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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

| F                            | or ca    | lendar year 2011 or tax year beginning                                   |                              | , 2011         | , and endi  | ng          |                      | , 20  |
|------------------------------|----------|--|------------------------------|----------------|-------------|-------------|----------------------|---|
|                              | Name     | e of foundation  |                              |                | _           | A           | Employer identifi    | cation number                                 |
|                              | WIL      | LIAMS FAMILY FOUNDATION  |                              |                |             |             | 73-137610            | 2   |
| _                            | Numl     | per and street (or P O box number if mail is not deliv                   | ered to street address)      |                | Room/sui    | te B        | Telephone number     | er (see instructions)                         |
|                              |          | <i>'</i>   |                              |                |             |             | (58                  | 0) 536-1411                                   |
|                              | 260      | O STONE HILL DRIVE   |                              |                |             |             |                      |   |
|                              | City o   | or town, state, and ZIP code   |                              |                | ·           |             |                      |   |
|                              |          |  |                              |                |             | С           | If exemption applica | ition is                                      |
|                              | LAW      | TON, OK 73505  |                              |                |             |             | pending, check here  |   |
| G                            | Che      | ck all that apply Initial return   | Initial return               | of a former p  | ublic chari | ty          | 1 Foreign organizat  | tions check here                              |
|                              |          | Final return   | Amended re                   | •              |             | 1   5       | 2. Foreign organiza  |   |
|                              |          | Address change   | Name chang                   |                |             |             | 85% test, check h    | ere and attach                                |
| Н                            | Che      | ck type of organization X Section 501                                    |                              |                |             |             | computation .        |   |
| ſ                            |          | section 4947(a)(1) nonexempt charitable trust                            | Other taxable pr             |                | tion        | E           | •                    | n status was terminated (1)(1)(A), check here |
| ī                            |          |  | ounting method: X C          |                |             |             |                      | in a 60-month termination                     |
|                              | of v     |  | Other (specify)              |                |             |             |                      | )(1)(B), check here                           |
|                              |          |  | column (d) must be on        | cash basis.)   |             |             |                      |   |
| F                            | art      | Analysis of Revenue and Expenses (The                                    | (12)                         |                |             |             |                      | (d) Disbursements                             |
| _                            |          | total of amounts in columns (b), (c), and (d)                            | (a) Revenue and expenses per | (b) Net inve   |             |             | djusted net          | for charitable                                |
|                              |          | may not necessarily equal the amounts in column (a) (see instructions) ) | books                        | Incom          | ie          |             | income               | purposes<br>(cash basis only)                 |
| _                            | 1        | Contributions, grifts, grants, etc., received (attach schedule) .        |                              |                |             |             |                      | 100011 baddio offiny                          |
|                              | 2        | if the foundation is <b>not</b> required to                              |                              | <del></del>    |             |             |                      |   |
| 7                            | 3        | Theck   attach Sch B   | 2.                           |                | 2.          |             |                      | ATCH 1  |
| 3                            | 4        | Dividends and interest from securities                                   | 673.                         |                | 673.        |             |                      | ATCH 2  |
| <br>20                       |          | Gross rents  |                              |                |             |             |                      |   |
| ~                            | l        | Net rental income or (loss)  |                              |                |             |             |                      |   |
|                              |          | Net gain or (loss) from sale of assets not on line 10                    |                              |                | <del></del> | ·           |                      |   |
| ğ                            |          | Gross sales price for all  |                              |                |             |             |                      |   |
| ~÷.                          | 7        | capital gain net income (from Part IV, line 2) .                         |                              |                |             | <del></del> |                      | ,   |
| 찏                            | 8        | Net short-term capital gain  |                              |                |             |             |                      |   |
| Z                            | 9        | Income modifications · · · · · · · · · · · · · · · · · · ·               |                              |                | ,           |             |                      |   |
| z                            |          | Gross sales less returns   |                              |                |             |             | · · · · ·            | -   |
| <b>SCANNE® 幹息</b>            | ١,       | and allowances · · · · Less Cost of goods sold .                         |                              |                | -           |             |                      | , ,   |
| $\boldsymbol{\wp}$           | l        | Gross profit or (loss) (attach schedule)                                 |                              |                |             |             |                      |   |
|                              | 11       | Other income (attach schedule)   |                              |                |             |             |                      |   |
|                              | 12       | Total. Add lines 1 through 11  | 775                          |                | 675.        |             |                      |   |
| _                            | 13       | Compensation of officers, directors, trustees, etc                       | 0                            | DESE           |             |             |                      |   |
|                              | 14       | Other employee salanes and wages   |                              | RECEIN         | /ED 🕂       | 1           |                      |   |
| 9                            | 15       | Pension plans, employee benefits   |                              |                |             | 21          |                      |   |
| Sue                          | 1        | Legal fees (attach schedule)   | 480                          | NOV 1 9        | 2012        |             |                      | <del></del>                                   |
| Expenses                     |          | Accounting fees (attach schedule)  | 900.                         |                | 2012 C      |             |                      |   |
| ΘĒ                           |          | Other professional fees (attach schedule)                                |                              |                |             | 1           |                      |   |
| Operating and Administrative | 17       | Interest   |                              | OGDEN,         | UT          | 1           |                      |   |
| stra                         | 18       | Taxes (attach schedule) (see instructions)                               |                              |                |             |             |                      |   |
| Ë                            | 19       | Depreciation (attach schedule) and depletion.                            |                              |                |             |             |                      |   |
| 투                            | 20       | Occupancy  |                              | L <del>_</del> |             |             |                      |   |
| Ž                            | 21       | Travel, conferences, and meetings  |                              |                |             |             |                      |   |
| anc                          | 22       | Printing and publications  |                              | L              |             |             |                      |   |
| g                            | 23       | Other expenses (attach schedule)   |                              |                |             |             |                      | · · · · · · · · · · · · · · · · · · ·         |
| atir                         | 23<br>24 | Total operating and administrative expenses.                             |                              |                |             |             |                      |   |
| 70.                          |          | Add lines 13 through 23  | 900.                         |                | 900.        |             |                      |   |
| ö                            | 25       | Contributions, gifts, grants paid  | 2,124.                       |                |             |             |                      | 2,124   |
| _                            | ~        | Total expenses and disbursements Add lines 24 and 25                     | 3,024.                       | <u> </u>       | 900.        |             | 0                    | 2,124   |
|                              |          | Subtract line 26 from line 12  |                              |                |             |             |                      | _,  |
|                              |          | Excess of revenue over expenses and disbursements                        | -2,349.                      |                | - /         |             |                      |   |
|                              | _        | Net investment income (If negative, enter -0-)                           |                              |                | 0           |             |                      |   |
|                              |          | Adjusted net income (if negative, enter -0-)                             |                              |                | -           |             | ·                    | <u> </u>                                      |
| _                            |          |  |                              |                |             |             |                      |   |

