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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2011

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Α	For the 2	<u>2011 calen</u>	dar year, or tax y	ear beginning	5/01	, 2011, and endir	ng 4/.		, 2012		
В	Check if ap	plicable	C					D Employer I	dentification N	umber	
	Addres	ss change		LUTHER KING	S SCHOLARSH	IP FUND		06-61	07846		
	Name	change	PO BOX 130					E Telephone	number		
	Initial	return	NEW LONDON	I, CT 06320							
	Termi	nated									
	\vdash	ded return						G Gross rece	inte S	187,	902
	\vdash	ation pending	F Name and addre	ss of principal officer			H(a) Is this	a group return fo	•	Yes	X No
		ation penang	SAME AS C				li .	affiliates include		Yes	No
	Tay.ever	mpt status	X 501(c)(3)	·—·-	(insert no)	4947(a)(1) or 527	If 'No,'	attach a list (se	e instructions)		
<u>. </u>	Websi			301(6)	(msert no)	4347(4)(1) 01327					
S				Trust Association		11 1/2 / 7		exemption numb		. Ст	
		organization		Trust Association	n Other ►	L Year of Forma	tion 1900	o IVI State	e of legal domi	cite CT	
F		Summar				ter DD MADE	TN 777		2 667767.7	DOUT	
						ivities <u>DR. MART</u>					
Activities & Governance	l					N_DEDICATED_TO					
nan						RCES FOR YOUNG					S
Ver		neck this bo				ENESS OF AND I				_2	
ဗ္ဗ	l			f the governing boo		ons or disposed of me	ore than 2		t assets		14
•ರ				members of the g					4		14
Ë	l			mployed in calenda					5		0
₹	l			stimate if necessar	•	,			6		0
¥	l			nue from Part VIII,		12			7a		0.
Acti	b Ne	et unrelated	d business taxab	e income from For	m 990-T, line 34				7b		0.
							Р	rior Year	Cu	rrent Ye	ar
	8 Co	ntributions	and grants (Par	t VIII, line 1h)				223,220	6.	182,	980.
3	9 Pro	ogram serv	vice revenue (Pa	rt VIII, line 2g)							
Revenue	10 Inv	vestment ir	ncome (Part VIII,	column (A), lines	3, 4, and 7d)			2,76	2.	3,	613.
æ	11 Ot	her revenu	ie (Part VIII, colu	mn (A), lines 5, 6d	, 8c, 9c, 10c, and	l 11e)					
	12 To	tal revenue	e – add lines 8 t	hrough 11 (must ea	jual Part VIII, col	umn (A), line 12)		225,98	8.	186,	593.
	13 Gr	ants and s	imilar amounts p	aid (Part IX, colum	n (A), lines 1-3)			111,500	0.	108,	333.
	14 Be	enefits paid	I to or for member	ers (Part IX, columi	n (A), line 4)						
	15 Sa	laries, othe	er compensation	, employee benefits	(Part IX, colum	n (A), lines 5-10)					
ges.	16a Pro	ofessional	fundraising fees	(Part IX, column (/	A), line 11e)			33,79	5.		
Expenses			_	art IX, column (D)		33,354.	~_	190 NWA	19. A.	¥ 36	73.
М						, , , , , , , , , , , , , , , , , , , ,	-	44 404		11	902
	1/ Ut	her expens	ses (Fait IX, COIL	ımn (A), lines 1.1.a.	Liu, (11-24e)	line 25)		44,480	t		902.
				17 (must equal Pa	- u tr	, iine ∠5))∫		189,77			235.
. •		venue less	s expenses Subt	ract line 18,4rom li	ne ()∠/기3	, A		36,21	1		358.
is q		نانججم املا	(Dank V. Ive. 10)	1	الد مد سند.	.	Reginnin	g of Current Y		nd of Yea	
Assets Balanc			(Part X, line 16)		* 4 3			435,47	. 1		625.
a E			es (Part X, line 2			•	-		0.		0.
<u> </u>				Subtract line 21 fro	m line 20			435,47	1.	<u>523,</u>	625.
		Signatur							-		
Und	ler penalties iplete Decla	s of perjury, I d	ieclare that I have exa	mined this return, including	ng accompanying sche	fules and statements, and to has any knowledge	the best of n	ny knowledge an	nd belief, it is tr	ue, correct	, and
		()	MARGER	10/10		- ,	- 1 2	lo. 1 11	7012		
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76	re		r print name and title	11 CANECE	INCOME	OI DA PIL	<u>n 201</u>	MIHAZIVI	<u> </u>	<u> </u>	
				/ In :		70-1-		···	, PTIN		
		1	preparer's name	1 '	signature	Date	_	Check i	"		
Pa		KATHLEE		•		3/25/1	.3	self-employed	P00093	1556	
	eparer	Firm's name		BEALS & BANKS	, P.C.						
US	e Only	Firm's addre						Firm's EIN			
		<u></u>		ON, CT 06320				Phone no (860) 443-		
				e preparer shown a						es	No
BA	A For Pa	aperwork F	Reduction Act No	tice, see the separ	ate instructions.	TE	EA0113L 08	/18/11	F	orm 990	(2011)

