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Form 990-PF

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

Department of the Treasury Internal Revenue Service

Treated as a Private Foundation

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

OMB No 1545-0052

2011

FOI	ror calendar year 2011 or tax year beginning July 1 , 2011, and ending June 30 , 2012									
Na	me of for	undation	· .			A Employer	identification number			
The June Bug Center, Inc. 54-2004834 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions)										
Nu	mber and	d street (or P O box number if mail is not delivered to street address)		Room/s	surte	B Telephone	number (see instruction	s)		
c/0	Ale	exander I. Saunders, P.O. Box 14125				540-983-7607				
Cit	City or town, state, and ZIP code					C If exemption application is pending, check here ▶				
Roa	anoke	e, VA 24038						_		
G	Check	all that apply:	of a former p	ublic c	charity	D 1. Foreign	organizations, check t	nere ▶□		
		☐ Final return ☐ Amended r				2. Foreign	organizations meeting	the 85% test		
		🛛 Address change 🗌 Name char					nere and attach comput			
		type of organization 🔯 Section 501(c)(3) exempt p				E If private f	oundation status was te	erminated under		
		n 4947(a)(1) nonexempt charitable trust				section 50	07(b)(1)(A), check here	▶□		
ı		narket value of all assets at J Accounting method:	t <u>x</u> . Cash	∐ Ac	crual	F If the foun	dation is in a 60-month	termination		
	line 16	f year (from Part II, col. (c),				under sed	tion 507(b)(1)(B), check	k here ▶ 🗌		
П			on casn basis	5)						
	art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue expenses p			investment	(c) Adjusted net	(d) Disbursements for charitable		
		the amounts in column (a) (see instructions))	books	۱ ا	ır	come	income	purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)	90,290	00				(,,		
	2	Check ► ☐ if the foundation is not required to attach Sch B	30,230							
	3	Interest on savings and temporary cash investments								
	4	Dividends and interest from securities								
	5a	Gross rents	960	0.00			960.00			
	b	Net rental income or (loss)								
<u>•</u>	6a	Net gain or (loss) from sale of assets not on line 10			1					
Revenue	b	Gross sales price for all assets on line 6a								
Š	7	Capital gain net income (from Part IV, line 2) .				0.00				
ď	8	Net short-term capital gain				•				
	9	Income modifications								
	10a	Gross sales less returns and allowances								
	b	Less. Cost of goods sold								
	C	Gross profit or (loss) (attach schedule)		0.00						
	11	Other income (attach schedule)	16,489			0.00	16,489.00			
_	12	Total. Add lines 1 through 11	107,739 43,180			0.00	17,449.00 43,180.00	43 100 00		
penses	14	Other employee salaries and wages	7,089				7,089.00	43,180.00 7,089.00		
SUS	15	Pension plans, employee benefits	7,003	,.00			7,009.00	7,089.00		
	16a	Legal fees (attach schedule)				-				
Ä	Ь	Accounting fees (attach schedule)			-			-		
<u>≷</u>	c	Other professional fees (attach schedule)					-			
rat	17	Interest	Ĭ							
ist	18	Taxes (attach schedule) (see instructions)	(2),346	5.00		-	11,346.00			
를	19	Depreciation (attach schedule) and depletion 2 2013	(A) , 322	2.00			11,322.00			
퉏	20	Occupancy	\S\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
þ	21	Travel, conferences, and meetings OCDEN UT	873	3.00			873.00	873.00		
a	22									
Operating and Administrative	23	Other expenses (attach schedule)	46,703	3.00			46,703.00	46,703.00		
aŧ	24	Total operating and administrative expenses. Add lines 13 through 23	100 51			2 22	400 540 00	05 045 00		
Jer.	2F	_	120,513	5.00		0.00	120,513.00	97,845.00		
Ö	25 26	Contributions, gifts, grants paid	120 512			0.00	120 F12 00	07 045 00		
_	27	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12:	120,513	5.00		0.00	120,513.00	97,845.00		
	a	Excess of revenue over expenses and disbursements	(12,774							
	b	Net investment income (if negative, enter -0-)	(14, 174			0.00				
		Adjusted net income (if negative, enter -0-)				0.00	0.00			

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2011)