| E           | art II   | Ralance Sheets  | Attached schedules and amounts in the description column should be for end-of-year  | Beginning of year              | End                                   | of year               |
|-------------|----------|---|---|--------------------------------|---------------------------------------|-----------------------|
| <u>-</u>    |          |   | amounts only (See instructions)   | (a) Book Value                 | (b) Book Value                        | (c) Fair Market Value |
|             | 1        |   | ng  |                                |                                       |                       |
|             | 2        | Savings and temporary   | cash investments  | 6,269.                         | 3,920                                 | . 3,920               |
|             | 3        | Accounts receivable ▶   |   |                                |                                       |                       |
|             |          | Less allowance for dou  | btful accounts ▶  |                                |                                       |                       |
|             | 4        |   |   |                                |                                       |                       |
|             |          | Less allowance for dou  | btful accounts ▶  |                                |                                       |                       |
|             | 5        |   |   |                                |                                       |                       |
|             | 6        |   | officers, directors, trustees, and other  |                                |                                       |                       |
|             |          | disqualified persons (att   | tach schedule) (see instructions)   |                                |                                       |                       |
|             | 7        | Other notes and loans r   | eceivable (attach schedule)   | _                              |                                       |                       |
|             |          |   | btful accounts >  |                                | ``                                    |                       |
| 'n          | 8        | Inventones for sale or us   |   |                                |                                       |                       |
| Assets      | 9        |   | eferred charges   |                                |                                       |                       |
| 155         | -        |   | e government obligations (attach schedule).   |                                | -                                     |                       |
|             |          |   | stock (attach schedule) ATCH 3  | 45,244.                        | 45,244                                | . 39,610              |
|             | ı        |   | bonds (attach schedule).  |                                |                                       |                       |
|             | 11       | Investments - land, buildings and equipment basis Less accumulated deprecia | <b></b>   |                                |                                       | - Arm                 |
|             |          | (attach schedule)   |   |                                |                                       |                       |
|             | 12       |   | loans   |                                |                                       |                       |
|             | 13<br>14 | Investments - other (atta<br>Land, buildings, and                           | ich schedule)   |                                |                                       |                       |
|             |          |   | tion  |                                | , A                                   |                       |
|             |          | (attach schedule)   | tion  |                                |                                       | <u> </u>              |
|             | 15       | Other assets (describe  | /   |                                |                                       | <del></del>           |
|             | 16       | •   | completed by all filers - see the   |                                |                                       |                       |
| _           |          |   | age 1, item I)  | 51,513.                        | 49,164                                | 43,530                |
|             | 17       | Accounts payable and a  | ccrued expenses   |                                |                                       |                       |
|             | 18       | Grants payable  |   |                                |                                       | 1                     |
| 98          | 19       | Deferred revenue  |   |                                |                                       |                       |
| ≣           | 20       |   | rs, trustees, and other disqualified persons  |                                | ·                                     |                       |
| Liabilities | 21       | Mortgages and other no  | tes payable (attach schedule)   |                                |                                       |                       |
| _           | 22       | Other liabilities (describe   | <b>: ▶</b> )  |                                |                                       |                       |
|             |          |   |   |                                |                                       |                       |
|             | 23       | Total liabilities (add line   | s 17 through 22)  | 0                              |                                       | ]                     |
|             |          |   | ow SFAS 117, check here > 24 through 26 and lines 30 and 31.  |                                |                                       | ,                     |
| 98          | 24       | Unrestricted  |   |                                |                                       |                       |
| a           | 25       | Temporarily restricted  |   |                                |                                       | 1                     |
| 3al         | 26       | Permanently restricted  |   |                                |                                       | 1                     |
| פ           |          | Foundations that do   | not follow SFAS 117, plete lines 27 through 31.   Indianal, bldg, and equipment fund  Inlated income, endowment, or other funds  I balances (see instructions)  net assets/fund balances (see |                                | <del></del>                           | , ·                   |
| ᆵ           |          | check here and com  | plete lines 27 through 31. ▶ X  |                                |                                       |                       |
| 5           | 27       | Capital stock, trust princ  | apal, or current funds  | 100.                           | 100                                   | .  ` ` `              |
| ts          | 28       | Paid-in or capital sumlus, or   | land, bldg , and equipment fund   |                                |                                       | 1 1                   |
| SS          | 29       | Retained earnings accumi  | elated income, endowment, or other funds  | 51,413.                        | 49,064                                |                       |
| ĕ           | 30       | Total net assets or fund  | balances (see instructions)   | 51,513.                        | 49,164                                | .1                    |
| ě           | 31       | Total liabilities and   | net assets/fund balances (see   |                                | · · · · · · · · · · · · · · · · · · · | ;                     |
| _           |          | instructions)   |   | 51,513.                        | 49,164                                | ,                     |
| P           | art li   | Analysis of Cha   | inges in Net Assets or Fund I   |                                | ·                                     | <u> </u>              |
|             |          |   | alances at beginning of year - Part   |                                | must agree with                       |                       |
| •           |          |   | I on prior year's return)   |                                | -                                     | 51,513                |
| 2           |          | r amount from Part I, i   | 07  |                                | _                                     | -2,349                |
|             |          |   | ad ia lina 2 (itamiza) b  |                                |                                       |                       |
|             |          | lines 1, 2, and 3   | <del>-</del>  |                                |                                       | 49,164                |
| _           | Door     | aaaaa natunaludad m   | line 2 (rtemize) ►  |                                |                                       |                       |
| ñ           | Total    | net assets or fund ha   | lances at end of year (line 4 minus l   | ine 5) - Part II, column (b)   | ), line 30 6                          | 49,164                |
| <u>-</u>    | - Julian | not assets of fully ba  | narious at end of year time 4 minus i   | inc of - i are ii, coloniii (b | ,, iii ie 50   <b>0</b>               | 101101                |

