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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 For calendar year 2011, or tax year beginning , 2011, and ending Employer identification number UROLOGIC CANCER FOUNDATION 74-2518380 828 NORTH CURTISWOOD LANE В Telephone number (see the instructions) 615-343-0234NASHVILLE, TN 37204 If exemption application is pending, check here Initial return Initial Return of a former public charity G Check all that apply: D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, checkers and attach computation Address change Name change Н X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at end of year Accounting method: X Cash (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. 310,012. column (d) must be on cash basis Pantil Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not necessarily equal the amounts in column (a) purposes (cash basis only) (see instructions)) Contributions, gifts, grants, etc, received (att sch) 24,61 If the foundn is not reg to att Sch B Interest on savings and temporary cash investments N/A 4 Dividends and interest from securities 6,767 6,7675a Gross rents b Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a ဇာ E <a>≥</a> E Capital gain net income (from Part IV, line 2) 6 SCANNED APR Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances . . b Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 6.773 384 13 Compensation of officers, directors, trustees, etc. 0 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) SEE ST 1 878 **b** Accounting fees (attach sch). 878 c Other prof fees (attach sch) SEE ST 2 2,078 2,078. OPERAT 17 Interest **究板GEIVED** SEE 18 Taxes (attach schedule)(see instrs) 41 41 Depreciation (attach Ą sch) and depletion Occupancy
Travel, conferences, and meetings **APR** Ö 20 Ŝ Printing and publications 23 Other expenses (attach schedus DEN. 24 Total operating and administrative expenses. Add lines 13 through 23 2,997 997 25 Contributions, gifts, grants paid PART XV 375 17. 375 17. Total expenses and disbursements. 26 Add lines 24 and 25 20,372 997 Subtract line 26 from line 12: a Excess of revenue over expenses <u>11,012</u> and disbursements . 3,776 b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)

Form 990-PF (2011)

1	Total net assets or fund balances at beginning of year— Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	318,890.
2	Enter amount from Part I, line 27a	2	11,012.
3	Other increases not included in line 2 (itemize) . ► SEE STATEMENT 6	3	12,500.
4	Add lines 1, 2, and 3	4	342,402.
5	Decreases not included in line 2 (itemize)  SEE STATEMENT 7	5	1,511.
6	Total net assets or fund balances at end of year (line 4 minus line 5)- Part II, column (b), line 30	6	340,891.