	m 990 (2011) DR. MARTIN LUTHER KING SCHOLARSHIP FUND	06-610784	6 Page 2
Pa	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission. SEE SCHEDULE 0	-	
2	Did the organization undertake any significant program services during the year which were not listed on	the prior	
	Form 990 or 990-EZ?		Yes X No
	If 'Yes,' describe these new services on Schedule O		
3	5,, p, p	ices?	Yes X No
4	If 'Yes,' describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of the section 4947(a)(1) trusts are required to report the amount of the section 4947(a)(1) trusts are required to report the amount of the section 4947(a)(1) trusts are required to report the amount of the section 4947(a)(1) trusts are required to report the amount of the section 4947(a)(1) trusts are required to report the amount of the section 4947(a)(1) trusts are required to report the amount of the section 4947(a)(1) trusts are required to report the section 4947(a)(1) trusts are required to requir	es, as measure	d by expenses
	others, the total expenses, and revenue, if any, for each program service reported	ount or grants a	
4:	a (Code (Cod	venue \$	182,980.)
4	b (Code including grants of \$) (Re	venue \$)
		-	
4	c (Code) (Expenses \$ including grants of \$) (Re	venue \$)
		- 	
		- 	.
			
			
			
			
4	d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$		``
	le Total program service expenses ► 111,333.		
BA			Form 990 (2011)

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	_X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	an December of	X ers moss s
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable	Ç.	•	
ā	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		Х
t	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
C	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	1	
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	-	Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		Х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	-	X
		144		
Č	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	_	Х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
	aDid the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	<u> </u>	X
ı	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	L	L

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		X
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		X
t	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		X
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	٠ ،	*	
ā	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		x
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	28c 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		<u>x</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	Х
ı	b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		<u>x</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		<u>x</u>
BAA	· · · · · · · · · · · · · · · · · · ·	Forn	9 90	(2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance	<u> </u>		age :
Check if Schedule O contains a response to any question in this Part V			
check it scriedule o contains a response to any question in this Part V			_ <u> </u> _
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
	잌		
	2		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b If 'Yes,' enter the name of the foreign country	74		^
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	-		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b	•	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	<u> </u>	1	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	5c		
solicit any contributions that were not tax deductible?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	* */	
7 Organizations that may receive deductible contributions under section 170(c).		b &	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	ļ	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.0		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7c ☀ ∗	31 (6.)	* *
	_	 	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g	ļ.	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a	1	
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b]		
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders 11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	1	İ	
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O		1	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand	┪		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14a	 	_^
	1 1 12	71	ı

Form 990 (2011) DR. MARTIN LUTHER KING SCHOLARSHIP FUND 06-6107846 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year if there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 1 a 14 **b** Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? X 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a members of the governing body? Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? Яa Х X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c 13 Did the organization have a written whistleblower policy? 13 Х 14 Did the organization have a written document retention and destruction policy? 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X 15 a Х b Other officers of key employees of the organization 15_b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16_b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ► NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year SEE SCHEDULE O20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

. Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

order this box is fielded the organization	1	10.010	<u> </u>	((7011 00		later any carron of		
(A) Name and title	(B) Average hours per week	unles	Position (do not check more than one bo unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	(describe hours for related organiza tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W 2/1099 MISC)	from the organization and related organizations
(1) DONETTA HODGE										
TRUSTEE	2	X						0.	0.	0.
(2) ANDREA ACKERMAN	_									
TRUSTEE	2	Х					ļ	0.	0.	0.
(3) KEVIN HENNESSY										
TRUSTEE	2	X						0.	0.	0.
(4) ROBERT HENDERSON										
TRUSTEE	2	X					<u> </u>	0.	0.	0.
(5) ANDREW MAYNARD	_									
TRUSTEE	2	X						0.	0.	0.
(6) MARILYN PERCY	_									
TRUSTEE	2	Х						0.	0.	0.
(7) MICHAEL SHAPIRO							1			
TRUSTEE	2	X						0.	0.	0.
(8) MYLES BRADLEY	_									
TRUSTEE	2	X					<u> </u>	0.	0.	0.
(9) RONALD WILLIAMS	_									
TRUSTEE	2	X					<u> </u>	0.	0.	0.
(10) ULYSSES B. HAMMOND										
PRESIDENT	2			X			L.	0.	0.	0.
(11) JAMES E. MITCHELL	_									
VICE PRESIDENT	2	<u> </u>		X			<u> </u>	0.	0.	0.
(12) MARY-JANE MCLAUGHLIN TREASURER	_ 2			x				0.	0.	0.
(13) KARIN EDWARDS	† -							j	<u> </u>	
RECORDING SEC.	2			x				0.	0.	0.
(14) VERNA SWANN	 									<u> </u>
CORR. SEC.	7 2			Х				0.	0.	0.

Part VII Section A. Officers, Directors, Trust (A) Name and title	(B) Average hours per	(do box offic	not cl , unles	Pos heck ss pe	c) ition more irson directo	e than one is both an tor/trustee)		(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	week (describ e hours for related organi- zations in Sch O)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	relatéd organization: (W-2/1099-MISC)	from the organization and related organizations
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)	<u> </u>									
(23)										
(24)										
(25)										
1b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limite		ose	listed	d ab	oove) wh	► ► o re	0. 0. 0. ceived more than	0	0.
from the organization 0 3 Did the organization list any former officer, director			1		-1-			-11		Yes No
 on line 1a³ If 'Yes,' complete Schedule J for such in 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater to 	ndıvıdu portab	<i>al</i> le co	mpe	ensa	ation	and	l oth	ner compensation		3 X
 such individual Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or services rendered to the organization? 	ompen	satio	on fr	om	any	unre	elate	ed organization or	ındıvıdual	4 X 5 X
Section B. Independent Contractors	•								h #100 000 f	5 A
Complete this table for your five highest compensation from the organization. Report compensation.	nsatior	eper 1 for	the	cale	ntra enda	r yea	ar e	nding with or with	in the organization	
Name and business addres	s							Description	of services	(C) Compensation
			_							
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶		t lim	iited	to t	hose	e list	ted a	above) who receiv	ed more than	