Part IV Capital Gains and Losses for Tax on Investment Income

Page 3

| , ,  | d describe the kind(s) of property sold (                                   | •   | (b) How<br>acquired<br>P-Purchase<br>D-Donation | (c) Date<br>acquired<br>(mo , day, yr ) | (d) Date sold<br>(mo , day, yr ) |
|--|---|---|---|---|----------------------------------|
| 1a   |   |   |   |   |                                  |
| b  | -   |   |   |   |                                  |
| C  |   |   |   |   |                                  |
| d  |   |   |   |   |                                  |
| e  |   |   |   |   |                                  |
| (e) Gross sales pnce   | (f) Depreciation allowed (or allowable)                                     | (g) Cost or other basis<br>plus expense of sale   |   | (h) Gain or (lo<br>(e) plus (f) mini    |                                  |
| a  |   |   |   |   |                                  |
| b  |   |   |   |   |                                  |
| С  |   |   |   |   |                                  |
| d  |   |   |   |   |                                  |
| е  |   |   |   |   |                                  |
| Complete only for assets:  | showing gain in column (h) and owner  | d by the foundation on 12/31/69   | (n)   | Gains (Col (h) g                        | ain minus                        |
| (i) F M V as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69  | (k) Excess of col (i)<br>over col (j), if any   |   | (k), but not less t<br>Losses (from co  | han -0-) <b>or</b>               |
| а  |   |   |   |   |                                  |
| b  |   |   |   |   |                                  |
| С  |   |   |   |   |                                  |
| d  |   |   | :   |   |                                  |
| е  |   |   |   |   |                                  |
| Capital gain net income or     Net short-term capital gain                         | (net capital loss)  {    If          | gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 22(5) and (6)                    | 2   |   |                                  |
| If gain, also enter in Part  | t I, line 8, column (c) (see instr  | ructions) If (loss), enter -0- in $\}$  | 3   |   |                                  |
| Part V Qualification U   | Inder Section 4940(e) for Rec   | duced Tax on Net Investment I   |   |   |                                  |
| If section 4940(d)(2) applies,   | leave this part blank   | e section 4940(a) tax on net investi<br>utable amount of any year in the b<br>Do not complete this part |   | ·<br>                                   | Yes X No                         |
| 1 Enter the appropriate amo  | ount in each column for each year.  | , see the instructions before making  | any entri                                       | es                                      |                                  |
| (a) Base penod years Calendar year (or tax year beginning in)                      | (b) Adjusted qualifying distributions                                       | (c) Net value of nonchantable-use assets  |   | (d) Distribution ra (col (b) divided by |                                  |
| 2010   | 5,000.  | 44,146.   |   |   | 0.113261                         |
| 2009   |   | 38,086.   |   | <del></del>                             |                                  |
| 2008   | 4,315.  | 58,418.   |   |   | 0.073864                         |
| 2007   | 17,895.   | 91,616.   |   |   | 0.195326                         |
| 2006   | 18,927.   | 111,169.  | -   |   | 0.170254                         |
| 2 Total of line 1, column (d)  |   |   | 2   |   | 0.552705                         |
|  | for the 5-year base period - divide<br>lation has been in existence if less |   | 3   |   | 0.110541                         |
| 4 Enter the net value of non-  | charitable-use assets for 2011 from   | m Part X, line 5  | 4   |   | 43,660.                          |
| 5 Multiply line 4 by line 3 .  |   |   | 5   |   | 4,826.                           |
| 6 Enter 1% of net investmen  | nt income (1% of Part I, line 27b)  |   | 6   |   |                                  |
| 7 Add lines 5 and 6  |   |   | 7   |   | 4,826.                           |
| 8 Enter qualifying distribution If line 8 is equal to or gree Part VI instructions | ns from Part XII, line 4  | n Part VI, line 1b, and complete t  | 8<br>hat part (                                 | using a 1% tax                          | 2,124.<br>rate See the           |

| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in  | struc    | tions | <del>s)</del> |
|-----|--|----------|-------|---------------|
| 1 a | 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   |          |       | 0             |
|     | here  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-) 2   |          |       |               |
| 3   | Add lines 1 and 2  |          |       | 0             |
| 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-   |          |       | 0             |
| 6   | Credits/Payments   |          |       |               |
| а   | 2011 estimated tax payments and 2010 overpayment credited to 2011 6a   |          |       |               |
| b   | Exempt foreign organizations - tax withheld at source  |          |       |               |
| С   | Tax paid with application for extension of time to file (Form 8868) 6c   | <b>S</b> |       |               |
| d   | Backup withholding erroneously withheld  | . ,      |       |               |
| 7   | Total credits and payments Add lines 6a through 6d   |          |       | 0             |
| 8   | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached   |          |       |               |
| 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  |          |       |               |
| 11  | Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ Refunded ▶ 11   |          |       |               |
|     | t 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 participate   |          | Yes   | No            |
|     | or intervene in any political campaign?  | 1a       |       | X             |
| b   | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the  |          |       | , v           |
|     | Instructions for definition)?  | 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   |          |       | <u> </u>      |
|     | distributed by the foundation in connection with the activities  | /-       |       |               |
| _   | 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  |          |       |               |
| •   | on foundation managers > \$  |          |       | x             |
| 2   | Has the foundation engaged in any activities that have not previously been reported to the IRS?  | 2        |       |               |
| 2   | If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of |          |       |               |
| 3   | 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       |       | Х             |
| b   |  | 4b       |       | Х             |
| 5   | If "Yes," has it filed a tax return on Form 990-T for this year?  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  |          |       |               |
|     | 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        | Х     | Ĭ             |
| 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        | Х     |               |
| 8a  | Enter the states to which the foundation reports or with which it is registered (see instructions)   |          |       |               |
|     |  |          | ļ     | . :           |
| 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       | 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," 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  | 40       |       | Х             |

(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to

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 penod? (Use Schedule C, Form 4720, to determine if the

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . .

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

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

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

4b Form 990-PF (2011)

2 b

3 b

4a

Х

Х

Х

(d) Contributions to (b) Title, and average (e) Expense account

| (a) Name and address of each employee paid more than \$50,000 | hours per week<br>devoted to position | (c) Compensation | plans and deferred compensation | other allowances |
|---|---------------------------------------|------------------|---------------------------------|------------------|
| NONE  |                                       |                  |                                 |                  |
|   |                                       |                  |                                 |                  |
| ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~                       |                                       |                  |                                 |                  |
|   |                                       |                  |                                 |                  |
|   |                                       |                  |                                 |                  |
| Total number of other employees paid over \$50,000            |                                       |                  |                                 |                  |

| D   |    | 7 |
|-----|----|---|
| rac | ıe |   |

| Part VIII    | Information About Officers, Directors, Trustees, Foundation Managers, and Contractors (continued)   | Highly Paid Emplo       | yees,            |
|--------------|---|-------------------------|------------------|
| 3 Five       | highest-paid independent contractors for professional services (see instructions)   | . If none, enter "NONI  | E."              |
|              |   | b) Type of service      | (c) Compensation |
| NONI         | ,   |                         |                  |
| NONI         |   |                         | -                |
|              |   |                         |                  |
|              |   |                         |                  |
|              |   |                         |                  |
|              |   |                         |                  |
| Total num    | per of others receiving over \$50,000 for professional services   | <b>&gt;</b>             |                  |
| Part IX-A    | Summary of Direct Charitable Activities   |                         |                  |
|              | indation's four largest direct charitable activities during the tax year. Include relevant statistical information is and other beneficianes served, conferences convened, research papers produced, etc. | n such as the number of | Expenses         |
| 1 N/A        |   |                         |                  |
|              |   |                         |                  |
| 2            |   | <del></del>             |                  |
| <b>4</b>     |   |                         |                  |
|              |   |                         |                  |
| 3            |   |                         |                  |
|              |   |                         |                  |
| 4            |   |                         |                  |
| <b>7</b>     |   |                         |                  |
|              |   |                         |                  |
| Part IX-B    | Summary of Program-Related Investments (see instructions)   |                         |                  |
|              | e two largest program-related investments made by the foundation during the tax year on lines 1 and 2   |                         | Amount           |
| 1 NOT        | APPLICABLE  |                         |                  |
|              |   |                         |                  |
| 2            |   |                         |                  |
|              |   |                         |                  |
| All other pr | ogram-related investments. See instructions   |                         |                  |
| 3 NONE       |   |                         |                  |
|              |   |                         |                  |
| Total Add    | lines 1 through 3   |                         |                  |