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Pa	rt II	Balance Sheets Attached schedules and amounts in the desc	ription column	Beginning of year	End of	
		should be for end-of-year amounts only (Se	e instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
ı	1	Cash—non-interest-bearing		9,204.00	156.00	156.00
	2	Savings and temporary cash investments		204.00		
Į	3	Accounts receivable >				
		Less: allowance for doubtful accounts				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees,				
		disqualified persons (attach schedule) (see instruction	ns)			
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts ▶				
ts	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U.S and state government obligations (attack				
	b	Investments—corporate stock (attach schedule)	-	··- <u>-</u> -		
	С	Investments—corporate bonds (attach schedule) .				··
	11	Investments—land, buildings, and equipment: basis				
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis ▶				
	1-7	Less accumulated depreciation (attach schedule)		248,167.00	236,845.00	280,000.00
	15	Other assets (describe	133,003	240,107.00	230,043.00	200,000.00
	16	Other assets (describe ► Total assets (to be completed by all filers-	-see the			
		instructions Also, see page 1, item l)		257,575.00	237,001.00	280,156.00
	17	Accounts payable and accrued expenses		237,373.00	257,001.00	200,130.00
	18	Grants payable			_ 	
Liabilities	19	• •			 .	
Ξ	20	Deferred revenue Loans from officers, directors, trustees, and other disqualifie				
ğ	21	Mortgages and other notes payable (attach schedule	•			1
Ë	22	Other liabilities (describe roces payable (attach schedule)		0 025 00	0 001 00	
	23	Total liabilities (add lines 17 through 22)	································	8,925.00	9,921.00	
	23_			8,925.00	9,921.00	
S		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and	. ▶ ∐			
alances	24	Unrestricted		249 650 00	227 001 00	
<u>ē</u>	l			248,650.00	237,001.00	
	25 26	Temporarily restricted				
Þ	20	Permanently restricted				
בֿ		Foundations that do not follow SFAS 117, check I and complete lines 27 through 31.	iere ► 📋			
Net Assets or Fund B	27	-				
S	27 28	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipme				
šet	i e	· · · · · · · · · · · · · · · · · · ·				
Š	29	Retained earnings, accumulated income, endowment, or o		0.40 650 00	007 001 00	
it/	30	Total net assets or fund balances (see instructions Total liabilities and net assets/fund balan		248,650.00	237,001.00	
ž	31			055 555 00	0.4.6 0.00 0.0	
		instructions)		257,575.00	246,922.00	
	rt III	Analysis of Changes in Net Assets or Fundal net assets or fund balances at beginning of year—			ograe with	
1		al net assets or fund balances at beginning of year— -of-year figure reported on prior year's return)			<u> </u>	040 650 00
_						248,650.00
2		er amount from Part I, line 27a			2	(12,774.00
3		er increases not included in line 2 (itemize) Adjus				1,125.00
4		l lines 1, 2, and 3		· · · · · · · ·		237,001.00
5	Dec	creases not included in line 2 (Itemize) ► al net assets or fund balances at end of year (line 4 mir	(in - 5)	Dad II askess (4) "	5	000 000
6	Ota	al net assets or fund balances at end of year (line 4 mil	ius iine 5)—	raπ II, column (b), lir	ne 30 6	237,001.00
						Form MMII-PF (2011)

