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

OMB No. 1545-0052

2011

Department of the Treasury Internal Revenue Service

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

	indar year 2011, or tax year beginning		, and ending		
-	oundation Rose Family Charitable	Foundation	A	Employer identification number 73-1519254	mber
umber ar	nd street (or P O box number if mail is not delivered	o street address)	Room/suite B	Telephone number (see the	instructions)
3728 Lity or tow	S Elm Pl PMB 520	81-1-	710 2242	(918) 629-44	74
	en Arrow		74011 C	If exemption application is	pending, check here 🕨 🗌
Che	ck all that apply Initial return	Initial Return of a form	mer public charity D	1 Foreign organizations, che	ck here ►
	X Address change	Name change		2 Foreign organizations mee	ting the 85% test, check
i Ç	neck type of organization: X Section	501(c)(3) exempt private for		here and attach computation	on ▶ []
	Section 4947(a)(1) nonexempt charitate r market value of all assets at end of year J	Accounting method: X C	orivate foundation E	If private foundation status under section 507(b)(1)(A)	
(fr	om Part II, column (c), line 16)	Other (specify)	F	If the foundation is in a 60	
Part I	256, 625. (P. Analysis of Revenue and	art I, column (d) must be on		under section 507(b)(1)(B)	, check here
ait i	Expenses (The total of amounts in columns (b), (c), and (d) may not nec sarily equal the amounts in column (a (see instructions).))	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	1 Contributions, gifts, grants, etc, received (att				
	2 Ck ► if the foundn is not req to att Sci 3 Interest on savings and temporary			 	- had 1
	cash investments		139.		
	4 Dividends and interest from securities		717.	·	4.
	5a Gross rents	· · 	L-6a Stmt	 	
R	or (loss) 6a Net gain/(loss) from sale of assets not on line	10 10,375.	2 Oa Sciiic	 	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
E	b Gross sales price for all assets on line 6a . 84,00				
Ě	7 Capital gain net income (from Part IV, line 2)		10,375.	· · · · · · · · · · · · · · · · · · ·	
NU	8 Net short-term capital gain 9 Income modifications			0.	
Ĕ	10a Gross sales less returns and allowances			 	
			ļ <u> </u>	<u> </u>	
İ	goods sold				<u> </u>
	c Gross profit/(loss) (att sch)			ļ	,
	Other income (attach schedule)	···			<u> </u>
	12 Total. Add lines 1 through 11	18,901.	11,231.	0.	
	13 C sation of officers, directors, trustees,				
	employee salaries and wages				
	1/ face fallers asked to		 	 	
A D M	• rees (attach schedule)	268.		 	268.
, i	c ier prof fees (attach sch)				
D Î P S	17 Interest				
OP TRAT	18 Taxes (attach schedule)(see instrs) Pedera.Income	Tax 12.		ļ	
† †	19 Depreciation (attach sch) and depletion]			
N E	20 Occupancy				
	21 Travel, conferences, and meetings				
A E X D P	22 Printing and publications23 Other expenses (attach schedule)	• • •		-	
E	Office/Posta	ge 482.			482.
Š	24 Total operating and administrative				
Š	expenses. Add lines 13 through 23 Contributions, gifts, grants paid.	762. 14,646.	<u> </u>		750. 14,646.
	26 Total expenses and disbursement			 	14,040.
	Add lines 24 and 25				15,396.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements				
	b Net investment income (if negative, enter -0-		11,231.		
	· •			0.	T
Į	C Adjusted net income (if negative, enter -0-)				

Form	990	PF (2011) Hazel Rose Family Charitable Foun	ndation	73-15	19254 Page 2
747	*	Attached schedules and amounts in the description	Beginning of year	End o	of year
18.	8 4	Balance Sheets Column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	217,364.	192,851.	192,851.
	2				
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4			·-····································	, ,
	1	Less: allowance for doubtful accounts		* ***	
	5				
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see instructions)			
Α	7				
A S E T	١.	Less: allowance for doubtful accounts			
5 F	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
S	10	a Investments – U.S. and state government obligations (attach schedule)			
		b investments — corporate stock (attach schedule)	49,371.	77,377.	63,774.
		c Investments — corporate bonds (attach schedule)	25/5/21	,	03/1/11
		Investments – land, buildings, and equipment: basis		,	.*
		Less: accumulated degregation	, (*) (*) (*) (*)	ix	·
		- (altach schedule)			
		Investments — mortgage loans			
		invesiments - other (attach schedule)		THE COLUMN TO SUCTED AND THE	
	14	Land, buildings, and equipment: basis		AND A PROPERTY.	
	1	Loss: accumulated depreciation (nlack schedule)			
	15	* Other assets (describe >			
	16	Total assets (to be completed by all filers -			
		see the instructions. Also, see page 1, item I)	266,735.	270,228.	256,625.
Ļ		Accounts payable and accrued expenses		···	
A'	ŧ	Grants payable			
5	* '	Deferred revenue			
L	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ,					
<u>i</u> .	22.	Other liabilities (describe)			
E	23	Total Babilities (add lines 17 through 22)			
	*	Foundations that follow SFAS 117, check here			Fax 1
		1			97.3
NFUTN	24	Unrestricted			14
ŦŇ	25	Temporarily restricted		· · · · · · · · · · · · · · · · · · ·	
_A D	26	Permanently restricted	·		
A B A L A		Foundations that do not follow SFAS 117, check here ▶ X and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds			
TA	28	Paid-in or capital surplus, or land, building, and equipment fund			**************************************
С	29	Retained earnings, accumulated income, endowment, or other funds		270,228.	
O E R S	30	Total net assets or fund balances (see instructions)			
•	31	Total liabilities and net assets/fund balances (see instructions)	266,735.	270,228. 270,228.	ALC: N
Dar	<u> </u>	Analysis of Changes in Net Assets or Fund Balance		270,228.	Strategic and the strategic and
					