| Pa     | rt X Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)  | gn foundatio | ons,                                    |
|--------|---|--------------|---|
| 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           | 40,220.                                 |
| b      | Average of monthly cash balances  | 1b           | 4,105.                                  |
| С      | Fair market value of all other assets (see instructions)  | 1c           |   |
| d      |   | 1d           | 44,325.                                 |
| е      | Reduction claimed for blockage or other factors reported on lines 1a and  |              |   |
|        | 1c (attach detailed explanation) 1e   |              |   |
| 2      | Acquisition indebtedness applicable to line 1 assets  | 2            |   |
| 3      | Subtract line 2 from line 1d  | 3            | 44,325.                                 |
| 4      | Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see  |              |   |
|        |   | 4            | 665.                                    |
| 5      | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4   | 5            | 43,660.                                 |
| 6      | Minimum investment return. Enter 5% of line 5   | 6            | 2,183.                                  |
| Pa     | rt 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 process. | part)        |   |
| 1      | Minimum investment return from Part X, line 6   | 1            | 2,183.                                  |
| 2 a    | 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) 2b   | 1            |   |
|        | Add lines 2a and 2b   | 2c           |   |
| 3      | Distributable amount before adjustments. Subtract line 2c from line 1   | 3            | 2,183.                                  |
| 4      | Recoveries of amounts treated as qualifying distributions   | <del></del>  | , |
| 5      | Add lines 3 and 4   | 5            | 2,183.                                  |
| 6      |   | 6            | <del></del>                             |
| 7      | Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,   |              |   |
|        | line 1  | 7            | 2,183.                                  |
| Pa     | rt XII Qualifying Distributions (see instructions)  | 1            |   |
| 4      | Amounts need (including administrative expanses) to accomplish charitable etc. numeros  | 1 1          |   |
| 1<br>a | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes<br>Expenses, contributions, gifts, etc total from Part I, column (d), line 26                     | -            | 2,124.                                  |
|        | Drogram related investments, total from Part IV P   | 1a<br>1b     | 2,124.                                  |
| b      | Program-related investments - total from Part IX-B  | 10           | <del></del>                             |
| 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   |              |   |
| a      | Suitability test (prior IRS approval required)  | 3a           |   |
| ь      | Cash distribution test (attach the required schedule)   | 3b           | 0.104                                   |
| 4      | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4   | 4            | 2,124.                                  |
| 5      | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income   | _            | 2                                       |
| _      | Enter 1% of Part I, line 27b (see instructions)   | 5            | 0 101                                   |
| 6      | Adjusted qualifying distributions. Subtract line 5 from line 4  | 6            | 2,124.                                  |
|        | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years                               | culating whe | ther the foundation                     |

Form 990-PF (2011)

| Pa | rt XIII Undistributed Income (see instru  | uctions) |                     |   | ·                                       |
|----|---|----------|---------------------|---|---|
|    |   | (a)      | (b)                 | (c)                                     | (d)                                     |
| 1  | Distributable amount for 2011 from Part XI,   | Corpus   | Years prior to 2010 | 2010                                    | 2011                                    |
|    | line 7  |          |                     |   | 2,183.                                  |
| 2  | Undistributed income, if any, as of the end of 2011   |          |                     |   |   |
| а  | Enter amount for 2010 only  | -        |                     |   |   |
| ь  | Total for pnor years 20 09 20 08 20 07  |          |                     |   |   |
| 3  | Excess distributions carryover, if any, to 2011   |          |                     |   | ,                                       |
| а  | From 2006   |          |                     |   |   |
| b  | From 2007 13,498.   | •        |                     |   | ,                                       |
| С  | From 2007 13,498. From 2008 1,410.  |          |                     |   |   |
|    |   | -        |                     |   |   |
|    | From 2009   |          |                     |   |   |
|    | Total of lines 3a through e   | 31,321.  |                     |   | ;                                       |
|    | Qualifying distributions for 2011 from Part XII,  |          |                     |   |   |
|    | line 4 ▶ \$ 2,124.  |          |                     |   |   |
| а  | Applied to 2010, but not more than line 2a  |          |                     |   |   |
|    | Applied to undistributed income of prior years  |          |                     |   | 1 |
|    | (Election required - see instructions)  |          |                     |   |   |
| С  | Treated as distributions out of corpus (Election required - see instructions)   |          |                     |   |   |
|    | Applied to 2011 distributable amount  |          |                     | *************************************** | 2,124.                                  |
|    |   |          |                     |   |   |
|    | Remaining amount distributed out of corpus Excess distributions carryover applied to 2011   | 59.      |                     |   | 59.                                     |
| 6  | (If an amount appears in column (d), the same amount must be shown in column (a))   |          |                     |   |   |
| а  | Corpus Add lines 3f, 4c, and 4e Subtract line 5   | 31,262.  |                     |   |   |
|    | Prior years' undistributed income Subtract  |          |                     |   |   |
| U  | line 4b from line 2b  |          |                     |   | ,                                       |
| С  | 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   |          |                     |   |   |
| е  | 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)  | 13,556.  |                     |   |   |
| 9  | Excess distributions carryover to 2012.   |          |                     |   |   |
|    | Subtract lines 7 and 8 from line 6a   | 17,706.  |                     |   |   |
| 10 | Analysis of line 9  |          |                     |   |   |
|    | Excess from 2007 13, 498.   |          |                     |   |   |
| b  | Excess from 2008 1,410.   | }        |                     |   |   |
| C  | Excess from 2009  | ŀ        |                     |   |   |
|    | Excess from 2010 2,798.   |          |                     | -                                       |   |
| е  | Excess from 2011  | ,        |                     |   |   |