		nd(s) of property sold (e g , real esta or common stock, 200 shs MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
b_						
<u>c</u>	 				-	
<u>d</u>						·
<u>е</u>		(f) Depreciation allowed	(a) Cost or	other basis	(h) Ga	n or (loss)
	(e) Gross sales price	(or allowable)		nse of sale		(f) minus (g)
		······································		<u>.</u>		_
b						
c					-	
d						_
е						
	Complete only for assets showing	ng gain in column (h) and owner	by the foundation	on 12/31/69		l (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i)		t less than -0-) or from col (h))
а						
b						
С						
d						
е			<u> </u>			
2	Capital gain net income or (r		n, also enter in Pa s), enter -0- in Pa		2	
3	Net short-term capital gain of If gain, also enter in Part I,	line 8, column (c) (see inst		s), enter -0- in		
D4					3	
For o	V Qualification Under ptional use by domestic private	Section 4940(e) for Rete foundations subject to the	duced Tax on I	Net Investmen	Income	
For o f sect Vas ti f "Yes	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the se s," the foundation does not qu	r Section 4940(e) for Re- te foundations subject to the this part blank. ction 4942 tax on the distrib alify under section 4940(e).	duced Tax on I section 4940(a) utable amount of Do not complete	Net Investmen tax on net investor any year in the b this part.	t Income ment income.) ase period?	☐ Yes ☐ N
For o f sect Vas t	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the se by," the foundation does not qui Enter the appropriate amount	r Section 4940(e) for Re- te foundations subject to the this part blank. ction 4942 tax on the distrib alify under section 4940(e).	duced Tax on I section 4940(a) utable amount of Do not complete	Net Investmen tax on net investor any year in the b this part.	t Income ment income.) ase period?	
For o f sect Was th f "Yes 1	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the se s," the foundation does not qu	r Section 4940(e) for Re- te foundations subject to the this part blank. ction 4942 tax on the distrib alify under section 4940(e).	section 4940(a) utable amount of Do not complete ear; see the instru	Net Investmen tax on net investor any year in the b this part.	t Income ment income.) ase period? aking any entries.	☐ Yes ☐ N (d) stribution ratio divided by col (c))
For o f sect Vas ti f "Yes 1	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the set," the foundation does not qualified the appropriate amount (a) Base period years	this part blank. ction 4942 tax on the distribulify under section 4940(e). it in each column for each y	section 4940(a) utable amount of Do not complete ear; see the instru	Net Investmen tax on net invest any year in the b this part. uctions before ma	t Income ment income.) ase period? aking any entries.	(d) stribution ratio
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For o f sect Was th f "Yes 1	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the set," the foundation does not quenter the appropriate amount (a) Base period years (or tax year beginning in) 2010 2009 2008	this part blank. ction 4942 tax on the distribulify under section 4940(e). it in each column for each y	section 4940(a) utable amount of Do not complete ear; see the instru	Net Investmen tax on net invest any year in the b this part. uctions before ma	t Income ment income.) ase period? aking any entries.	(d) stribution ratio
For o f sect Was th f "Yes 1	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the set," the foundation does not quenter the appropriate amour (a) Base period years index year (or tax year beginning in) 2010 2009 2008 2007	this part blank. ction 4942 tax on the distribulify under section 4940(e). it in each column for each y	section 4940(a) utable amount of Do not complete ear; see the instru	Net Investmen tax on net invest any year in the b this part. uctions before ma	t Income ment income.) ase period? aking any entries.	(d) stribution ratio
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For o f sect Was the f "Yes 1 Cale	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the set," the foundation does not quere the appropriate amount (a) Base period years indar year (or tax year beginning in) 2010 2009 2008 2007 2006	te foundations subject to the this part blank. ction 4942 tax on the distribalify under section 4940(e). It in each column for each your section distributed the thick that is a section 4940(e).	utable amount of Do not complete ear; see the instru	Net Investmen tax on net invest any year in the b this part. uctions before ma (c) of nonchantable-use a	t Income ment income.) ase period? aking any entries. (col (b)	(d) stribution ratio
For o f sect Was tl f "Yes 1 Cale	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the set," the foundation does not quit the appropriate amount (a) Base period years index year (or tax year beginning in) 2010 2009 2008 2007 2006 Total of line 1, column (d)	te foundations subject to the this part blank. ction 4942 tax on the distribalify under section 4940(e). It in each column for each y Adjusted qualifying distribution	utable amount of Do not complete ear; see the instru	Net Investmen tax on net invest any year in the b this part. uctions before ma (c) of nonchantable-use a	t Income ment income.) ase period? aking any entries. (col (b)	(d) stribution ratio
For o f sect Was th f "Yes 1 Cale	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the set," the foundation does not quere the appropriate amount (a) Base period years indar year (or tax year beginning in) 2010 2009 2008 2007 2006	te foundations subject to the this part blank. ction 4942 tax on the distribulify under section 4940(e). It in each column for each y Adjusted qualifying distribution the 5-year base period—di	utable amount of Do not complete ear; see the instru	any year in the bethis part. (c) of nonchantable-use a	t Income ment income.) ase period? aking any entries. ssets (col (b)	(d) stribution ratio
For o f sect Was tl f "Yes 1 Cale	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the set," the foundation does not quenter the appropriate amount (a) Base period years indar year (or tax year beginning in) 2010 2009 2008 2007 2006 Total of line 1, column (d) Average distribution ratio for	te foundations subject to the te foundations subject to the this part blank. ction 4942 tax on the distribalify under section 4940(e). In the each column for each you had the each qualifying distributed and the each qualifying distributed the foundation has been in existence if	utable amount of Do not complete ear; see the instru	any year in the bethis part. uctions before many of nonchantable-use and the second s	t Income ment income.) ase period? aking any entries. ssets (col (b)	(d) stribution ratio
(For o f sect Was ti f "Yes 1 Cale	Qualification Under ptional use by domestic private from 4940(d)(2) applies, leave the foundation liable for the set of," the foundation does not quare the appropriate amount (a) Base period years index year (or tax year beginning in) 2010 2009 2008 2007 2006 Total of line 1, column (d) Average distribution ratio for number of years the foundate	te foundations subject to the te foundations subject to the this part blank. ction 4942 tax on the distribalify under section 4940(e). In the each column for each you had the each qualifying distributed and the each qualifying distributed the foundation has been in existence if	utable amount of Do not complete ear; see the instrums Net value of the total on I less than 5 years	any year in the bethis part. uctions before ma (c) of nonchantable-use a	ase period? aking any entries. (col (b)	(d) stribution ratio
For o f sect Was the few sectors of the few sectors	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the set, the foundation does not quare the appropriate amount (a) Base period years index year (or tax year beginning in) 2010 2009 2008 2007 2006 Total of line 1, column (d) Average distribution ratio for number of years the foundate.	te foundations subject to the te foundations subject to the this part blank. ction 4942 tax on the distribalify under section 4940(e). In the each column for each you have a distributed and the each you have a distributed	utable amount of Do not complete ear; see the instructions Net value of the value of the total on I less than 5 years from Part X, line	any year in the bethis part. uctions before ma (c) of nonchantable-use a	t Income ment income.) ase period? aking any entries. ssets (col (b)	(d) stribution ratio
If sect Was ti If "Yes 1 Cale 2 3	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the set," the foundation does not quenter the appropriate amount (a) Base period years indar year (or tax year beginning in) 2010 2009 2008 2007 2006 Total of line 1, column (d) Average distribution ratio for number of years the foundation for the private in the priv	te foundations subject to the te foundations subject to the this part blank. ction 4942 tax on the distribalify under section 4940(e). In the each column for each you have a column f	utable amount of Do not complete ear; see the instructions Net value of the value of the value of the total on I less than 5 years from Part X, line	any year in the bethis part. uctions before ma (c) of nonchantable-use a	t Income ment income.) ase period? aking any entries. ssets (col (b)	(d) stribution ratio

