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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

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

A F	or th	e 2011	calendar year, or tax year beginn	ing 05	/01 ,2011 ,	, and en	ding		04/30,2	0 12	
_			C Name of organization					D Employer id	entification nu	mber	
Вс	heck if ap	phcable	JOHN G. KENEDY, JR. C	HARITABLE TRUST	1			74-633	4106		
	Addre		Doing Business As					1			
	chang	ge e change	Number and street (or P O box if mail is n	ot delivered to street address	s)	Room/su	te	E Telephone n	umber		
-	1		P O BOX 2950		<i>'</i>			(210) 22			
	-1	retum	(210) 22	0-4436							
		inated	City or town, state or country, and ZIP + 4					١		170	620
<u> </u>	Amen	n	SAN ANTONIO, TX 78299					G Gross receip		,170,	
<u> </u>	Applic pendii		F Name and address of principal officer	JOHN W. ROBE	FNB C	O-TRU:	STEE	H(a) Is this a grou affiliates?	p return for	Yes	X No
			P.O. BOX 2950 SAN ANT	ONIO, TX 78299				H(b) Are all affilia	tes included?	Yes	No
1	Tax-ex	xempt st	atus X 501(c)(3) 501(c) () 🕨 (insert no)	4947(a)(1) o	or	527	If "No," attac	h a list (see instru	ctions)	_
J	Websi	ıte: 🕨	N/A					H(c) Group exemp	otion number		
K	Form o	of organi	zation Corporation X Trust	Association Other	-	L Ye	ear of format	tion 1986 M	State of legal d	omicile	TX
	rt I		nmary			•		•			
	_		describe the organization's mission or n	nost significant activities		· · · · ·					
	l	•	TRUST WAS CREATED TO S	•	ORGANI 7	ZATION	S SPEC	TETCALLY			
e			CIONED IN THE WILL OF EL								
ä			THER DETAIL.	inna 3. Kunudi.		IACIII	TIVI I				
Governance	_										
é ဗိ	ı		this box I if the organization dis		or disposed (of more th	nan 25% o	t its net assets	1 - 1		0
త	1		er of voting members of the governing be						3		2.
Activities &			er of independent voting members of the		•				4		0
₹	5	Total r	number of individuals employed in calend	dar year 2011 (Part V, line	e 2a)				5		<u> </u>
Act	6	Total r	number of volunteers (estimate if necess	ary)					6		0
	7a	Total u	inrelated business revenue from Part VI	II, column (C), line 12					7a		0
	ь	Net un	related business taxable income from F	orm 990-T, line 34					7b		0
								Prior Year	Cui	rrent Ye	ar
	8	Contri	outions and grants (Part VIII, line 1h)						o		
Revenue	9	Progra	outions and grants (Part VIII, line 1h)	046					d		
Š	l		ment income (Part VIII, column (A) lines					4,385,94	8 6	,199,	589
ã	14	Other	revenue (Part VIII, column) A Tiere E-	d 94 04 100 and 11a)			• •	16,915,69		,383,	
	11	Other	revenue (Part VIII, column A lines 5	u, oc, se proc, and rie)			• • ├──	21,301,64			
			evenue - add lines 8 through 11 must e							,583,	
			and similar amounts paid∉Pan IX colu				• •	12,259,75	6. 11	,007,	849.
	14	Benefi	ts paid to or for members (Part IX, colun	of (A) (the 4)					0		0
(28)	15	Salarie	es, other compensation, employeethene	its (Part IX, column (A), li	nes 5-10) .			1,084,53	6. 1	,036,	559.
GENEROSS	16 a	Profes	sional fundraising fees (Part IX, column	(A)7 line 11e)					0		0
₽	b	Total f	undraising expenses (PartiXa column (C) √ine 25) ►		0					
\$	17	Other	expenses (Part IX, column (A), lines 11a	n-1 d , 11f-24e)				2,416,57	3. 1	,563,	218.
m	18	Total e	expenses Add lines 13-17 (must equal F	ert IX, column (A), line 2	5)			15,760,86	5. 13	,607,	626.
O	19		ue less expenses Subtract line 18 from					5,540,77	6. 4	,975,	741.
ة د ر.							Begin	ning of Current	<u> </u>	d of Year	
a star	20	Total s	issets (Part X, line 16)					16,022,50		,998,	251.
A 17 S	21						• • —	110,022,00	77	, , , , ,	
4 2 2	21					• • • •	• •	116,022,50	9 120	,998,	251
2 <u>5</u>			sets or fund balances Subtract line 21 f	rom line 20		• • • •	-	110,022,30	9. 120	, ,,,,,,	231.
-	rt II		nature Block					- 4b - b - ab - at Is			
con	nerpen rect,ar	nd comp	perjury, I declare that I have examined this r lete. Declaration of preparer (other than office	er) is based on all information	n of which pr	eparer has	nents, and to any knowle	o the best of my k edge	nowledge and t	zener, it is	s true,
		1.7	7 1.1.1 PM = WP	18 / 10	كدر						
Sig	ın		Signature of officer	Van Har	ve -			Data			
Hei			Signature of officer	/// Z				Date			
1101		 • •	JOHN W. 1665	1AD10 C.	<u> JUES</u>	>5					
			Type or print name and title								
		Pnnt/T	ype preparer's name	Preparer's signature		Date	07/02/204	Check	f PTIN		
Paid		STEV	VART GOODSON	Stands Book		~	07/02/201	self-employe	∍d ₽00	08446	62 .
-	parer	Firm's	name ► ERNST & YOUNG U.	S. LLP				Firm's EIN	34-65655	96	
USE	Only	-	address ▶ P.O. BOX 2938 SA		8299-29	38			210-228-		
Mav	the IF		uss this return with the preparer shown							res	No
			eduction Act Notice, see the separate							m 990	_

JSA 1E1010 1 000

For	m 990 (2011) Page 2
·P	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission ATTACHMENT 1
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services? 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 services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$1,609,011 including grants of \$1,609,011) (Revenue \$) OUR LADY OF THE LAKE UNIVERSITY
4b	(Code) (Expenses \$
4c	(Code) (Expenses \$2,145,348including grants of \$2,145,348) (Revenue \$)
	DIOCESE OF CORPUS CHRISTI
	Other program services (Describe in Schedule O) ATTACHMENT 2 (Expenses \$ 5,644,479 including grants of \$ 5,644,479) (Revenue \$)
4e	Total program service expenses ▶ 11,007,849.

Part	IV Checklist of Required Schedules			
			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
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)			
7	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
_	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues,	<u> </u>		
5				
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		Х
_	Part III	-		
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		ŀ	Х
	"Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
	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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		33	
	VII, VIII, IX, or X as applicable			- 12 m
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—othersecurities 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	11b		Х
С	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	11c		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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	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	11f		Χ
12 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		Χ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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	1		
	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		X
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
19	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
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Part	Checklist of Required Schedules (continued)		l	
	District the control of the control		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization	24	х	
22	In the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	21	Λ	
22	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
22	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u>'</u>
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	х	
24 2	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
24 a	\$100,000 as of the last day of the year, 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
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	<u> </u>	l	
·	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		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
20 4	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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		x
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		Х
28	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)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		, X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	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	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
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		X
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	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
р	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		Х
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		X
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,	3-		v
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	20		
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	L

Form **990** (2011)

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Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			$\overline{}$
	Check if Schedule O contains a response to any question in this rait v	-:-	Yes	No
1 3	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable) <u>~</u> ~		* 1
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		. **	12 %
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1	75	la de la companya de
·	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	, ', '	, 1	2, 4, +2 2
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	ŀ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1739	"	
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 O	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		X
b	If "Yes," enter the name of the foreign country	September 1	,	1
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	N.		•
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			١.,
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	١		
_	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		
L	and services provided to the payor?	7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7 31		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	33,		
	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	, ;	X
9	Sponsoring organizations maintaining donor advised funds.			2027
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	171	1 108
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a	17		
	Initiation fees and capital contributions included on Part VIII, line 12	, '	. \$	
11	Section 501(c)(12) organizations. Enter	' `:		32
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1 .		
_	against amounts due or received from them)		· -	
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	; ''	, ,	¥:J
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		Ď,	議引
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O		``.	
b	Enter the amount of reserves the organization is required to maintain by the states in which	5-	and product	22 4
	the organization is licensed to issue qualified health plans	(2 44)	,	
	Enter the amount of reserves on hand	1, , , , ,		*, > {
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<u>d</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	L	L

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Part	**Wolf of the structure	elow, es ın	and Sch	for a edule
	Check if Schedule O contains a response to any question in this Part VI			X
Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are 1a			
	maternal 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			
b	Enter the number of voting members included in line 1a, above, who are independent]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	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
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	•		
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	ļ		
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, 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	<u> </u>	Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code		 -
			Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10a		X
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?	<u>11a</u>	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12 a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		١.,	
	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		١.,	
	describe in Schedule O how this was done	12c		<u> </u>
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by		Ì	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			,,
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			Ì
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement]		.,
	with a taxable entity during the year?	16a		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 take steps to safeguard the			
-	organization's exempt status with respect to such arrangements?	16b	L	L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)	(3)s o	niy)	
	available for public inspection. Indicate how you made these available. Check all that apply Own website			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	f inte	rest p	olicy,
	and financial statements available to the public during the tax year		•	•
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ► FROST FINANCIAL MGMT GROUP P O. BOX 2950 SAN ANTONIO, TX 78299 (210) 220-4436			

Form **990** (2011)

JSA

_ 1			
Form	990	(2011)	

Section A.