| Pa  | rt XIV Private Oper   | rating Foundations        | see instructions an                   | d Part VII-A guestion                            | 9)                     | NOT APPLICABLE        |
|-----|---|---------------------------|---------------------------------------|--|------------------------|-----------------------|
|     |   |                           |                                       |  | <del></del>            | NOT THE BECKEDED      |
| ıa  | If the foundation has   |                           |                                       |  | uing                   |                       |
|     | foundation, and the rulin   |                           |                                       |  | 1 1000                 | Va                    |
| b   | Check box to indicate wh  |                           | private operating toun                | <del></del>                                      | 4942(                  | j)(3) or 4942(j)(5)   |
| 2 a | Enter the lesser of the ad-   | Tax year                  |                                       | Prior 3 years                                    |                        | (e) Total             |
|     | justed net income from Part   | (a) 2011                  | <b>(b)</b> 2010                       | (c) 2009   | (d) 2008               | .,                    |
|     | I or the minimum investment<br>return from Part X for each          |                           |                                       |  |                        |                       |
|     | year listed   |                           |                                       |  |                        |                       |
| b   | 85% of line 2a  |                           |                                       |  | •••                    |                       |
| _   |   |                           |                                       |  |                        |                       |
| ·   | 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  |                           |                                       | <u> </u>   |                        |                       |
| е   | Qualifying distributions made<br>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           |                           |                                       |  |                        |                       |
| а   | "Assets" alternative test - enter                                   |                           |                                       |  |                        |                       |
|     | (1) Value of all assets   |                           |                                       |  |                        |                       |
|     | (2) Value of assets qualifying                                      |                           |                                       |  |                        |                       |
|     | under section<br>4942(j)(3)(B)(i)                                   |                           |                                       |  |                        |                       |
| b   | "Endowment" alternative test-                                       |                           |                                       |  |                        |                       |
|     | enter 2/3 of minimum invest-  |                           |                                       |  |                        |                       |
|     | ment return shown in Part X   |                           |                                       |  |                        |                       |
| _   | line 6 for each year listed   |                           |                                       | <del>                                     </del> |                        |                       |
| C   | "Support" alternative test - enter                                  |                           |                                       |  |                        |                       |
|     | (1) Total support other than gross investment income                |                           |                                       |  |                        |                       |
|     | (interest, dividends, rents,  |                           |                                       |  |                        |                       |
|     | payments on secunties loans (section 512(a)(5)),                    |                           |                                       |  |                        |                       |
|     | or royalties)   |                           | · · · · · · · · · · · · · · · · · · · |  |                        |                       |
|     | (2) Support from general public and 5 or more                       |                           |                                       |  |                        |                       |
|     | exempt organizations as   |                           |                                       |  |                        |                       |
|     | provided in section 4942<br>(j)(3)(B)(iii)                          |                           |                                       |  |                        |                       |
|     | (3) Largest amount of sup-  |                           |                                       |  | · <del>····</del>      |                       |
|     | port from an exempt   |                           |                                       |  |                        |                       |
|     | organization (4) Gross investment income                            |                           | <del></del>                           |  |                        |                       |
| Pa  |   | ary Information (C        | omnlete this part                     | only if the founda                               | tion had \$5 000       | or more in assets     |
|     |   | during the year - see     |                                       | only if the founda                               | mon naa wo,ooo         | or more in assets     |
| 1   | Information Regarding   |                           |                                       |  |                        |                       |
|     | List any managers of  |                           |                                       | e than 2% of the total                           | contributions receiv   | ed by the foundation  |
| _   | before the close of any   | tax year (but only if th  | ey have contributed                   | more than \$5,000) (Se                           | e section 507(d)(2))   | od by the redridation |
|     | N/A   |                           | •                                     | , ,  |                        |                       |
|     | List any managers of  | the foundation who is     |                                       | f the steel of a serve                           | sation (as an agricult | · leves poster of the |
| D   |   |                           |                                       | n has a 10% or greater i                         |                        | riarge portion of the |
|     | Time of a partie  | amp or other oriting) of  | on and roundation                     | a rom or greater                                 |                        |                       |
|     | > / P   |                           |                                       |  |                        |                       |
|     | N/A   |                           | - A.C                                 |  |                        | <del></del>           |
| 2   | Information Regarding   | _                         |                                       | •  |                        |                       |
|     | Check here ► X If t   | he foundation only n      | nakes contributions                   | to preselected charita                           | able organizations a   | ind does not accept   |
|     |   |                           |                                       | ants, etc (see instruction                       | ons) to individuals o  | r organizations under |
|     | other conditions, comp  | olete items 2a, b, c, and | d d                                   |  |                        |                       |
| а   | The name, address, a  | nd telephone number       | of the person to who                  | m applications should be                         | addressed              |                       |
|     |   |                           |                                       |  |                        |                       |
|     | The form in which app   | lications should be sub   | mitted and informati                  | on and materials they s                          | hould include          |                       |
|     |   |                           |                                       | , -  | •                      |                       |
|     |   |                           |                                       |  |                        |                       |
| С   | Any submission deadli   | nes                       |                                       | -  |                        |                       |
| •   | ·/ = ==================================                             |                           |                                       |  |                        |                       |
|     |   |                           |                                       |  |                        |                       |
| - п | Any restrictions or li  | mitations on awards       | such as hy geogra                     | anhical areas charitah                           | le fields kinds of     | institutions or other |
| u   | factors   | anono on awards,          | sach as by geogra                     | spinous urous, charitat                          | nords, kinds of        | montations, or other  |
|     |   |                           | •                                     |  |                        |                       |

| Part XV Supplementary Information (   | continued)   |                      |                                  |          |
|---|--|----------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid Durin Recipient Name and address (home or business) | ng the Year or Appr  | oved for I           | Future Payment                   |          |
| Recipient   | If recipient is an individual,<br>show any relationship to | Foundation status of | Purpose of grant or contribution | Amount   |
| Name and address (home or business)   | any foundation manager<br>or substantial contributor       | recipient            | contribution                     | , underk |
| a Paid during the year  |  |                      |                                  |          |
|   |  |                      |                                  |          |
| ATTACHMENT 5  | 1  | İ                    |                                  |          |
|   |  |                      |                                  |          |
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|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
| Total   |  |                      | ▶ 3a                             | 2,124.   |
| <b>b</b> Approved for future payment  |  |                      |                                  |          |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
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|   |  |                      |                                  |          |
|   |  |                      |                                  |          |
| Total   | · · · · · · · · · · · · · · · · · · ·                      | <del></del>          | <u>▶ 3b</u>                      | <u> </u> |