Part \		48—s	see in	stru	ictio	ns)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check					0.00
	here ► □ and enter 1% of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				
3	Add lines 1 and 2	3			(0.00
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			(0.00
6	Credits/Payments:					
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a					
b	Exempt foreign organizations—tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) . 6c					
d	Backup withholding erroneously withheld	l				
7	Total credits and payments Add lines 6a through 6d	7			(0.00
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9			(0.00
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			(0.00
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶	11			(0.00
Part \						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation		-	\rightarrow	Yes	—
	participate or intervene in any political campaign?			la	_	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see of the instructions for definition)?		1	ь		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any published or distributed by the foundation in connection with the activities.	materi	als			
С	Did the foundation file Form 1120-POL for this year?		. 1	lc		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in on foundation managers. ▶ \$	posed	1			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		. -	2		х
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes					
4-2	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•		3 la		X
+a b	15 WALL THE STATE OF THE STATE	• •	_	₽a ₽b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		x
	If "Yes," attach the statement required by General Instruction T.	• •	· -	┪		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					1 1
	• By state legislation that effectively amends the governing instrument so that no mandatory directive	ons th	at			1
	conflict with the state law remain in the governing instrument?			6		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), an	d Part .	xv 🗀	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		<u> </u>			
L	Virginia If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney					
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation		. [3b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 494			[
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV) complete Part XIV		.	9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list names and addresses	ting th	neir	10		x

Page	ŧ

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
4.4	Website address ▶ junebugcenter.org			
14	The books are in care of ▶ Donald H. McBroom Telephone no. ▶ Located at ▶ Floyd, VA			
15	Located at ► Floyd, VA Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here. and enter the amount of tax-exempt interest received or accrued during the year ► 15	, ,	 , l	\
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☐ No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . Yes No		ľ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
_	all years listed, answer "No" and attach statement—see instructions.)	2b	 	X
C 20	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.)	3b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		Х

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	VII D	_ 6	n: =	4=00	· · · · · · · ·	<u> </u>	1 /			Page
	VII-B Statements Regarding Activities			4720	May Be R	equire	d (contin	nued)		
5a	= = mig me year are are realisation pay or mean any amount to									1
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . ☐ Yes ☑ No									
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?									
	directly or indirectly, any voter registration drive?								1 1	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)									
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to compare the prevention of cruelty the cruelty the cruelty the prevention of cruelty the c	, charita	ıble, scientific	c, literar		ational	∏Yes	⊠ No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	e transa	ctions fail to	qualify	under the e	exception	ns descril	_		
	Regulations section 53 4945 or in a current notice	regardir	ng disaster as	sistance	e (see instri	ictions)	?		5b	>
	Organizations relying on a current notice regardi	ng disas	ster assistand	ce chec	k here .			ightharpoons		
C	If the answer is "Yes" to question 5a(4), does t			exemp	tion from t	he tax				
	•	because it maintained expenditure responsibility for the grant?								
_	If "Yes," attach the statement required by Regula									
6a	Did the foundation, during the year, receive any		•	-		niums		_		
	·						Yes	∑ No	<u>-</u>	
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.	ns, direc	tly or indirec	tly, on a	personal l	penefit	contract?	•	6b	X
	At any time during the tax year, was the foundation						☐ Yes		<u> </u>	_
	If "Yes," did the foundation receive any proceeds								7b	
ган	Information About Officers, Direct and Contractors	iois, i	rustees, re	ounua	lion wana	igers,	nigiliy r	alu E	mpioye	es,
1	List all officers, directors, trustees, foundation	n mana	agers and th	eir con	pensation	lsee i	nstructio	ns)		
	(a) Name and address	(b) Title	e, and average rs per week ed to position	(c) Cor	npensation paid, enter -0-)	(d) emplo	Contributions byee benefit erred compe	to plans	(e) Expens	e accour
ary	Souder	+	Director		•		•			
	Box 940, Floyd VA 24091	40 H	ours	43	,180.00					
	y Moore	Dire	ctor							
	Box 1000, Ferrum College VA 2408	38			N/A			N/A		N
								11/11		
	erick Pryor	Dire	ctor				-	11711		
red		Dire	ctor		N/A			N/A		
red 06 lex	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders	Direc								
red 06 lex 0 S	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011	Dire	ctor		N/A N/A			N/A N/A		N
red 06 lex	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe	Dire	ctor	se incl	N/A N/A	ine 1—	see instr	N/A N/A	s). If no	N
red 06 lex 0 S	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011	Dire	ctor		N/A N/A	ne 1—	1	N/A N/A	s). If no	N.
red 06 lex 0 S 2	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe	Direc	ctor	average	N/A N/A		(d) Contribu	N/A N/A ruction	(e) Expens	N N ne, en
red 06 lex 0 S 2	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	ner than tho	average veek	N/A N/A uded on l		(d) Contribu	N/A N/A ruction		N N ne, en
red 06 lex 0 S 2	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N N ne, en
red 06 lex 0 S	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N ne, en
red 06 lex 0 S 2	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N ne, er
red 06 lex 0 S	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N ne, en
red 06 lex 0 S 2	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N ne, en
red 06 lex 0 S	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N ne, en
red 06 lex 0 S	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N N ne, en
red 06 lex 0 S	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N ne, en
red 06 lex 0 S 2	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N N ne, en
red 06 lex 0 S 2	erick Pryor Frances Dr., Roanoke VA 24017 ander Saunders Jefferson St, Roanoke VA 24011 Compensation of five highest-paid employe "NONE."	Direc	(b) Title, and a hours per v	average veek	N/A N/A uded on l		(d) Contribution of the co	N/A N/A ruction	(e) Expens	N N ne, en