•	(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 ac P - Purel D - Done					(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	19 TEVA PHARMACEUTIO	CALS		D		12/30/10	1/04/11
	40 NUANCE COMMUNICA			<u>D</u>		12/29/11	12/30/11
<del>_</del> _c		<u> </u>		12/23/11	12/30/11		
d	<del></del>						
<u>u</u>							<del></del>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	(loss)
	1,004.			998.			
a						<del></del>	6.
				1,011.			0.
						<del></del> -	<del></del>
d			<del></del>				
е						<del></del>	
		ig gain in column (h) and owned by t				(I) Gains (Coli	
	(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 a	ny		gain minus column ( nan -0-) <b>or</b> Losses (fr	
a	l						6.
b	)						0.
c	;						
d	l						
е	•						
2	Capital gain net income or (net	capital loss) If gain, also If (loss), ente	enter in Part I, line 7 er -0- in Part I, line 7	-	2		6.
3		oss) as defined in sections 1222(5) ai					
2	ın Part I, line 8	8, column (c) (see instructions). If (lo			3		6.
Par	Qualification Under	Section 4940(e) for Reduced	Tax on Net Investme	<u>nt Incon</u>	ie		
	es,' the foundation does not qualit	on 4942 tax on the distributable amo fy under section 4940(e). Do not com each column for each year; see the	plete this part.	<u> </u>	s.	Yes	X No
	(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitable-use as:			<b>(d)</b> Distribution	
	2010		nononamable ase as	sets	(col	umn (b) divided	
	2009	23.501.			(col	umn (b) divided	by column (c))
	2008	23,501.	24	9,315.	(col	umn (b) divided	by column (c)) 0.094262
	2007	9,900.	24 20	9,315. 0,438.	(col	lumn (b) divided	by column (c)) 0.094262 0.049392
					(col	lumn (b) divided	0.094262 0.049392 0.051752
	<del></del>	9,900. 11,450. 17,577.	24 20 22 22	9,315. 0,438. 1,246. 8,167.	(col	lumn (b) divided	by column (c)) 0.094262 0.049392 0.051752 0.077036
	2006	9,900. 11,450.	24 20 22 22	9,315. 0,438. 1,246.	(col	lumn (b) divided	by column (c)) 0.094262 0.049392 0.051752 0.077036
2	2006  Total of line 1, column (d) .	9,900. 11,450. 17,577. 11,475.	24 20 22 22 24	9,315. 0,438. 1,246. 8,167.	2	lumn (b) divided	by column (c)) 0.094262 0.049392 0.051752 0.077036 0.047598
2	2006  Total of line 1, column (d)  Average distribution ratio for the	9,900. 11,450. 17,577.	24 20 22 22 24 	9,315. 0,438. 1,246. 8,167.	-	lumn (b) divided	by column (c)) 0.094262 0.049392 0.051752 0.077036 0.047598 0.320040
3	2006  Total of line 1, column (d) .  Average distribution ratio for the number of years the foundation	9,900. 11,450. 17,577. 11,475.	24 20 22 22 24 	9,315. 0,438. 1,246. 8,167.	2	lumn (b) divided	by column (c))  0.094262 0.049392 0.051752 0.077036 0.047598 0.320040 0.064008
3	2006  Total of line 1, column (d) .  Average distribution ratio for the number of years the foundation	9,900.  11,450.  17,577.  11,475.	24 20 22 22 24 	9,315. 0,438. 1,246. 8,167.	2	lumn (b) divided	by column (c))  0.094262 0.049392 0.051752 0.077036 0.047598  0.320040 0.064008 297,563.
3	2006  Total of line 1, column (d) .  Average distribution ratio for the number of years the foundation  Enter the net value of noncharit	9,900.  11,450.  17,577.  11,475.	24 20 22 22 24 	9,315. 0,438. 1,246. 8,167.	2 3 4	lumn (b) divided	by column (c))  0.094262 0.049392 0.051752 0.077036 0.047598 0.320040 0.064008 297,563.
3 4 5	2006  Total of line 1, column (d)  Average distribution ratio for the number of years the foundation  Enter the net value of noncharit  Multiply line 4 by line 3	9,900.  11,450.  17,577.  11,475.	24 20 22 22 24 	9,315. 0,438. 1,246. 8,167.	2 3 4 5	lumn (b) divided	by column (c))  0.094262 0.049392 0.051752 0.077036 0.047598 0.320040 0.064008 297,563. 19,046. 38.
3 4 5 6 7	2006  Total of line 1, column (d)  Average distribution ratio for the number of years the foundation  Enter the net value of noncharit  Multiply line 4 by line 3  Enter 1% of net investment income	9,900.  11,450.  17,577.  11,475.  25-year base period— divide the total has been in existence if less than 5 years.  able-use assets for 2011 from Part X ome (1% of Part I, line 27b)	24 20 22 22 24 	9,315. 0,438. 1,246. 8,167.	2 3 4 5 6	lumn (b) divided	by column (c)) 0.094262
3 4 5 6 7	2006  Total of line 1, column (d)  Average distribution ratio for the number of years the foundation  Enter the net value of noncharit  Multiply line 4 by line 3  Enter 1% of net investment income add lines 5 and 6  Enter qualifying distributions from	9,900.  11,450.  17,577.  11,475.  25-year base period— divide the total has been in existence if less than 5 years.  able-use assets for 2011 from Part X ome (1% of Part I, line 27b)	24 20 22 22 24	9,315. 0,438. 1,246. 8,167. 1,080.	2 3 4 5 6 7 8		by column (c))  0.094262 0.049392 0.051752 0.077036 0.047598 0.320040 0.064008 297,563. 19,046. 38. 19,084. 17,375.