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|                | Analysis of Income-Produ                                      | icing Activ          | /ities                  |                       |  |  |
|----------------|---|----------------------|-------------------------|-----------------------|--|--|
| ∟nter gross am | ounts unless otherwise indicated                              | Unrela               | ated business income    | Excluded by           | y section 512, 513, or 514             |  |
| 1 Program sei  |   | (a)<br>Business code | (b)<br>Amount           | (c)<br>Exclusion code | (d)<br>Amount                          | Related or exempt<br>function income<br>(See instructions) |
| -              |   |                      |                         |                       |  | (See instructions)   |
|                |   |                      |                         |                       |  |  |
|                | ·   |                      |                         |                       |  |  |
| _              |   |                      |                         |                       |  |  |
|                |   |                      |                         |                       |  |  |
| f              |   |                      |                         |                       |  |  |
| g Fees and     | contracts from government agencies                            |                      |                         |                       |  |  |
| 2 Membership   | dues and assessments  |                      | ,                       |                       |  |  |
|                | avings and temporary cash investments                         |                      |                         | 14                    | 2.                                     |  |
|                | nd interest from securities                                   |                      | <del></del>             | 14                    | 673.                                   |  |
|                | ncome or (loss) from real estate                              |                      |                         |                       |  |  |
|                | anced property  |                      |                         | <del> </del>          |  |  |
|                | -financed property  |                      | <del></del>             | <del> </del>          |  |  |
|                | come or (loss) from personal property                         | ····                 |                         | <u> </u>              | · · · · · · · · · · · · · · · · · · ·  |  |
|                | tment income  |                      |                         | <del> </del>          |  | 1-10   |
|                | ) from sales of assets other than inventory                   |                      | <del> </del>            | <del> </del>          |  |  |
|                | or (loss) from special events                                 |                      |                         | <del> </del>          | ······································ |  |
|                | or (loss) from sales of inventory                             |                      |                         |                       |  |  |
| _              | ue a  |                      |                         | <u> </u>              |  |  |
|                |   |                      |                         | -                     |  | **   |
| _              |   |                      |                         |                       |  | · · ·  |
| е              |   |                      |                         |                       |  |  |
| 2 Subtotal Ac  | dd columns (b), (d), and (e)                                  |                      |                         |                       | 675.                                   |  |
|                | Relationship of Activities  Explain below how each activities |                      |                         | -                     |  | uted importantly to th                                     |
| Line No.       |   | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               | •  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               | •  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               | •  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               | •  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               |  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               | •  |
| Line No.       | Explain below how each activit                                | y for which          | n income is reported ii | n column (e           | e) of Part XVI-A contrib               | •  |

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| Part     | XVII            | Information R Exempt Organ                                     |   | sfers To and Transa   | ctions an                          | d Relations                           | hips With Non             | chari        | table       | 9       |
|----------|-----------------|--|---|---|------------------------------------|---------------------------------------|---------------------------|--------------|-------------|---------|
| 1 0      | old the         | <del></del>  | <del> </del>  | ngage in any of the follow  | ing with ai                        | ny other organi                       | zation described          | Π            | Yes         | No      |
|          |                 | _  | -   | ection 501(c)(3) organizat  | _                                  | -                                     |                           |              |             |         |
|          |                 | cations?   | (1000)  | · · · · · · · · · · · · · · · · · · ·   |                                    | , , ,                                 | у то рожинови             | ł            |             |         |
|          | •               |  | no foundation to a                                    | noncharitable exempt org  | anization of                       | <del>.</del>                          |                           |              |             |         |
|          |                 |  | -   |   |                                    |                                       |                           | 1a(1)        |             | X       |
|          |                 |  |   |   |                                    |                                       |                           | 1a(2)        |             | X       |
|          |                 | ransactions:   |   |   |                                    |                                       |                           | 14(2)        |             |         |
|          |                 |  | ncharitable exemi                                     | ot organization   |                                    |                                       |                           | 1b(1)        | - ~         | X       |
| i i      | 7) Dur          | chases of assets fro   | nm a noncharitah                                      | e exempt organization   |                                    |                                       |                           | 1b(2)        |             | X       |
| Ü        | 2) Rer          | ntal of facilities, equi                                       | inment or other a                                     | ssets   | · · · · · · ·                      |                                       | • • • • • • • • •         | 1b(3)        |             | х       |
| i i      | 4) Rei          | mbursement arrang  | ements  |   |                                    |                                       |                           | 1b(4)        |             | Х       |
| Ù        | 5) Loa          | ins or loan quarantee  | 98  |   |                                    |                                       |                           | 1b(5)        |             | х       |
| i i      | 6) Per          | formance of service  | s or membershir                                       | or fundraising solicitations  | · · · · · · ·                      |                                       |                           | 1b(6)        |             | Х       |
| c S      | haring          | of facilities, equipm  | nent mailing lists                                    | , other assets, or paid emp   | lovees                             |                                       |                           | 1c           |             | X       |
|          |                 |  |   | complete the following  |                                    |                                       |                           |              | fair m      | arke    |
|          |                 |  |   | s given by the reporting  |                                    | , ,                                   | •                         |              |             |         |
|          |                 | -  |   | ment, show in column (d   |                                    |                                       |                           |              |             |         |
| (a) Line | —т-             | (b) Amount involved  |   | icharitable exempt organization   | <del></del>                        |                                       | s, transactions, and shar |              |             |         |
| (=, =    | -               | N/A  | (0) 112.110 01 110.                                   | onantable exempt engantablen  | N/A                                | onphon or transford                   | , transactions, and onar  |              | ngeme       |         |
|          |                 |  |   |   |                                    |                                       |                           |              |             |         |
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|          | <del> -</del> - |  |   | <del></del>   |                                    |                                       |                           |              | <del></del> |         |
|          | —               |  |   |   |                                    |                                       |                           |              |             |         |
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|          |                 |  |   |   |                                    |                                       |                           |              |             |         |
|          |                 |  |   | ated with, or related to,   |                                    |                                       | organizations<br>F        | <b>-</b> ¬   | TV.         | ٦       |
|          |                 |  |   | er than section 501(c)(3))  | or in sectioi                      | n 52/7                                | <i></i> L                 | Y6           | s X         | ] No    |
| ti d     | "Yes,           | " complete the follow  |   | #NT f   | <u> </u>                           |                                       | Barranton of other        | <b>.</b> .   |             |         |
|          |                 | (a) Name of organization                                       | 1   | (b) Type of organization  |                                    | (c)                                   | Description of relations  | пір          |             |         |
|          |                 |  | <del></del>   | <del></del>   |                                    |                                       |                           |              |             |         |
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|          |                 |  |   |   |                                    |                                       |                           |              |             |         |
|          | 1               |  |   |   |                                    |                                       |                           |              |             |         |
| Sian     | correct         | penalties of perjury, I decla<br>, and complete Declaration of | ire that I have examined<br>preparer (other than taxp | this return, including accompanying<br>ayer) is based on all information of whi | schedules and<br>ch preparer has a | statements, and to a<br>any knowledge | the best of my knowledg   | e and b      | elief, it   | is true |
| Sign     |                 |  |   | 1   |                                    |                                       | May the IRS               | discus       | s this      | retum   |
| Here     |                 |  |   | <u> </u>  | . 🔼                                |                                       | with the pre              |              |             | below   |
|          | Sign            | ature of officer or trustee                                    | 9000  | Date // /2 10   | Tatle                              |                                       | (see instruction:         | ;)? <u>X</u> | Yes         | No      |
|          | <u> </u>        | MUMW (   | Nece  | Proporor's signature  |                                    | Date Date                             |                           | TIN          |             |         |
| Paid     |                 | Print/Type/preparer's  | •   | Preparer's signature  | ta a VDa.                          |                                       | Clieck   II               | TIN<br>DOLO  | 0701        | _       |
| Prepa    | irer            | STEVE ST   | - COLLEGE   | I AUU A   | lakly                              | 1408 . 70                             |                           |              |             | .3      |
|          |                 |  | EAKLEY & GI   | LBERI, P.C.   |                                    | F                                     | im's EIN ▶ 73-12          | 487          | 49          |         |
| Jse C    | niy             | Firm's address ▶ 11  |   |   | •                                  |                                       |                           |              |             |         |
|          |                 | OK   | LAHOMA CITY   | , OK  | 73                                 | 102 F                                 | Phone no 405-23           | 35-4         | 400         |         |

