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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
The foundation may be able to use a copy of this return to satisfy state reporti

OMB No 1545-0052 2011

		toronae cernee				DO 00.0	to doe a cop, or	tino retain to	sunory state	. , cpc	rang requirements			
F	or ca	lendar year 2011 o	r tax	year begi	nning			, 2011	, and end	ling		, 20		
	Nam	e of foundation									A Employer identific	cation number		
_	MIN	D SCIENCE FOUN	IAGN	TION							74-1384861			
	Num	ber and street (or P O t	oox nu	ımber if mail is	not delive	ered to stre	et address)		Room/si	ute	B Telephone numbe	er (see instructions)		
	117 WEST EL PRADO										(21	0) 821-6094		
	City	or town, state, and ZIP	code					_	4,					
											C If exemption applica	tion is		
	SAN	ANTONIO, TX 7	7821	.2							pending, check here	· · · · · · · · ·		
G		eck all that apply		Initial retur	'n	— Т	Initial return	of a former	nublic cha	rity		•		
_	0,,,	ook all that apply	_	Final returi			Amended re	•	Jubilo olia	····y	D 1 Foreign organizat 2 Foreign organizat			
			\vdash	Address ch		<u> </u>	Name chang				85% test, check h	ere and attach		
_	Cho	eck type of organizat				(0)(3) 0)					computation .			
ï									4		E If private foundation	2 1 1		
· +		Section 4947(a)(1) non		·			ther taxable p				under section 507(b)	(1)(A), check here .		
٠		market value of all a					method C		cruai		F If the foundation is			
		ear (from Part II, col ► \$ 57	(<i>c), 1</i> 8 , 0		(Port I	tner (sp	ecfy) (d) must be or		-		under section 507(b)(1)(B), check here			
	_					COIDITIII	(u) must be or	i Casii Dasis)		· ·		(d) D. h		
L	art	Analysis of Rever total of amounts in co	iue a	ina Expens	i es (The d (d)		Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable		
		may not necessarily e	equal	the amounts		ex	penses per books	income		,	income	purposes		
_	т —	column (a) (see instru	iction.	s))				-				(cash basis only)		
	1	Contributions, gifts, grants, e	tc , rec	eived (attach sch	nedule)		406,349.							
<u>⊘</u> i	2			ion is not requ										
2012	3	Interest on savings and t	empor	rary cash inves	tments		352.		352.			-		
	4	Dividends and interes	st fron	n securities			3	1	3.		······································			
9	5 a	Gross rents												
	b	Net rental income or (loss	s)											
ھ≤		Net gain or (loss) from s	ale of a	assets not on i	line 10									
蒙	b	Gross sales price for all assets on line 6a —]						
のできるでに来る。enigy	7	Capital gain net incon	ne (fr	om Part IV, I	ine 2) .									
IJŤ.	8	Net short-term capital			•									
<u>Z</u>	9	Income modifications												
3	10 a	Gross sales less returns and allowances					-							
3	ь	Less Cost of goods sold					·							
Ó		Gross profit or (loss) (n schedule)										
	11	Other income (attach					41,898.				41,898.	ATCH 1		
	12	Total. Add lines 1 thro					448,602.		355.		41,898.			
	13	Compensation of officers												
	14	Other employee salari					112,112.		750.		·	111,362		
es	15	Pension plans, employ					·					· · · · · ·		
Expens		Legal <u>fees (attach sch</u>			2		9,700.					9,700		
×					Z.		5,450.					5,450		
ē	,	Accounting fees trattal	E	VED	· · } ·		1,200.					1,200		
흝			:5 (att	ach schedul	iti i			-						
itra	17	Interest NOV	0 1	2012	Š .*		8,835.					8,835		
<u>.</u>	18	Taxes affach schedule (s					12,461.					- 0,033		
Ē	19	Depreciation (attach s			en en e		12,401.	 						
ĕ	20	Trave, conferences	FN	1 117	•~•}		11,819.					9,303		
2	21	Travel, conferences, a	ព្រះក្រា	ëetings .	<u> }</u> . ∣									
8	22	Printing and publication					5,191.					5,191		
Operating and Administrative	23	Other expenses (attac					158,204.					158,204		
e le	24	Total operating and a		•			204 050		7.			200 0:5		
ď		Add lines 13 through					324,972.		750.			309,245		
٠,	25	Contributions, gifts, gi	rants	paid		•	110,850.					110,850		
_	26	Total expenses and disburse	ements	Add lines 24	and 25		435,822.		750.		0	420,095		
	27	Subtract line 26 from	line 1	2										
	а	Excess of revenue over expe	enses a	ınd dısburseme	nts		12,780.							
	b	Net investment incon	ne (ıf	negative, en	ter -0-)				0					
	^	Adjusted net income	lif no	aatwa antar	٥,١			l			41,898.			

