

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 t	the organization	Employer identification number			
POWELL	CHARITABLE FOUN	65-1175747			
Organizat	tion type (check one).				
Filers of:		Section:			
Form 990	or 990-EZ	501(c)() (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		527 political organization			
Form 990-PF		∑ 501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
	y a section 501(c)(7), (8	ered by the General Rule or a Special Rule . S), or (10) organization can check boxes for both the General Rule and a Specia	al Rule See		
•					
General R	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 R	ules				
un the	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				
du	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.				
du no ye ap	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				
A		set asserted by the Conoral Bule and/or the Special Bules does not file Schodul	le 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),

Name of organization
POWELL CHARITABLE FOUNDATION

Employer identification number 65-1175747

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

(a)	(b)	(c) .	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_1	JOHN POWELL TCLAT 303 APPERSON DRIVE SALEM, VA 24153	\$116,432	Person 🔀 Payroll 🗍 Noncash 🗍 (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
_2	PEGGY DANIELS TCLAT 303 APPERSON DRIVE SALEM, VA 24153	\$116,432	Person 🔀 Payroll 🗍 Noncash 🗍 (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3	WILLIAM POWELL TCLAT 303 APPERSON DRIVE SALEM, VA 24153	\$116,432	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	PAUL POWELL TCLAT 303 APPERSON DRIVE SALEM, VA 24153	\$116,432	Person 🔀 Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5	MARY ROBERTS TCLAT 303 APPERSON DRIVE SALEM, VA 24153	\$116,432	Person 🔀 Payroll 🗍 Noncash 🗍 (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person