1	Total	I net assets or fund balances at beginning of year – Part II, colum of year figure reported on prior year's return)	n (a), line 30 (must agre	ee with	065
•					266,735.
		r amount from Part I, line 27a		· · · · · · · · · · · · · · · · · · ·	3,493.
3					
4		lines 1, 2, and 3	• • • • • • • • • • • • • • • • • • • •		270,228.
5		ases not included in line 2 (itemize)		5	
6_	Tota	net assets or fund balances at end of year (line 4 minus line 5) -	- Part II, column (b), line	30 6	270,228.

		osses for Tax on Investmen			73-1519254	Page 3
Par	(a) List and describe	e the kind(s) of property sold (e.g., re ee; or common stock, 200 shares ML	eal estate	(b) How acqu P — Purcha D — Donate	se (month, flay, year):	
	SalesForce.com				08/20/10	01/05/11
	Riverbed Technology	Inc			10/20/10	01/20/11
	F 5 Network Inc		1	>	11/26/10	01/20/11
	Deer & Co		I		01/11/11	03/05/11
	See Columns (a) thru (d)					7-37-1-3-1-1
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gàin or (e) plus (f) if	(loss) inus (g)
a	12,974.		11	,297.		1,677.
b	13,301.		9	,235.	www.	4,066.
c	11,003.			,100.		
<u>d</u>	<u> </u>			, 587.	143 V 4 2 44	103.
e				,086.	,	6,626.
		ng gain in column (h) and owned by			(I), Gains, (Col	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (over column (j), if any		gain minus column (l than 20% or bosbes (m	om celum n-(h))****
a				1		1,677.
b	<u> </u>					4,066.
c			· 		+ c,	-2,097.
d					77 + 1 = 12 × 1	103.
<u>е</u>	See Columns (i) thru (l)			ا این -	Consorts Regar.	6,626
2	Capital gain net income or (net	capital loss) If gain, also If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	1.	2	10,375.
3	Net short-term capital gain or (le	oss) as defined in sections 1222(5) a	and (6):	ľ		n grana is
	<u> </u>	8, column (c) (see instructions). If (loss), enter -0-		3	מלב הו
Där		Section 4940(e) for Reduce	d Tax on Net Investmen	nt Incom	T!	10,373.
<u>, ,,, ,,</u>		foundations subject to the section 4			Pain	\$ 1.50 FU
•			5-0(a) tax on het hivestillent	income.)	**	184 19 29
If sec	ction 4940(d)(2) applies, leave th	ıs part blank.			f	ប្″ រាប់ ដៅដង់
Was	the foundation liable for the secti	ion 4942 tax on the distributable amo	ount of any year in the base p	eriod?	. □ Yes -	ne None
	ė	fy under section 4940(e). Do not con	• • • • • • • • • • • • • • • • • • • •		_	र के बीएश
1	Enter the appropriate amount in	each column for each year; see the	instructions before making a	ny entries.		, ात्र इला हराही, 🐧
	(a) Base period years	(b) Adjusted qualifying distributions	(c) Net value of		(d) Distribution	Table Set 1
	Calendar year (of tax year beginning in)	4 + ₹	noncharitable-use asse	ts ((column (b) divided	by:columna (c)) E
	2010	16,897.	267	,055.		0.0632724
	2009	15,109.	271	,304.	(4)	0 : 05:56904
	2008	16,171.	299	,212.		0 -0.54045
	2007	14,395.	286	,844.		0.050184
	2006	9,492.	212	,654.		0.044636
2	Total of line 1, column (d)				2	0.267827
3	Average distribution ratio for the	5-year base period - divide the tot	al on line 2 by 5, or by the			
	number of years the foundation	has been in existence if less than 5	years		3	0.053565
	F.4 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				_	
4	Enter the net value of noncharit	able-use assets for 2011 from Part)	(, line 5		4	268,367.
4 5	Multiply line 4 by line 3	able-use assets for 2011 from Part >	(, line 5		5	268,367. 14,375.
	•		(, line 5			
5	Multiply line 4 by line 3		(, line 5		5	14,375.
5	Multiply line 4 by line 3 Enter 1% of net investment inco Add lines 5 and 6 Enter qualifying distributions from			. , ,	5 6 7 8	14,375. 112. 14,487. 15,396.