*ATCH 4 JSA ** ATCH 5

Form **990-PF** (2011)

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Part II	Ralanca Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	f year
I al t ii	Datalice Streets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ing	186,121.	258,080.	258,080
2		cash investments			
3					
	Less allowance for dou	btful accounts ▶	48,236.		
4					
	Less allowance for dou	btful accounts ▶			
5					
6		officers, directors, trustees, and other			
"		' '			
_		tach schedule) (see instructions)			
7		receivable (attach schedule)			
		btful accounts ▶			
		e			
		eferred charges			
		e government obligations (attach schedule)			
b	Investments - corporate	stock (attach schedule)			
c	Investments - corporate	bonds (attach schedule)			
11	Investments - land, buildings and equipment basis				
	Less accumulated deprecia	ation			
12	Investments - mortgage	loans			
13	Investments - other (atta	ach schedule)			
14	Land, buildings, and equipment basis	▶ 437,003.			
	Less accumulated deprecia	► 437,003. 185,572.	262,014.	251,431.	320,000
14.5			202,011.	201,101.	320,000
15		>)			
16		completed by all filers - see the	406 371	E00 E11	£70 000
+		age 1, item I)	496,371.		578,080
17		occrued expenses	9,165.	9,525.	
18		· · · · · · · · · · · · · · · · · · ·			
<u>8</u> 19	Deferred revenue				
≝ 20		ors, trustees, and other disqualified persons			
Liabilities 20 21 22	Mortgages and other no	ites payable (attach schedule)			
- 22	Other liabilities (describe	• ►) <u> </u>			
İ					
23	Total liabilities (add line	s 17 through 22)	9,165.	9,525.	
	Foundations that fol	low SFAS 117, check here ►X			
	and complete lines	24 through 26 and lines 30 and 31.			
S 24	Unrestricted		487,206.	499,986.	
24 25					
<u>a</u>	Permanently restricted				
B 20	•				
Fund Bal		not follow SFAS 117,			
ර් 27		plete lines 27 through 31. ▶ 🔲			
0 27		cipal, or current funds			
Net Assets 30 30 8 8 8	•	land, bldg, and equipment fund			
29	• .	ulated income, endowment, or other funds			
30		I balances (see instructions)	487,206.	499,986.	
ž 31	Total liabilities and	net assets/fund balances (see			
	instructions)	<u></u>	496,371.	509,511.	
Part II	Analysis of Cha	anges in Net Assets or Fund E	Balances		
		alances at beginning of year - Part		nust agree with	
		d on prior year's return)			487,206
2 Ente	r amount from Part I. I	ine 27a		2	12,780
3 Othe	r increases not include				
					499,986
	eases not included in	line 2 (itemize)			
		Rlances at end of year (line 4 minus l	ine 5) - Part II, column (b)		499,986
<u> </u>	o. aosets or Iuliu Da	nances at end of year time 4 minus !	nio oj ir arcin, columni (b),		Form 990-PF (2011)

	nd describe the kind(s) of property solo		(b) How acquired P-Purchase	(c) Date	(d) Date so (mo, day, y
	brick warehouse, or common stock, 20	OU shs MLC Co)	D-Donation	(mo , day, yr)	, , , , , , ,
<u>la</u>					
<u>b</u>					
<u>c</u> d					
<u>e</u>	(9 Depresenting ellered	(g) Cost or other basis	 	(h) Gain or (lo) cc)
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(e) plus (f) min	
a			ļ		
b					
С					
d					
e	<u> </u>		<u> </u>		
Complete only for assets	s showing gain in column (h) and owi			Gains (Col (h) g (k), but not less	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	Losses (from co	
a					·-··
b			ļ		
С					
d			<u> </u>		
е					
Capital gain net income o	r (not conital loca)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2		
Net short-term capital gail	n or (loss) as defined in sections				<u>-</u>
		structions) If (loss), enter -0- in			
5		· · · · · ·	3		
		educed Tax on Net Investment	ncome		
section 4940(d)(2) applies	, leave this part blank the section 4942 tax on the dist	ributable amount of any year in the b		_	Yes X
f section 4940(d)(2) applies Vas the foundation liable for f "Yes," the foundation does	, leave this part blank r the section 4942 tax on the dist not qualify under section 4940(e	ributable amount of any year in the b) Do not complete this part	oase period	d? [Yes X
f section 4940(d)(2) applies Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a)	, leave this part blank r the section 4942 tax on the dist not qualify under section 4940(e nount in each column for each ye	ributable amount of any year in the be) Do not complete this part ar, see the instructions before makin	oase period	d?es(d)	
f section 4940(d)(2) applies Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years	, leave this part blank r the section 4942 tax on the dist not qualify under section 4940(e	ributable amount of any year in the b) Do not complete this part	g any entri	d?	atio
f section 4940(d)(2) applies Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a) Base period years Calendar year (or tax year beginning in)	, leave this part blank r the section 4942 tax on the dist not qualify under section 4940(e nount in each column for each ye (b)	ributable amount of any year in the be) Do not complete this part ar, see the instructions before making (c)	g any entri	es (d) Distribution r	atio
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COHIII	990-PF (2011) MIND SCIENCE FOUNDATION 74 130	1001		age 7
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 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-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0
6	Credits/Payments			
a	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			
	Exempt foreign organizations - tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 6c			
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 8		_	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			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			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the	, 1		
	instructions for definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities	, ,		
С	Did the foundation file Form 1120-POL for this year?	1 c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		:	
	(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 imposed			
Ū	on foundation managers ▶\$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	Ī
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	ΨY	, 1	1	
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	8ь	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	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
10	and addresses	10		Х
			n.PF	(2011

