Is For | | | Code | ls For | | | Code |
| Form 990 | | | 01 | Form 990-T (corporation) | _ | | 07 |
| Form 990-E | 3L | | 02 | Form 1041-A | | | 08 |
| Form 990-E | Z | _ | . 01 | Form 4720 | | | 09 |
| Form 990-F | F | | 04 | Form 5227 | | | 10 |
| Form 990-T | (sec 401(a) | or 408(a) trust) | 05 | Form 6069 | | . <u>-</u> | 11 |
| - | (trust other th | | 06 | Form 8870 | | | 12 |
| | | Deborah A. Kolarich, | CPA | | | | • |
| | | 2908 Poston Avenue | | | | | |
| The books | are in the care o | Nashville | | | | TN | 37203 |
| | | | | | | | |
| Telephon | e No ▶ 61 | 5-320-7888 | FAX No | o. > | | | |
| • If the orga | anization does | not have an office or place of business | in the Unite | ed States, check this box | | | ▶ 🗍 |
| | | urn, enter the organization's four digit (| | | this is | | _ |
| | group, check t | — | | · · · · · · · · · · · · · · · · · · · | ich | | |
| a list with the | names and El | Ns of all members the extension is for | | | | | |
| | | 3-month (6 months for a corporation r | equired to fi | ile Form 990-T) extension of time | | · | |
| | | | | ganization named above. The extension | n is | | |
| | organization's | | ` | | | | |
| | - | 2011 or | | | | | |
| _ | • | | | | | | |
| ▶ □ | tax year begin | nning , and ending | | | | | |
| 2 If the ta | - | I in line 1 is for less than 12 months, ch | eck reason | Initial return Final return | | | |
| | hange in acco | | | | | | |
| | | r Form 990-BL, 990-PF, 990-T, 4720, o | or 6069, ente | er the tentative tax less any | | | |
| | | See instructions | 5555, 6110 | and temente tan, 1000 any | | 0 | |
| | · | r Form 990-PF, 990-T, 4720, or 6069, | enter any re | fundable credits and | 3a | + * | |
| | | nts made Include any prior year overpa | = | | 3ь | \$ | 5,798 |
| | | ct line 3b from line 3a Include your pay | | | 1 35 | • | |
| | | ederal Tax Payment System) See instr | | toquilde, by using | 3c | s | 0 |

| Form 8868 (I | Rev 1-2012) | | | | | Page 2 |
|--|---|--|---|---------------------|-------------------|-------------------|
| | e filing for an Additional (Not Automatic) 3-Mor | | · · | | | ► X |
| Note. Only c | omplete Part II if you have already been granted | an automatic 3-m | nonth extension on a previously filed F | orm 8868 | | |
| | e filing for an Automatic 3-Month Extension, co | | | · | | |
| Part II | Additional (Not Automatic) 3-Mon | th Extension | | | | |
| | | | Enter files | | | see instructions |
| Type or | Name of exempt organization or other filer, s | | ET 0.1 | Employ | er identification | n number (EIN) or |
| print | WILLIAM H. FRIST FAMII | | TION | □ 50 | C0710 | 0.0 |
| File by the | c/o DEBORAH A. KOLARIO | | | | <u>-62718</u> | |
| due date for filing your | Number, street, and room or suite no. If a P. 2908 POSTON AVENUE | | | Socials | security numb | er (SSN) |
| return See instructions | City, town or post office, state, and ZIP code NASHVILLE | _ | | | | |
| | | | | | | |
| Enter the Re | eturn code for the return that this application is fo | r (file a separate a | application for each return) | | | . 04 |
| Application | on | Return | Application | | | Return |
| ls For | | Code | ls For | | | Code |
| Form 990 | | 01 | | | | |
| Form 990- | BL | 02 | Form 1041-A | | | |
| Form 990- | ·EZ | 01 | Form 4720 | | | 09 |
| Form 990- | | 04 | Form 5227 | | ··· | 10 |
| | -T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 |
| Form 990- | -T (trust other than above) | 06 | Form 8870 | | | 12 |
| If this is for the whole | ganization does not have an office or place of bu for a Group Return, enter the organization's four e group, check this box If it is names and EINs of all members the extension is | r digit Group Exem for part of the grou | nption Number (GEN)If thi | s is nd attach a | | > [] |
| 5 For ca 6 If the 7 State Add | est an additional 3-month extension of time until alendar year 2011, or other tax year begindar year entered in line 5 is for less than 12 mon Change in accounting period in detail why you need the extension ditional time is needed aplete and accurate tax | nnnng ths, check reason | , and ending | | to pre | epare a |
| | application is for Form 990-BL, 990-PF, 990-T, | 4720, or 6069, ent | ter the tentative tax, less any | | | |
| | fundable credits See instructions application is for Form 990-PF, 990-T, 4720, or | 6069 enter any s | afundable credits and | 8a_ | \$ | 0 |
| | ated tax payments made Include any prior year | = | | | } | |
| | int paid previously with Form 8868 | ovorpayment and | and as a credit and any | 8b | \$ | 5,798 |
| c Balar | | | | | | |
| | 8c | 8c \$ | | | | |
| | tronic Federal Tax Payment System) See instru | | and he assumed at the Doctor | | · | |
| | _ | | ust be completed for Part II o | • | | |
| | lities of perjury, I declare that I have examined the | | | ents, and to | the best of | my |
| knowleage | and belief, it is true, correct, and complete, and t | ınatı am autnorize | to prepare this form | | | |
| Signature | Wilmall O Koloni | | Title ▶ CPA | | Date | ▶ 08/07/12 |

Form **8868** (Rev 1-2012)