3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Denr	is Souder	
		7,089.00
Tota	number of others receiving over \$50,000 for professional services	
Dar	t IX-A Summary of Direct Charitable Activities	*
ı aı	GAPA Summary of Direct Charlesbie Activities	
	t the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of panizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	The June Bug Center is directly involved in delivering performances in	
	music and theatre as well as education in stagecraft, music and theatre.	
_	Community theatre serves the community in ways that improve wellness and eduction	. 97,845.00
2	·	-
	······	
3		
3		-
		•
4		
		-
	t IX-B Summary of Program-Related Investments (see instructions)	
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	See above	-
		-
2		
_		-
	•	-
All	other program-related investments. See instructions	
3		_
		_
Tota	I. Add lines 1 through 3	
		Form 990-PF (2011

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions)	n foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0.00
b	Average of monthly cash balances	1b	4,000.00
C	Fair market value of all other assets (see instructions)	1c	0.00
d	Total (add lines 1a, b, and c)	1d	4,000.00
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	4,000.00
4	Cash deemed held for charitable activities. Enter 11/2 % of line 3 (for greater amount, see		· · · · · · · · · · · · · · · · · · ·
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,000.00
6	Minimum investment return. Enter 5% of line 5	6	200.00
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ 🖫 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	N/A
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI) 2b	1	
С	Add lines 2a and 2b	2c	0.00
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.00
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.00
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0.00
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	97,845.00
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1 . 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	97,845.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	97,845.00
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g wheth	ner the foundation

Part	XIII Undistributed Income (see instructio	(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years pnor to 2010	2010	2011
	line 7				0.00
2	Undistributed income, if any, as of the end of 2011:		·		
а	Enter amount for 2010 only			0.00	
b	Total for prior years: 20, 20, 20		0.00		
3	Excess distributions carryover, if any, to 2011:				
a	From 2006			1	
b	From 2007				
C d	From 2008				
u e	From 2010				
f	Total of lines 3a through e	0.00			
4	Qualifying distributions for 2011 from Part XII,	0.00			
·	line 4: ▶ \$				
а	Applied to 2010, but not more than line 2a .				
D	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2011 distributable amount				200.00
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2011				·-
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	0.00			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.00		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
а	Subtract line 6c from line 6b. Taxable amount—see instructions		0.00		
е	Undistributed income for 2010. Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions			0.00	
f	Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2012				0.00
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) .				
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2012.				
4-	Subtract lines 7 and 8 from line 6a	0.00			
10	Analysis of line 9:				
a	Excess from 2007 Excess from 2008				
b c	Excess from 2008 Excess from 2009				
d	Excess from 2010				
9	Excess from 2011				

Part 2	XIV Private Operating Founda	tions (see instru	ctions and Part \	/II-A, question 9)	
1a	If the foundation has received a ruling	or determination	letter that it is a p	nvate operating		
	foundation, and the ruling is effective for	2011, enter the dat	e of the ruling	•	5/14/2001	
b	Check box to indicate whether the found	dation is a private o	perating foundatio	n described in sec	tion 😠 4942(j)(3	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(c) Total
	income from Part I or the minimum investment return from Part X for	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	each year listed	0.00				0.00
b	85% of line 2a	0.00	0.00	0.00	0.00	0.00
	Qualifying distributions from Part XII,					
	line 4 for each year listed .	97,845.00	129,873.00	134,921.00	183,630.00	546,269.00
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0.00
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	97,845.00	129,873.00	134,921.00	183,630.00	
3	Complete 3a, b, or c for the alternative test relied upon.	37,043.00	125,075.00	134,321.00	103,030.00	340,203.00
а	"Assets" alternative test—enter					
_	(1) Value of all assets	280,156.00	248,167.00	248,970.00	248,970.00	1,026,263.00
	(2) Value of assets qualifying under	,				
	section 4942(j)(3)(B)(i)	280,000.00	248,167.00	248,970.00	248,970.00	1,026,107.00
b	"Endowment" alternative test—enter 2/3				· · · · · · · · · · · · · · · · · · ·	
	of minimum investment return shown in Part X, line 6 for each year listed					0.00
С	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0.00
	(2) Support from general public				-	
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.00
	(3) Largest amount of support from an exempt organization .					0.00
	(4) Gross investment income .					0.00
Part	XV Supplementary Information	on (Complete th	is part only if tl	he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	-see instruction	ıs.)			
1	Information Regarding Foundation	Managers:				<u> </u>
а	List any managers of the foundation	who have contribi	uted more than 2%	6 of the total cont	ributions received	by the foundation
	before the close of any tax year (but o	nly if they have co	ntributed more tha	n \$5,000). (See s	ection 507(d)(2).)	
N/A						
b	List any managers of the foundation ownership of a partnership or other er					arge portion of the
N/A						
2	Information Regarding Contribution Check here ▶ ☐ if the foundation unsolicited requests for funds. If the foundations, complete items 2a, b	only makes controundation makes	ibutions to presel	lected charitable		
а	The name, address, and telephone nu	ımber of the perso	n to whom applica	tions should be ac	ddressed:	
N/A						
b	The form in which applications should	be submitted and	information and m	naterials they shou	ıld include:	
С	Any submission deadlines:	 				
d	Any restrictions or limitations on av	vards, such as b	y geographical ai	reas, charitable f	elds, kinds of ins	stitutions, or other