JOHN G. KENEDY, JR CHARITABLE TRUST

74-6334106

Page 7

	<u> </u>									
Part VII	Compensation of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	 Independent Cont 	ractors								

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

(A) Name and Title	(B) Average hours per week (describe hours for	erage Position ITS per (do not check more than box, unless person is bott escribe)					an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) PABLO E. SUESS									_	
CO-TRUSTEE (2) FROST BANK, CO-TRUSTEE	40.00	X	-		-		-	500,264.	0	
JOHN W ROBB, ADMINISTRATOR	40.00		X					1,151,290.	o	
(3)										
(4)										
(5)			-							
(6)										
(7)							-			
(8)						-				
(9)										
(10)					-		-			
(11)										
(12)										
_ (13)										
(14)			-							

Form 990 (2011)

JSA

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees(continued)											
(A) Name and title	(B) Average hours per week (describe hours for	Average Position hours per (do not check more than c week box, unless person is both officer and a director/truste						(D) Reportable compensation from the	(E) Reportable compensation fro related organizations	on from d ions	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-I	VIISC)	organization and related organizations
											
										·	
											·
to Total from continuation sheets to Part VII, Sec d Total (add lines 1b and 1c)	tion A .						* * *	1,651,554. 0 1,651,554.		0 0	0 0
Total number of individuals (including but not reportable compensation from the organization)	limited to the		liste) re		\$100,000	of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu											Yes No
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual	eater than	\$15	0,00	002	If	"Yes	ar s," (nd other compens complete Schedu	ation from le <i>J for</i> :	the such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Yo											5 X
Section B. Independent Contractors				-							
Complete this table for your five highest com- compensation from the organization Report of year.											
(A) Name and business add	lress							(B) Description of ser	vices	C	(C) Compensation
					_		-				
Total number of independent contractors (in more than \$100,000 in compensation from the contractors)				utec		thos	e li	sted above) who	received		Taran Alamana

Pai	rt VIII	Statement of Revenue					
other commenteration of the state of the	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		·	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns					
ပႜ	h	Total Add lines 1a-1f		0	. 53.	1.34	, , ,
Program Service Revenue	2a b c d		Business Code	3			
<u> </u>	f	All other program service revenue L			t. ***		7537 7 4
<u>ā</u>	3 4	Investment income (including dividends, interest, other similar amounts)	and ▶	2,916,083	S. S. S.		2,916,083.
	5	Royalties · · · · · · · · · · · · · · · · · · ·	▶	10,825,094			10,825,094
	6a b c	(i) Real Gross rents	(II) Personal				
	d	Net rental income or (loss)	(II) Other	1,396,986	a ny popře s ky	,	1,396,986.
	7a b c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	(ii) Oulei				v 502
	d	Net gain or (loss)	<u></u> ▶	3,283,506			3,283,506.
Other Revenue	8a b	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		, , , , , , , , , , , , , , , , , , , ,			
0	9a	Net income or (loss) from fundraising events Gross income from gaming activities					215/8/11
	ь	See Part IV, line 19		-			
	c	Net income or (loss) from gaming activities	▶	0			
	10a	Gross sales of inventory, less returns and allowances a		•			
	b c	Less cost of goods sold b		0	3 7 	in the state of th	
		Miscellaneous Revenue E	Business Code			·/-	
	11a b	SURFACE DAMAGE INCOME NILGAI DEER MEAT INCOME	211110 110000	2,500. 150,698			2,500. 150,698.
	С	OTHER RANCH INCOME	110000	8,500.			8,500.
	d	All other revenue					
	e	Total Add lines 11a-11d	▶	161,698			
	12	Total revenue. See instructions	<u></u> ▶	18,583,367			18,583,367

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 respo	nse to any question in	this Part IX		<u> ,</u>
	not include amounts reported on lines 6b, , 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 .	11,007,849.	11,007,849.		
2	Grants and other assistance to individuals in			3 \	
	the United States See Part IV, line 22	0		, ` ` <u> </u>	
3	Grants and other assistance to governments,				λ
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0		,	
5	Compensation of current officers, directors,	-		-	
	trustees, and key employees	1,036,559.		1,036,559.	
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			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section				
-	401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0.			
11	Fees for services (non-employees)				
	Management	0			
	Legal	130,577.		130,577.	
	Accounting	9,350.		9,350.	
	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
	Investment management fees	0		·	
g	Other	0			
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0		_	
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	0			
24	Other expenses Itemize expenses not covered		İ		·
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column		v.		
	(A) amount, list line 24e expenses on Schedule O)				· · ·
	OIL AND GAS ROYALTY FEES	497,832.		497,832.	
	PRODUCTION TAXES	-142,862.		-142,862.	
	AD VALOREM TAXES	318,091.		318,091.	
	INTANGIBLE DRILLING COSTS	110,389.		110,389.	
	All other expenses	639,841.	11 007 040	639,841.	
	Total functional expenses Add lines 1 through 24e Joint costs. Complete this line only if the	13,607,626.	11,007,849.	2,599,777.	··· ·· · · · · · · · · · · · · · · · ·
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here ▶				
10.4	following SOP 98-2 (ASC 958-720)	0			
JSA					Form 990 (2011)

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Form **990** (2011)

Pa	rt X	Balance Sheet			rage II
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	C	1	C
	2	Savings and temporary cash investments	1,217,729.	2	345,726.
	3	Pledges and grants receivable, net	C	3	(
	4	Accounts receivable, net	C	4	(
	5	Receivables from current and former officers, directors, trustees, key			
Assets		employees, and highest compensated employees Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section	0	5	
	6	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)	С	6	
	7	Notes and loans receivable, net	0	7	C
	8	Inventories for sale or use	0	8	(
٩	9	Prepaid expenses and deferred charges	0	9	(
	10 a	Land, buildings, and equipment cost or			
	'	other basis Complete Part VI of Schedule D 10a 22,488,988.			
	ь		22,488,988.	10c	22,488,988.
	11	Less accumulated depreciation	92,297,686.		98,145,431.
	12	Investments - other securities See Part IV, line 11		12	20,210,1021
	13	Investments - program-related See Part IV, line 11	0	13	
	14	· · · · · · · · · · · · · · · · · · ·		14	
	15	Intangible assets Other assets See Part IV, line 11	18,106.		18,106.
	16		116,022,509.		120,998,251.
	17	Total assets. Add lines 1 through 15 (must equal line 34)		17	120,330,231.
	}	Accounts payable and accrued expenses		18	
	18	Grants payable		19	
	19	Deferred revenue	0		
	20	Tax-exempt bond liabilities		20	(
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ē	22	Payables to current and former officers, directors, trustees, key			
ä		employees, highest compensated employees, and disqualified persons			•
_		Complete Part II of Schedule L	U	22	(
	23	Secured mortgages and notes payable to unrelated third parties	0	23	<u> </u>
	24	Unsecured notes and loans payable to unrelated third parties	0	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	0	25	C
	26	Total liabilities. Add lines 17 through 25	0	26	
ses		Organizations that follow SFAS 117, check here lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets		27	
3ali	28	Temporarily restricted net assets		28	
ă	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds	116,022,509.	30	120,998,251.
Se	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
¥	32	Retained earnings, endowment, accumulated income, or other funds	0	32	0
Net	33	Total net assets or fund balances	116,022,509.	33	120,998,251.
	34	Total liabilities and net assets/fund balances	116,022,509.	34	120,998,251.

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For	n 990 (2011)		Page 12
Pa	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI		х
1	Total revenue (must equal Part VIII, column (A), line 12)	18,58	3,367.
2	Total expenses (must equal Part IX, column (A), line 25)	13,60	7,626.
3	Revenue less expenses Subtract line 2 from line 1	4,97	5,741.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	116,022	2,509.
5	Other changes in net assets or fund balances (explain in Schedule O)		1.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	120,998	3,251.
Pa	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII		es No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	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
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		
	the Single Audit Act and OMB Circular A-133?	3a	Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	
		Form 9 !	90 (2011)

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SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury ► Attach to Form 990 or Form 990-EZ. See separate instructions. Internal Revenue Service Name of the organization Employer identification number JOHN G. KENEDY, JR. CHARITABLE TRUST 74-6334106 Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 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) An organization organized and operated exclusively to test for public safety See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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 d X Type III - Other c Type III - Functionally integrated e X 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) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the a following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? 11g(i) Χ (ii) A family member of a person described in (i) above? 11g(ii) Χ (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (vi) is the (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the (v) Did you notify (vii) Amount of organization in col (I) fisted in (described on lines 1-9 above or IRC section organization the organization organization in support col (i) organized in col (i) of your governing (see instructions)) your support? in the US? document? Yes Yes Yes No (A)_{ATTACHMENT 1} (B) (C) (D) (E)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

11,007,849.