Form 990-PF (2011) UROLOGIC CANCER FOUNDATION	74-2518380	D==0 A
Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948		Page 4
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	see instructions)	
Date of ruling or determination letter (attach copy of letter if necessary— see instrs)		<u> </u>
b Domestic foundations that meet the section 4940(e) requirements in Part V,	<u> </u>	76
check here and enter 1% of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
		(建立)
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3 Add lines 1 and 2	3	76.
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 incomeSubtract line 4 from line 3. If zero or less, enter -0.	. 5	76.
6 Credits/Payments:	7,77	
a 2011 estimated tax pmts and 2010 overpayment credited to 2011		
b Exempt foreign organizations – tax withheld at source.		
c Tax paid with application for extension of time to file (Form 8868)		
d Backup withholding erroneously withheld 6d		
7 Total credits and payments. Add lines 6a through 6d	7	0.
8 Enter any <b>penalty</b> 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, enteramount owed .	9	76.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter theamount overpaid	► 10	
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax.	<u>▶ 11  </u>	
RankVIII-A Statements Regarding Activities		
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or departicipate or intervene in any political campaign?	lid it	Yes No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		16 X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any mater or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year?	ials published	1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation . > \$ 0. (2) On foundation managers > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax im	0.	
foundation managers . • \$0.  2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2 X
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, of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	articles ges .	3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	}_	4b N/A
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		
<ul> <li>6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:</li> <li>By language in the governing instrument, or</li> </ul>		
• By state legislation that effectively amends the governing instrument so that no mandatory directions with the state law remain in the governing instrument?	s that conflict	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
8a Enter the states to which the foundation reports or with which it is registered (see instructions)  UT	<b>-</b>	
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 SEE STAT		8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942 for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV) if 'Yes,' co	()(3) OI 4342()(3) F	9 X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing and addresses	their names	10 X
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	1 990-PF (2011) UROLOGIC CANCER FOUNDATION  WIFA Statements Regarding Activities (continued)	74-25	18380		Page 5
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions).		1	1	Х
	Did the foundation make a distribution to a donor advised fund over which the foundation or a disquali advisory privileges? If 'Yes,' attach statement (see instructions)	•	1:		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address	applicatio	n? <u>[1</u>	3 X	
14	The books are in care of ► <u>DR. JOSEPH A. SMITH, JR.</u> Located at ► 828 NORTH CURTISWOOD LANE, NASHVILLE, TN  ZIP + 4 ►	e no. ► _6 37204		-0234	
15-	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year.	 ► 15	N	/A	► ∏ N/A
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other a bank, securities, or other financial account in a foreign country?	uthority ove	era 1	Ye 6	s No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the n foreign country ▶	ame of the			
Ŗā	Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Ye	s No
18	a During the year did the foundation (either directly or indirectly):			•	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No	- 1 -	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		X No		
	<ul><li>(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?</li><li>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?</li></ul>		X No X No		
	(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)?	Yes	X No		
	(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 [	X No		
	b If any answer is 'Yes' to 1a(1)-(6), didany 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 Organizations relying on a current notice regarding disaster assistance check here.	)? . ►[		1 b	N/A
	c 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 c	X
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)):				
	a 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?  If 'Yes,' list the years ▶ 20, 20, 20	Yes ·	XNο		
	b Are there any years listed in 2a for which the foundation isnot applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement—see instructions.)			2b	N/A
	c If the provisions of section 4942(a)(2) are being applied toany of the years listed in 2a, list the years h  20, 20, 20	ere.			
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		
	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 approve 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)	d	1.1 1.1 1.4	3b	N/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a	Х
	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			4b	X
RΔ	the tax year beginning in 2011?	<u> </u>	Form		F (2011)

