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Department of the Treasury Internal Revenue Service

# **Return of Private Foundation**

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

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

OMB No 1545-0052

2011

Fo	cal	endar year 2011 or tax year beginning		, а	nd ending		
Na	me of	foundation				Α	A Employer identification number
ТН	E HA	RRISON-ROBBIE DEARING FOUNDATION					72-6212583
		and street (or P O box number if mail is not delivered to stre	et ad	Idress)	Room/suite	В	B Telephone number (see instructions)
102	411	NNWOOD BLVD					615-377-3684
		wn, state, and ZIP code		<u>.                                    </u>		5	C If exemption application is pending, check here
ΝΔ	SHV	ILLE		TN	37215	١	5 if exemption application is pending, check field
		ck all that apply  Initial return	Initi	al return of a former		┧╮	D 1. Foreign organizations, check here
•	OHE	Final return		ended return	public charity	"	
							2 Foreign organizations meeting the 85% test,
<del></del>		<del></del>		ne change		ł	check here and attach computation
Н		ck type of organization X Section 501(c)(3)		• •		E	E If private foundation status was terminated
느	Sec	tion 4947(a)(1) nonexempt charitable trust	(	Other taxable private	foundation		under section 507(b)(1)(A), check here  ▶
- 1		market value of all assets at end J Accoun	ing	method X Cast	n 🔲 Accrual	F	F If the foundation is in a 60-month termination
				pecify)			under section 507(b)(1)(B), check here ►
				d) must be on cash bas	sis)		
Pa	rt l	Analysis of Revenue and Expenses (The to.		(a) Revenue and	(b) Net investm	ent	(d) Disbursements  nt (c) Adjusted net for chantable
		amounts in columns (b), (c), and (d) may not necessarily e	qual	expenses per	income		income purposes
		the amounts in column (a) (see instructions) )		books			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule	)	0			
	2	Check ▶ if the foundation is not required to attach So					
	3	Interest on savings and temporary cash investme	nts	0			0
	4	Dividends and interest from securities		0			0
	5 a	Gross rents					0
<u>•</u>		Net rental income or (loss)	0				
Ē	6 8	Net gain or (loss) from sale of assets not on line 1		0			
Revenue	_	Gross sales price for all assets on line 6a	0	)			
ď	7	Capital gain net income (from Part IV, line 2)					0
	8	Net short-term capital gain					0
	9	Income modifications	_				
		Gross sales less returns and allowances	0				
		Less Cost of goods sold	0	<u> </u>			
	11	Gross profit or (loss) (attach schedule)  Other income (attach schedule)		0			0 0
	12	Total. Add lines 1 through 11		· · · · · · · · · · · · · · · · · · ·	-		
		· · · · · · · · · · · · · · · · · · ·		0			0 0
enses	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages					
SUC	15	Pension plans, employee benefits		<del></del>			
ο.		Legal fees (attach schedule)		0	<del></del>		0 0 0
ω		Accounting fees (attach schedule)		595		-	0 0 595
<u>e</u>		Other professional fees (attach schedule)		150	<del></del>		0 0 150
ati	17	Interest 1		100		_	3 190
Administrative Ex	18	Taxes (attach schedule) (see instructions)		0			0 0 0
] ]	19	Depreciation (attach schedule) and depletion		0	<del>                                       </del>		0 0
ΔĒ	20	Occupancy			-		
ď	ł	Travel, contere noes and recording 2					
ם וּ	22	Printing and publications					
	23			0			0 0 0
Z	24	Other expenses (the partial of the common strative expenses.			_		
Œ	21 22 23 24 25 26 27	Add lines 13 through 23		745			0 0 745
e l	25	Contributions, gifts, grants paid		0		•	0
9	26	Total expenses and disbursements Add lines 24 and 25		745			0 0 745
Š	27	Subtract line 26 from line 12					
C G	<b>8</b> 3	Excess of revenue over expenses and disbursements		-745			
٧	ا آ	Net investment income (if negative, enter -0-)					0
		Adjusted net income (if negative, enter -0-)					0
Fo	Pap	erwork Reduction Act Notice, see instructions.					Form <b>990-PF</b> (201/1)