b 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

b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

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?

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

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

Form **990-PF** (2011)

N/A

N/A

2b

3 b

2 Compensation of five highest-paid employees "NONE."	(other than thos	e included on lin	e 1 - see instructi	ons). If none, ente
(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 compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.			· · · · · · · · · · · · · · · · · · ·	▶ NONE

2

3 NONE

All other program-related investments. See instructions

Total. Add lines 1 through 3.

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions)	ign foundations	,
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	
b	Average of monthly cash balances	1 b	276,363.
С	Fair market value of all other assets (see instructions)	1c	
d		1d	276,363.
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		3	276,363.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
		4	276,363.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	
6	Minimum investment return. Enter 5% of line 5	6	
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► X and do not complete this	part)	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2011 from Part VI, line 5		
b		1	
С	Add lines 2a and 2b	1 2c	
3	Distributable amount before adjustments Subtract line 2c from line 1		
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	_	
6		6	
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)	
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	
·	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	420,095.
b		1b	120,000
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1.5	
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3 b	<u></u>
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	420,095.
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)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	420,095.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	Iculating whether	er the foundation

Form **990-PF** (2011)

	n 990-PF (2011)				Page 9
Pa	rt XIII Undistributed Income (see instru	ictions)			····
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				
2	Undistributed income, if any, as of the end of 2011				
а	Enter amount for 2010 only				
	Total for prior years 20 09 ,20 08 ,20 07				
	Excess distributions carryover, if any, to 2011				
	From 2006				
	From 2007				
	From 2008				
d	From 2009				
	From 2010				
	Total of lines 3a through e				
4	Qualifying distributions for 2011 from Part XII,				
	line 4 ▶ \$:		
а	Applied to 2010, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
	Applied to 2011 distributable amount			·-····································	
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2011				
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				
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				
٠	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)			· ·	
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	()		
10	Analysis of line 9				
а	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
	Excess from 2010		1		
	Excess from 2011				
					Form 990-PF (2011)