Total number of other employees paid over \$50,000

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Form 990-PF (2011) UROLOGIC CANCER FOUNDATION 7 Part Will Information About Officers, Directors, Trustees, Foundation Managers, Highly I	4-25183 Paid Fmr	80 Page
and Contractors (continued)	àin riil	oloyees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NON	E.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
ONE		
	<u>.</u>	
otal number of others receiving over \$50,000 for professional services.	<b>&gt;</b>	
Part IX-A Summary of Direct Charitable Activities		
st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		<del></del>
2		
		<u> </u>
3	· <b>-</b>	
4	· <b>-</b>	
Range Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2.	Amount
1		
2		
All other program-related investments. See instructions.		
3		
Fotal. Add lines 1 through 3	. ►	
BAA		Form <b>990-PF</b> (20

Form 990-PF (2011) UROLOGIC CANCER FOUNDATION 74-2518380 Partice Minimum 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; a Average monthly fair market value of securities 1 a 180,983. **b** Average of monthly cash balances . . 1b 121,111. c Fair market value of all other assets (see instructions) 1 c d Total (add lines 1a, b, and c). 1d 302,094. e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e 0 (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets. 2 0. 3 Subtract line 2 from line 1d 3 302,094. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) . 4 4,531. Net value of noncharitable-use assetsSubtract line 4 from line 3. Enter here and on Part V, line 4 5 297,563. Minimum investment return Enter 5% of line 5 6 14,878. Part Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 1 Minimum investment return from Part X, line 6 1 14,878. 2a Tax on investment income for 2011 from Part VI, line 5 76. 2b b Income tax for 2011. (This does not include the tax from Part VI) c Add lines 2a and 2b 2 c 76. 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 14,802. 4 Recoveries of amounts treated as qualifying distributions 4 5 5 Add lines 3 and 4 14,802. Deduction from distributable amount (see instructions) 6 Distributable amountas adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 14,802.

### Rank XIII Qualifying Distributions (see instructions)

1 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	17,375.
<b>b</b> Program-related investments – total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
<b>b</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	17,375.
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	
6 Adjusted qualifying distributions Subtract line 5 from line 4	6	17,375.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Form 990-PF (2011)

Rant XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
Distributable amount for 2011 from Part XI, line 7	, ,			14,802.
2 Undistributed income, if any, as of the end of 2011.	, ,			
a Enter amount for 2010 only		, ш	0.	- H
<b>b</b> Total for prior years 20, 20, 20		0.	·	
3 Excess distributions carryover, if any, to 2011:				
a From 2006			, ,	,
<b>b</b> From 2007			·.· 7	
c From 2008 .	= {		<u> </u>	-
d From 2009 .		, ,		,
e From 2010 8,492.		-		
f Total of lines 3a through e	8,492.	9 ]		
4 Qualifying distributions for 2011 from Part	• •			
XII, line 4: ► \$17,375.	٠.	ਦ ਦ		
a Applied to 2010, but not more than line 2a	- #1	· -	0.	
<b>b</b> Applied to undistributed income of prior years	=		C 6.0	i i i
(Élection required – see instructions)		0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
<b>d</b> Applied to 2011 distributable amount	ے. چختے د۔ ﴿ ت	, e , o		14,802.
e Remaining amount distributed out of corpus	2,573.	ن جر فحد	0 - 2 - 2	
5 Excess distributions carryover applied to 2011 .	0.	_ ==		0.
(If an amount appears in column (d), the same amount must be shown in column (a) )	, ,		ə. '	ا لائد
Same amount must be shown in column (a) )	າ	~ · · · · · ·		
6 Enter the net total of each column as	. ⊶	J	=======================================	وت
indicated below:	C=			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5.	11,065.	,	-	
<b>b</b> Prior years' undistributed income. Subtract	, p			, ,
line 4b from line 2b .		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency	, care			, T
has been issued, or on which the section	#.p			- ==
4942(a) tax has been previously assessed	حمت حمت ح	0.	, == == .	
d Subtract line 6c from line 6b. Taxable	* \$			
amount - see instructions		0.	4. ° ° ° °	- °::::::::::::::::::::::::::::::::::::
e Undistributed income for 2010. Subtract line 4a from		,	,	·
line 2a. Taxable amount — see instructions .	,	3 (1	0.	
f Undistributed income for 2011. Subtract lines		=	-30	
4d and 5 from line 1. This amount must be	•	,	İ	
distributed in 2012 .	····			0.
7 Amounts treated as distributions out of				, , , , ,
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)			_	
(see instructions)	0.			
8 Excess distributions carryover from 2006 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012.	44	ĺ		, -
Subtract lines 7 and 8 from line 6a	11,065.			
10 Analysis of line 9:	•		-	باهر د
a Excess from 2007	•		-	- 5
b Excess from 2008				·
c Excess from 2009				e 1.
d Excess from 2010 8, 492.			· ·	
e Excess from 2011 2,573.				