Dа	et II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
т <u>а</u>	سعب	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	17,289	16,544	16,544
	3	Accounts receivable   0			
		Less allowance for doubtful accounts	0	0	0
	4	Pledges receivable ▶0			
		Less allowance for doubtful accounts		0	0
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	0	0	0
	7	Other notes and loans receivable (attach schedule)			
	ļ	Less allowance for doubtful accounts	0	0	0
Ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10 a	Investments—U.S. and state government obligations (attach schedule)	0	0	0
	t	nvestments—corporate stock (attach schedule)	0	0	0
	C	Investments—corporate bonds (attach schedule)	0	0	0
	11	Investments—land, buildings, and equipment basis			
	•	Less accumulated depreciation (attach schedule)   0	0	0	0
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	0	0	0
	14	Land, buildings, and equipment basis ▶ 0			
		Less accumulated depreciation (attach schedule) ▶0	0	0	0
	15	Other assets (describe  )	0	0	0
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	17,289	16,544	16,544
	17	Accounts payable and accrued expenses	3,118	3,118	
S	18	Grants payable			
tie	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
<u>.e</u>	21	Mortgages and other notes payable (attach schedule)	0	0	
_	22	Other liabilities (describe  )	0	0	
	23	Total liabilities (add lines 17 through 22)	3,118	3,118	
		Foundations that follow SFAS 117, check here			
lances		and complete lines 24 through 26 and lines 30 and 31.			
ğ	24	Unrestricted			
æ	25	Temporarily restricted			
Ö	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here			
正		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds	o	0	
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
<b>SS</b>	29	Retained earnings, accumulated income, endowment, or other funds	14,171	13,426	
Ř	30	Total net assets or fund balances (see instructions)	14,171	13,426	
ē	31	Total liabilities and net assets/fund balances (see			
	<u></u>	instructions)	17,289	16,544	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with		
	end-o	of-year figure reported on prior year's return)		1	14,171
2	Enter	amount from Part I, line 27a		2	-745
3	Other	r increases not included in line 2 (itemize)			0
		ines 1, 2, and 3		4	13,426
		eases not included in line 2 (itemize) ▶		5	0
6	Total	net assets or fund balances at end of year (line 4 minus line 5)-Part II, o	olumn (b), line 30	6	13.426

(a) List and describe the	nd Losses for Tax on Investme kind(s) of property sold (e.g., real estate use, or common stock, 200 shs. MLC Co.)	(b) How acq P—Purch	ase (c)	Date acquired no , day, yr )	(d) Date sold (mo , day, yr )
1a		DDonat	1011	· · · · · · · · · · · · · · · · · · ·	
b					
C	<del>-</del>		····		
d					
e					
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			or (loss) ) minus (g)
_a(	0		0		0
b (			0		0
<u>c</u> (	<del>                              </del>		0		0
<u>d</u> (	<del>                                     </del>		0		0
e (	<u> </u>		0		0
(i) F M V as of 12/31/69	wing gain in column (h) and owned b	(k) Excess of col (i)	59	col (k), but not	(h) gain minus less than -0-) or
	as of 12/31/69	over col (j), if any		Losses (no	om col (h))
<u>a</u> (	<del>                                     </del>	<del></del>	0		0
c (	<del> </del>		0		<u>0</u>
d (	<del></del>		0		0
e (			0		0
2 Capital gain net income of		o enter in Part I, line 7 nter -0- in Part I, line 7	} 2		0
, ,	n or (loss) as defined in sections , line 8, column (c) (see instruction	1222(5) and (6).	}		0
Part V Qualification Un	der Section 4940(e) for Red	uced Tax on Net Inve	estment li	ncome	
If "Yes," the foundation does	leave this part blank the section 4942 tax on the distri not qualify under section 4940(e) nount in each column for each ye	Do not complete this p	art		
(a)			201010 111411	ing any ontro	(d)
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distributions	(c) Net value of noncharitable	e-use assets		ribution ratio
2010	11,8	342	28,588		0 414230
2009		160	26,396	-,-	0 017427
2008	45,9	907	113,060		0 406041
2007					0 000000
2006					0 000000
2 Total of line 1, column (d)				2	0 837698
	for the 5-year base period—divid oundation has been in existence		o, or by	3	0 279233
4 Enter the net value of non	charitable-use assets for 2011 fr	om Part X, line 5		4	
5 Multiply line 4 by line 3				5	0
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)			6	0
7 Add lines 5 and 6				7	0
8 Enter qualifying distribution	ons from Part XII, line 4 ater than line 7, check the box in	Part VI line 1h and con	onleto that	8	0 24 tay rato See
the Part VI instructions			pioto triat	part doming a T	70 tax fate Gec