orr,	1990-PF (2011) Hazel Rose Family Charitable Foundation	<u>73 - :</u>	<u> 1519</u>	<u> 254</u>		Page 4
21	Cise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see i	nstruc	tions)	,
1	Exempt operating foundations described in section 4940(d)(2), check here A and enter 'N/A' on line 1.			100		A Park
	Date of integral determination letter: (attach copy of letter if necessary — see instrs)	ļ				
I	b Februs fic foundations that meet the section 4940(e) requirements in Part V,	-	1		·	112.
	obedictions ☆► X and enter 1% of Part I, line 27b		ŀ			
1	c All bibés de l'action de la column (b)		1	公司		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		_			
	foundations 新敬,Others enter -0-)		2			0.
3	_Add.knes-1 and 2	• • •	3			112.
4	Subtile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			0.
	Likichased on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		_5			112.
	- Crodits Payments:	i				
	ar 2841 Assumated tax pmts and 2010 overpayment orbitied to 2011					
		12.				
	c Tax paid with application for extension of time to file (Form 8868)	12.	ľ			
7	Total credits and payments. Add lines 6a through 6d	-	7	******	N. A. WY	112.
, Ω	Enter any penalty for underpayment of estimated tax. Check here		8			
9	Fax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9		<u></u>	0.
	Gverpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10			0.
	Enter the amount of line-10 to be: Credited to 2012 estimated tax	_ ▶	11			
	Statements Regarding Activities					
1	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				接數 Ye	s No
•	participate or intervene in any political campaign?			[1 a	Х
1	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			[1 b	x
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials or distributed by the foundation in connection with the activities.	publi	shed			
	c Did the foundation file Form 1120-POL for this year?			[1 c	Х
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•				تتنظ
	(1) On the foundation > \$ (2) On foundation managers > \$					
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ed on				
٠,	foundation managers			ľ	2	х
2	If 'Yes,' attach a detailed description of the activities.		•• ••		-	
	Cr. Cr.	_1.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, arti- of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	cies			3	Х
4	*Did the foundation have unrelated business gross income of \$1,000 or more during the year?			1	4a	X
	**Yes, has it filed a tax return on Form 990-T for this year?				4b	
	White there a liquidation, termination, dissolution, or substantial contraction during the year?				5	х
	ारी '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 with the state law remain in the governing instrument?	t conf	lict	[6 X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV				7 X	\rightarrow
	a Enter the states to which the foundation reports or with which it is registered (see instructions)					
	b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation				8b X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	or 49	42(j)(5)		
	for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' comp	olete F	Part XI	v	9	<u> </u>
10	· 1.		nes		10	•
BA	and addresses.			For	m 990-P	X F (2011)
_~					· ·	(· · /

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	990-PF (2011) Hazel Rose Family Charitable Foundation 73-153-925	411(05)	Person Sing	ĩ
Par	t VII-A	Staten	THE STATE OF	Ŋ
	within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	ות אפניו יעוטל ליי	NE X	_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	1 500 fg	uan (S)	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 2.	1,3 97.	X.9 (E)	
1.4	Website address		r jed — ,es}—	
14	Located at PO Box 90625 Albuquerque NM ZIP + 4 > 87199	K/12/1/76	\$ E/T 2	
15	Located at ► PO Box 90625 Albuquerque NM ZIP + 4 ► 87199 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	' हो ।		
	and enter the amount of tax-exempt interest received or accrued during the year	ंश्वर संरक्ष	man.	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	11671	es No	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the name of the foreign country			
Par	t MIBS Statements Regarding Activities for Which Form 4720 May Be Required		a⊋हेत XЫ	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		eš No	
1 a	i During the year did the foundation (either directly or indirectly):		3	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No 2		7	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			54
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	5		. ;
	- Trajec		<u>.</u>	
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes			
t	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	oži b	or sur	j
	Organizations relying on a current notice regarding disaster assistance check here		-	<u>د</u>
ď	: Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1:0	J expol:	<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			F. 2
á	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?		e ••	***
	If 'Yes,' list the years * 20, 20, 20		*	H
l	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2 b		
•	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	► 20, 20, 20;			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No	a.		
t	of If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011)	3b	Sec.	
4 2	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	x	
_ t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b	o X	
BAA	Fo	rm 990-i	PF (2011)	