RankXIV Private Operating Foundat		uctions and Par	t VII-A guestion	74-2518380	N/A	
Tallf the foundation has received a ruling or on its effective for 2011, enter the date of the	etermination letter				M/ N	
b Check box to indicate whether the foundat	•	erating foundation d	lescribed in section	4942(j)(3) or	4942())(5)	
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		1	
income from Part I or the minimum investment return from Part X for each year listed	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total	
<b>b</b> 85% of line 2a .						
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed.</li> </ul>						
d Amounts included in line 2c not used directly for active conduct of exempt activities			-	,		
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities.</li> <li>Subtract line 2d from line 2c</li> </ul>						
3 Complete 3a, b, or c for the alternative test relied upon:						
a 'Assets' alternative test – enter:						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i).						
b 'Endowment' alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c 'Support' alternative test – enter:						
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
•					<del>-</del>	
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(8)(iii)						
<ul><li>(3) Largest amount of support from an exempt organization</li></ul>						
(4) Gross investment income.	(0 1 1 11 1		<del> </del>		<u> </u>	
Part XV Supplementary Information assets at any time during the	(Complete this le year — see il	s part only if the nstructions.)	e organization h	ad \$5,000 or mo	re in	
1 Information Regarding Foundation Mana	gers:	<u></u>				
a List any managers of the foundation who close of any tax year (but only if they hav NONE	have contributed m e contributed more	ore than 2% of the than \$5,000). (See	total contributions r e section 507(d)(2).)	eceived by the four	dation before the	
b List any managers of the foundation who				ally large portion of	the ownership of	
a partnership or other entity) of which the NONE	foundation has a	10% or greater intel	rest			
2 Information Regarding Contribution, Gra	nt, Gift, Loan. Sch	olarship, etc. Progr	ams:			
Check here ► X if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	makes contribution:	s to preselected ch	arıtable organızatıon			
a The name, address, and telephone number	er of the person to	whom applications	should be addresse	d:		
<b>b</b> The form in which applications should be	submitted and info	rmation and materi	als they should inclu	ude:		
c Any submission deadlines:						
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charit	able fields, kinds of	institutions, or othe	r factors:	
			<del></del>			

Form 990-PF (2011) UROLOGIC CANCER FOUNDATION 74-2518380 Page 11 Rank Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to any foundation manager or Purpose of grant or contribution status of **Amount** recipient Name and address (home or business) substantial contributor a Paid during the year VANDERBILT UNIVERSITY N/A **EXEMPT** SUPPORT OF UROLOGIC 1,000. 2201 WEST END AVENUE CANCER RESEARCH NASHVILLE, TN 37235 VANDERBILT INGRAM CANCER CENTER N/A EXEMPT DONATION FOR CANCER 2,000. 691 PRESTON BUILDING MEDICAL RESEARCH AND NASHVILLE, TN 37232 **EDUCATION** AMERICAN COLLEGE OF SURGEONS N/A EXEMPT FOR CANCER RESEARCH 100. 633 N SAINT CLAIR STREET CHICAGO, IL 60611 VANDERBILT SURGICAL MISSIONS N/A EXEMPT FOR SURGICAL MISSION 14,275. 1211 MENDICAL CENTER DRIVE WORK IN AFRICA AT NASHVILLE, TN 37232 PANZI HOSPITAL, DEMOCRATIC REPUBLIC OF CONGO