MIND	SCIENCE	FOUNDATION

Pa	rt XIV Private Oper	ating Foundations (see instructions and	Part VII-A, question	9)	
1 a	If the foundation has				ting	
h	foundation, and the ruling Check box to indicate wh				X 4942(J)(3) or 4942(J)(5)
		Tax year	private operating rounds	Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	I or the minimum investment return from Part X for each					
	year listed	0.	0.	0.	0.	0.
b	85% of line 2a	0.	0.	0.	0.	0.
С	Qualifying distributions from Part XII, line 4 for each year listed	420,095.	396,499.	360,519.	800,753.	1,977,866.
d	Amounts included in line 2c not	120,033.	330, 133.	300,313.	000,733.	1,577,000.
	used directly for active conduct of exempt activities	110,850.	79 , 500.		ļ	190,350.
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line			2.0		4 505 516
2	2d from line 2c	309,245.	316,999.	360,519.	800,753.	1,787,516.
•	alternative test relied upon					
а	"Assets" alternative test - enter	578,080.	554,357.	527,945.	413,909.	2,074,291.
	(1) Value of all assets(2) Value of assets qualifying		300,000		,	
	under section 4942(j)(3)(B)(i)	578,080.	554,357.	527,945.	413,909.	2,074,291.
þ	"Endowment" afternative test- enter 2/3 of minimum invest-			•		
	ment return shown in Part X,					
	line 6 for each year listed	,	. ,,			
С	"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					
	(j)(3)(B)(si)					
	port from an exempt organization					
	(4) Gross investment income					
Pa				only if the founda	tion had \$5,000 c	or more in assets
		luring the year - see				
ı а	Information Regarding List any managers of			than 2% of the total	contributions receive	d by the foundation
_	before the close of any					a by the realization
	N/A					
b	List any managers of					large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	interest	
	N/A					
2	Information Regarding	Contribution, Grant	. Gift. Loan, Scholarshi	ip. etc Programs:		
	Check here ► X if t	-			able organizations an	d does not accept
	unsolicited requests for	or funds If the founda	ation makes gifts, grat	nts, etc (see instruction	ons) to individuals or	organizations under
	other conditions, comp					
а	The name, address, a	nd telephone number	of the person to whom	applications should be	addressed	
h	The form in which appl	ications should be sub	mutted and information	n and materials they s	should include	
	THE TOTAL III WINCH APPI	locations should be sut	zinktou aliu ililotiliatio	n and materials they s	moduce	
С	Any submission deadli	nes				
	Any contribute as 1	mutations as sured-	auch en hu	abiool orace at any	do fields lands of :-	estitutions or other
a	Any restrictions or lii factors	mitations on awards,	such as by geogra	pilicai areas, charitat	DIE NEIUS, KINOS OT IN	SULUTIONS, OF DINEF

Page **10**

			 	
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 h	-uture Payment	<u></u>
Recipient	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	35/11/152/15/1	
a Paid during the year				
ATTACHMENT 9		•		
			-	
	İ			
		ı		
Total			▶ 3a	110,850.
b Approved for future payment				
		1		
Total			▶ 3b	
				

Part XVI-	A Analysis of Income-Produ	icing Acti	vities			
	amounts unless otherwise indicated	1	ated business income	Excluded by	y section 512, 513, or 514	(e)
J	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
-	ATTACHMENT 10					3,587.
				·		3,007.
f						
-	and contracts from government agencies					36,021.
	ship dues and assessments			14	352.	30,021.
	n savings and temporary cash investments			03	332.	
	ds and interest from securities			1 03	J.	
	al income or (loss) from real estate					
	-financed property					
	debt-financed property			+	,	
	l income or (loss) from personal property			+		
	vestment income					
•	oss) from sales of assets other than inventory	-				-
9 Net inco	me or (loss) from special events			 		
10 Gross pr	rofit or (loss) from sales of inventory					
	venue a				2 200	
b OTH	ER INCOME	<u></u>		14	2,290.	
с				_		
d				ļ		
е				_	0.645	20.000
	Add columns (b), (d), and (e)				2,645.	39,608.
	dd line 12, columns (b), (d), and (e)				13	42,253.
	neet in line 13 instructions to verify calc			- 15		
Part XVI-	B Relationship of Activities	s to the Ac	complishment of Ex	xempt Purp	oses	
Line No	Explain below how each activit	ty for whic	h income is reported	ın column (e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation	on's exemp	ot purposes (other than	by providing	g funds for such purpose	s) (See instructions)
1A	THE FOUNDATION SPONSO	RS LECT	URES, WORKSHOPS,	, AND PRO	DUCT	
	SALES IN ORDER TO EDU					
	RESEARCH ON THE BRAIN	AND TH	E HUMAN MIND ANI	D ITS POT	CENTIAL.	
	INFORMATION THUS PRO	VIDED T	O PARTICIPANTS A	AND THE C	SENERAL	
	PUBLIC IS CONSIDERED					
····	LIVES, WHICH IS THE G	OAL OF	THE FOUNDATION.	MANAGEN	MENT	
	CONSIDERS THE COLLECT					
	BE MINIMAL CONSIDERAT	ION IN	RELATION TO THE	VALUABLE	3	
	INFORMATION RECEIVED.		· · · · · · · · · · · · · · · · · · ·			
2	THE SOLICITATION AND		ION OF DUES FROM	M MEMBERS	<u> </u>	
	ATTEMPTS TO REINFORCE					······································
	PRIMARY PURPOSE OF TH					
	ITS SUCCESS.					
			······································			
						
				·		
						-
					14	
					·-·	- ·
					,,,	
	I					

JSA 1E1492 1 000

Form 990-PF (2011)