Part	XV Supplementary Information (cont	inued)		-	
3	Supplementary Information (cont Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	
а	Paid during the year			-	
/-					
N/A					
					1
	Total			▶ 3a	0.00
b	Approved for future payment				
N/A	1				
			1		
			<u> </u>		

	gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
	Program service revenue: Program Program					4 401 00
,	Children's Camp Program Dining Theatre Income				 	4,481.00 12,008.00
	billing Theatre Theome					12,008.00
	· · · · · · · · · · · · · · · · · · ·					
					-	
						_
	Fees and contracts from government agencies					
	Membership dues and assessments					
	nterest on savings and temporary cash investments				•	
	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:					
	a Debt-financed property					·
	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
	b					
	d					
	9					
	Subtotal Add columns (b), (d), and (e)		0.00	`	0.00	· · · · · · · · · · · · · · · · · · ·
					13	16,489.00
	variabaat in lina 10 inatruationa ta varifu aalaulation.	~ \				
	worksheet in line 13 instructions to verify calculation	•	ant of Evenn	t Burnosos		
oart	XVI-B Relationship of Activities to the A	ccomplishn			I A contributed	mortantly to the
oart	No. Explain below how each activity for which accomplishment of the foundation's exempt purp	ncomplishm income is reposes (other than	orted in column by providing fund	(e) of Part XV s for such purpos		
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal	incomplishing income is represented in and information in and information in the second in the secon	orted in column by providing fund mal classro	(e) of Part XV s for such purpos		
Part Line a	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line a	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line a	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line a	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informattress re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Part Line a	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformi
Pari Line a	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformin
Pari Line	No. Explain below how each activity for which accomplishment of the foundation's exempt purp. Fees charged to deliver formal arts and personal wellness for	income is reproses (other than and informatives re-	orted in column by providing fund mal classro duction.	(e) of Part XV s for such purpos om program	s, workshop	os, peformin

		Exempt Org	ganizations						_
1	in sec			ngage in any of the f ection 501(c)(3) orga				Yes	S No
а	Trans	fers from the rep	orting foundation to	a noncharitable exen	npt organization o	f:			
	(1) Ca	ısh						1a(1)	Х
	(2) Ot	her assets .				. <i>.</i>		1a(2)	Х
ь		transactions:							
-			a noncharitable exer	mot organization				1b(1)	X
				ble exempt organizat				1b(2)	$\frac{1}{x}$
									
			equipment, or other					1b(3)	X
								1b(4)	<u> </u>
		ans or loan gua						1b(5)	X
				ip or fundraising solic				1b(6)	X
C				ts, other assets, or pa				1c	X
d				," complete the follow					
				es given by the repo					
	value	in any transaction	on or sharing arrange	ement, show in colum	nn (d) the value o	f the goods, o	ther assets, or se	rvices rec	eived
(a) Line	по () Amount involved	(c) Name of nonch	antable exempt organization	on (d) Descr	iption of transfers	, transactions, and sha	nng arranger	nents

	-+		<u> </u>						
									
							· ··-		
								_	
-									
				· · · · · · · · · · · · · · · · · · ·					
									
									
			L						
2a				liated with, or related					_
			• • •	ther than section 501	(c)(3)) or in secti	on 527?	[☐ Yes 🛭] No
b	If "Ye	s," complete the	following schedule.						
		(a) Name of organ	uzation	(b) Type of org	anization		c) Description of relation	onship	
						·-			
									
		<u> </u>							
	llad-	s accolhoc of norma	I doolars that I have ever-in	ed this return, including acco	mnanving schodulos as	d statemente and	to the hest of my knowl	edge and heli	ef it is true
Ci~-	1	r penalities of perjuty. ct, and complete Dec	i decisie dist i have examin Laration of preparer (other th	ed this return, including account nan taxpayer) is based on all	information of which pr	eparer has any kno	wledge		
Sign		1111 1		1		•	May the	IRS discuss the preparer show	
Here		JUN I		3.8.13	Knes.			ructions)? 🔯 Y	
	Sign	ature of officer or true	stee	Date	Title				
Paid	•	Print/Type preparer	r's name	Preparer's signature		Date	Check if	PTIN	
	0 F C =	Alexander :	I. Saunders	A.T. Sau	nlen	3-12-13	self-employed	P01408	079
Prep			Woods Rogers	PLC			Firm's EIN ▶ 54-1		
Use	Unly	Firm's address	P O Box 1412		24038		Phone no. 54-983		

Part XVII. Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of	the organization			Employer identification number
The Ju	ne Bug Center,	Inc.		54-2004834
	ation type (check			
Filers o	f:	Section:		
Form 99	00 or 990-EZ	☐ 501(c)() (enter number) organization	
		4947(a)(1) non	exempt charitable trust not treated as a private	foundation
		☐ 527 political o	rganization	
Form 99	00-PF		npt private foundation	
		4947(a)(1) non	nexempt charitable trust treated as a private four	dation
		501(c)(3) taxat	ole private foundation	
Genera	For an organizati	on filing Form 990, 990 ny one contributor. Coi	0-EZ, or 990-PF that received, during the year, \$	5,000 or more (in money or
Special	Rules			
	under sections 5	09(a)(1) and 170(b)(1)(A \$5,000 or (2) 2% of th	ng Form 990 or 990-EZ that met the 33½ % supp A)(vi) and received from any one contributor, duri ne amount on (i) Form 990, Part VIII, line 1h, or (ii)	ng the year, a contribution of
	during the year, t	otal contributions of m	nization filing Form 990 or 990-EZ that received file than \$1,000 for use exclusively for religious, tion of cruelty to children or animals. Complete P	charitable, scientific, literary,
	during the year, of not total to more year for an exclusion applies to this or	contributions for use e than \$1,000. If this bo sively religious, charita ganization because it i	nization filing Form 990 or 990-EZ that received xclusively for religious, charitable, etc., purposes ox is checked, enter here the total contributions table, etc., purpose. Do not complete any of the preceived nonexclusively religious, charitable, etc.	s, but these contributions did hat were received during the arts unless the General Rule ., contributions of \$5,000 or
Caution	. An organization	that is not covered by	the General Rule and/or the Special Rules does	not file Schedule B (Form 990.