Total			<u>.</u>	► 3a	17,37
Approved for future payment					
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### Part XVI-A Analysis of Income-Producing Activities

nter ares	s amounts unless otherwise indicated.	Uprolate	ed business income	Evaluded by	rection 512 512 or 514	
	ram service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
-			<del></del>	code		
				<del>  -</del> -		
с				<del>  </del>		
d				<del>  </del>		
					-	
f	.,,					
g Fees	and contracts from government agencies		•			
2 Mem	bership dues and assessments					<del>-</del>
3 Interes	st on savings and temporary cash investments					
4 Divid	lends and interest from securities.			14	6,767.	
5 Net r	rental income or (loss) from real estate:		The state of the s	· 景/亚多		
a Debt	-financed property .					
	debt-financed property .					
6 Net re	ental income or (loss) from personal property			<u> </u>		
<b>7</b> Othe	r investment income					
	or (loss) from sales of assets other than inventory			18	6.	
	ncome or (loss) from special events	ļ				···· <u></u> ····
10 Gros	s profit or (loss) from sales of inventory					
11 Othe	r revenue:				<b>司皇帝,从李林</b> 夏	10 1/16 TO THE THE THE THE THE THE THE THE THE THE
		_				
		<del>-</del>		<del>                                     </del>		
						<del> </del>
d						
			<u> </u>	1 1		
e				SANCE PARTY		
12 Subt	total. Add columns (b), (d), and (e)				6,773.	6 772
12 Subt	i. Add line 12, columns (b), (d), and (e)				6,773. 13	6,773.
12 Subt 13 Tota (See work	ii. Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculation				13	6,773.
12 Subt 13 Tota (See work	i. Add line 12, columns (b), (d), and (e)		shment of Exempt	Purpose	13	6,773.
12 Subt 13 Tota (See work	il. Add line 12, columns (b), (d), and (e) .sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			13 s	6,773.  to the structions.)
12 Subt 13 Tota (See work: Parit XV	il. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			13 s	
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12 Subt 13 Tota (See work ParitXXV Line No.	il. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			13 s	
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12 Subt 13 Tota (See work ParitXXV Line No.	il. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompli			13 s	

# Form 990-PF (2011) UROLOGIC CANCER FOUNDATION 74-2518380 Part XXVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	<u></u>					
a Transfers (1) Cash (2) Othe b Other tra (1) Sales (2) Purci	d in section 501(c) o to political organizati s from the reporting in assets insactions: s of assets to a none	of the Code (ot lons? foundation to charitable exer in a noncharita liment, or other	ble exempt organization	ganızatıons) or	organization in section 527,	1a (1) X 1a (2) X 1b (1) X 1b (2) X 1b (3) X 1b (4) X
<b>(5)</b> Loan	ns or Ioan guarantee:	s				1b (5) X
	=		p or fundraising solicitations			1b (6) X
			ts, other assets, or paid emp	lovees		1c X
. 3		····, ···········.	,	,		
the good	ls, other assets, or s	ervices diven	complete the following sched by the reporting foundation. I now in column <b>(d)</b> the value of	f the foundatio	n received less that	n fair market value in
	(b) Amount involved		f noncharitable exempt organization			nsactions, and sharing arrangements
I/A						
					<del></del>	
			· -		<del></del>	
					<del></del>	
2a Is the for describe	undation directly or i	indirectly affiliated the Code (of	ated with, or related to, one of ther than section 501(c)(3)) of	or more tax-ex r in section 52	empt organizations 7?	Yes XNo
	complete the following	•	· · · · · ·			
(a)	Name of organizati	on	(b) Type of organiza	tion	(c) Descr	iption of relationship
N/A			, , , ,		-	
Sign Under p correct,	enalties of perpary, I design and complete Declaration	e that have exam of preparer (other	ined this return, including accompanyir than taxpayer) is based on all informat	g schedules and st on of which prepar	atements, and to the best of the hest of the has any knowledge	May the IRS discuss this return with the preparer shown below
	ture of officer or trustee		Date	Title		(see instructions)?
	Print/Type preparer snar	me	Preparer's signature	)	ate / / Che	I I I I I I I I I I I I I I I I I I I
Paid	STEVEN L. RO	OSS	X fleer 13	L CPA.	1/2/12	employed P00067192
			RKMAN, LLC	5	Firm's El	
reparer	<u> </u>		HAVEZ DR.			
Jse Only	<u> </u>	OUTH JORE			Phone no	。 (801) 254-9781
BAA		20111 0010	, 01 01050		Frione fi	Form <b>990-PF</b> (2011)
, C C						1 OIIII 330-FF (2011)