Total

,Pai	(Complete only if you checked the box on line 5, 7, or 8 of Part II. If the organization fails to qualify under the tests listed below, please complete Part III.)								
Sec	tion A. Public Support								
Cale	ndar year (or fiscal year 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	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3		,						
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)	<u> </u>	, 3;	7, 3,79	, ,				
Sec	Public support. Subtract line 5 from line 4 tion B. Total Support	L	<u> </u>		 	[((8)]]			
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
		(4) 2501	(2, 2000	(0) 2000	(4) 20 10	(0, 2511	(1) 10101		
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)								
11	Total support. Add lines 7 through 10	L			, 5	1636.53			
12	Gross receipts from related activities, etc. (se	ee instructions) .				12			
13	First five years. If the Form 990 is f organization, check this box and stop here								
Sec	tion C. Computation of Public Sup	port Percenta	ige						
14	Public support percentage for 2011 (line		•			14	%		
15	Public support percentage from 2010 Se					15	<u>%</u>		
16a	33 1/3 % support test - 2011. If the o	•					e, check		
	this box and stop here. The organization	-		-			▶ ∟		
b	33 1/3 % support test - 2010. If the c	-							
	check this box and stop here. The orga	•							
17a	10%-facts-and-circumstances test - 2								
	10% or more, and if the organization								
	Part IV how the organization meets t			-	•	•	рропед		
L	organization						▶ □		
D		_	•			•			
	15 is 10% or more, and if the organization Explain in Part IV how the organization								
	supported organization				=	=	► □		
18	Private foundation. If the organization						•		

Part III	Support Schedule	for Organizations	s Described in Section	n 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						
Caler	ndar year (or fiscal year 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						
4	Tax revenues levied for the						
7	organization's benefit and either paid						
	to or expended on its behalf						
_	The value of services or facilities						-
5							
	furnished by a governmental unit to the						
_	organization without charge		<u> </u>		· · · · · · ·		
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3		i				
h	received from disqualified persons						
J	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		ļ				
8	Public support (Subtract line 7c from						
	line 6)		<u> </u>	<u> </u>	L	L	
	tion B. Total Support	r	1		T	1 1 2011	(0.T-1-1
Caler	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources				ļ		
b	Unrelated business taxable income (less			ļ			
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business					1	
	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	1			1		
	(Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)						
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year a	as a section 501(c)(3)
	organization, check this box and stop here						
Sec	tion C. Computation of Public Sup	port Percent	age				
15	Public support percentage for 2011 (line 8, c	olumn (f) divided !	by line 13, column	(f))		15	%
16	Public support percentage from 2010 Sched	ule A, Part III, line	15			16	%
	tion D. Computation of Investmen						
17	Investment income percentage for 2011 (li			s, column (f))		17	%
18	Investment income percentage from 2010			•		18	%
	33 1/3 % support tests - 2011. If the or					<u> </u>	
	17 is not more than 331/3 %, check th						
h	33 1/3 % support tests - 2010. If the orga						
U	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization						
				<u> </u>			00 000 F71 0044

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additional information. (See instructions)

				ATTAC	MENT 1	
SCHEDULE A, PART I - INFORMATION ABOUT	SUPPORTED C	ORGANIZATIO	NS			
(I) NAME OF SUPPORTED ORGANIZATION	(II) EIN	(III) TYPE OF ORGANIZATION	(IV) YES NO	(V) YES NO	(VI) YES NO	(VII) AMOUNT OF SUPPORT
OUR LADY OF THE LAKE UNIVERSITY	74-1109631	02	х	x	х	1,609,011.
SPOHN HOSPITAL	74-1109836	03	x	x	х	1,609,011.
DIOCESE OF CORPUS CHRISTI	74-1185667	01	x	x	х	2,145,348
PAX CHRISTI INSTITUTE	74-2324894	01	x	x	х	1,609,011
CONVENT ACADEMY OF THE INCARNATE WORD	74-2460683	02	x	x	х	1,609,011
MISSIONARY SOCIETY OF OBLATE FATHERS OF TX	74-1256497	01	x	x	x	2,426,457.
TOTAL AMOUNT OF SUPPORT					,	11,007,849_

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Internal Revenue Service

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Open to Public Inspection

Department of the Treasury ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization 74-6334106 JOHN G. KENEDY, JR. CHARITABLE TRUST Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 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? 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 Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II 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 Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year Held at the End of the Tax Year Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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? 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) 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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 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 2 - 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 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2011

Using the organization's acquisition, accession, and other records, check any of the following that are a signic collection items (check all that apply) a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt XIV	purpose in Part							
b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt XIV	Yes No							
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt XIV	Yes No							
4 Provide a description of the organization's collections and explain how they further the organization's exempt XIV	Yes No							
XIV	Yes No							
								
F. Duran the uses did the exposuration policy or recover describes of out historical transverse or other simples								
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar								
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	Dort IV							
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990 line 9, or reported an amount on Form 990, Part X, line 21								
1a Is the organization an agent, trustee, custo dian or other intermediary for contributions or other assets not included on Form 990, Part X?								
Amount								
c Beginning balance								
d Additions during the year								
e Distributions during the year								
f Ending balance								
2a Did the organization include an amount on Form 990, Part X, line 21?	Yes No							
b If "Yes," explain the arrangement in Part XI V								
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10								
(a) Current year (b) Pnor year (c) Two years back (d) Three years back	(e) Four years back							
1a Beginning of year balance 116,022,509 110,481,733 107,184,684 105,373,109								
b Contributions								
c Net investment earnings, gains,								
and losses								
d Grants or scholarships 11,007,849. 12,259,756. 9,818,371. 20,187,886.								
e Other expenditures for facilities .								
and programs								
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentage of the c urrent year end balance (line 1g, column (a)) held as								
a Board designated or quasi-endowment ▶%								
b Permanent endowment ► 100.0000 %								
c Temporarily restricted endowment								
The percentages in lines 2a, 2b, and 2c sh ould equal 100%								
3a Are there endowment funds not in the pos session of the organization that are held and administered for the	N IN-							
organization by	Yes No							
(i) unrelated organizations								
(ii) related organizations	3a(ii) X							
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	30							
4 Describe in Part XIV the intended uses of the organization's endowment funds								
Part VI Land, Buildings, and EquipmentSee Form 990, Part X, line 10) Doob webse							
(investment) (other) depreciation) Book value							
1a Land	22,488,988.							
b Buildings								
c Leasehold improvements								
d Equipment								
e Other	22,488,988.							
	le D (Form 990) 2011							

Part VII	Investments - Other Securities. See F	orm 990, Part X, line	12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	al derivatives		
(2) Closely-	held equity interests		
(3) Other			
<u>(A)</u>			
(B)			
(C)		, , , , , , , , , , , , , , , , , , ,	
(D)			
(E) (F)		<u> </u>	
(G)			
(G) - (H)			
(I)			
	n (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII			2 13
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	(I) (S = 200 D + 1) (S = 40)		· · · · · · · · · · · · · · · · · · ·
Part IX	o (b) must equal Form 990, Part X, col. (B) line 13) Other Assets. See Form 990, Part X, II		
railix) Description	(b) Book value
(1)		, Beschpasii	(a) book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
	(b) must equal Form 990, Part X, col (B) line 15)		· · · · · · · · · · · · · · · · · · ·
Part X	Other Liabilities. See Form 990, Part X (a) Description of liability	(b) Book value)
1. (1) Foder	ral income taxes	(b) Book value	- V
(2)	ai iliculie taxes		*:
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	<u></u>		
(11)			
	mn (b) must equal Form 990, Part X, col (B) line 25		
			organization's financial statements that reports the
organizatio	n's liability for uncertain tax positions under FII	1 40 (MOU /4U)	

Schedul	e D (Form 990) 2011		Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statemen	ıts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		<u> </u>
2	Total expenses (Form 990, Part IX, column (A), line 25)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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 5		
6	Investment expenses 6		·
7	Prior period adjustments 7		
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)	
Part		n	
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		
а	Net unrealized gains on investments 2a	-	
b	Donated services and use of facilities 2b	1	
С	Recoveries of prior year grants 2c	1	
d	Other (Describe in Part XIV)	1	
е	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		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV)	1	
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu	urn	
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		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b	1	
С	Other losses 2c	1	
d	Other (Describe in Part XIV)	1	
е	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:	-	
а	Investment expenses not included on Form 990, Part VIII, line 7b	-	
b	Other (Describe in Part XIV)]	
С	Add lines 4a and 4b	4c	
_ 5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part	XIV Supplemental Information		
Compl	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part II	V, line	es 1b and 2b,
	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	this	part to provide
any ad	ditional information		
SEE	PAGE 5		
	TAGE 3		

Part XIV Supplemental Information (continued)

PART V, LINE 4

UNDER ITEM 16, SECTION 2 OF THE WILL OF ELENA S. KENEDY, THE TRUST WAS CREATED TO BENEFIT THE CATHOLIC DIOCESE OF CORPUS CHRISTI, CONVENT ACADEMY OF THE INCARNATE WORD, SPOHN HOSPITAL, OUR LADY OF THE LAKE UNIVERSITY, PAX CHRISTI INSTITUTE, AND THE MISSIONARY SOCIETY OF OBLATE FATHERS OF TEXAS. THE PURPOSES INCLUDE RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL WITHIN SECTION 501(C)(3).

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SCHEDULE (Form 990)

Department of the Treasury

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

OMB No 1545-0047

Open to Public

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Schedule I (Form 990) (2011) (h) Purpose of grant or assistance CHARITABLE HARITABLE HARITABLE HARITABLE HARITABLE CHARITABLE × ×es Employer identification number 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. Part II can be duplicated if additional space is needed. Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes' 74-6334106 (g) Description of non-cash assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ► Attach to Form 990. 2,426,457 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 1,609,011 2,145,348 1,609,011 1,609,011 1,609,011 (d) Amount of cash grant (c) IRC section if applicable 501 (C) (3) For Paperwork Reduction Act Notice; see the instructions for Form 990. Enter total number of other organizations listed in the line 1 table Part I General Information on Grants and Assistance the selection criteria used to award the grants or assistance? 74-1109836 74-1185667 74-2324894 74-2460683 74-1256497 74-1109631 (P) EIN CHARITABLE TRUST P O. BOX 2620 CORPUS CHRISTI, IX 78403-2620 (6) MISSIONARY SOCIETY OF OBLATE FATHERS OF IX 411 SW 24TH STREET SAN ANTONIO, TX 78285 (5) CONVENT ACADEMY OF THE INCARNATE WORD 7711 MADONA DRIVE SAN ANTONIO, TX 78216 P.O BOX 3666 CORPUS CHRISTI, TX 78404 (a) Name and address of organization or government (1) OUR LADY OF THE LAKE UNIVERSITY. (3) DIOCESE OF CORPUS CHRISTI (2) SPOHN HOSPITAL (4) PAX_CHRISTI INSTITUTE_ 2930 S ALAMEDA STREET 4601 CALALLEN DRIVE JOHN G. KENEDY, Internal Revenue Service Name of the organization Part II

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Schedule I (Form 990) (2011)

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

	Part III can be duplicated if additional space is needed.	ce 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
-						
7	-					
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7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	s part to provid	de the information	on required in F	art I, line 2, and any	other additional information

PART I, LINE 2

THE TRUST IS REQUIRED TO DISTRIBUTE INCOME FROM THE RANCH PROPERTY TO THE

MISSIONARY SOCIETY OF OBLATE FATHERS OF TEXAS. THE REMAINING INCOME IS

DISTRIBUTED AS FOLLOWS:

CATHOLIC DIOCESE OF CORPUS CHRISTI 25%

CONVENT ACADEMY OF THE INCARNATE WORD 18.75%

SPOHN HOSPITAL

18.75%

18.75%

OUR LADY OF THE LAKE UNIVERSITY

PAX CHRISTI INSTITUTE

18.75%

Schedule 1 (Form 990) (2011)

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SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection

Name of the organization JOHN G. KENEDY, JR. CHARITABLE TRUST

Employer identification number 74-6334106

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			١.
	16 C.			'
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		ļ
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director Explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			-
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9	L	
			000	1 2044

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

Schedule J (Form 990) 2011

Schedule J (Form 990) 2011

Page 2

Partil Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(I) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
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16	3							
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Schedule J (Form 990) 2011

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2011

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Open to Public Inspection

OMB No 1545-0047

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.