Par	t VIII Statement of Revenue	· · · · · · · · · · · · · · · · · · ·				
	•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
22	1a Federated campaigns 1a				·	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	b Membership dues 1b	·				
μğ	c Fundraising events. 1c	_				
R A	d Related organizations 1 d					
ا ا	e Government grants (contributions)		:			
N S	* ` '					
5覧	f All other contributions, gifts, grants, and similar amounts not included above	100 000				
86		182,980.				
돌	g Noncash contributions included in lns 1a-1f: \$					
	h Total. Add lines 1a-1f		182,980.			
Ž		Business Code				
PROGRAM SERVICE REVENUE	2a					
2	b				-	
ş	c					
E	d					
Σ	e					
8	f All other program service revenue					·
Ž	g Total. Add lines 2a-2f	•			* *	
-					*	<u> </u>
	3 Investment income (including dividends, in other similar amounts)	terest and	3,537.			2 527
			3,331.			3,537.
	4 Income from investment of tax-exempt bon	na proceeas				
	5 Royalties		20 4 77 80 7- 5	4444		
-	(i) Real	(ii) Personal	* * * * * * * * * * * * * * * * * * * *	4 7 4 4 5	>	* * *
- [6a Gross rents.		* * * * * * * * * * * * * * * * * * * *	· * * * ·	· / / / / / / / / / / / / / / / / / / /	· . · ·
[b Less rental expenses		3.499-	y * \$ x v v * \$ * * , ;	<i>> 1</i>	*
	c Rental income or (loss)		* * * * * * * * * * * * * * * * * * * *	/ * * * * /		, i i i , i
1	d Net rental income or (loss)	•				
	7 a Gross amount from sales of (i) Securities	(II) Other	· · · · · · · · · · · · · · · · · · ·		♦ ₹ 3 × 4 ,	* 4 .
	assets other than inventory 1,385.		* * *	* - *	* * * * *	* * *
	b Less cost or other basis			* *	* * *	
	and sales expenses 1,309.		***	* *	/ *	
	c Gain or (loss) 76.		, ,	* .		
ļ	d Net gain or (loss)		76.			76.
			70.			76.
ш	8a Gross income from fundraising events					
	(not including \$					
凝	of contributions reported on line 1c)					
8	See Part IV, line 18					
OTHER REVENU	b Less direct expenses b					
_	c Net income or (loss) from fundraising even	nts 🟲				
	9a Gross income from gaming activities See Part IV, line 19 a					
	b Less direct expenses b					
	c Net income or (loss) from gaming activities	5				
	10a Gross sales of inventory, less returns and allowances					
	b Less: cost of goods sold b					
	c Net income or (loss) from sales of inventor	rv 🕨				
		Business Code				1
			· · · · · · · · · · · · · · · · · · ·			
	11a					
					-	
	°					
	d All other revenue					
	e Total. Add lines 11a-11d	•	- · · · · · · · · · · · · · · · · · · ·	-		
	12 Total revenue. See instructions	•	186,593.	0.1	0.	3,613.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	 Check if Schedule O contains a re 	esponse to any question	n in this Part IX		
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21		·		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	108,333.	108,333.	*	٠, .
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.				
10	Payroll taxes		····		
11	_ *				
	Management				
	·				
	Legal	4,000.		4,000.	
	Accounting	4,000.		4,000.	
	Lobbying		38 38 38 38 38 38 48 48 48 48 48 48 48 48 48 48 48 48 48	1 2 7 7 12 12 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
ç) Other				
12	Advertising and promotion	4,934.			4,934.
13	Office expenses	1,478.		1,478.	
14	Information technology				
15	Royalties				
16	Occupancy				
17					
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	ANNUAL DINNER COSTS	28,420.			28,420.
	MISC	3,000.	3,000.		20,420.
			3,000.	70.	
	POSTAGE AND SHIPPING	70.		70.	
	¹				
	All other expenses	150 005	111 000	F 540	22.25
	Total functional expenses. Add lines 1 through 24e	150,235.	111,333.	5,548.	33,354.
26	the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ► ☐ If following SOP 98-2 (ASC 958-720)				

Par	<u>τ χ</u>	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	77,521.	1	25,347.
	2	Savings and temporary cash investments	204,408.	2	297,023.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
A S	7	Notes and loans receivable, net		7	
S	8	Inventories for sale or use		8	<u></u>
A S S E T S	9	Prepaid expenses and deferred charges		9	=
	10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
-	b	Less accumulated depreciation 10b		10 c	
1		Investments – publicly traded securities	153,541.	11	148,828
	12	Investments – other securities See Part IV, line 11	1.	12	1
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	52,426
	16	Total assets. Add lines 1 through 15 (must equal line 34)	435,471.	16	523,625
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
Ļ	20	Tax-exempt bond liabilities		20	
å	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
A B I L I T	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		22	3*
1 1	23	Secured mortgages and notes payable to unrelated third parties		23	
E S	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0
Ĕ		Organizations that follow SFAS 117, check here ► X and complete lines	* * * * *	()	* * *
		27 through 29 and lines 33 and 34.	` , ; ~ ` ` `		*
SSETS	27	Unrestricted net assets	355,371.	27	425,280
Ĕ	28	Temporarily restricted net assets	80,100.	28	98,345
- 1	29	Permanently restricted net assets		29	
R		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete			
FUZD		lines 30 through 34.			
B	30	Capital stock or trust principal, or current funds		30	
B E	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
<u> </u>	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ž	33	Total net assets or fund balances	435,471.	33	523,625
Š	34	Total liabilities and net assets/fund balances	435,471.	34	523,625