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

35-FF) (2011)	Page
Name of organization	Employer identification number
The June Bug Center, Inc.	54-2004834
Dowl Contributors (and instructions) the state of	

r ai t i	Contributors (see instructions). Ose duplicate copies (or Part I il additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	The June M. McBroom Charitable Lead Trust c/o Alexander I. Saunders, P.O. Box 14125 Roanoke, VA 24038	\$90,290.00	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

Employer identification number

The June Bug Center, Inc.

54-2004834

Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		į l	

Form **8868**

(Rev. January 2012)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709

internal Revenu			· · · · · · · · · · · · · · · · · · ·			
	filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Mo					🕨 🗓
•	mplete Part II unless you have already been g					n 8868.
a corporati 8868 to red Return for	filing (e-file). You can electronically file Form fon required to file Form 990-T), or an addition quest an extension of time to file any of the Transfers Associated With Certain Persona s.). For more details on the electronic filing of the	al (not auto forms liste I Benefit (omatic) 3-month extens d in Part I or Part II wit Contracts, which must	ion of time. You c h the exception o be sent to the I	an electronica of Form 8870, RS in paper	lly file Form Information format (see
Part I	Automatic 3-Month Extension of Time					
Part I only						. ▶ 🗀
	orporations (including 1120-C filers), partnersh me tax retums.	ips, REMIC	os, and trusts must use	Form 7004 to req	juest an exten	sion of time
10 1110 1110011	no tax roturno.		Er	iter filer's identifyin	ng number, see	instructions
Type or	Name of exempt organization or other filer, see in	nstructions.		Employer identi		
print	The June Bug Center, Inc.			□54-20048		
File by the	Number, street, and room or suite no. If a P.O. bo	ox, see instr	uctions.	Social security	number (SSN)	
due date for filing your	P.O. Box 940				. <u> </u>	
return. See	City, town or post office, state, and ZIP code. For	r a foreign a	ddress, see instructions.			
instructions.	Floyd, VA 24091					
Enter the R	eturn code for the return that this application i	s for (file a	separate application for	r each return) .		04
Application	on	Return	Application			Return
Is For		Code	ls For			Code
Form 990		01	Form 990-T (corporati	on)		07
Form 990-	BL	02	Form 1041-A	·		08
Form 990-	EZ	01	Form 4720			09
Form 990-	<u> </u>	04	Form 5227			10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-	T (trust other than above)	06	Form 8870		·	12
Telephone If the orga If this is for the who a list with the	s are in the care of ▶ Donald H. McB e No. ▶ 540-789-8125 anization does not have an office or place of boor a Group Return, enter the organization's foulle group, check this box ▶ □ . If in the names and EINs of all members the extensions	FA usiness in a r digit Gro it is for par on is for.	the United States, check up Exemption Number (t of the group, check thi	GEN) s box		
1 I req	uest an automatic 3-month (6 months for a co					
until		npt organiz	zation return for the orga	inization named a	bove. The exte	ension is
	he organization's return for:					
▶∟	calendar year 20or					
▶ [⊽	tax year beginning July 1	20	11 and ending	June 30	20	12
2 f the	e tax year entered in line 1 is for less than 12 n	nonths, che	eck reason: Initial ref	turn Final ret	urn	12.
	hange in accounting period is application is for Form 990-BL, 990-PF, 990	1-T 4720	or 6069, enter the tenta	tive tax less any		
nonr	efundable credits. See instructions.				3a \$	
estin	is application is for Form 990-PF, 990-T, 4 nated tax payments made. Include any prior y	ear overpa	yment allowed as a cred	dit	3b \$	0.00
	nce due. Subtract line 3b from line 3a. Includ PS (Electronic Federal Tax Payment System).			equired, by using	3c \$	0.00
	ou are going to make an electronic fund withdrawal			O and Form 8879-E		