Employer identification number

74-6334106

JOHN G. KENEDY, JR. CHARITABLE TRUST

FORM 990, PART VI, SECTION B, LINE 11B YES, THE ADMINISTRATOR FOR THE TRUST REVIEWS AND SIGNS FORM 990 AS REQUIRED BY INTERNAL BANK POLICIES.

FORM 990, PART VI, SECTION B, LINE 12C FROST BANK HAS A WRITTEN CONFLICT OF INTEREST POLICY. BANK POLICY REOUIRES ALL OFFICERS AND DIRECTORS TO ANNUALLY DISCLOSE INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST. THE BANK INTERNAL POLICIES ARE REGULARLY AND CONSISTENTLY MONITORED FOR COMPLIANCE AND ENFORCEMENT BY INTERNAL AND EXTERNAL AUDITORS. FROST BANK HAS A WRITTEN WHISTLEBLOWER POLICY AND A WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY COMPENSATION FOR THE TRUSTEE IS EITHER SET BY THE GOVERNING DOCUMENT OR REFLECT CHARGES THAT ARE NORMAL AND CUSTOMARY AS ESTABLISHED BY THE BANK FOR SIMILAR ACCOUNTS.

FORM 990, PART VI, SECTION C, LINE 19 COPIES OF FORM 1023, TRUST GOVERNING DOCUMENTS, TAX RETURNS, AND FINANCIAL REPORTS ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST. COPY OF THE CONFLICT OF INTEREST POLICY IS ALSO AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST.

FORM 990, PART VIII, LINE 5

DETAIL OF ROYALTY INCOME

OIL AND GAS ROYALTIES: \$8,885,959. Schedule O (Form 990 or 990-EZ) 2011 Page 2

Name of the organization JOHN G. KENEDY, JR. CHARITABLE TRUST Employer identification number 74-6334106

WIND ROYALTY INCOME:

\$1,939,135.

TOTAL ROYALTY INCOME \$10,825.094.

FORM 990, PART IX, LINE 24(E)

OTHER EXPENSES

RANCH/WIND ROYALTY EXPENSES

\$633,053

FOREIGN TAXES PAID

\$ 3,282

MISC. OIL & GAS EXPENSES

\$ 2,185

OTHER EXPENSES

\$ 1,320

TOTAL OTHER EXPENSES

\$639,840

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

UNDER ITEM 16, SECTION 2 OF THE WILL OF ELENA S. KENEDY, THE TRUST WAS CREATED TO BENEFIT THE CATHOLIC DIOCESE OF CORPUS CHRISTI, CONVENT ACADEMY OF THE INCARNATE WORD, SPOHN HOSPITAL, OUR LADY OF THE LAKE UNIVERSITY, PAX CHRISTI INSTITUTE, AND THE MISSIONARY SOCIETY OF OBLATE FATHERS OF TEXAS. THE PURPOSES INCLUDE RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL WITHIN SECTION 501(C)(3).

ATTACHMENT 2

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION

GRANTS

EXPENSES

REVENUE

PAX CHRISTI INSTITUTE

1,609,011.

1,609,011.

CONVENT ACADEMY OF THE INCARNATE WORD

1,609,011.

1,609,011.

JSA

Schedule O (Form 990 or 990-EZ) 2011

Schedule O (Form 990 or 990-EZ) 2011 Page 2 Name of the organization Employer identification number 74-6334106 JOHN G. KENEDY, JR. CHARITABLE TRUST ATTACHMENT 2 (CONT'D) FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES GRANTS DESCRIPTION EXPENSES REVENUE MISSIONARY SOCIETY OF THE OBLATE FATHERS OF 2,426,457. 2,426,457. 5,644,479. TOTALS 5,644,479.

ATTACHMENT 3

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
CASH EQUIV & SHORT TERM FUNDS	8,300,369.	COST
CORPORATE BONDS	12,886,065.	COST
MUTUAL FUNDS	29,148,160.	COST
COMMON STOCK	39,434,204.	COST
GOVERNMENT OBLIGATIONS	8,376,633.	COST
TOTALS	98,145,431.	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Open to Public 2011

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Inspection

See separate instructions. ▶ Attach to Form 990. Employer identification number 74-6334106

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

JOHN G. KENEDY, JR. CHARITABLE TRUST

Name of the organization Department of the Treasury Internal Revenue Service

Part I

	Primary activity	Legal domicile (state or foreign country)	(u) Total income	End-of-year assets	Direct controlling entity	fling
						!
					:	:
zations (Complete of the during the tax year)	e organization answ	ered "Yes" to Fo	orm 990, Part IV,	line 34 because	it had	
(b) Primary activity		(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) . Direct controlling entity	(9) Section 512(b)(13) controlled entity?	(b)(13) ed ?
					Yes	o _N
SAN ANTONIO TX 78285	È	(0) (0)	c	6/ 10		>
+	41	(6) (5) 100	7	U /N		۲
3404 HEALTHCARE	XT	501(C)(3)	m	N/A		×
5667			,	-		
\dashv	TX	501(C)(3)	1	N/A		×
4894 78410 RELIGION	TX	501(C)(3)	П	N/A		×
74-2460683 CORPUS CHRISTI, TX 78404 RELIG./EDU	C.	501(C)(3)	2	N/A		×
SAN ANTONIO, TX 78216 RELIGION	TX	501(C)(3)	,1	N/A		×
	zations (Complete If th during the tax year) 6b Primary activity 96.31 98.36 78404 1894 RELIGION 48.94 78410 78410 78410 78410 16683 17694 RELIGION 186404 186404 186404	tions (Complete of the organization answoring the tax year) (b) (c) Primary activity 31 EDUCATION TX 36 HEALTHCARE TX 63 RELIGION TX 94 RELIGION TX 94 RELIGION TX 94 RELIGION TX 94 RELIGION TX TX 94 RELIGION TX 10 TX 10 TX 10 RELIGION TX 10 TX 10 TX 10 TX 10 TX TX 10 TX TX TX TX TX TX TX TX TX T	tions (Complete of the organization answered "Yes" to Firing the tax year) (b) (c) (d) 131 EDUCATION TX 501 (C) (3) 36-4 HEALTHCARE TX 501 (C) (3) 10-3 RELIGION TX 501 (C) (3) 10-4 RELIGION TX 501 (C) (3)	Lions (Complete if the organization answered "Yes" to Form 990, Part IV, ring the tax year) (a) (b) (c) (d) (e) 131- EDUCATION TX 501 (C) (3) 2 160- TX 501 (C) (3) 3 160- TX 501 (C) (3) 3 160- TX 501 (C) (3) 1 160- <	tions (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because irring the tax year) (a) (b) (i) (ii) (iii) (iiii)	State Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because is the tax year (t) (t)

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

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Schedule R (Form 990) 2011

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership diginal the tax year.) Schedule R (Form 990) 2011 Part III

	because it had one of more related organizations treated as a partitional planting trie tax year.)	iore related organ	ולמוטוא	וובמובח שא מ חשו	an filling dilik iain	lax yeal.)						
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or	(d) Direct controlling entity	(e) Predominant Income (related, unrelated excluded from	(f) Share of total income	(g) (h) Share of end-of-year Dusroportents assets	(h) Deproportionate efecations?	(I) Code V-UBI amount in box 20 of	(j) General or managing partner?	(k) Percentage ownership	I
			toreign country)		tax under sections 512-514)		•		Schedule K-1 (Form 1065)			
								Yes No	,	Yes No		
(1)	-											1
(2)												1
(E)												1
(4)												1
(5)										 		1
(9)												I
(7)												ı
Part IV	Identification of Related Organizations Taxable as a Corporation or Trust(Complete if the organization answered "Yes" to Form 990, Part IV	d Organizations	Taxable	as a Corporatic	on or Trust(Comple	te if the organ	zation answere	d "Yes"	to Form 990, F	Part IV,		ı
	line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ne or more relate	d organi	zations treated	as a corporation or 1	rust during the	tax year.)					

	line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	zations treated as	s a corporation	or trust during t	he tax year.)			
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1)								
(2)								
<u>(</u> <u>ē</u>)								
<u>(</u> 9)								
(<u>7</u>)								