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Form **990** (2011)

_		06-6107846		Pa	ige 12					
Pa	rt XI Reconciliation of Net Assets	_								
	Check if Schedule O contains a response to any question in this Part XI				X					
	•									
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	86,5	<u>93.</u>					
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	50,2	235.					
3	3 Revenue less expenses Subtract line 2 from line 1									
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	4	35,4	71.					
5	Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE Q	5		51,7	796.					
6	6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))									
Pa	rt XII Financial Statements and Reporting									
	Check if Schedule O contains a response to any question in this Part XII									
				Yes	No					
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			ζ.	. 4					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				<u> </u>					
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X					
	b Were the organization's financial statements audited by an independent accountant?		2b		X					
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	it of the audit,	2c							
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule \boldsymbol{O}		χ, .	,	7					
	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	sissued on a	4 (1)	AN IN						
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	ı the Sıngle	3a		X					
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	required audit	3b							

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Form **990** (2011)

TEEA0112L 07/06/11

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number

				KING SCHOLARSH							.07846	
Par	1	Rea	son for Publ	ic Charity Status	(All organizations	must c	omple	te this	part.)	See ii	nstructi	ons.
The o	rga	nızatı	on is not a priva	te foundation because	e it is. (For lines 1 thro	ugh 11,	check o	nly one	box)			
1		A chi	urch, convention	of churches or assoc	ciation of churches desc	cribed in	section	170(b)	(1)(A)(i).			
2		A sch	nool described in	n section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ)						
3		A ho	spital or a coope	erative hospital servic	e organization describe	d in sec	tion 170)(b)(1)(A)(iii).			
4		A me	edical research o	organization operated	in conjunction with a h	ospital c	describe	d in sec	tion 170)(b)(1)(A)(iii) En	iter the hospital's
		name	e, city, and state	,								
5		An o 170(l	rganızatıon oper b)(1)(A)(iv). (Co	ated for the benefit o mplete Part II)	f a college or university	owned	or opera	ated by	a gover	nmental	unit des	scribed in section
6					overnmental unit descri					_		
7	in section 170(b)(1)(A)(vi). (Complete Part II)											neral public described
8	닏		-		'0(b)(1)(A)(vi). (Comple							
9	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)										its support from gross	
10			3		xclusively to test for pu		•		• • •			
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3) . Check the box that describes the type of supporting organization and complete lines 11e through 11h											
	a Type I b Type II c Type III — Functionally integrated d Type III — Other											
е	e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)										fied persons on 509(a)(1) or	
f			e organization re k this box	eceived a written detei	rmination from the IRS	that is a	Type I	, Type II	or Type	e III sup	porting (organization,
g		Since	e August 17, 200	06, has the organizati	on accepted any gift o	r contrib	ution fro	om any	of the fo	llowing	persons	,7
_												Yes No
		(i)	A person who	directly or indirectly co	ontrols, either alone or	together	with pe	ersons d	escribe	d in (ii)	and (III)	11.0
		/ !!\			oported organization?							11 g (i)
		(ii)	-	er of a person describ	**	h 2						11 g (ii)
				• •	described in (i) or (ii) a							11 g (iii)
h				T	e supported organization						1	
			me of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	ection column (i) listed in column			ou notify nization in n (i) of upport?	organiz colur organize	s the ation in nn (i) ed in the S ?	(vii) Amount of support
						Yes	No	Yes	No	Yes	No	
(A)					,							
(B)					_			<u> </u>				
				ľ								
(C)						<u> </u>		<u> </u>				
					· · ·							
(D)												
(E)												
Tota	ļ											
BAA	Fo	r Pap	erwork Reduction	on Act Notice, see the	Instructions for Form	990 or 9	90-EZ.			Schedule	A (For	m 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011 DR. MARTIN LUTHER KING SCHOLARSHIP FUND 06-6107846 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(vi) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