Form 990 Pf (2011) 2 Fazel Rose Family	Charitable For	undation	73-15	19254	Page (
Statements Regarding Activit	ies for Which Forn	n 4720 May Be Rec	uired (continued)		
5a During the year did the foundation pay or incui	any amount to:				
(A Carry or bropaganda, or otherwise attemp	t to influence legislation	(section 4945(e))? .	. Yes X	No 😲	
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registra	tion drive?		. Yes X] No	
(3) Privide of grant to an individual for travel,	study, or other similar p	ourposes?	Yes <u>X</u>	No No	
-(4) Provide a grant to an organization other the	4940(d)(2)? (see instru	ctions)	Yes X] No	
(5)- Provide for any-purpose other than religious	us, charitable, scientific, n of cruelty to children o	literary, or or animals?	Yes 🗓] No	
b K-any-answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53,4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception disaster assistance	ons	. 5t	
agamzations elying on a current notice regar	ding disaster assistance	e check here	- □		
c if the answer is Yes' to question 5a(4), does to tax because it maintained expenditure respons	ne foundation claim exe	mption from the	Yes] No	
If Yes, attach the statement required by Regu	lations section 53.4945	-5(d).			
6 per le	•• •• ••• • • • • • • • • • • • • • • •] No	
one in the year, pay premi	ums, directly or indirectl	y, on a personal benefit	contract?	6b	X
7 Ling the fax year, was the found	ation a party to a prohib	oited tax shelter transact	tion? Yes X	l No	
oundation receive any proceed	is or have any net incor	ne attributable to the tra	insaction?	7 b	
nation About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	Employee	s,
onitacions					
1 directors, trustees, foundation				Т	
Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Expension	se account, lowances
Diane Love Karnuth			compensation	 	
3721 PMB 520	President				
Broken A 200 OK 74011	1.00	0.	0.		0.
Glenda L Durano P.O. 10 10 10 10 10 10 10 10 10 10 10 10 10	Sec/Treasurer		, ,	1.	-
Albane	1.00	0.	0.		0.
				}	
		,			
				}	•
				<u></u>	
2 Compensation of five highest-paid employee					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expens other all	se account, lowances
None			compensation		
				, ,	
0				 	
]	
0				 -	
0					
0				 	
Total number of other employees paid over \$50,000	L			ļ	None
BAA	TEEA0306 1	2/05/11		Form 99	None 0-PF (2011)

Form 990-PF (2011) Hazel Rose Family Charitable Foundation Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employee and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE. Fall INA (c) Compensation (a) Name and address of each person paid more than \$50,000 (b) Type of service None 4. S. 18. 0600 W field much tail र (क्षुपुर्विक्य क्षुपुर्व io detailed a coal. 16:5 to congressionistication rious - MAR & SAITE deprined head for considered activities te religionism as a friliama talest. PARTIE BE BONC NET SODE-WSB 25561. a in investment retu Distributable Arres A PUBLIC, "MOZIC 6. 2a 3 as an investment . a . UL WI (E) WHOTO I Total number of others receiving over \$50,000 for professional services Part X-A Summary of Direct Charitable Activities THOTHS HIDER DISPLE " " " " ONE (185 OF B) O'. List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses - 54 (頭のがつ) しゃともが基る <u> अस्त र इंग्लिक वर्ग स्वरूप र वर्ग</u> 3 DEC 11 BUTTERM A S <u>ा है कि शेरिकाम है</u> Chudshall in Bld Qualifying distribe ... à. Tuch with a fit 1.7 Part & Summary of Program-Related Investments (see instructions) 1. 一九 滑下地流 Amount Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Total. Add lines 1 through 3	
ВАА	Form 990-PF (2011)

All other program-related investments. See instructions.

Form 999.PF (2011), Hazel Rose Family Charitable Foundation 73-1519254 F Municipal Investment Return (All domestic foundations must complete this part. Foreign foundations, see Instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:	16.00	
a Average monthly fair market value of securities	1 a	71,968.
b Average of monthly cash balances	1b	200,486.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add imes 1a, b, and c)	1 d	<u>272,454.</u>
e`Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract Time 2 from line 1d	3	272,454.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3	i	
(for greater amount, see instructions)	4	4,087.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	268,367.
6 Minimum investment return. Enter 5% of line 5	6	13,418.
Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	atıng fou	ndations
and certain foreign organizations check here ► and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	13,418.
2a Tax on investment income for 2011 from Part VI, line 5 2a 112.	13 % 3 10 % 3.5	
b ncome tax for 2011. (This does not include the tax from Part VI.) 2b		
c'Add times 2a and 2b	2 c	112.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	13,306.
4 Reconcernes of amounts treated as qualifying distributions	4	
5 Add hates 3 and 4	5	13,306.
6 Déduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	13,306.
		13/300.
Qualifying Distributions (see Instructions)		
1 Amounts and (maked as administrative auropea) to accomplish about the state of th		
Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	15,396.
b Program-related investments – total from Part IX-B	1 b	
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 lest (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	15,396.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	1	
	5	112.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	15,284.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years.	e foundation	nc