Schedule R (Form 990) 2011

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Schedule R (Form 990) 2011

Page 3 ş Schedule R (Form 990) 2011 (d) Method of determining amount involved Yes COST ACTUAL COST ACTUAL COST ACTUAL COST ACTUAL COST ACTUAL COST ٩ 13 19 ٥ 9 je 무 4 9 1_p a # 19 ¥ = = ACTUAL If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) 2,145,348. 1,609,011. 1,609,011. 1,609,011. 2,426,457. 1,609,011 Amount involved During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Transaction type (a-r) <u>a</u> m Μ ω М В ф Performance of services or membership or fundraising solicitations for related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Lease of facilities, equipment, or other assets from related organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule TEXAS Other transfer of cash or property from related organization(s) OF Reimbursement paid by related organization(s) for expenses Gift, grant, or capital contribution from related organization(s) Reimbursement paid to related organization(s) for expenses Vame of other organization Other transfer of cash or property to related organization(s) Gift, grant, or capital contribution to related organization(s) Loans or loan guarantees to or for related organization(s) CONVENT ACADEMY OF THE INCARNATE WORD FATHERS OUR LADY OF THE LAKE UNIVERSITY Purchase of assets from related organization(s) Exchange of assets with related organization(s) SOCIETY OF OBLATE DIOCESE OF CORPUS CHRISTI PAX CHRISTI INSTITUTE SPOHN HOSPITAL MISSIONARY Part V Ec b 0 0 σ _ ¥ 4 Ξ 3 (3)(2) 7 2 9

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Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" on Form 990, Part IV, line 37.) Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

of gloss revenue, that was not a related organization. See misting	מווידמווסוו ספפ וויפווס	cilolis legalding	כווס וכמשומיים בעמיפים יכן ככונשיי יויילכאיייכיון אמיהיכים איים		מוויכוור אמונוכו	2					
(a) Name, address and EIN of entry	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(i) Code V-UBI amount in box 20 of Schedule K-1	(J) General or managing partner?		(k) Percentage ownership
			section 512-514)	Yes No			Yes	Н	Yes	ş	
(1)		·	i								
(<u>z</u>)										<u></u>	
(<u>3</u>)											
(4)											
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(13)											
(14)											
(15)											
(16)											
_								Sch	edule R	(Form 99	Schedule R (Form 990) 2011

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Schedule R (Form 990) 2011

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Part VII Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

FROST NATIONAL BANK TRUSTEE STATEMENT OF CAPITAL GAINS AND LOSSES KENEDY, JOHN G JR CHAR TRUST

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TRUST YEAR ENDING 04/30/2012

			I K	USI IEAR ENDING	34/30/2012					
TAX PREPARE TRUST ADMIN INVESTMENT	ISTRATOR	45 18 338			LEGEND.		FEDERAL S - STATE EXEMPT FROM STATE U -	I - INHERIT		
PROPERTY DE			SHARES	DATE	SALES PR		COST BASIS	GAIN/LOSS	TERM	NC
2091	AGOO AGT	LENT 1	TECHNOLOGIES	INC COM* - 008460	JIOI - MINOR	= 42				
2071	SOLD	DUI!!		04/05/2012	93089			SUB TRUST	F0486801	l
	ACQ		1152 0000	05/26/2011	51286		56635 55	-5349 54	ST	
14560	0000 AGT	LENT '	939 0000 FECHNOLOGIES	08/12/2011 INC COM* - 008460	41803 1101 - MINOR		33559 76	8243 68	ST	
	SOLD			04/05/2012	648198	13				
	ACQ		8228 0000 6332 0000	05/26/2011 08/12/2011	366303 281894		404511.52 226305 05	-38208 35 55589 91	S T S T	
1854	0000 ALB	EMARLI		N COM* - 01265310			220303 03	33207 31	31	
	SOLD		1054 0000	02/10/2012	120676		07704 43	SUB TRUST		
14706	ACQ 0000 ALB	EMARI.	1854 0000 E CORPORATIO	11/15/2010 N COM* - 01265310:	120676 1 - MINOR = 4		97794 43	22881 97	LT15	I
20.00	SOLD			02/10/2012	957209	86				
	ACQ		14460 0000 246 0000	11/15/2010 11/18/2010	941197 16012		762733 19 12998 64	178464 59 3013 44	LT15 LT15	
221		EMARL!		N COM* - 01265310	1 - MINOR = 4	2				
	SOLD ACO		221 0000	02/13/2012 11/15/2010	14602 14602		11657 26	SUB TRUST 2944 99	F0486801	
1754.		EMARL		N COM* - 01265310	1 - MINOR = 4	2		2211 22	2.25	•
	SOLD ACQ		1754 0000	02/13/2012 11/18/2010	115892 115892		92681 36	23211 56	LT15	v
1856		NIVAL		CTF 1 COM* - 1436						
	SOLD		856 0000	09/14/2011 02/24/2010	61162 28208		29933 64	SUB TRUST -1725 04	F0486801 LT15	
	ACQ		500 0000	04/22/2010	16476		20859 05	-4382 06	LT15	
			500 0000	10/05/2010	16476		19814 05	-3337 06	ST	Y
13093	SOLD	NIVAL	CORP PAIRED	CTF 1 COM* - 1436 09/14/2011	431466		44			
	ACQ		9593 0000	02/24/2010	316127		335459 54	-19332 14	LT15	
352	0000 COG	NIZAN	3500 0000 T TECH. SOLU	04/22/2010 TIONS CL A* - 1924	115338 446102 - MINO		146015 45 42	-30676 57	LT15	1
	SOLD			05/24/2011	25411	45		SUB TRUST		
2544	ACQ 0000 COG	NI ZAN'	352 0000 T TECH SOLU	09/23/2008 TIONS CL A* - 1924	25411 446102 - MINO		8815.84 42	16595 61	LT15	1
	SOLD			05/24/2011	183655		20020 62	20560 20	7 ma C	
	ACQ		962 0000 1582 0000	04/21/2008 09/23/2008	69448 114207		29879 63 39621 19	39568 70 74585 94	LT15 LT15	Ϋ́
1038		NIZAN'	r tech solu	TIONS CL A* - 1924	446102 - MINO 59926		42	SUB TRUST	P0496901	
	SOLD ACQ		1038 0000	08/22/2011 09/23/2008	59926		25996 71	33929 30	LT15	
7421		NI ZAN'	r tech. solu	TIONS CL A* - 1924			42			
	SOLD ACO		7421 0000	08/22/2011 09/23/2008	428430 428430		185858 95	242571 63	LT15	Y
1225		OCOPH	ILLIPS COM*	- 20825C104 - MINO	OR = 42 89270	<i>c</i> =	_	SUB TRUST	E0406001	
	SOLD ACO		92 0000	05/04/2011 10/04/2006	6704		6 5221 00	1483 41	LT15	
	-		200 0000	12/06/2006	14574		13960 00	614 80	LT15 LT15	
			600 0000 300 0000	05/06/2009 08/24/2009	43724 21862		26542 00 13569 00	17182 40 8293 20	LT15	
2062	0000 500	0.00011	33 0000	10/02/2009	2404	84	1544.60	860 24	LT15	Y
9960	SOLD	осорн.	ILLIPS COM*	- 20825C104 - MINO 05/04/2011	JK = 42 725825	04				
	ACQ		334 0000	10/16/2006	24339		20078 18	4261 74		Y
			3500 0000 3000 0000	12/08/2008 03/04/2009	255059 218622		177918 00 111136 60	77141 00 107485 40	LT15 LT15	Y Y
			2000 0000	03/12/2009	145748	00	74896 80	70851 20	LT15	
293	0000 CUM		1126 0000 INC* - 23102	08/24/2009 1106 - MINOR = 42	82056	12	50936 41	31119 71	LT15	Y
	SOLD			08/17/2011	27289		14775 ((SUB TRUST		
3085	ACQ 0000 CUM	MINS	293 0000 INC* - 23102	06/05/2009 1106 - MINOR = 42	• 27289	58	10775 66	16513 92	LT15	Y
	SOLD			08/17/2011	287332		113457 04	172075 25	7 M3 C	17
22990	ACQ 0000 EBA	Y INC	3085 0000 ORPORATED CO	06/05/2009 M* - 278642103 - M	287332 4INOR = 42	30	113457 04	173875 26	LT15	ĭ
	SOLD			05/06/2011	748788		2.22.2	0.000 44		
	ACQ		7134 0000 1363 0000	04/03/2007 05/03/2007	232355 44393		242049 06 46832 54	-9693 44 -2439 39	LT15 LT15	
			9493 0000	11/28/2007	309188	66	327148 72	-17960 06	LT15	Y
917	0000 EME	RSON I	5000 0000 ELECTRIC CO	10/14/2009 COM* - 291011104 -	162850 - MINOR = 42	87	126349 50	36501 37	LT15	Y
	SOLD			08/17/2011	42283			SUB TRUST		
	ACQ		804 0000 113 0000	10/09/2003 10/27/2003	37073 5210		22495.92 3075.01	14577 41 2135 55	LT15 LT15	
8875		RSON I		COM* - 291011104 -	- MINOR = 42				_	
	SOLD ACQ		4868 0000	08/17/2011 07/07/2003	409236 224468		129217 41	95251 49	LT15	Y
			4007 0000	10/03/2003	184767		107341 76	77425 48	LT15	
9993	0000 EME SOLD	KSON !	ELECTRIC CO	COM* - 291011104 - 01/09/2012	- MINOR = 42 474428	54		_	_	
	ACQ		993 0000	10/03/2003	47143	75	26601 04	20542 71	LT15	
			4000 0000 5000 0000	11/03/2004 05/06/2009	189904 237380		132620 00 181452 00	57284 35 55928 44	LT15 LT15	
1437		RSON I		COM* - 291011104 -	MINOR = 42					
	SOLD ACQ		237 0000	01/09/2012 10/27/2003	68223 13625		7809 99	SUB TRUST 5815 65	F0486801 LT15	Y
	·		330 0000	11/03/2004	14242	83	9946 50	4296 33	LT15	Y
			500 0000	05/06/2009	23738	U4	18139 25	5598 79	LT15	Y