### 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		
UROLOGIC CANCER FOUNDAT	74-2518380		
Organization type (check one):			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organizatio		
-	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust trea 501(c)(3) taxable private foundation	ited as a private foundation	
Check if your organization is covered <b>Note</b> . Only a section 501(c)(7), (8), or	by the General Rule or a Special Rule. r (10) organization can check boxes for both the General	Rule and a Special Rule See instructions.	
General Rule			
For an organization filing Form 99 contributor. (Complete Parts I and	90, 990-EZ, or 990-PF that received, during the year, \$5,0d II.)	)00 or more (in money or property) from any one	
Special Rules			
509(a)(1) and $170(b)(1)(A)(vi)$ , ar	on filing Form 990 or 990-EZ that met the 33-1/3% support nd received from any one contributor, during the year, a c 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Compli	contribution of the greater of \$5,000 or	
For a section 501(c)(7), (8), or (1) total contributions of more than \$ the prevention of cruelty to childr	0) organization filing Form 990 or 990-EZ that received fr 1,000 for use <i>exclusively</i> for religious, charitable, scientific en or animals. Complete Parts I, II, and III.	om any one contributor, during the year, c, literary, or educational purposes, or	
contributions for use exclusively fulfithis box is checked, enter here	<ol> <li>organization filing Form 990 or 990 EZ that received from religious, charitable, etc, purposes, but these contribut the total contributions that were received during the year the parts unless the General Rule applies to this organization.</li> </ol>	tions did not total to more than \$1,000.  r for arexclusively religious, charitable, etc.	
religious, charitable, etc, contribu	tions of \$5,000 or more during the year	►\$	
990-PF) but it must answer 'No' on P	covered by the General Rule and/or the Special Rules doe art IV, line 2, of its Form 990; or check the box on line H ot meet the filing requirements of Schedule B (Form 990	l of its Form 990-EZ or on Part I, line 2, of its	
BAA For Paperwork Reduction Act 990EZ, or 990-PF.	Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2011	

Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2011)	Page	1	of
Name of organization	Employerid	entifica	ation num

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)	-∠age		of	1	of Part
Name of organization	Employer	r identific	ation nun	nber	
UROLOGIC CANCER FOUNDATION	74-25	51838	30		
Contributors (see instructions). Use duplicate copies of Part I if additional space is needed					

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES DANIELS 6850 CENTRAL PIKE LEBANON, TN 37090	\$10,000.	Person X 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
2	ROGER NEWMAN  1536 OCEAN DR #505A  VERO BEACH, FL 32963	\$10,000.	Person X 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 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 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 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 Payroll Noncash (Complete Part II if there is a noncash contribution)

L to

74-2518380

1 of Part II

Name of organization
UROLOGIC CANCER FOUNDATION

Employer identification number

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

(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
	<u> </u>	
	(b) Description of noncash property given  (b) Description of noncash property given  (b) Description of noncash property given  (b) Description of noncash property given	Description of noncash property given  (c)  FMV (or estimate) (see instructions)  (b)  Description of noncash property given  (c)  FMV (or estimate) (see instructions)  \$  Description of noncash property given  (b)  Description of noncash property given  (c)  FMV (or estimate) (see instructions)  \$  Description of noncash property given  (b)  Description of noncash property given  FMV (or estimate) (see instructions)  FMV (or estimate) (see instructions)