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Form 990-PF (2011)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				13,306.
2 Undistributed income, if any, as of the end of 2011:			or was the	
a Enter amount for 2010 only		·	المستنف المستعدد وحدد	
b Total for prior years. 20 , 20, 20				
3 Excess distributions carryover, if any, to 2011:				7 (4)
a From 2006		,		
b From 2007	1 '			وصعا والشر
c From 2008 . 1,318.	1			£(0)
d From 2009	7, **	*1.1	0	
	1			
e From 2010 . 3,548.				
f Total of lines 3a through e	6,613.			A STATE OF THE STA
4 Qualifying distributions for 2011 from Part		,	78 F. 17	
XII, line 4 [.] ► \$15,396.		ا ا		
a Applied to 2010, but not more than line 2a.			0.	
b Applied to undistributed income of prior years] V			
(Election required — see instructions)	,	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	,		
d Applied to 2011 distributable amount			19	13,306.
e Remaining amount distributed out of corpus.	2,090.		A FARE	
5 Excess distributions carryover applied to 2011	0.		100	0.
(If an amount appears in column (d), the		·		
same amount must be shown in column (a))		;		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	:		Carlot Control
6 Enter the net total of each column as indicated below:		`	U.S.	
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	8,703.	- ,		
	5,703.			
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistribut-	1987	U.		Alba mas American de la companya del companya de la companya del companya de la c
ed income for which a notice of deficiency	建 /			3
has been issued, or on which the section				
4942(a) tax has been previously assessed	Allery and			Mariana de S Mariana de S Mariana de S
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions	and the second s	<u>0.</u>	1	
e Undistributed income for 2010. Subtract line 4a from				
line 2a. Taxable amount — see instructions	NY TO		0.	
f Undistributed income for 2011. Subtract lines				
4d and 5 from line 1. This amount must be			1	
distributed in 2012	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	İ		,	
(see instructions)			, , ,	
8 Excess distributions carryover from 2006 not		-	1	أ يه يَوْ
applied on line 5 or line 7 (see instructions) .	0.	-	· ·	Î
9 Excess distributions carryover to 2012.		-		y-
Subtract lines 7 and 8 from line 6a	8,703.	,	,	,
10 Analysis of line 9:		0		
a Excess from 2007 193.			·	ļ, <u>.</u>
b Excess from 2008 . 1,318.				,
1/310.	 	; · .		,
1/331.	'			
	:			-
e Excess from 2011 2,090.	l	·		

m 999 PF (2011) Maxel Rose Famil				73-1519254	
Private Operating Foundat					N/A
1 a If the foundation has received a ruling or do is effective for 2011, enter the date of the r	uling			···· <u> </u>	4040()(5)
b Check box to indicate whether the foundation	on is a private ope	rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
b 85% of the 2a					
e Quality and skinbutions from Part XII, line 4 year listed					
d Amounts released to line 2e not used directly for active sortalics of exempts activities					
e Quality no distributions made directly for active conduct of exempt activities. Subtract line 2d from ine 2c.					
3 Complete 3a, b, or c for the alternative test relied apon:		:			
a 'Assets' alternative (65) - enter:					
(1) Value of all assets	 	ļ			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			ļ		
b Endowment alternative test — enter 2/3 of minimum investment return shown in Part X, tine 6-for each year listed					
c Support alternative test - enter:					
investment income (interest, dividends, rents, payments on Section 512(a)(5)), or royalties)					
(2) Saperat Permeneral public and 5 or to provided (2) Saperat Permeneral public and 5 or to provided (2) (3) (8) (iii)					
(3) Parees amount of support from					
(4) Closs investment income				,	
Stop ementary Information	(Complete this e year — see ir	part only if the structions.)	organization h	nad \$5,000 or mor	e in
1 Normalist Regarding Foundation Manag a tist any managers of the foundation who helds of the fact that the foundation who helds of the fact that the fact t	ers: ave contributed mo contributed more	ore than 2% of the to than \$5,000). (See	otal contributions re section 507(d)(2).)	eceived by the foundati	on before the
b List any managers of the foundation who o rapartnership or other entity) of which the f	wn 10% or more o oundation has a 10	f the stock of a corp)% or greater intere	oration (or an equa st.	illy large portion of the	ownership of
2 Information Regarding Contribution, Gran Check here ☐ If the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d.	nakes contributions	to preselected cha	ritable organizations	s and does not accept inizations under other	unsolicited conditions,
a The name, address, and telephone number	r of the person to v	whom applications s	hould be addressed	l:	
b The form in which applications should be s	ubmitted and infor	mation and materia	s they should includ	de:	
c Any submission deadlines.					
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	ble fields, kinds of i	nstitutions, or other fa	ctors:

Part XV3 Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approx

3 Grants and Contributions Pa	aid During the Yea	r or Approved for Futu	re Payment		Enter gress . 1 to 1
Recipient		If recipient is an individual, show any relationship to any foundation manager or	Foundation	Purpose of great or	Amount
Name and address (home of	r business)	substantial contributor	recipient	Contribution	
a Paid during the year					
Living Proof					•
PO Box 84089					
Houston	TX 77284		501c3	Religious	100.
South Cliff Baptist (Church				, , , , , , , , , , , , , , , , , , , ,
4100 SW Loop 820			ľ	1	
Fort Worth	TX 76109		501c3	Religious :	20 to 600.
Cape NM					16 . 1
PO Box 3203				the mean	٠ د ١
Moriarty	NM 87035		501c3	Educational/religioùs	2 125.
CLASS				2-	
PO Box 36551					
Albuquerque	NM 87176		501c3	Educational/religious	50.
South Cliff Baptist C					
4100 SW Loop 820					,
Fort Worth	TX 76109		501c3	Religious	600.
John Smithwick Minist					, na 12
P.O. Box 1860			İ		,
Catoosa	OK 74015		501c3	Religious	11 (000 fr
Uniting the Way					2,000.
7708 Morris Ripple					<u> </u>
Albuquerque	NM 87122		501c3	 welfare/religious	300·. `
BGR					, , , , , , , , , , , , , , , , , , ,
402 BNA Drive Ste 411					A gas of an annual of a
Nashville	TN 37217		501c3	welfare.religious	2.500 2.
Augustine Christian A					18 574 18 1 30 1 B
6310 E 30th Street	-	•			المحاول والمراج المالية المالية
Tulsa	OK 74114		501c3	Educational/religious	With H 12 000 . 15 4
See Line 3a statement					The Committee of the control of the
•	•				(ine (to.) City.)
	i				8,371
-					AM
	••				an and an an an an an an an an an an an an an
					ومراسية والمسؤو
Total	····			► 3a	14,646.
b Approved for future payment					-
•	•				
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Total					

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Form 990-PF (2011)

nter gr <u>oss</u> a	mounts unless otherwise indicated	Unrelat	ed business income	Exclude	by section 512, 513, or 514	(e)
'n		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
	n service revenue:			code		
				<u> </u>		
	_ 					
			<u> </u>	+		
		<u> </u>				
·				 	·	
T	nd contracts from government agencies			+		
_		<u> </u>		┼──┤		<u> </u>
	rship dues and assessments			14	120	
	n savings and temporary cash investments			14	139.	
	ds and interest from securities	EXPEDITE SECTION		14	716.	7 1 b - \$7 524 68 87 98 88 88 88
	tal income or (loss) from real estate.	安介、沙蒙),此一张	Carrier and Carrier Con	C 7 + 25 8-4	· · · · · · · · · · · · · · · · · · ·	サインストンは、なり、アンスをはない。
	ot-financed property			 		
	I income or (loss) from personal property		· · · · · · · · · · · · · · · · · · ·	 		
	restment income	ļ		1	1 102	
				18	1,123.	
	oss) from sales of assets other than inventory ome or (loss) from special events			18	10,375.	0
	profit or (loss) from sales of inventory			├		
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Form 990-PF (2011) Hazel Rose Family Charitable Foundation 73-1519254 Part Will Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

describe	organization directly ed in section 501(c)	of the Code (othe	age in any of t r than section	he following w 501(c)(3) orga	ith any oth inizations)	ner organization or in section 5	1 27,		Yes	No
-	to political organiza									
(1) Cas	rs from the reporting	g toungation to a r	noncharitable e	exempt organiz	ation of:					
				• • • • • • • • • • • • • • • • • • • •	• •		• • •	1a(1)		<u> </u>
	er assets						•	1a (2)		X
	ansactions									1
	es of assets to a noi				•			1b(1)		<u> </u>
	chases of assets fro				•	· · · ·		1b (2)		<u> </u>
	ital of facilities, equi		ssets	• •				1b (3)		<u> </u>
• •	mbursement arrange		•					1 (4)		<u> </u>
	ns or loan guarante							1b (5)		X
	formance of service:							1b (6)		X
c Sharing	of facilities, equipm	nent, mailing lists,	other assets,	or paid employ	/ees			1c		X
any tran	nswer to any of the adds, other assets, or saction or sharing a	services given by arrangement, show	the reporting f v in column (d	oundation. If the thick the property of the value of the terms of terms of the terms of terms of terms of terms of terms of terms of te	ne foundat he goods,	on received les other assets, o	ss than fair marl or services receiv	ket value in ved.		
(a) Line no.	(b) Amount involved	(c) Name of r	oncharitable exem	ipt organization	(d)	Description of trai	nsfers, transactions,	and sharing arran	gements	
·										
										
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									`.\$	<u>. </u>
									,	
b If 'Yes,'	undation directly or ed in section 501(c) complete the follow	ing schedule.				· · · · · · · · · · · · · · · · · · ·		Yes	ΧN	40
(a) Name of organizat	tion	(b) Type	of organization	n	(0) Description of	relationship		
										
										
										