FROST NATIONAL BANK TRUSTEE STATEMENT OF CAPITAL GAINS AND LOSSES KENEDY, JOHN G JR CHAR TRUST

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TRUST YEAR ENDING 04/30/2012

TAX PREPARER 45 TRUST ADMINISTRATOR: 18	INC	SI ILAK MIDING		F - FEDERA				
INVESTMENT OFFICER 338 PROPERTY DESCRIPTION	SHARES	DATE	SALES PR	ICE	COST BASIS	GAIN/LOSS	TERM	NC
500000 0000 FEDERAL	350 0000	05/08/2009	16616 - 31398A7C0 -		12608 61	4008 02	LT15	Y
SOLD	50000 0 0000	06/23/2011 12/15/2010	500000 500000	00	500000 00	0 00	ST	Y
SOLD ACQ 15167 0000 FORTINE	2177 0000	05/17/2011 09/29/2010 34959E109 - MINOR	101562 101562 = 42	72	54884 79	SUB TRUST 46677 93	F0486801 ST	Y
SOLD ACQ 2223 0000 FORTINE	15167 0000 T INC COM* - 3			03	382378 27	325201 76 SUB TRUST	ST	Y
SOLD ACQ 16333 0000 FORTINE	1206 0000 1017 0000	07/26/2011 09/29/2010 10/11/2010	45061 24446 20615	35	15202 35 12820 51	9244 00 7794 70	ST	Y
SOLD ACQ	8346.0000 6000 0000	07/26/2011 09/29/2010 10/11/2010	331079 169178 121623	51	105206 34 75660 00	63972 17 45963 66		Y Y
3423 0000 FORTINE SOLD	1987 0000	10/15/2010	40277	70	26282 25	13995 45 SUB TRUST	F0486801	
ACQ	423 0000 1000 0000 2000 0000	10/11/2010 10/15/2010 01/05/2011	8782 20762 41524	.30	5332 42 13210 00 36769 70	3450 03 7552 30 4754 90	ST	Y Y
24013 0000 FORTINE SOLD ACQ	8013 0000	08/03/2011 10/15/2010 11/09/2010	498565 166368 124573	31	105988 75 94718 10	60379 56 29855 70		Y Y
40 3900 GNMA I SOLD	6000 0000 10000 0000 POOL #209561	12/27/2010 9 5% 9/15/17 05/15/2011	207623 - 362171WW6 -	00	162994 00	44629 00		Y
ACQ 40 7300 GNMA I SOLD		10/27/1988 9 5% 9/15/17 06/15/2011	- 362171WW6 - 40	73		0 39		
ACQ 41.0600 GNMA I SOLD	40 7300 POOL #209561 41 0600	10/27/1988 9 5% 9/15/17 07/15/2011 10/27/1988	- 362171WW6 - 41	73 MINOR = 20 06 06	40 34 3 40 66	0 39 0 40		
ACQ 41 4100 GNMA I SOLD ACQ		9 5% 9/15/17 08/15/2011 10/27/1988	- 362171WW6 - 41			0 40		
42.6900 GNMA I SOLD ACQ	42 6900	9 5% 9/15/17 09/15/2011 10/27/1988	42 42	69 69	42 28	0 41	LT15	Y
42.1100 GNMA I SOLD ACQ 42 4600 GNMA I	42 1100	9 51 9/15/17 10/15/2011 10/27/1988 9 51 9/15/17	4 2 4 2	11 11	41 70	0 41	LT15	Y
42 4300 GNMA I SOLD ACQ 42 8200 GNMA I	42 4600	11/15/2011 10/27/1988 9 5% 9/15/17	42 42	.46 46	42 05	0 41	LT15	Y
SOLD ACQ 43 1700 GNMA I	42 8200	12/15/2011 10/27/1988 9 5% 9/15/17	42 - 362171WW6 -		42.41	0 41	LT15	Y
SOLD ACQ 43.5300 GNMA I	43.1700 POOL #209561	01/15/2012 10/27/1988 9 5% 9/15/17 02/15/2012	43 - 362171WW6 -	17 .17 MINOR = 20	42 75	0 42	LT15	Y
SOLD ACQ 43 8900 GNMA I SOLD	43 5300 POOL #209561	10/27/1988 9 5% 9/15/17 03/15/2012	43 - 362171WW6 -	53	43 11	0 42		
ACQ 44 2600 GNMA I SOLD		10/27/1988 9 5% 9/15/17 04/15/2012	- 362171WW6 - 44	26		0 43		
ACQ 6235 3400 GNMA I SOLD	44 2600 POOL #701962 6235 3400	10/27/1988 4 5% 6/15/39 05/15/2011		34	43 83 0 6330 74	0 43 -95 40		
ACQ 5071 7800 GNMA I SOLD ACQ		03/09/2010 4 5% 6/15/39 06/15/2011 03/09/2010		MINOR = 20 78		-76 32		
2833 9900 GNMA I SOLD ACQ		4 5% 6/15/39 07/15/2011 03/09/2010	2833 2833	99	2875 90	-41 91	LT15	Y
5113 3700 GNMA I SOLD ACQ	5113 3700	4 5% 6/15/39 08/15/2011 03/09/2010	5113 5113	37 37	5187 48	-74 11	LT15	Y
7797 6100 GNMA I SOLD - ACQ 18984 0000 GNMA I	7797 6100	4 51 6/15/39 	<u>7797</u> 7797	61	7907 97	-110 36	LT15	- y -
SOLD ACQ	18984 0000	10/15/2011 03/09/2010	18984 18984	00	19246 57	-262 57	LT15	Y

FROST NATIONAL BANK TRUSTEE STATEMENT OF CAPITAL GAINS AND LOSSES KENEDY, JOHN G JR CHAR TRUST

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TRUST YEAR ENDING 04/30/2012

1,	ROSI ILAK ENDING U	4/30/2012		
TAX PREPARER 45 TRUST ADMINISTRATOR 18 INVESTMENT OFFICER 338		LEGEND· F - FEDERA E - EXEMPT		I - INHERITED ACQ COST UNKNOWN
PROPERTY DESCRIPTION SHARES	DATE	SALES PRICE	COST BASIS	GAIN/LOSS TERM NC
14642 8200 GNMA I POOL #701962		36296UZ37 - MINOR = 20)	
SOLD 14642 8200	11/15/2011 03/09/2010	14642 82 14642 82	14840 72	-197 90 LT15 Y
15138 6800 GNMA I POOL #701962 SOLD ACQ 15138 6800	12/15/2011 03/09/2010	36296UZ37 - MINOR = 20 15138 68 15138 68	15337 78	-199 10 LT15 Y
5532 7300 GNMA I POOL #701962 SOLD		36296U237 - MINOR = 20 5532 73		-199 10 1113 1
ACQ 5532 7300 11303 5300 GNMA I POOL #701962	03/09/2010	5532 73 36296UZ37 - MINOR = 20	5603 44	-70 71 LT15 Y
SOLD ACQ 11303 5300	02/15/2012 03/09/2010	11303.53 11303.53	11443 99	-140 46 LT15 Y
10757 8100 GNMA I POOL #701962 SOLD	4 5% 6/15/39 - 03/15/2012	36296UZ37 - MINOR = 20 10757 81)	
ACQ 10757 8100 15454 5800 GNMA I POOL #701962		10757 81 36296UZ37 - MINOR = 20	10888 36)	-130 55 LT15 Y
SOLD ACQ 15454 5800	04/15/2012 03/09/2010	15454 58 15454.58	15637 46	-182 88 LT15 Y
650.0000 GOLDMAN SACHS GROUP SOLD	09/01/2011	73033.96		SUB TRUST F0486801
ACQ 80 0000	03/05/2010	8988.80	13311 19 20816 27	-4322 39 LT15 Y
120 0000 200 0000	04/06/2010 06/03/2010	13483.19 22471 99	28777 84	-7333 08 LT15 Y -6305.85 LT15 Y
250 0000	07/06/2010	28089 98	33421 22	-5331 24 LT15 Y
5000 0000 GOLDMAN SACRS GROUP				
SOLD ACQ 1000 0000	09/01/2011 06/03/2010	561799 70 112359 94	143903 30	-31543 36 LT15 Y
1000 0000	06/04/2010	112359 94	145509 00	-33149 06 LT15 Y
1500 0000	07/06/2010	168539.91	200527 35	-31987 44 LT15 Y -81584 94 ST Y
1500 0000 6261 9800 GNMA REMIC 09-101 L	12/20/2010 4% 10/20/38 -	168539.91 38376JQK3 - MINOR = 21	250124.85	-81584 94 ST Y
SOLD	09/20/2011	6261 98		
ACQ 6261 9800	07/29/2011	6261.98	6589.09	-327 11 ST Y
6442 3300 GNMA REMIC 09-101 L SOLD	4% 10/20/38 - 10/20/2011	38376JQK3 - MINOR = 21 6442 33	•	
ACQ 6442 3300	07/29/2011	6442 33	6768 56	-326 23 ST Y
6619 2900 GNMA REMIC 09-101 L	4 10/20/38 -	38376JQK3 - MINOR = 21		
SOLD ACQ 6619 2900	11/20/2011 07/29/2011	6619 29 6619 29	6942 87	-323.58 ST Y
6792 7600 GNMA REMIC 09-101 L		38376JQK3 - MINOR = 21		-323.26 21 1
SOLD	12/20/2011	6792 76		
ACQ 6792 7600	07/29/2011	6792 76	7113 47	-320 71 ST Y
6962 6300 GNMA REMIC 09-101 L SOLD	01/20/2012	38376JQK3 - MINOR = 21 6962 63	•	
ACQ 6962 6300	07/29/2011	5962 63	7278 99	-316 36 ST Y
7128 8100 GNMA REMIC 09-101 L		38376JQK3 - MINOR = 21	•	
SOLD ACO 7128 8100	02/20/2012 07/29/2011	7128 81 7128 81	7441 23	-312 42 ST Y
7291 2200 GNMA REMIC 09-101 L		38376JQK3 - MINOR = 21		242 14 21 1
SOLD	03/20/2012	7291 22	7602 11	310 00 CM V
ACQ 7291 2200 7243 7300 GNMA REMIC 09-101 L	07/29/2011 4% 10/20/38 ~	7291 22 38376JQK3 - MINOR = 21	7602 11	-310 89 ST Y
SOLD	04/20/2012	7243 73		
ACQ 7243 7300	07/29/2011	7243 73	7543 67	-299.94 ST Y
1104 0000 HALLIBURTON CO COM* SOLD	05/24/2011	K ≈ 42 52137 16		SUB TRUST F0486801
ACQ 114 0000	10/04/2007	5383 73	4517 19	866 54 LT15 Y
795 0000	10/25/2007	37544 42	32484 89	5059 53 LT15 Y
195 0000 7641 0000 HALLIBURTON CO COM*	11/02/2007 - 406216101 - MINO	9209 01 R = 42	7875 34	1333 67 LT15 Y
SOLD	05/24/2011	360851 50		
ACQ 3044 0000	11/02/2007	143755 00	122936 15	20818 85 LT15 Y
4597 0000 2433 0000 HALLIBURTON CO COM*	12/08/2008 - 406216101 - MINO	217096 50 R = 42	69184 85	147911 65 LT15 Y
SOLD	09/23/2011	78307 52		SUB TRUST F0486801
ACQ 333 0000	11/02/2007	10717 80	13448 67	-2730 87 LT15 Y
500 0000 1000 0000	04/04/2008 11/04/2008	16092 79 32185 58	20740 00 19827 84	-4647 21 LT15 Y 12357 74 LT15 Y
600 0000	06/16/2010	19311 35	16008 00	3303 35 LT15 Y
17403 0000 HALLIBURTON CO COM*				
SOLD ACQ 2403 0000	09/23/2011 12/08/2008	560125 65 77341 95	36165 15	41176 80 LT15 Y
7500 0000	12/10/2008	241391 85	126343 05	115048 80 LT15 Y
7500 0000	06/16/2010	241391 85	200147 25	41244 60 LT15 Y
7488 0000 HARMAN INTL INDS IN SOLD	C COM* - 413086109 - 06/06/2011	- MINOR = 42 343646 92		
ACQ 7488 0000	11/04/2010	343646 92	295566 34	48080 58 ST Y
1132 0000 HARMAN INTL INDS IN				CUD TRUCT COACCOS
SOLD ACO 1132 0000	06/06/2011 11/04/2010	51950 89 51950 89	44682 30	SUB TPUST F0486801 7268 59 ST /
2368 0000 HARMAN INTL INDS IN				
SOLD	06/14/2011	103288 51	33405 46	SUB TRUST F0486801
ACQ 823 0000 1200 0000	11/04/2010 11/10/2010	35897 99 52342 15	32485 46 47932 92	3412 53 ST / 4409 23 ST Y
345 0000	12/01/2010	15048 37	15761 84	-713 47 ST Y