ATTACHMENT 1

ATTACHMENT 1 PAGE 14

|                   | i |
|-------------------|---|
| INVESTMENTS       |   |
| CASH              |   |
| ON TEMPORARY CASH |   |
| NO                |   |
| INTEREST          |   |
| 1                 |   |
| H                 |   |
| PART              |   |
| 990PF,            | l |
| FORM              |   |

| REVENUE AND EXPENSES INVESTMENT PER BOOKS INCOME | 2. 2.                | 2.    |
|--|----------------------|-------|
|  |                      | TOTAL |
| DESCRIPTION                                      | FIDELITY INVESTMENTS |       |

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| ACHMENT |
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| NET<br>INVESTMENT<br>INCOME             | 673.                 | 673.  |
|---|----------------------|-------|
| REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | 673.                 | 673.  |
|   |                      | TOTAL |
| DESCRIPTION                             | FIDELITY INVESTMENTS |       |

ATTACHMENT 2 PAGE 15

ATTACHMENT 3 PAGE 16

|   |    | _ |
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- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

FIDELITY INV-GROWTH & INC FUND

TOTALS

ENDING BOOK VALUE

ENDING FMV

39,610.

45,244.

45,244.

39,610.

ATTACHMENT 4

| , AND TRUSTEES                 |   |
|--------------------------------|---|
| AND                            |   |
| - LIST OF OFFICERS, DIRECTORS, |   |
| OF OFFICERS,                   |   |
| OF                             | İ |
| LIST                           |   |
| 1                              |   |
| VIII                           |   |
| PART VIII                      |   |
| 990PF,                         |   |
| FORM 990PE                     |   |

| ·   | 0   | O   |
|---|---|---|
|   | 0   | 0   |
|   | 0   | 0   |
| TITLE AND AVERAGE HOURS PER<br>WEEK DEVOTED TO POSITION | TRUSTEE   | TRUSTEE   |
| NAME AND ADDRESS  | CHERYN WILLIAMS<br>2600 STONEHILL DRIVE<br>LAWTON, OK 73505 | CHARLES E. WADE, JR.<br>727 NW HEINZWOOD CIRCLE<br>LAWTON, OK 73505 |

GRAND TOTALS

73-1376102

ATTACHMENT 5

# FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

| RECIPIENT NAME AND ADDRESS  | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
|---|--|----------------------------------|--------|
| COMMUNICAL COUNTY MEMURIAL HOSFITAL FUUNDATION P.O. BOX 7346 LAWTON, OK 73506 | NONE<br>EXEMPT   | CHARITABLE CONTRIBUTION          | 250.   |
| UNIVERSITY OF OKLAHOMA FOUNDATION<br>100 TIMBERDELL ROAD<br>NORMAN, OK 73019  | NONE<br>EXEMPT   | CHARITABLE CONTRIBUTION          | 1,874. |

2,124. TOTAL CONTRIBUTIONS PAID

ATTACHMENT 5 PAGE 18

V 11-6.1

05v088 C308 11/6/2012

4:34:44 PM

## Form **8868**

(Rev January 2012) .

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

Department of the Treasury

OMB No 1545-1709

| nternal Revenue Service ► File a separate application for each return.  |   |   |                 |                                     |                         |                             |  |
|---|---|---|-----------------|-------------------------------------|-------------------------|-----------------------------|--|
| • If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box   |   |   |                 |                                     |                         |                             |  |
| <ul> <li>If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)</li> </ul> |   |   |                 |                                     |                         |                             |  |
| Do not complete Part II unlessou have already been granted an automatic 3-month extension on a previously filed Form 8868                 |   |   |                 |                                     |                         |                             |  |
|   |   | You can electronically file Form                                    |                 |                                     |                         |                             |  |
| a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form  |   |   |                 |                                     |                         |                             |  |
|   | 868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see |   |                 |                                     |                         |                             |  |
|   |   |   |                 |                                     |                         |                             |  |
|   |   | details on the electronic filing of the Month Extension of Time. On |                 |                                     |                         | nies & Noripronts           |  |
|   |   | ····  | -               |                                     |                         | 1-                          |  |
|   |   | file Form 990-T and requesting an                                   | automatic       | o-month extension - che             | eck this box and comple | te                          |  |
| Part I only   |   | aludum 4420 C Flores and a sub-                                     |                 |                                     | 70044                   |                             |  |
|   |   | cluding 1120-C filers), partnerships                                | s, REWICS,      | and trusts must use For             |                         |                             |  |
| to file ıncome  | _   | empt organization or other filer, see ins                           | tructions       |                                     | <u> </u>                | ng number, see instructions |  |
| Type or   | I value of ex   | empt organization of other mer, see ms                              | il delions      |                                     | Employer identifica     | tion number (EIN) or        |  |
| print   | אבדדד בא א  | MS FAMILY FOUNDATION  |                 |                                     | X 73-137610             | 12                          |  |
| File by the   |   | eet, and room or suite no. If a P.O. box                            | see instruc     | hinns                               | <del> </del>            | · <del></del>               |  |
| due date for  |   | PONE HILL DRIVE   | , 000 111011 00 |                                     | Social security num     | inei (2214)                 |  |
| filing your<br>return See   |   | r post office, state, and ZIP code For a                            | foreign addi    | ress see instructions               |                         |                             |  |
| instructions  | 1   | OK 73505  | io.org.r add    | ooo, ooo maradaana                  |                         |                             |  |
| Enter the Re  | ·   | r the return that this application is f                             | or (file a se   | parate application for ea           | ach return)             | 0 4                         |  |
| Application   | ····  |   | Return          | Application                         |                         | Poture                      |  |
| Is For  |   | •   | Code            | is For                              |                         | Return                      |  |
| Form 990  |   |   | 01              |                                     |                         | Code                        |  |
| Form 990-BL   |   |   | 02              | Form 990-T (corporation form 1041-A | JII)                    | 07                          |  |
| Form 990-EZ   |   |   | 02              | Form 4720                           |                         | 08                          |  |
| Form 990-PF   |   |   | 04              | Form 5227                           | ···                     | 10                          |  |
|   |   | or 408(a) trust)  | 05              | Form 6069                           |                         |                             |  |
| Form 990-T (  |   |   | 06              | Form 8870                           |                         | 11 12                       |  |
| 1 01111 330-1 (   | ilust other t   | nan above)  |                 | 1 01111 0070                        |                         |                             |  |
|   |   | care of ► CHERYN WILLIAMS   |                 | -AVAIL-S A                          | ſ/A                     |                             |  |
| •   |   | 580 536-1411  |                 |                                     | <del> </del>            |                             |  |
| _   |   | es not have an office or place of bu                                |                 | •                                   |                         |                             |  |
|   |   | eturn, enter the organization's four                                |                 |                                     |                         | If this is                  |  |
|   |   | eck this box  |                 | t of the group, check thi           | s dox▶[                 | and attach                  |  |
|   |   | atic 3-month (6 months for a corpor                                 |                 | rad to file Form 000 T) a           | vitanaian af tima       |                             |  |
|   | st arrautom   | •   | -               | •                                   |                         | . The automics is           |  |
|   |   |   | xempi orga      | anization return for the o          | nganization named abov  | e The extension is          |  |
|   | _   | ar 20 11 or   |                 |                                     |                         |                             |  |
|   |   |   | 20              |                                     |                         | 20                          |  |
|   | tax year be   | ginning   | , 20            |                                     |                         |                             |  |
|   |   | red in line 1 is for less than 12 mon                               | ths, check      | reason Initial re                   | eturn Final returr      | 3                           |  |
| c   | hange in ac   | counting period   |                 |                                     |                         |                             |  |
|   |   | <del></del>   |                 |                                     |                         | <del></del>                 |  |
|   | 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.   |   |                 |                                     |                         |                             |  |
|   | b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and  |   |                 |                                     |                         |                             |  |
|   |   | nents made Include any prior yea                                    |                 | •                                   |                         | 3b \$                       |  |
|   |   | ract line 3b from line 3a Include                                   |                 |                                     |                         |                             |  |
| (Electro  | nic Federal   | Tax Payment System) See instruc                                     | tions           |                                     |                         | 3c \$ O                     |  |
|   |   | ng to make an electronic fund v                                     | vithdrawal      | with this Form 8868,                | see Form 8453-EO a      | nd Form 8879-EO for         |  |
| payment inst  | ructions  |   |                 | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,    |                         |                             |  |