										
Sign Here	penalties of perjury, I declar and complete Declaration	are that I have examine of preparer (other that	d this return, includ n taxpayer) is base	ling accompanying of on all information	of which pre	sparer has any know	the best of my know eledge Laoss	May the IR this return preparer s (see instru	S discus with the hown be	low
Signa	Print/Type preparer's na	ama .	Preparer's s	signature /	Tri	Date //			res	No
			Preparer s s		1]	Check X	_{if} PTIN		
Paid	Louise M. U		Daus	20,770	<u>mage</u>	05/16/12	self-employed			
Preparer		Umbrage & U		CPA's	_4_		Firm's EIN ►			
Use Only	Firm's address	3420 Consti	tut/ion Av	re NE Ste			ļ			
· · ·	<u></u>	Albuquerque			NM 87	106	Phone no (5	05) 255-9	551	
BAA		-		-				Form 990	-PF (2	(011)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2011

Name of the organization		Employer identification number			
Hazel Rose Family Charitable	Foundation	73-1519254			
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a priva 501(c)(3) taxable private foundation	te foundation			
Check if your organization is covered by the Gei Note. Only a section 501(c)(7), (8), or (10) orga	neral Rule or a Special Rule. Inization can check boxes for both the General Rule and a Spe	ecial Rule. See instructions.			
General Rule X For an organization filing Form 990, 990-EZ contributor. (Complete Parts I and II.)	, or 990-PF that received, during the year, \$5,000 or more (in	money or property) from any one			
Special Rules					
509(a)(1) and 170(b)(1)(A)(vi), and received	orm 990 or 990-EZ that met the 33-1/3% support test of the re I from any one contributor, during the year, a contribution of the VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and	he greater of (1) \$5,000 or			
For a section 501(c)(7), (8), or (10) organizational contributions of more than \$1,000 for unthe prevention of cruelty to children or animal	ation filing Form 990 or 990-EZ that received from any one co ise <i>exclusively</i> for religious, charitable, scientific, literary, or e als Complete Parts I, II, and III.	ntributor, during the year, ducational purposes, or			
contributions for use <i>exclusively</i> for religious lf this box is checked, enter here the total co	ation filing Form 990 or 990-EZ that received from any one co s, charitable, etc, purposes, but these contributions did not tot ontributions that were received during the year for an exclusival inless the General Rule applies to this organization because if	al to more than \$1,000. elv religious, charitable, etc.			
religious, charitable, etc, contributions of \$5	,000 or more during the year	>\$ <u>(6)</u>			
990-PF) but it must answer 'No' on Part IV. line	the General Rule and/or the Special Rules does not file Scher 2, of its Form 990; or check the box on line H of its Form 990 e filing requirements of Schedule B (Form 990, 990-EZ, or 990)-EZ or on Part I, line 2, of its * ~			
BAA For Paperwork Reduction Act Notice, se 990EZ, or 990-PF.	e the Instructions for Form 990, Schedule B (Form 990, 990-EZ, or 990-PF) (2011)			

Schedule	B (Form 990, 990-EZ, or 990-PF) (2011)	Page	1 of 1 of Part 1
Name of org	Rose Family Charitable Foundation		519254
	Contributors (see instructions). Use duplicate copies of Part I if additional sp.		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Nadine N Holloway 3029 Quail Creek Road Oklahoma City OK 73120	\$6, <u>118.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- 434.	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(<u>a)</u> Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page

1 to

Employer identification number

1 of Part II

Name of organization

Hazel Rose Family Charitable Foundation

73-1519254

Partill Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	150 shares of Birkshire Hathaway stock		
		\$11,445.	06/08/11
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
:		\$	

Sales Expense: .

Total Gain (Loss)

Net Gain or Loss From Sale of Assets

2011

Name Employer Identification Number Hazel Rose Family Charitable Foundation 73-1519254 Asset Information: Description of Property: . .. See Part IV Stock sale Schedule for detail How Acquired: . . . Purchased Date Acquired. various Date Sold. . various Name of Buyer: . Sold through broker 84,003. Cost or other basis (do not reduce by depreciation) .. 73,628. Sales Price: . . Sales Expense: ._ Valuation Method: 10,375. Accumulation Depreciation: . Total Gain (Loss) . Description of Property: _ How Acquired: . . . Date Acquired Name of Buver: Date Sold: Cost or other basis (do not reduce by depreciation) . _____ Sales Price: . Valuation Method: . . Sales Expense: Accumulation Depreciation: .._ Total Gain (Loss): . Description of Property: How Acquired. Date Acquired Date Sold: . Name of Buyer: . Sales Price: . Cost or other basis (do not reduce by depreciation) Sales Expense Valuation Method: . .. Accumulation Depreciation: . Total Gain (Loss): Description of Property: . . . __ How Acquired: Date Acquired: Date Sold: ... Name of Buyer. Sales Price Cost or other basis (do not reduce by depreciation) . Sales Expense Valuation Method: Total Gain (Loss): Accumulation Depreciation: Description of Property: . . . How Acquired: Date Acquired: Date Sold. Name of Buyer: ... Sales Price: . Cost or other basis (do not reduce by depreciation) ... Valuation Method: . Sales Expense: . Accumulation Depreciation. Total Gain (Loss). Description of Property. Date Acquired: . ____ How Acquired: . Name of Buyer ... Date Sold: Cost or other basis (do not reduce by depreciation) . Sales Price. Sales Expense: Valuation Method: . Accumulation Depreciation: . . _____ Total Gain (Loss) Description of Property: Date Acquired. ._ How Acquired: . . . Date Sold. Name of Buyer: Sales Price: . Cost or other basis (do not reduce by depreciation) ... Sales Expense. . Valuation Method: Total Gain (Loss): . Accumulation Depreciation: .. Description of Property: Date Acquired: How Acquired: . Date Sold. . Name of Buyer: Sales Price Cost or other basis (do not reduce by depreciation)