Form 99	0-PF (2	, 2011)	MIND SCI	ENCE FOUNDATION			74-138	4861	Pa	age 13
Part 2		Exempt Organ	nizations	nsfers To and Transa			<u></u> -	chari	table	;
in o	sect	ion 501(c) of the Co zations?	ode (other than s	engage in any of the follo- section 501(c)(3) organiza	tions) or in	section 527, re			Yes	No
			-	a noncharitable exempt or				10/1		х
								1a(1) 1a(2)		X
		ransactions						14(2)		
			ncharitable exen	npt organization				1b(1)		x
				ble exempt organization				1b(2)		Х
				assets				1b(3)		Х
								1b(4)		Х
(5	5) Loa	ans or loan guarantee	es					1b(5)		X
(€	i) Per	formance of service	es or membersh	ip or fundraising solicitation	s			1b(6)		X
				s, other assets, or paid em				1c		X
		•		s," complete the following	•		•			
		-		ces given by the reporting						
			· · · · · · · · · · · · · · · · · · ·	ement, show in column (
(a) Line	no	(b) Amount involved	(c) Name of ne	oncharitable exempt organization	N/A	escription of transfe	rs, transactions, and sha	nng arra	ngeme	nts
		N/A			N/A					
						····				
,			<u> </u>	-						
_							_			
							,			
							· ·			
										
	<u> </u>		ļ							
d	escrib) of the Code (ot	iliated with, or related to, her than section 501(c)(3)			organizations	Y	es X] No
		(a) Name of organization	n	(b) Type of organization	n	(c) Description of relation	ship		
	Llador	position of popular I dealer	are that I have examin	ed this return, including accompanyi	na sebadulas as	nd statements and to	the best of my knowled	na and t	aliaf it	is tole
Sign	correc	t, and complete Declaration of	f preparer (other than ta	xpayer) is based on all information of w	hich preparer ha	s any knowledge	the best of thy knowled	ge and i	Jener, It	is true,
Here) (July on	1 XWN	111/15/12	- D 17	xec. Di	May the IR with the p	S discus		return below
ricic	Sign	ature of officer or trustee		Date	Title	<u>,</u>	(see instruction		7 6	No
							(3 3 3 3 3 3 3 3			
Dv:4		Print/Type preparer's	name	Preparer's signature,		Date	ICHECKI HII	PTIN		
Paid		STEWART GOODS	ON	Stawast Hoods		11/05/2	012 self-employed	P000	8446	<u> </u>
Prepa			RNST & YOUNG				Firm's EIN ▶ 34-6	5655	96	
Use C	nly	Firm's address ▶ P.	O. BOX 2938	3						

SAN ANTONIO, TX

78299-2938 Phone no 210-228-9696

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
MIND SCIENCE FOUND	ATION	74 1204061
Organization type (check o	nno)	74-1384861
Organization type (check o	me)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private	vate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private	foundation
	501(c)(3) taxable private foundation	
instructions General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$	\$5 000 or more (in money or
	ny one contributor Complete Parts I and II	,c,ccc ci more (iii meric) cr
Special Rules		
under sections 50	I(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % supplies $I(c)(3)$ organization filing Form 990 or 990-EZ that met the 33 1/3 % supplies $I(c)(3)$ and $I(c)(3)$ organization filing $I(c)(3)$ organization fills $I(c)(3)$ orga	uring the year, a contribution of
during the year, t	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received otal contributions of more than \$1,000 for use exclusively for religious, irposes, or the prevention of cruelty to children or animals. Complete Pa	charitable, scientific, literary,
during the year, of not total to more year for an exclus applies to this org	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receives contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, than \$1,000. If this box is checked, enter here the total contributions the cively religious, charitable, etc., purpose. Do not complete any of the paraganization because it received nonexclusively religious, charitable, etc.	but these contributions did hat were received during the rts unless the General Rule , contributions of \$5,000 or
Caution. An organization th 990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules does not answer "No" on Part IV, line 2, of its Form 990, or check the box of 90-PF, to certify that it does not meet the filing requirements of Schedule	ot file Schedule B (Form 990, on line H of its Form 990-EZ or on
For Paperwork Reduction Act No	tuce, see the Instructions for Form 990, 990-EZ, or 990-PF.	chedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization MIND SCIENCE FOUNDATION

Employer identification number 74-1384861

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	TOM SLICK MEMORIAL TRUST C/O FROST NATIONAL BANK, P.O. BOX 1600 SAN ANTONIO, TX 78296	\$405,349.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(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) No.	(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) No.	(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) No.	(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) No.	(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)

Name of organization MIND SCIENCE FOUNDATION

Employer identification number

74-1384861

Noncash Property (see instructions). Use duplicate copies	s of Part II if additional space is ne	eded
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
	(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) (b) Description of noncash property given	Description of noncash property given Column

Employer identification number

74-1384861

t	Exclusively religious, charitable, etc., that total more than \$1,000 for the year organizations completing Part III, econtributions of \$1,000 or less for the	ear. Complete colurenter the total of exc	mns (a) through (e <i>lusively</i> religious, c) and the following line entry. charitable, etc.,
	Use duplicate copies of Part III if addition			
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
				
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
			-	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee

- OTHER INCOME

PART I

FORM 990PF,

DESCRIPTION MEMBERSHIP INCOME OTHER INCOME WORKSHOP & CONFERENCE REVENUE

REVENUE
AND
EXPENSES
PER BOOKS
36,021.
2,290.
3,587.