				<u> </u>	<u> </u>		
Sec	tion A. Public Support						
	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')	139,110.	163,024.	152,902.	223,226.	182,980	. 861,242.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				, , , ,		0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	139,110.	163,024.	152,902.	223,226.	182,980	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1						
	that exceeds 2% of the amount shown on line 11, column (f)	Company william	*	24. Å	<u> </u>		286,246.
6	Public support. Subtract line 5 from line 4						574,996.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	139,110.	163,024.	152,902.	223,226.	182,980	. 861,242.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,971.	4,217.	2,587.	2,656.	3,537	. 17,968.
9	Net income from unrelated business activities, whether or not the business is regularly carried on			·		,	0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0.
11	Total support. Add lines 7 through 10	5	*	*	**.		879,210.
12	Gross receipts from related activ	vities, etc (see ins	tructions)		-	12	0.
13	13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						
Section C. Computation of Public Support Percentage							
	Public support percentage for 20	•	• • • • • • • • • • • • • • • • • • • •	ie 11, column (f)).		14	
15	Public support percentage from	2010 Schedule A,	Part II, line 14			15	98.20 %
16a 33-1/3% support test — 2011. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.							
t	b 33-1/3% support test — 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstances	s' test, check this	box and stop her	re. Explain in Pa	art IV how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	s' test, check this ation qualifies as	box and stop he a publicly support	re. Explain in Pa ted organization	art IV how the ►
	Private foundation. If the organ	zation did not che	ck a box on line	13, 16a, 16b, 17a			
BAA					Sc	nedule 🗛 (Form	990 or 990-F7\ 2011

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails , to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support				·		
	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a			-			
	governmental unit to the organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b		_				
	Public support (Subtract line 7c from line 6)						
	tion B. Total Support				·	· · · · · · · · · · · · · · · · · · ·	
	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	: Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add Ins 9, 10c, 11, and 12)				<u> </u>		
14	organization, check this box and	stop here		nd, third, fourth, (or fifth tax year as	a section 501(c)(3	▶ [
	tion C. Computation of Pu					" 1 1	
15	Public support percentage for 20	• •		ne 13, column (f))	15	
16	Public support percentage from					16	<u> </u>
	tion D. Computation of Inv						
17	Investment income percentage f	or 2011 (line 10c,	column (f) divide	ed by line 13, colu	umn (f))	17	બ
18	Investment income percentage f	rom 2010 Schedu	ile A, Part III, line	17		18	<u>%</u>
19 a	33-1/3% support tests – 2011. It is not more than 33-1/3%, check	f the organization this box and sto	did not check the p here. The organ	box on line 14, lization qualifies	and line 15 is mor as a publicly supp	e than 33-1/3%, ar orted organization	nd line 17
t	33-1/3% support tests — 2010. It line 18 is not more than 33-1/3%	6, check this box	and stop here . Th	e organization qu	ualifies as a public	ly supported organ	3-1/3%, and Initiation
20	Private foundation. If the organ	ization did not che	eck a box on line	14, 19a, or 19b,	check this box and	see instructions	▶

Schedule	A (Form 990 c	or 990-EZ) 2011	DR. MAR	IN LUTHER	KING SCH	OLARSHIP	FUND	06-6107846	Page 4
Part IV	Suppleme Part IJ, IIn (See Instr	ental Informa e 17a or 17b uctions).	ation. Compley; and Part II	ete this part I, line 12. Al	to provide t so complete	he explanate this part fo	ions requ or any add	ired by Part II, litional informa	line 10; tion.
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization DR. MARTIN LUTHER KING SCHOLARSHIP FUND 06-6107846 Part Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year). Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part It Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements. 2a **b** Total acreage restricted by conservation easements 2b 2 c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 ► S b Assets included in Form 990, Part X ▶\$