C-1	3. (F		_		•	
Name of organ	3 (Form 990, 990-EZ, or 990-PF) (2011)  nization  IC CANCER FOUNDATION		Page	1 to Employer identif 74-25183		
	Exclusively religious, charitable, e organizations that total more than	tc, individual contributions to s \$1,000 for the year. Complete cols	section 501(c)	(7), (8), or (1	0)	
	For organizations completing Part III, enter contributions of \$1,000 or less for the year. (Use duplicate copies of Part III if additional	total of <i>exclusively</i> religious, charitable, Enter this information once. See instru	etc.	<b>►</b> \$	N/A	
(a)	(b)	(c)		(d)		
No. from Part I	Purpose of gift	Use of gift	Des	cription of how	gift is held	
	N/A					
		45				
	Transferee's name, addres	(e) Transfer of gift ss. and 7IP + 4	Relationshin o	f transferor to t	ransferee	
	Transfero S frame, address	3, 1114 211 1 7		T Wallstell To W	latisteree	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
Tarri						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relati			ntionship of transferor to transferee		
					<del></del>	
(a)	(b)	(c)		(d)		
No. from Part I	Purpose of gift	Use of gift	Des	cription of how	gift is held	
		(e)			· · · · · · · · · · · · · · · · · · ·	
	Transfer of gift Transferee's name, address, and ZIP + 4 Relati			f transferor to t	ransferee	
				<u> </u>		
(a)	(b)	(c)		(d)	····	
No. from Part I	1	Use of gift	Des	scription of how	gift is held	

(e)
Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

2011	FEDE	RAL STAT	<b>TEMENTS</b>		PAGE 1
	UROLO	GIC CANCER I	OUNDATION		74-2518380
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES					
ACCOUNTING FEES	TOTAL	(A) EXPENSES PER BOOKS \$ 878 \$ 878		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES					
INVESTMENT & MANAGEMENT SE	RVICES TOTAL	(A) EXPENSES PER BOOKS \$ 2,078 \$ 2,078		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES					
EXCISE TAX ON INVESTMENT I	NCOME TOTAL	(A) EXPENSES PER BOOKS \$ 41 \$ 41	(B) NET INVESTMENT INCOME  \$ 41. \$ 41.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 4 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE S					
CORPORATE STOCKS CAPITAL INCOME BUILDER FUN	D CLASS	F1	VALUATION METHOD  COST \$ TOTAL \$	BOOK VALUE 110,000. 110,000.	FAIR MARKET VALUE \$ 84,529. \$ 84,529.

2011	FEDERAL	STATEMENTS	5		PAGE 2
	UROLOGIC CA	NCER FOUNDATIO	N		 74-251838
STATEMENT 5 FORM 990-PF, PART II, L INVESTMENTS - CORPO	INE 10C RATE BONDS				
CORPORATE BONDS		VALUATION METHOD	Ī	BOOK VALUE	MARKET ALUE
BOND FUND OF AMERICA	A CLASS F1	COST	\$ L <u>\$</u>	101,000. 101,000.	95,592. 95,592.
STATEMENT 6 FORM 990-PF, PART III, I OTHER INCREASES  OUTSTANDING CHECK AS OUTSTANDING DEPOSITS	Г 12/31/11			TOTAL	\$ 2,000. 10,500. 12,500.

## FORM 990-PF, PART III, LINE 5 OTHER DECREASES

OUTSTANDING DEPOSITS AT 12/31/11
UNSETTLED STOCK SALE AS OF 12/31/11

\$ 500. 1,011. TOTAL \$ 1,511.

### STATEMENT 8 FORM 990-PF, PART VII-A, LINE 8B COPIES OF FORM 990-PF TO STATE OFFICIALS

THE UTAH ATTORNEY GENERAL DOES NOT REQUIRE THAT A COPY OF FORM  $990\mbox{-}PF$  BE FILED WITH THE STATE.