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-	-see	instruc	tion	s)	
1 8	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)					
i	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			0	
	here ▶ ☐ and enter 1% of Part I, line 27b					
(	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%					
2	of Part I, line 12, col. (b)	۱ ،			ام	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2 3			0	
4	Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			—്	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			0	
6	Credits/Payments	<del>-  </del>			<u>`</u>	
	a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 0					
	Exempt foreign organizations—tax withheld at source 6b	1				
	C Tax paid with application for extension of time to file (Form 8868)  6c 0					
	Backup withholding erroneously withheld 6d	1				
7	Total credits and payments Add lines 6a through 6d	7	•		0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.	8			0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9			0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			0	
	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 0 Refunded ▶	11			0	
Pa	rt VII-A Statements Regarding Activities					
1 :	a 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?			1a		Х
١	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the					
	instructions for definition)?		l	1b		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		1			
	C Did the foundation file Form 1120-POL for this year?		ļ	1c		X
(	i Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		İ			
	(1) On the foundation ► \$ (2) On foundation managers ► \$					
,	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
2	on foundation managers  \$			2		X
_	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities		ŀ			<u> </u>
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		Ì	3		_X
4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		İ	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
	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					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>					
_	that conflict with the state law remain in the governing instrument?		}	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), ar	nd Pai	t XV		Х	
8	a 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			O L		ļ
a	General (or designate) of each state as required by General Instruction G? If "No," attach explanation		}	8b	Х	├—
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,"					<u> </u>
	complete Part XIV			9		Х
10	·		Ì			<del>  ^</del>
	their names and addresses			10		l x

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable

purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?