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			ONICHA RADI 160.	4/30/2012				
TAX PREPARER - TRUST ADMINISTR	45 100 10			LEGEND F	- FEDERAL S - ST	ATE I - INHERI	TEN	
INVESTMENT OFFI					- EXEMPT FROM STATE			
DOADDDW DECCRI	METON	CUADEC	DATE	CNIEG DOZGE	COCH DAGE	- CN 131 /1 OCC	mpp.u	
PROPERTY DESCRI		SHARES	DATE	SALES PRICE	COST BASIS	GAIN/LOSS	TERM	NC
17077 0000	UNDWAN T	NULL THE THE		WYNOD 40				
	HAKMAN I OLC	INIT INDS INC	COM* - 413086109 06/14/2011	742691 54				
A	CQ	6127 0000	11/04/2010	267250 31	241844 94	25405 37		Y
		7000 0000 3900 0000	11/10/2010 12/01/2010	305329 23 170112 00	279356 00 178933 17	25973 23 -8821 17		Y
			OM * - 428236103 -	MINOR = 42	1,0335 1.			_
	OLD CQ	811 0000	05/13/2011 09/26/2008	73329 24 32838 22	39087 04	SUB TRUST -6248 82		Y
••	-4	500 0000	10/28/2008	20245 51	16255 00	3990 51	LT15	Ý
12949 0000	UEWI ETT	500 0000	06/05/2009 COM * - 428236103 -	20245 51 MINOR - 42	18749 25	1496 26	LT15	Ā
	OLD		05/13/2011	520269 15				
A	CQ	4849 0000 2000 0000	09/26/2008 10/29/2008	196340 97 80982 04	233702 89 72540 00	~37361 92 8442 04		Y Y
		3000 0000	03/12/2009	121473 07	88110 00	33363 07		Y
0500 0000	TI I TNOT	3000 0000	06/05/2009 INC COM * - 452308	121473 07	112497.30	8975 77	LT15	Y
	OLD	S TOOL WORKS	06/06/2011	478138.02	4			
	CQ	8588 0000	10/08/2009	478138.02	388156 98	89981 04	LT15	Y
	OPD	100L WORKS	INC COM * - 452308: 06/06/2011	51054 09	4	SUB TRUST	F0486801	
	CQ	917 0000	10/08/2009	51054 09	41446 20	9607 89		Y
	OPD TPTIMOTE	TOOL WORKS	INC COM * - 452308: 07/28/2011	109 - MINOR = 42 606965 23	!			
	CQ	2417 0000	10/08/2009	123104 39	109242 60	13861 79	LT15	Y
		3500 0000 3000 0000	10/14/2009 10/14/2009	178264 52 152798 16	158886 00 135958 20	19378 52 16839 96		Y Y
		3000 0000	12/03/2010	152798 16	151620 00	1178 16	ST	Ŷ
	ILLINOIS	TOOL WORKS	INC COM * - 452308: 07/28/2011	109 - MINOR = 42 84395 51	?	SUB TRUST	F0486801	
	Q Q	607 0000	10/08/2009	30916 16	27434 94	3481 22	LT15	
		500 0000 350 0000	10/14/2009 02/18/2010	25466 36 17826 45	22609 45 16263 56	2856 91 1562.89	LT15 LT15	Y Y
		200 0000	12/03/2010	10186.54	10108 00	78.54	ST	Ŷ
	INT'L BU	ISINESS MACHI	NES CORP COM * - 4! 06/02/2011	59200101 - MINOF 122907 16	R = 42			
A	CQ.	739 0000	06/08/2010	122907 16	91835 16	31072 00	ST	Y
	INT'L BU OLD	ISINESS MACHI	NES CORP COM * - 4! 06/02/2011	59200101 - MINOF 523114 83	R = 42			
A	₽Q.	3148 0000	06/08/2010	523114 83	391200 39	131914 44	ST	Y
	INT'L BU OLD	ISINESS MACHI	NES CORP COM * - 4! 06/02/2011	59200101 - MINOF 15301 02	l = 42	SUB TRUST	E0496901	
	CQ	92 0000	06/08/2010	15301 02	11432 79	3868.23	ST	Y
	INT'L BU	SINESS MACHI	NES CORP COM * - 49 06/02/2011	59200101 - MINOF 71122 34	R = 42	SUB TRUST	E0406001	
	CQ	428 0000	06/08/2010	71122 34	53187 35	17934 99	ST	Y
	INT'L BU	ISINESS MACHI	NES CORP COM * - 4! 07/13/2011	59200101 - MINOF 62491 65	l = 42	CITY WILLIAM	D0406001	
	CQ CQ	90 0000	06/08/2010	15842 95	11184 25	SUB TRUST 4658 70	LT15	
		160 0000 105 0000	07/06/2010 09/13/2010	28165 25 18483 45	19894 40	8270 85		Y Y
2473 0000	INT'L BU		NES CORP COM * - 45		13600 19 t = 42	4883 26	ST	ĭ
	OLD	473 0000	07/13/2011	435329 16	E 0 7 7 0 4 7	24404 05	1 11 1 1	v
A	CQ.	1000 0000	06/08/2010 06/15/2010	83263 52 176032 82	58779 47 129581 30	24484 05 46451 52	LT15 LT15	Y Y
EDD4 3000	TUV CTOR	1000 0000	07/07/2010 ES FUND CL I* - 469	176032 82	125320 00	50712 82	LT15	Y
	DPD CFOR	ML MAIURAL R	01/18/2012	112327 01	= 33	SUB TRUST	F0485801	
A	_Q	1635 1080 2657 8070	12/08/2008 05/08/2009	30690.98 49887.04	22700 48	7990 50	LT15	
		1691 4750	07/16/2009	31748 99	40000 00 25000 00	9887 04 6748 99	LT15 LT15	
		AL NATURAL R	ES FUND CL I* - 469		= 53			
	OLD CQ	3621 5010	01/18/2012 10/29/2008	934385 26 67975 57	56826 41	11149 16	LT15	ŧ
		22747 9440	02/04/2009	426978 91	250000 00	176978 91	LT15	Y
1571 0000		23411 3360 NC COM* - 64	03/13/2009 110D104 - MINOR = 4	439430 78 12	250000 00	189430 78	LT15	Y
	DLD	1571 0000	12/21/2011	54602 67	0.1003 05	SUB TRUST		
	CQ NETAPP I	1571 0000 NC COM* - 64	02/09/2011 110D104 - MINOR = 4	54602 67 12	94081 85	-39479 18	ST	
S	DLD		12/21/2011	388752 92				
		11185 0000 ORPORATION*	02/09/2011 - 68389X105 - MINOF	388752 92 8 = 42	669831 62	-281078 70	ST	
SC	DLD		02/15/2012	84689 37		SUB TRUST		
A	CQ.	1800 0000 700 0000	05/27/2005 06/28/2005	50813 62 19760 85	23131 44 8932 00	27682 18 10828 85	LT15 LT15	
	00101-	500 0000	09/12/2005	14114 90	6755 00	7359 90	LT15	
	ORACLE C DLD -	ORPORATION*	- 68389X105 - MINOF 02/15/2012	8 = 42 564878 11				
A		6545 0000	05/27/2005	184763 98	84108 49	100655 49	LT15	
		5000 0000 4000 0000	06/20/2005 09/12/2005	141148 95 112919 16	62250 00 53600 00	78898 95 59319 16	LT15 LT15	
		4465 0000	11/08/2005	125046 02	56705 50	69340 52	LT15	