Schedule D (Form 990) 2011 DR. M				06-610		Page 2
Part III Organizations Maintai	ining Collec	tions of Art, Histo	orical Treasures, or C	Other Similar Ass	ets (contin	ued)
3 Using the organization's acquisiti items (check all that apply)	on, accession,		•	nat are a significant u	se of its colle	ection
a Public exhibition		⊢	or exchange programs			
b Scholarly research	-1	e [Other				
c Preservation for future gener 4 Provide a description of the organ		ctions and explain ho	w thou further the erganize	ation's exempt purpor		
Part XIV			_		se III	
5 During the year, did the organiza assets to be sold to raise funds r					Yes	☐ No
Part IV Escrow and Custodia line 9, or reported an	l Arrangeme amount on l	ents. Complete if to Form 990, Part X,	the organization answ line 21.	vered 'Yes' to For	m 990, Pa	rt IV,
1 a Is the organization an agent, trus included on Form 990, Part X?		•		assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV ar	id complete the follow	ng table		<u> </u>	
c Beginning balance				1c	Amount	
d Additions during the year				1d	,	
e Distributions during the year				1e		
f Ending balance						
2a Did the organization include an amount on Form 990, Part X, line 21?						
b If 'Yes,' explain the arrangement in Part XIV						
Part V Endowment Funds. Co	mplete if th	e organization ans	swered 'Yes' to Form	990, Part IV, line	10.	
	(a) Current y	ear (b) Prior yea	r (c) Two years back	(d) Three years back	(e) Four ye	
1 a Beginning of year balance.					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>
b Contributions					<u> </u>	" " , .
c Net investment earnings, gains, and losses					i Kanaya .	₹ . <u>.</u>
d Grants or scholarships					2018 C 1 66	1 .
Other expenditures for facilities and programs					10 m 15 m	i'5,,
f Administrative expenses					1 1	
g End of year balance	a of the overes	tuger and belones (lir	a la soluma (a)) hold on	<u> </u>	<u> </u>	
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or guasi-endowment ▶ %						
a Board designated or quasi-endowment ► % b Permanent endowment ► %						
c Temporarily restricted endowmer	nt ►	%				
The percentages in lines 2a, 2b, and 2c should equal 100%						
3a Are there endowment funds not a organization by	n the possess	on of the organization	that are held and admini	stered for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related of	•	•			3b	
4 Describe in Part XIV the intended						
Part VI Land, Buildings, and				(-) A	(d) D = -1	
Description of property		a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
1 a Land	-					
b Buildings.c Leasehold improvements.	-					
d Equipment	-					
e Other	}					
Total. Add lines 1a through 1e (Colum	nn (d) must ea	ual Form 990. Part X.	column (B), line 10(c))	>		0.
ВАА	<u> </u>			Sched	lule D (Form	

Part VII	Investments — Other Securities. See	Form 990, Part X,	line 12. N/A	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	ion ket value
(1) Financ	ial derivatives			
	-held equity interests			
				
(D) (E)				·-·
(F)				<u>-</u>
(G)				
(H)				·
(l)				
	mn (b) must equal Form 990 Part X, column (B) line 12)			
Part VIII	Investments - Program Related. See	Form 990, Part X,	line 13. N/A	
	(a) Description of investment type	(b) Book value	(c) Method of valuat	ion
(1)		<u> </u>	Cost or end-of-year mark	ket value
(2)		<u> </u>		
(3)				
(4)				· · ·
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Part IX	nn (b) must equal Form 990, Part X, column (B) line 13) • Other Assets. See Form 990, Part X,	lno 15	<u> </u>	
FAILIA	····	scription	·	(b) Book value
(1) COM	MUNITY FOUNDATION ENDOWMENT	scription		52,426.
(2)				02/1201
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	-	"		
(10)	duran (h) must a suel Farm 000 Bart V actions (D) / 15.)	-	52,426.
Part X	Other Liabilities. See Form 990, Part X, column (32,420.
TaitA	(a) Description of liability	(b) Book value		
(1) Fede	eral income taxes	(b) Book value		
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)		-		
(10)			 	
(11)	nn (h) must aqual Form 000. Part V palisma (B) line 25.	>		
TOTAL (COINT	nn (b) must equal Form 990, Part X, column (B) line 25)	<u></u> 1		

2 FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

		<u>-610</u>	<u> 7846 </u>	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		N/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)	1		_
3	Excess or (deficit) for the year. Subtract line 2 from line 1			
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities			
6	Investment expenses			
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	N/A	
1	Total revenue, gains, and other support per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	Ženje		
ā	Net unrealized gains on investments	· · ·		
t	Donated services and use of facilities 2b	200		
(Recoveries of prior year grants			
C	1 Other (Describe in Part XIV)			
•	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
ā	Investment expenses not included on Form 990, Part VIII, line 7b.	- 5×.\$		
t	Other (Describe in Part XIV)	دغ		
(Add lines 4a and 4b	4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5		
Par	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	rn N/A	
1	Total expenses and losses per audited financial statements	1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	~~ <u>~</u>		
ā	Donated services and use of facilities 2a	10 m		
ŧ	Prior year adjustments 2b	1357		
(Other losses 2c	4170		
C	Other (Describe in Part XIV)			
6	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	'.		
ä	Investment expenses not included on Form 990, Part VIII, line 7b.			
	Other (Describe in Part XIV)			
	Add lines 4a and 4b	4c		
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		
	t XIV Supplemental Information			
Part	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete additional information	lines this p	16 and 26, part to provide	
				-
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TEEA3304L 05/25/11