4b

Pa	rt VI	-B	Statements Regarding Activiti	es f	or Which Form	า 47	20 May Be Re	equired	(continued)				
5a	Durin	g the	e year did the foundation pay or incur any	amo	ount to								
	(1)	Carr	ry on propaganda, or otherwise attempt t	o infli	uence legislation (	sect	ion 4945(e))?		Yes	X No			
	(2)	Influ	ience the outcome of any specific public	elect	ion (see section 49	955)	, or to carry		<u> </u>				
	• •		directly or indirectly, any voter registratio			•	•		Yes	X No			
	(3)	Prov	vide a grant to an individual for travel, stu	ıdy, o	r other similar pur	pose	es?		Yes	X No			
	(4)		vide a grant to an organization other than						r <del>1</del>				
	/E\		ection 509(a)(1), (2), or (3), or section 49						Yes	X No			
	(5)		vide for any purpose other than religious, cational purposes, or for the prevention o						Yes	X No			
b	-		wer is "Yes" to 5a(1)–(5), did any of the		•	•	-		ed in				
	_		ns section 53 4945 or in a current notice	_	=			ns)?		$\Box$	5b	N/A	
	_		ions relying on a current notice regarding						<b>•</b>				
С			wer is "Yes" to question 5a(4), does the f			tion	from the						
			se it maintained expenditure responsibili attach the statement required by Regulati	-	-	(d)		•	∐ Yes	X No			
6a			undation, during the year, receive any fu				nav						
-4			s on a personal benefit contract?	, ۱	250ti, 57 maneoti	y, .c	- F7		Yes	X No			
h	•		undation, during the year, pay premiums	dire	ctly or indirectly o	n a	nersonal benefit o	ontract?		<u> </u>	6b		
	lf "Υε	es" to	o 6b, file Form 8870								0.0		
		-	ne during the tax year, was the foundation		-				Yes	X No		$\vdash$	
_			lid the foundation receive any proceeds of						11:	Daid E	7b		
۲	art V	Щ	Information About Officers	, DIF	ectors, Truste	es	, Foundation	wanage	rs, Hignly	Paid E	mpioy	ees,	
4	Liet	all c	and Contractors officers, directors, trustees, found	atio	n managore and	-1 th	oir component	ion (soc	inetructions	-1			
	LIST	an c	onicers, unectors, trustees, round		Title, and average	_	C) Compensation		ontributions to				
			(a) Name and address		hours per week evoted to position		f not paid, enter -0-)	employ	ee benefit plans	, ,	e) Expen other al	se accor lowance	
НΑ	RRIS	ON S	S. DAVIS		AIRMAN							-	
			OOD BLVD NASHVILLE TN 37215		2 00		o			o			0
RO	BBIE	ВD	AVIS	SEC	CRETARY						_		
102	4 LY	NW	OOD BLVD NASHVILLE TN 37215	<u>L_</u>	2 00		0			0			0
ΗA	RRIS	ON I	B DAVIS	TRI	JSTEE								
102	4 LY	NW(	OOD BLVD NASHVILLE TN 37215	<u> </u>	00		0			0			0
	RAH			TRI	JSTEE		_			_			_
			OOD BLVD NASHVILLE TN 37215		00		0			<u> </u>			0
2		•	nsation of five highest-paid emplo IONE."	yees	corner than the	ose	incluaea on lii	ne 1—se	e instructio	ns). It <b>n</b>	one,		
			· · · · · · · · · · · · · · · · · · ·		(b) Title, and avera	ane			) Contributions t			·	
(a	Name	and a	address of each employee paid more than \$50	,000	hours per week		(c) Compensation		employee benefit ans and deferre		e) Expen	se acco lowance	
					devoted to position	on		) P	compensation	<b>"</b>	ouiei ai	iowance	:5
NO	NE												
<b>-</b> -		<b></b>											
										+			
	. <b></b>												
										_			
	<b>-</b>	<b>-</b>											
											_		
					<u> </u>		L						
To	tal nu	mbe	er of other employees paid over \$50,	,000									

Form 990-PF (2011) THE HARRISON-ROBBIE DEARING FOUNDATION	72-6212583 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manage and Contractors (continued)	rs, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, et	nter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of sen	
NONE (5) (5) (5) (6) (7) (6) (7) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	(e) compendation
NONE	
	0
	0
	0
	0
	0
Total number of others receiving over \$50,000 for professional services	<b>•</b>
Part IX-A Summary of Direct Charitable Activities	
List the fermidation of fermi learnest disease about the contribution of the state	· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 FOUNDATION ONLY IS INVOLVED IN PROVIDING GRANT FUNDS	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
•••••••••••••••••••••••••••••••••••••••	
2	
All other program-related investments See instructions	
3	
	<u> </u>

Total. Add lines 1 through 3

Form **990-PF** (2011)