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TRUST YEAR ENDING 04/30/2012
TAX PREPARER 45
TRUST ADMINISTRATOR 18

TAX PREPARE TRUST ADMIN INVESTMENT	NISTRATOR. 18	В		LEGEND.			- STATE TATE U	I - INHERI - ACQ COST UNKNO		
PROPERTY DE		SHARES	DATE	SALES PR		COST BA		GAIN/LOSS	TERM	NC
7509		INC COM * -	717081103 - MINOR		20			CITO TOUGH	D0 + 0 < 0.02	
	SOLD ACO	3759 0000	02/08/2012 01/29/2010	156681 78434		71120	28	SUB TRUST 7314 26	LT15	
		1000 0000	02/01/2010	20865	80	18889	9 90	1975 90	LT15	Y
		600 0000	02/19/2010	12519		10846		1672 62	LT15	
		1400 0000 750.0000	05/04/2010 09/13/2010	29212 15649		24314 12802		4897 20 2846 85	LT15 LT15	Y
62633			717081103 - MINOR	= 42					_	
	SOLD ACQ	31133 0000	02/08/2012	1306887 649614		589036	. 76	60578 54	LT15	Y
-	ACQ	31133 0000 5000 0000	01/29/2010 02/01/2010	104328		94449		9879 49	LT15	
		5000 0000	02/19/2010	104328		90399		13929 49	LT15	
		4000 0000 7500 0000	05/04/2010 06/15/2010	83463 156493		69474 115714		13988 79 40778 99	LT15 LT15	
		5000 0000	09/10/2010	104328		84599		19729 49	LT15	Y
2020	0000 00 777	5000 0000	11/02/2010	104328	. 99	89055	5 50	15273 49	LT15	Y
2820	SOLD	DE MEDICAL IN	C COM* - 790849103 12/09/2011	98557	95			SUB TRUST	F0486801	
	ACQ	2420 0000	02/07/2011	84578	10	105352		-20774 18	ST	
20000	пп. те попо	400 0000 DE MEDICAL IN	03/22/2011 C COM* - 790849103	13979 - MINOR = 42	. 85	20603	36	-6623 51	ST	
20000	SOLD		12/09/2011	698992						
	ACQ	17295 0000 2705 0000	02/07/2011	604453		752920 130651		-148466 71	ST ST	
5700	9700 SANTANI		02/18/2011 1 89% 5/15/17	94538 - 80282LABO -			. 23	-36112 49	21	
	SOLD		05/15/2011	5700	. 97					
5443	ACQ 8800 SANTANI	5700 9700 DER 11-51A C	02/04/2011 1 89% 5/15/17	5700 - 802821.AB0 -		5700 OR = 87	91	0 06	ST	Y
34.13	SOLD	55. 11 51. C	06/15/2011	5443	88					
5262	ACQ CANTEAN	5443 8800	02/04/2011 1 89% 5/15/17	5443		5443	83	0.05	ST	¥
2363	6400 SANTANI SOLD	DEK 11-SIM C	07/15/2011	5363		DR - 87				
5407	ACQ	5363.6400	02/04/2011	5363		5363	59	0 05	ST	Y
5487	.1100 SANTANI SOLD	DER 11-SIA C	1 89% 5/15/17 08/15/2011	- 80282LABU - 5487		JR = 87				
	ACQ	5487 1100	02/04/2011	5487	11	5487	05	0 06	ST	Y
5616	.0400 SANTANI SOLD	DER 11-S1A C	1 89% 5/15/17 09/15/2011	- 80282LAB0 - 5616		OR = 87				
	ACQ	5616 0400	02/04/2011	5616	04	5615	98	0 06	ST	Y
5527	.5700 SANTANI SOLD	DER 11-SIA C	1 891 5/15/17	- 80282LAB0 - 5527		OR ≈ 87				
	ACQ	5527 5700	10/15/2011 02/04/2011	5527		5527	51	0.06	ST	Y
5326	0200 SANTANI	DER 11-S1A C	1 89% 5/15/17			OR = 87				
	SOLD ACO	5326 0200	11/15/2011 02/04/2011	5326 5326		5325	97	0 05	SŤ	Y
5074	2900 SANTAN		1 89% 5/15/17	- 80282LABO -	MIN					
	SOLD ACO	5074 2900	12/15/2011 02/04/2011	5074 5074		5074	24	0 05	ST	Y
4946	4200 SANTAN		1 89% 5/15/17	- 80282LAB0 -	MINO		~ `			•
	SOLD ACO	4946 4200	01/15/2012 02/04/2011	4946 4946		4946	37	0 05	ST	Y
4923	6000 SANTANI		1 89% 5/15/17				· .	0 03	9.	•
	SOLD ACO	4923 6000	02/15/2012 02/04/2011	4923 4923		4923	55	0 05	LT15	v
5128	7800 SANTANI		1 89% 5/15/17				33	0 03	2113	•
	SOLD	5128 7800	03/15/2012	5128 5128		5128	77	0 05	LT15	v
4692	ACQ 3600 SANTAN		02/04/2011 1 89% 5/15/17				/3	0 03	P112	1
	SOLD		04/15/2012	4692	. 36				•	
3755	ACQ 0000 SUNCOR	4692 3600 ENERGY INC*	02/04/2011 - 867224107 - MINO	4692 R = 44	36	4692	31	0 05	LT15	1
	SOLD		03/22/2012	122060				SUB TRUST		
	ACQ	2505 0000 500 0000	10/08/2010 10/13/2010	81427 16253		86344 17678		-4917 04 -1425 44	LT15 LT15	
	,	75 0 0000	02/14/2011	24379		31522		-7142 85	LT15	-
26505	0000 SUNCOR SQLD	ENERGY INC*	- 867224107 - MINO 03/22/2012	R = 44 861574	55					
	ACQ	17505 0000	10/08/2010	569019		603379		-34360 33	LT15	
		5000 0000 4000 0000	10/13/2010 12/22/2010	162530 130024		176798 151014		-14267 93 -20989 54	LT15	
734	0000 UNION		COM* - 907818108 -		40	131014	00	-20789 34	LT15	1
	SOLD		08/23/2011	63102		F.1F03	0.7	SUB TRUST		
5998	ACQ 0000 UNION	734 0000 PACIFIC CORP	03/25/2010 COM* - 907818108 -	63102 MINOR = 42	10	54523	87	8578 29	LT15	ľ
2220	SOLD		08/23/2011	515649						
26705	ACQ	5998 0000 REORD INTERNA	03/25/2010 TIONAL LTD COM* -	515649 H27013103 - MJ		445550	63	70098 92	LT15	Y
	SOLD		06/02/2011	515657	16					
	ACQ ~		02/17/201 <u>1</u> TIONAL LTD COM* -	5 <u>1</u> 5657 หว ว ดาจากวิ - Mi		697179	11	95	ST	
3521	SOLD		05/02/2011	73533	34			SUB TRUST		
	QDA	3821 0000	02/17/2011	73533	34	99418	60	-25885 26	ST	

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TAX PREPARER 45
TRUST ADMINISTRATOR 18
INVESTMENT OFFICER 338

LEGEND F - FEDERAL S - STATE I - INHERITED E - EXEMPT FROM STATE U - ACQ COST UNKNOWN

PROPERTY DESCRIPTION SHARES DATE SALES PRICE COST BASIS GAIN/LOSS TERM NC

SUMMARY OF CAPITAL GAINS/LOSSES

FEDERAL	SHORT TERM	LONG TERM 28%	LONG TERM 15%	ST WASH SALE	LT WASH SALE	1250 GAIN
NONCOVERED FROM ABOVE	867202 02	0 00	2957458 27	0 00	0 00	0 00*
COVERED FROM ABOVE	-714911 38	0 00	-7142 85	0 00	0 00	0 00
COMMON TRUST FUND	0 00	0 00	0 00		• • • • • • • • • • • • • • • • • • • •	0 00
CAPITAL GAIN DIVIDENDS	0 00	0 00	178655 30			0 00
	152290 64	0 00	3128970.72	0 00	0 00	0 00
	132230 04		5126576.72		0 00	0 00
STATE						
NONCOVERED FROM ABOVE	867202 02	0 00	2957458 27	0 00	0 00	0 00*
COVERED FROM ABOVE	-714911 38	0.00	-7142 85	0.00	0 00	• • • • • • • • • • • • • • • • • • • •
COMMON TRUST FUND	0 00	0 00	0 00			0.00
CAPITAL GAIN DIVIDENDS	0 00	0.00	178655 30			0 00
	152290 64	0.00	3128970 72	0 00	0 00	0 00
		==========	==========			=========

* - 1250 GAIN DETAILED ON TRANS PAGES, NOT ABOVE

CAPITAL LOSS CARRYOVER

FEDERAL

0 00

0 00

TEXAS N/A N/A