41,898.

TOTALS

ADJUSTED

NET

INCOME

36,021.

2,290.
3,587.

41,898.

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^
MFNT
ACH
ATT

FEES	
LEGAL	
PART I -	
990PF,	
FORM	

CHARITABLE PURPOSES	9,700.	9,700.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	.007,6	9,700.
		TOTALS
DESCRIPTION	LEGAL FEES	

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	5,450.	5,450.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	5,450.	5,450.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

OTHER PROFESSIONAL FEES ı PART I FORM 990PF,

OTHER PROFESSIONAL FEES DESCRIPTION

REVENUE AND EXPENSES PER BOOKS

1,200.

1,200.

TOTALS

CHARITABLE PURPOSES

1,200.

1,200.

ATTACHMENT 4 PAGE 22

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60042190

HUNATTA

TAXES	
ı	
Н	
PART	
990PF,	
FORM	

REVENUE	AND	EXPENSES	PER BOOK

EXPENSES	PER BOOKS	8,835.	

8,835.

TOTALS

PAYROLL TAXES

DESCRIPTION

α γ	.000
α	70

8,835.

CHARITABLE PURPOSES

10,951. 25,140. 1,365. 1,634.

1,365.

929. 1,013. 2,871.

25,140.

& AUDITORIUM

AUDIO VISIAL

ADVERTISING

DESCRIPTION

AUTO EXPENSE

BANK CHARGES & OTHER FEES

COMPUTER SOFTWARE

CONTRACT LABOR

PER BOOKS EXPENSES AND

REVENUE

OTHER EXPENSES

PART

990PE

FORM

1,013. 2,871.

814

1,972.

20, 192. 3, 409. 14, 323. 2, 776. 2, 730. 1, 751. 5, 500.

20, 192. 3, 409. 14, 323. 2, 776. 2, 730. 1, 751. 5, 500.

FOOD, BEVERAGE, & CATERING

EQUIPMENT RENTAL

INSURANCE

DUES & SUBSCRIPTIONS

POSTAGE & DELIVERY

DEVELOPMENT

1,972.

814

400. 6,270. 3,551.

511

14,396.

17, 132, 12, 482, 3, 355.

158,204.

TOTALS

158,204.

14,396. 17,132. 12,482. 3,355. 2,737.

JANITORIAL & LANDSCAPING

UTILITIES

REPAIRS & MAINTENANCE

EDUCATIONAL EVENTS

MISCELLANEOUS EXPENSES

TELEPHONE & INTERNET

TRAINING

OFFICE SUPPLIES

SPONSORSHIPS

HONORARIA

GRAPHIC DESIGN

WEBSITE GIFTS

6,270. 3,551.

511

400.

V 11-6.1

60042190

ATTACHMENT 6 PAGE 24

FORM 990-PF, PAGE 1, PART 1, LINE 19 - GENERAL DEPRECIATION	NE 19 - GENERAL DEPRECIAT	TION			ATTACHMENT 7
DESCRIPTION OF PROPERTY	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	
BUILIDNG	319,720.00			319,720.00	
COMPUTER & EQUIPMENT	37,467.00	1,879.00		39,346.00	
OFFICE EQUIPMENT	47,003.00			47,003.00	
OFFICE FURNITURE	30,934.00			30,934.00	
	435,124.00	1,879.00		437,003.00	
ACCUMULATED DEPRECIATION	(173,110.00)	(12,461.70)	•	(185,571.70)	
	262,014.00	(10,582.70)	•	251,431.30	12,461.70

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
TOM SLICK 4200 NORTHSIDE PARKWAY BLDG. 2, SUITE 100 ATLANTA, GA 30327	LIFETIME TRUSTEE 1.00	0	0	0
SUHALI ARASTU 5 DEERHURST SAN ANTONIO, TX 78218	TRUSTEE 2.00	0	0	0
CLAYTON AYNESWORTH 3706 MEADOWBANK DRIVE AUSTIN, TX 78703	TRUSTEE 2.00	0	0	0
BETTY BOSTON 120 WEST OLMOS DRIVE SAN ANTONIO, TX 78212	TRUSTEE 2.00	0	0	0
MARY STINCHCOMB COCKE P.O.BOX 342 AUSTIN, TX 78767	TRUSTEE 2.00	0	0	0