Form 88	368 (Rev	v. 1-2012)					Page 2
• If yo	u are	filing for an Additional (Not Automatic)	3-Month Exten	sion, complete only Pa	art II and check th	is bo	x ▶ 🗆
		complete Part II if you have already beer filing for an Automatic 3-Month Extens			on on a previously	filed	Form 8868.
Part		Additional (Not Automatic) 3-Mon	th Extension	of Time. Only file the	original (no copi	ies n	eeded).
				En	ter filer's identifyin	g nun	nber, see instructions
Type o	or	Name of exempt organization or other filer,	see instructions.		Employer identi	ficatio	n number (EIN) or
File by t	e for	Number, street, and room or suite no. If a F	P.O. box, see instr	uctions.	Social security r	numbe	er (SSN)
filing yo retum. S instructi	See	City, town or post office, state, and ZIP coo	de. For a foreign a	ddress, see instructions.			
Enter	the Re	eturn code for the return that this applica	ition is for (file a	separate application for	each return) .		
Appli Is Fo	icatio r	n	Return Code	Application Is For			Return Code
Form	990		01	Jak to Vincinia in the		•	, 2
Form	990-E	SL.	02	Form 1041-A			08
Form	990-	Z	01	Form 4720			09
Form	990-F	PF	04	Form 5227			10
Form	990-7	(sec. 401(a) or 408(a) trust)	05	Form 6069			
Form	990-1	(trust other than above)	06	Form 8870			12
• If the • If this for the	phone e orga s is fo whole	are in the care of ► No. ► nization does not have an office or place r a Group Return, enter the organization e group, check this box ► [names and EINs of all members the exte	e of business in the contract of the contract	the United States, checkup Exemption Number (this box		If this is
4 5 6 7	☐ Cr	uest an additional 3-month extension of alendar year, or other tax year betax year entered in line 5 is for less than pange in accounting period in detail why you need the extension	time until ginning n 12 months, cho	, 20, eck reason: ☐ Initial r	, 20 and ending return ☐ Fina	retu	, 20 rn
8a		application is for Form 990-BL, 990-PF	-, 990-T, 4720, o	or 6069, enter the tental	tive tax, less any		
b	If this	s application is for Form 990-PF, 990 ated tax payments made. Include any ant paid previously with Form 8868.				8a 8b	\$
С	Balan	ice due. Subtract line 8b from line 8a. Incluronic Federal Tax Payment System). See in		with this form, if required	I, by using EFTPS	8c	
		Signature and Ver	ification must	be completed for P	art II only.		
		es of perjury, I declare that I have examine d belief, it is true, correct, and complete, and			edules and stateme	nts, a	nd to the best of my
Signatur	e ►		Title ▶		Da	ite ▶	
						_	9969 /p + 4948

FILE COPY

Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

nternal Reven	ue Service	Frie a sepa	i ate applica	auon loi each leium.		\perp		
•	_	n Automatic 3-Month Extension, co	-	_				. ▶ 🗌
•	-	n Additional (Not Automatic) 3-Mor		_			•	
Do not co	mplete Par	rt II unless you have already been gr	anted an a	utomatic 3-month	extension on a previous	ly file	d Form	8868.
a corporat 8868 to re Return for	tion require equest an e r Transfers	(e). You can electronically file Form 8 to file Form 990-T), or an additional xtension of time to file any of the formation of the Associated With Certain Personal edetails on the electronic filing of this	l (not auto orms listed Benefit C	matic) 3-month exte in Part I or Part II ontracts, which mu	ension of time. You car with the exception of ust be sent to the IRS	elec Form Sin	tronical 8870, paper f	ly file Form Information format (see
Part I		tic 3-Month Extension of Time.						
Part I only	· :	ed to file Form 990-T and reques						▶ 🖂
	me tax retu		os, ricivilo	s, and dasis must t				
				·	Enter filer's identifying			
Type or print	Name of	exempt organization or other filer, see ins	structions.		Employer identification r	numbe	er (EIN) o	r
- File by the due date for		street, and room or suite no. If a P.O. bo	x, see instru	ictions.	Social security number (SSN)	_	
filing your return. See instructions.	City, tow	n or post office, state, and ZIP code. For	a foreign ac	ddress, see instruction	is.			
		e for the return that this application is			n for each return) .			
Application Is For	ion 		Return Code	Application Is For				Return Code
	or Form 9	90-EZ	01	Form 990-T (corpo	oration)			07
Form 990	0-BL		02	Form 1041-A				08
	20 (individu	al)	03	Form 4720				09
Form 990			04	Form 5227				10
		1(a) or 408(a) trust)	05	Form 6069				11
Form 990	0-T (trust of	her than above)	06	Form 8870				12
• The boo	oks are in th	e care of ▶						
	ne No. ►	does not have an office or place of b		AX No. >	hack this boy			⊳∏
		Return, enter the organization's fou					 . If th	
		check this box ▷ □ . If i						
		and EINs of all members the extensi		g				
1 re	equest an a	utomatic 3-month (6 months for a co	rporation	required to file Form	990-T) extension of tir	me		
un	- 4	, 20, to file the exer	npt organi	zation return for the	organization named at	ove.	The ex	tension is
		zation's-return-for :						
		r year 20 or						
\triangleright	☐ tax year	beginning	, 20	, and ending			, 20	
			nonths, ch	eck reason: L]Initi	al return	urn		
	Change in	accounting period	T 4700	ar COCO anter the t	contativa tav. Isaa amir			
no	onrefundabl	tion is for Form 990-BL, 990-PF, 990 e credits. See instructions.				3a	\$	
b If es	this application	ation is for Form 990-PF, 990-T, a payments made. Include any prior y	4720, or 6 ear overpa	3069, enter any ref ayment allowed as a	fundable credits and a credit.	3b	\$	-
c Ba	alance due	. Subtract line 3b from line 3a. Includ ronic Federal Tax Payment System).	le your pay	ment with this form		3c		
	· -	ng to make an electronic fund withdrawal			153-EO and Form 8879-F0			instructions

Signature and Verification must be completed for Part II only.

Taxpayer has replaced this General Manager and is trying to rebuild its record base. (See attachment)

If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any

c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature & Alex Z. Dannelen

nonrefundable credits. See instructions.

amount paid previously with Form 8868.

(Electronic Federal Tax Payment System). See instructions.

8a

8b

8c \$

0

0-00-