Accumulation Depreciation: . .____

Valuation Method:

Hazel Rose CFF form 990-PF Part II line 10b

desc	beginning	end of year	basis	fmv	
 	year		 		_
 BP	7,268		 		
 F5	13,100				
 JKs	7,213	7,213	cost	1,000	
RVBT	9,235				
CRM	11,297				
SPY	1,258	38,906	cost	37,650	
APKT		7,668	cost	3,091	
AGP		7,498	cost	5,908	
BRK B		6,118	cost	11,445	
CTRP		9,975	cost	4,680	
 <u> </u>	49,371	77,378		63,774	

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (a) thru (d)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(month,	(d) Date sold (month, day, year)
Sina Corporation	P	01/01/11	04/18/11
Polypore International Inc	P	01/13/11	06/22/11
BP PLCSpon ADR	P	08/20/10	06/23/11
Polypore International Inc	P	01/13/11	07/18/11
Ancestry.com	P	07/06/11	07/27/11
Equity Option Trades	D	04/08/11	08/05/11

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income **Columns (e) thru (h)**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
11,149. 5,943. 8,373. 6,669. 4,109. 2,469.		9,976. 4,698. 7,268. 4,698. 4,100. 1,346.	1,173. 1,245. 1,105. 1,971. 9. 1,123.
Total		32,086.	6,626.

Form 990-PF, Part IV, Capital Gains and Losses for Tax on Investment Income Columns (i) thru (l)

Complete only for asset by the foundation on 12	(l) Gains (column (h)		
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	gain minus column (k), but not less than -0-) or losses (from column (h))
			1,173. 1,245.
			1,105. 1,971.
			9.
			1,123.

Total _____6,626.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
	contributor	-		
a Paid during the year				
Kirt Karmuth Ministrie	3_			Person or Business X
Broken Arrow OK 744	_	501c3	Educational/religious	1,000.
	01	30103	Boucational/religious	Person or
Therapetics	-			Business X
9433 81st St Ste J	_			
Tulsa OK 741		501c3	Educational/Welfare	500.
Hands Changing Legacies	3_			Person or
13749 S Nyssa Pl	_	-		Business . X
Glenpool OK 740	33	501c3	Welfare/Religious	500.
World Relief	_			Person or
7 East Baltimore Street	;			Business X
Baltimore MD 212	_	501c3	Welfare/religious	500.
Samaritan's Purse				Person or
PO Box 3000	-			Business . X
Boone NC 286	-	501c3	Religious/Welfare	500.
World Vision		30103	Actigious/ Welluic	Person or
PO Box 70359	-			Business X
	_	501c3	Welfare/Religious	496.
Tacoma WA 984	81	50163	wellare/kellglous	Person or
Navigators	-			Business X
PO Box 6000	_		Policions	375.
Colorado Springs CO 809	34	501c3	Religious	Person or
Oasis Network	·-			
PO Box 1924			D-14-4	
Tulsa OK 741	14	501c3	Religious	500.
Metro Ministries				Person or
PO Box 409		- -		Business X
Brooklyn NY 105		501c3	Welfare	1,000.
World Outreach Church		.		Person or
8863 91st Street		.		Business . X
Tulsa OK 741	14	501c3	Religious	500.
Word MAde Flesh		.		Person or
PO Box 70				Business X
Omaha NE 681	01	501c3	Religious/Welfare	500.
Calvary Chapel				Person or
4001 Osuna NE	·-			Business X
Albuquerque NM 871		501c3	Welfare/Religious	250.
Campus Crusade				Person or
PO Box 628222				Business X
		50163	Religious	250.
Orlando FL 328 Heifer Project	02	30103		Person or
PO_Box_6021	-	· - <i></i> -		Business X
Albertiea MN 560	07	501c3	Welfare	500.
Lonnie & Dana Shradel Ministri		30103		Person or
PO_Box_2367	=	· <i></i>		Business . X
Santa Barbara CA 931	-	50163	Reigious	1,000.
Danica Barbara CA 931	201	T 20TC3	1 31000	1,000.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				

Total

8,371.

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Supporting Statement of:

Net Gain or Loss From Sale of Assets/Sales Price-1

Description	Amount
Sale of stock	84,003.
Total	84.003.