ATTACHMENT 8 (CONT'D)

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 8 (CONT'D)

CONTRIBUTIONS

TITLE AND AVERAGE HOURS PER

WEEK DEVOTED TO POSITION

NAME AND ADDRESS

2.00

6220 CULEBRA ROAD SAN ANTONIO, TX 78236

DAN COOPER, PHD

SECRETARY

EXPENSE ACCT AND OTHER ALLOWANCES 0 0 BENEFIT PLANS TO EMPLOYEE 0 0 COMPENSATION

0

0

GRAND TOTALS

2.00

SAN ANTONIO, TX 78209

RICHARDSON GILL, PHD 7707 BROADWAY, 11A

TREASURER

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

AMOUNT		5,000	2,500	3,350	5,000	5,000	0000'5
PURPOSE OF GRANT OR CONTRIBUTION		CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT		NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT
RECIPIENT NAME AND ADDRESS	Control of the state of the sta	UNIVERSITY OF TEXAS AT AUSTIN DR. JURGEN STREECK - DEPT OF COMM STUDIES 1 UNIVERSITY STATION, A-1105 AUSTIN, TX 78712	NEURAL CORRELATE SOCIETY 3649 WEST MEDINAH COURT ANTHEM, AZ 85086	BOSTON UNIVERSITY PHILOSOPHY DEPARTMENT 745 COMMONMEALTH AVE, ROOM 537A BOSTON, MA 02215	ASSOCIATION FOR THE SCI STUDY OF CONSCIOUSNESS PAULA DROEGE 414 MCCORMICK AVE STATE COLLEGE, PA 16801	TEXAS STATE UNIVERSITY SAN MARCOS OFFICE OF SPONSORED PROGRAMS 601 UNIVERSITY DRIVE SAN MARCOS, TX 78666	THE UNIVERSITY OF TEXAS AT SAN ANTONIO OFFICE OF VP FOR UNIV ADVANCEMENT ONE UTSA CIRCLE SAN ANTONIO, TX 78249

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ATTACHMENT 9 (CONT.D)

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AMOUNT	5, 000	15,000	15,000	15,000.	15,000	5, 000
PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT	NONE EXEMPT
RECIPIENT NAME AND ADDRESS	TRINITY UNIVERSITY DEPT OF PSYCHOLOGY ONE TRINITY PLACE SAN ANTONIO, TX 78212	BAYLOR COLLEGE OF MEDICINE DEPT OF NEUROSCIENCE AND PSYCHOLOGY 1 BAYLOR PLAZA HOUSTON, TX 77030	YALE UNIVERSITY C/O GRANT AND CONTRACT ADMIN 47 COLLEGE ST, STE 203 NEW HAVEN, CT 06510	BRUNEL UNIVERSITY, WEST LONDON CENTRE FOR COGNITION & NEUROIMAGING 3PH UXBRIDGE UB8 UNITED KINGDOM	UNIVERSITY OF OXFPRD, PHARMACHOLOGY DEPT MANSFIELD ROAD 0X1 3 QT OXFORD UNITED KINGDOM	NEW YORK UNIVERSITY DEPT OF PSYCHOLOGY 6 WASHINGTON PLACE, RM 553 NEW YORK, NY 10003

MIND SCIENCE FOUNDATION

74-1384861

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

ATTACHMENT 9 (CONT'D)

CHARTIABLE

AMOUNT

15,000

RESEARCH FINANCE, E/BR 259 330 BROOKLINE AVENUE BOSTON, MA 02131

BETH ISRAEL DEACONESS MEDICAL CENTER

RECIPIENT NAME AND ADDRESS

EXEMPT

NONE

110,850 TOTAL CONTRIBUTIONS PAID

ATTACHMENT 9

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PAGE 31

E REVENUE	
1 SERVICE	
PROGRAM	
OF	
ANALYSIS OF PROGRAM	
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XVI-A	
, PART XV.	
990-PF,	
FORM	

RELATED OR EXEMPT FUNCTION INCOME ATTACHMENT 10 AMOUNT EXCLUSION AMOUNT BUSINESS DESCRIPTION

TOTALS

WORKSHOPS AND SPEAKER SERIES

3,587.

3,587.