Schedule **D** (Form 990) 2011

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Schedule D (Form 990) 2011 DR. MARTIN LUTHER KING SCHOLARSHIP FUND Part XIV Supplemental Information (continued)	06-6107846	Page 5
PartXIV Supplemental Information (continued)		
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SCHEDULE I

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No 1545-0047

2011

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Open to Public Inspection Employer identification number ☐ Yes 06-6107846 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990. Part I General Information on Grants and Assistance DR. MARTIN LUTHER KING SCHOLARSHIP FUND Department of the Treasury Internal Revenue Service Name of the organization

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States [Part II Grants and Other Assistance to Governments and Organizations in the United States	s procedures for mon	toring the use of grants and Organi	e use of grant funds in the United States d Organizations in the United States. Complete if the organization answered 'Yes' to	States ed States. Complet	e if the organizat	ion answered 'Ye	ss' to
Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000.	for any recipient	that received m	ore than \$5,000. C	neck this box if no	one recipient rec	eived more than	
Part II can be duplicated if additional space is needed	f additional space	ıs needed	ļ				×
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(<u>1)</u>							
<u>(2)</u>							
<u>(3)</u>							
	· <u>-</u> .						
<u>(4)</u>							
(9)							
			:				
<u>w</u>							
(8)							
		ļ					
2 Enter total number of section 501(c)(3) and government organizati	(3) and government o	rganizations listed	ons listed in the line 1 table			A .	0
3 Enter total number of other organizations listed in the line 1 table	tions listed in the line	1 table				•	0

Schedule I (Form 990) (2011)

TEEA3901L 06/01/11

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2

Schedule I (Form 990) (2011) DR. MARTIN LUTHER KING SCHOLARSHIP FUND

[Parill Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					-
2					
8					
4					
S		į			
9			a		
7	2 04 1200 014 04010	temroful oth opinor	od a bosimoos aou	0 00	and any other additional information
Tango I suppremental mornator. Complete this part to provide the mornator required in the first of the complete the comple	plete tills part to p			2 2	
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Schedule I (Form 990) (2011)

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 2011

Department of the Treasury Internal Revenue Service Name of the organization

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

aliby of mago molecipal

Employer identification number

DR. MARTIN LUTHER KING SCHOLARSHIP FUND	06-6107846
FORM_990, PART III, LINE 1 - ORGANIZATION MISSION	
DR. MARTIN LUTHER KING SCHOLARSHIP FUND IS A NONPROF	IT, NONSTOCK CORPORATION
DEDICATED TO DEVELOPING AND MAINTAINING A COORDINATE	D NETWORK OF COMMUNITY RESOURCES
FOR YOUNG PEOPLE AND THEIR FAMILIES AND BROADENING A	ND_DEEPENING_PUBLIC_AWARENESS_OF
AND_COMMITMENT_TO_SOCIETY'S_RESPONSIBILITY_FOR_RESPO	NDING TO THE NEEDS OF YOUTH AND
THEIR FAMILIES. THE ORGANIZATION'S PRIMARY SOURCES O	F SUPPORT AND REVENUE ARE
CONTRIBUTIONS	·
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
NO REVIEW WAS OR WILL BE CONDUCTED.	·
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS	PUBLICLY AVAILABLE
AVAILABLE UPON REQUEST AND GUIDESTAR WEBSITE	
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2011 SCHEDULE O - SUPPLEMENTAL INFORMATION PAGE 2

DR. MARTIN LUTHER KING SCHOLARSHIP FUND 06-6107846

FORM 990, PART XI, LINE 5
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS
PRIOR PERIOD ADJUSTMENT \$ -3,141.
54,937.
TOTAL \$ 51,796.