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

,		ile (see instructions)		i -		
1	Distributable amount for 2011 fr	rom Part XI,	(a) Corpus	(b) Years pnor to 2010	(c) 2010	(d) 2011
2		af the and af 2014				846
_	Undistributed income, if any, as	of the end of 2011			0	
a	Enter amount for 2010 only Total for prior years 20	20 20		0		
_	· · · · · · · · · · · · · · · · · · ·			U		
3	Excess distributions carryover,	1 -				
a	From 2006	69,438				
þ	From 2007	98,636				
C	From 2008	40,390				
d	From 2009	0				
е	From 2010	10,413				
f	Total of lines 3a through e		218,877			
4	Qualifying distributions for 2011					
	XII, line 4 > \$	745				
	Applied to 2010, but not more the	1			0	
D	Applied to undistributed income	· · · ·				
	(Election required—see instruct	, , , , , , , , , , , , , , , , , , ,		0		
С	Treated as distributions out of c	corpus (Election	_			
	required—see instructions)		0			
	Applied to 2011 distributable an					745
_	Remaining amount distributed of		0			]
5	Excess distributions carryover a	• • • • • • • • • • • • • • • • • • • •	101			101
	(If an amount appears in colum same amount must be shown in	' ''				
6	Enter the net total of each co- indicated below:	lumn as				
а	Corpus Add lines 3f, 4c, and 4d	e Subtract line 5	218,776			
b	Prior years' undistributed incom	e Subtract				
	line 4b from line 2b			0		
С	Enter the amount of prior years	undistributed				
	income for which a notice of de	ficiency has				
	been issued, or on which the se	ection 4942(a)				
	tax has been previously assess	ed				
d	Subtract line 6c from line 6b Ta		·			
	amount—see instructions			0		
е	Undistributed income for 2010	Subtract line				
	4a from line 2a Taxable amour	nt—see				
	instructions				0	
f	Undistributed income for 2011	Subtract	,			
	lines 4d and 5 from line 1 This	amount must				
	be distributed in 2012					0
7	Amounts treated as distribution	s out of				
	corpus to satisfy requirements	mposed by				
	section 170(b)(1)(F) or 4942(g)	(3) (see instructions)				
8	Excess distributions carryover f	rom 2006				
	not applied on line 5 or line 7 (s	ee instructions)	69,337			
9	Excess distributions carryove	er to 2012.				
	Subtract lines 7 and 8 from line	6a	149,439			
10	Analysis of line 9					
а	Excess from 2007	98,636				
b	Excess from 2008	40,390				
С	Excess from 2009	0		!		
d	Excess from 2010	10,413				
е	Excess from 2011	O				

Form 990-PF (2011) THE HARRISON-ROBBIE DEARING FOUNDATION Page 11 72-6212583 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year 0 Total **▶** 3a Approved for future payment

Total

0

3b

Allarysis of income i roddollig Acti	<u> </u>				
Entèr gross amounts unless otherwise indicated	Unrelated bus	iness income	Excluded by section	on 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions )
a		0		0	0
b		0		0	
c		0		0	0
d		0		0	0
e		0		0	0
f	-	0		0	0
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments				-	ļ
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate		•		*	
Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	0	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a	-	0		0	
b	· <del> </del>	0		0	<del></del>
c	-	0		0	
de	-	0		0	<del>                                     </del>
12 Subtotal Add columns (b), (d), and (e)		0		0	<del></del>
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	0
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to the Ac	complishment	of Exempt P	urposes		
Line No. Explain below how each activity for which incom				mportantly to	
▼ the accomplishment of the foundation's exempt	purposes (other tha	in by providing fu	nds for such purp	oses) (See instru	ictions)
					-
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Preparer