FEDERAL FOOTNOTES

FORM 990-PF, PAGE 8, PART X, LINE 4

MIND SCIENCE FOUNDATION IS A PRIVATE OPERATING FOUNDATION WHICH RECEIVES THE MAJORITY OF ITS SUPPORT FROM THE TOM SLICK MEMORIAL TRUST. THE FOUNDATION DOES NOT MAINTAIN ASSETS FOR INVESTMENT SINCE ALL OF ITS ENDOWMENT FUNDS ARE HELD IN THE TOM SLICK MEMORIAL TRUST, WHICH IS AN ENTITY SEPARATE AND APART FROM THE FOUNDATION. MANAGEMENT BELIEVES THAT ALL ASSETS OWNED BY THE FOUNDATION, INCLUDING CASH, ARE REQUIRED TO BE USED FOR THE FOUNDATION'S CURRENT OPERATION IN ORDER TO PAY ADMINISTRATIVE EXPENSES AND OTHER NORMAL EXPENDITURES DIRECTLY RELATED TO THE FOUNDATION'S CHARITABLE AND EDUCATIONAL ACTIVITIES. MANAGEMENT BELIEVES THAT HISTORICAL CASH FLOW STATISTICS SUPPORT THIS CONCLUSION.

Form 8868 (Rev 1-2012)					Page 2
• If you a	re filing for an Additional (Not Automatic) 3-M	onth Exter	sion, complete only Part II	and	check this box	× X
Note. Only	y complete Part II if you have already been gra	inted an au	tomatic 3-month extension	on a	previously filed Form 8868	3
• If you a	re filing for an Automatic 3-Month Extension,	complete o	only Part I (on page 1)			
Part II	Additional (Not Automatic) 3-Month E	xtension o	of Time. Only file the orig	ınal	(no copies needed).	
			Er	nter f	ller's identifying number, see	instructions
	Name of exempt organization or other filer, see in	nstructions			Employer identification num	ber (EIN) or
Type or						
print	MIND SCIENCE FOUNDATION			\mathbf{x}	74-1384861	
	Number, street, and room or suite no. If a P.O. bo	ox, see instru	ctions		Social security number (SSN)
File by the due date for	117 WEST EL PRADO					
filing your return See	City, town or post office, state, and ZIP code. For	r a foreign ad	dress, see instructions			
instructions	SAN ANTONIO, TX 78212					
Enter the	Return code for the return that this application	is for (file a	a separate application for ea	ich re	eturn)	. 04
Application		Return	Application			Return
ls For		Code	Is For			Code
Form 990		01				
Form 990		02	Form 1041-A		**	08
Form 990-		01	Form 4720			09
Form 990-		04	Form 5227			10
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870			12
	not complete Part II if you were not already			sion	on a previously filed For	
	oks are in the care of ▶ MERIAM GOOD					
	one No ▶ 210 821-6094		FAX No ▶			
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	s for a Group Return, enter the organization's fo					is is
	nole group, check this box					
	e names and EINs of all members the extension		g.oop,			
	uest an additional 3-month extension of time u		1	1/1	5 , 20 12	
	calendar year 2011, or other tax year beginn			d en		20
	e tax year entered in line 5 is for less than 12 m				Final return	
וֹדוֹן	Change in accounting period					
7 State	e in detail why you need the extension ADDIT	T LAKOIT	IME IS NEEDED TO CO	OLLE	ECT ALL THE	
	ORMATION NECESSARY TO FILE A COM					
	<u>, , , , , , , , , , , , , , , , , , , </u>				· · · · · · · · · · · · · · · · · · ·	
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8a If the	is application is for Form 990-BL, 990-PF, 99	90-T, 4720	, or 6069, enter the tent	ative	tax, less any	
	efundable credits. See instructions		,		8a \$	0
b If th	is application is for Form 990-PF, 990-T,	4720. or	6069, enter any refund	dable		
	nated tax payments made Include any pr		-		1 1	
	unt paid previously with Form 8868	•	, ,		8b \$	0
	nce Due. Subtract line 8b from line 8a Include	your paym	ent with this form, if require	ed. b		
	ctronic Federal Tax Payment System) See instru			., -	8c \$	0
	Signature and Verific		st he completed for P	art l		····
Hoder penal	bes of perjury, I declare that I have examined this form,		•		<u>-</u>	ne and helvef
	ect, and complete, and that I am authorized to prepare this for	_	umpanying schedules and statem	CIIIS,	and to the best of my knowled	ge and beilei,
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Signature >	alliam Hiller		Title ▶ CPA		Date ▶ 08/13/	2012
	CAROCA CO LOCALA LA CO					(Rev 1-2012)