| Form 88                                       | 368 (Rev 1-2012)  |  |  |  | Page <b>2</b>   |  |
|---|---|--|--|--|-----------------|--|
|   | ou are filing for an Additional (Not Automatic) 3-Mo  | onth Exten   | sion, complete only Part II  | and check this box                     | <u> </u>        |  |
|   | Only complete Part II if you have already been gra  |  |  |  |                 |  |
| <ul><li>If yo</li></ul>                       | ou are filing for an Automatic 3-Month Extension, o   |  |  |  |                 |  |
| Part  | Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)   |  |  |  |                 |  |
|   |   |  | Er   | nter filer's identifying number, se    |                 |  |
|   | Name of exempt organization or other filer, see in  | structions   |  | Employer identification nun            | nber (EIN) or   |  |
| Туре  | or  |  |  |  |                 |  |
| print   | WILLIAMS FAMILY FOUNDATION  |  |  | X  73-1376102                          |                 |  |
| File by t                                     | Number, street, and room or suite no. If a P.O. bo  | x, see instruc   | ctions   | Social security number (SSI            | N)              |  |
| due dat                                       | e for 2600 STONE HILL DRIVE   |  |  |  |                 |  |
| filing yo<br>return S                         | see   | City, town or post office, state, and ZIP code For a foreign address, see instructions |  |  |                 |  |
| nstructi                                      |   |  | <del></del>  |  |                 |  |
|   | the Return code for the return that this application  |  |  | nch return)                            |                 |  |
| Applic  | ation   | Return   | Application  |  | Return          |  |
| is For  |   | Code   | Is For   |  | Code            |  |
| Form  |   | 01   | And the Control of th |  |                 |  |
|   | 990-BL  | 02   | Form 1041-A  | · · · · · · · · · · · · · · · · · · ·  | 08              |  |
|   | 990-EZ  | 01   | Form 4720  | <del></del>                            | 09              |  |
|   | 990-PF  | 04   | Form 5227<br>Form 6069   |  | 10              |  |
|   | 990-T (sec 401(a) or 408(a) trust)<br>990-T (trust other than above)  | 06   | Form 8870  |  | 12              |  |
|   | Do not complete Part II if you were not already   |  | <del></del>  | sion on a previously filed Fo          | <del></del>     |  |
|   | books are in the care of   CHERYN WILLIAM   |  | automatic o month exten  | istori on a proviously filed to        | 111 0000.       |  |
|   | ephone No ▶ 580 536–1411  |  | AX NO N/A  | —————————————————————————————————————— |                 |  |
|   | ne organization does not have an office or place of   | _  |  | nis box                                | ▶ □             |  |
|   | is is for a Group Return, enter the organization's for  |  |  |  | this is         |  |
|   | e whole group, check this box   |  |  |  | ttach a         |  |
|   | h the names and EINs of all members the extension   |  |  |  |                 |  |
| 4   | request an additional 3-month extension of time ui  | ntıl   |  | 1/15 , 20 12                           |                 |  |
|   | For calendar year 2011, or other tax year beginni   |  |  | d ending                               | , 20            |  |
| 6   | f the tax year entered in line 5 is for less than 12 m  | onthe char   | k reason Initial ro  | turn Einel return                      |                 |  |
|   | Change in accounting period   |  |  | oc CATHERDIC THE                       |                 |  |
| 7 5   |   |  | INCURRED DIFFICULTI  |  |                 |  |
| _   |   |  | COUNTING INFORMATION   |  |                 |  |
| _   |   |  | ND ACCURATE TAX RET  |  |                 |  |
|   |   |  | REQUESTS ADDITIONAL  |  |                 |  |
|   | f this application is for Form 990-BL, 990, J   | JU-1, 7120   | , or oood, enter the tent  | lative tax, less ally                  |                 |  |
| -   | nonrefundable credits. See instructions   |  |  | 8a \$                                  |                 |  |
|   | f this application is for Form 990-PF, 990-T,   |  |  | [2522]                                 |                 |  |
|   | estimated tax payments made Include any pri   | or year o  | verpayment allowed as  | · F-1.                                 |                 |  |
| _   | amount paid previously with Form 8868   |  | and with this form of require  | 8b\$                                   |                 |  |
|   | Balance Due. Subtract line 8b from line 8a Include  |  | ent with this form, if requir  | 1 1                                    |                 |  |
|   | Electronic Federal Tax Payment System) See instru   |  | et be completed for D  | art II only                            |                 |  |
| ( <u>                                    </u> | Signature and Verifica  |  |  |  | adaa asa kaa    |  |
|   | penalties of perjury, I declare that I have examined this form,<br>, correct, and complete, and that I am authonzed to prepare this for | •  | ompanying schedules and statem   | nents, and to the best of my knowle    | age and belief, |  |
|   |   |  | 0.4  | _                                      | <b>.</b> .      |  |
| C   |   |  | Tulo N CUA   | Data N                                 | 31-12           |  |

Form 8868 (Rev 1-2012)