**Use Only** 

► BETTS & RUBIO, PLLC

Firm's address ► 2220 EIGHTH AVE SOUTH, NASHVILLE, TN 37204

				DEARING I OUN				12-02 12		ı ayı	
Pa	rt XVII	Information Reg	_	sfers To and Tra	ansactions	and Re	lationships Wi	th Noncharit	able		
	<u> </u>	Exempt Organize									
1		e organization directly								Yes	No
		tion 501(c) of the Code	e (other than s	section 501(c)(3) or	ganızatıons)	or in sec	tion 527, relating	to political			
	organ	ızatıons?									
а	Trans	fers from the reporting	foundation to	a noncharitable ex	empt organiz	ation of.					
	(1) C	. •							1a(1)		_X
	(2) 0	ther assets							1a(2)		X
b		transactions									
	(1) Sa	ales of assets to a non	charitable exe	empt organization					1b(1)		X
		urchases of assets from			zation				1b(2)		Х
		ental of facilities, equip							1b(3)		Х
	(4) R	eimbursement arrange	ements .						1b(4)		X
		oans or loan guarantee			-				1b(5)		X
		erformance of services		nip or fundraising s	olicitations				1b(6)		Х
С	Sharır	ng of facilities, equipme	ent, mailing lis	its, other assets, or	paid employ	ees .			1c		X
		answer to any of the al	_				n (b) should alwa	avs show the fa	ur mark	et	
_	value	of the goods, other as	sets, or service	es given by the rep	orting founda	ation If the	ne foundation rec	eived less thai	n fair m	arket	
	value	in any transaction or s	haring arrang	ement, show in col	umn (d) the v	alue of the	he goods, other a	issets, or servi	ces rec	eıved	
(a)	Line no	(b) Amount involved	(c) Name	of noncharitable exempt	organization	(d) De	scription of transfers,	ransactions, and sl	naring arra	angeme	ents
<u> </u>		0	<del>                                     </del>	·- · · · · · · · · · · · · · · · · · ·		1 '	,			<u> </u>	
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2a	Is the	foundation directly or	indirectly affilia	ated with, or related	d to, one or m	ore tax-	exempt organizat	ions			
	descri	ibed in section 501(c)	of the Code (o	ther than section 5	601(c)(3)) or in	n section	527? .	🔲 \	res 🛚 🗓	No	
_b	If "Yes	s," complete the follow	ing schedule								
		(a) Name of organization	1	(b) Type o	of organization		(c) [	escription of relation	onship		
									_		
		Under penalties of perjury, I declare						edge and belief, it is trui	е,		
Si	gn ˈ°	correct, and complete Declaration o	of preparer (other than	taxpayer) is based on all infor	mation of which prepa	arer has any k	nowledge	May the IRS	diecuee th	ie retur	n
	- I.	7	· ·	1001)	012	_		with the prepa			
H	ere 📗	Am V	· Dans	€7 Ue7. •	OIF Exe	<u>د . D</u> : ،	rector	instructions)?			No
		Signature of officer or truste	e	Date	Title						
	. ,	Print/Type preparer's n	name	Preparers signature			Date		PTIN		
Pa		BIOLIA 55 ==		1///11	But C	M.	40,000,000,00	Check if		=0:-	
Pr	epare	RICHARD W BE	HS	10000	ا حمدادا	770	10/26/2012	self-employed	P0023	<u>7318</u>	

(615) 297-8502

Phone no

Firm's EIN ► 62-1866112

# Line 16b (990-PF) - Accounting Fees

THE HARRISON-ROBBIE DEARING FOUNDATION

595	Disbursements for Charitable	oses	(Cash Basis Only)	595									
	Disburs for Ch	Purp	(Cash Ba										
0		Adjusted Net	Income										
0		Net Investment	Income										
595	Revenue and	Expenses per	Books	969									
		Name of Organization or	Person Providing Service	BETTS & RUBIO CPAS, PLLC									
				<b> </b> _	2	8	4	ما	9	_	<b>&amp;</b>	6	0

# Line 16c (990-PF) - Other Fees

THE HARRISON-ROBBIE DEARING FOUNDATION

) 150	Disbursements for Charitable	Purposes (Cash Basis Only)	150									
)		Adjusted Net										
0		Net Investment										
150	Revenue and	Expenses per Books	150									
		Name of Organization or Person Providing Service	MORGAN STANLEY MGMT FEE									
			-	7	3	4	9	9	2	8	6	10

# Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

-	Name	Check "X" if Business	Street 1024 I VNIMOOD RI VD	City		Zip Code	Foreign Country	Title	
- 2	ROBBIE B DAVIS		1024 LYNWOOD BLVD	NASHVILLE	Z	37215		SECRE	TARY
က	HARRISON B DAVIS		1024 LYNWOOD BLVD	NASHVILLE		37215		TRUSI	EE
4	SARAH D DAVIS		1024 LYNWOOD BLVD	NASHVILLE	1 1	37215		TRUST	Ш
2									
9									İ
7									
ထ									
6									ĺ
10									

Part

THE HARRISON-ROBBIE DEARING FOUNDATION

	Explanation										
0	Expense Account								- !		
0	Benefits										
0	Compensation										
		-	2	3	4	2	9	7	8	6	10