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Form 990-PF

Department of the Treasury
Internal Revenue ServiceReturn of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

OMB No 1545-0052

2011

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

For calendar year 2011 or tax year beginning JUL 1, 2011, and ending JUN 30, 2012

Name of foundation THE UNAKA FOUNDATION, INC.		A Employer identification number 62-1530053
Number and street (or P.O. box number if mail is not delivered to street address) 1500 INDUSTRIAL ROAD	Room/suite	B Telephone number 423-639-1171
City or town, state, and ZIP code GREENEVILLE, TN 37745-3541		C If exemption application is pending check here ☐
G Check all that apply: ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ Foreign organizations meeting the 85% test, 2. check here and attach computation ☐
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 7,685.	J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	65,000.		N/A	
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	19.	19.		STATEMENT 1
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV line 2)		0.		
	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)					
11 Other income					
12 Total. Add lines 1 through 11	65,019.	19.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees				
	c Other professional fees				
	17 Interest				
	18 Taxes STMT 2	22.	0.		0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses				
	24 Total operating and administrative expenses. Add lines 13 through 23	22.	0.		0.
	25 Contributions, gifts, grants paid	74,150.			74,150.
26 Total expenses and disbursements. Add lines 24 and 25	74,172.	0.		74,150.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	<9,153.>				
b Net investment income (if negative, enter -0-)		19.			
c Adjusted net income (if negative, enter -0-)			N/A		

123501
12-02-11

LHA For Paperwork Reduction Act Notice, see instructions

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	10,600.	1,427.	1,427.
	2 Savings and temporary cash investments	6,238.	6,258.	6,258.
	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, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
Liabilities	11 Investments - land, buildings, and equipment basis ▶			
	Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other			
	14 Land, buildings, and equipment basis ▶			
	Less: accumulated depreciation ▶			
	15 Other assets (describe ▶)			
	16 Total assets (to be completed by all filers)	16,838.	7,685.	7,685.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐			
	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☒			
	and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	16,838.	7,685.	
30 Total net assets or fund balances	16,838.	7,685.		
31 Total liabilities and net assets/fund balances	16,838.	7,685.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	16,838.
2 Enter amount from Part I, line 27a	2	<9,153.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	7,685.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	7,685.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; 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	NONE			
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	{		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2010	457,679.	11,150.	41.047444
2009	868,342.	19,618.	44.262514
2008	800,540.	16,115.	49.676699
2007	2,162,739.	27,230.	79.424862
2006	1,628,925.	20,102.	81.032982

2 Total of line 1, column (d)	2	295.444501
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	59.088900
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	7,956.
5 Multiply line 4 by line 3	5	470,111.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7 Add lines 5 and 6	7	470,111.
8 Enter qualifying distributions from Part XII, line 4	8	74,150.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	0.
c	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	0.
3	Add lines 1 and 2	3	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0.
6	Credits/Payments:		
a	2011 estimated tax payments and 2010 overpayment credited to 2011	6a	16.
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	6d	
7	Total credits and payments. Add lines 6a through 6d	7	16.
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	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	16.
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ☐ Refunded ☐	11	0.

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ☐ \$ 0. (2) On foundation managers. ☐ \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ☐ \$ 0.		
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		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
4b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ TN		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	X	
14	The books are in care of ► <u>L.A. YONZ</u> Telephone no. ► <u>423-639-1171</u> Located at ► <u>1500 INDUSTRIAL ROAD, GREENEVILLE, TN</u> ZIP+4 ► <u>37745-3541</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15	N/A	
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? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►	16	Yes	No X

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?	☐ Yes ☒ No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☒ No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes ☒ No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	☐ Yes ☒ No	
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)? Organizations relying on a current notice regarding disaster assistance check here	N/A	1b
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?		1c
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? If "Yes," list the years ►	☐ Yes ☒ No	
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.)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No	
b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period 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)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a
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

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

- (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? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

▶ ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?**6b****X**

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 3		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

▶ 0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	8,077.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	8,077.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	8,077.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	121.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,956.
6	Minimum investment return. Enter 5% of line 5	6	398.

Part XI 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	398.
2a	Tax on investment income for 2011 from Part VI, line 5	2a	
b	Income tax for 2011. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	398.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	398.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	398.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	74,150.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	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	74,150.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	74,150.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				398.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006	1,628,042.			
b From 2007	2,161,423.			
c From 2008	799,740.			
d From 2009	867,365.			
e From 2010	457,125.			
f Total of lines 3a through e	5,913,695.			
4 Qualifying distributions for 2011 from Part XII, line 4: ► \$	74,150.			
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2011 distributable amount				398.
e Remaining amount distributed out of corpus	73,752.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	5,987,447.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c 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		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7	1,628,042.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	4,359,405.			
10 Analysis of line 9:				
a Excess from 2007	2,161,423.			
b Excess from 2008	799,740.			
c Excess from 2009	867,365.			
d Excess from 2010	457,125.			
e Excess from 2011	73,752.			

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
MATCHING GRANTS TO CHARITABLE ORGANIZATIONS (SEE ATTACHED STATEMENT)				31,150.
SCHOLARSHIPS (SEE ATTACHED STATEMENT)				43,000.
Total			3a	74,150.
b Approved for future payment				
NONE				
Total			3b	0.

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

THE UNAKA FOUNDATION, INC.

Employer identification number

62-1530053

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

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).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization	Employer identification number
THE UNAKA FOUNDATION, INC.	62-1530053

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	UNAKA COMPANY, INC. 1500 INDUSTRIAL ROAD GREENEVILLE, TN 377453541	\$ 65,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE UNAKA FOUNDATION, INC.

62-1530053

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

THE UNAKA FOUNDATION, INC.

62-1530053

Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) ► \$

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
ANDREW JOHNSON BANK	19.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	19.

FORM 990-PF TAXES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TN SECRETARY OF STATE	22.	0.		0.
TO FORM 990-PF, PG 1, LN 18	22.	0.		0.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 3

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DEAN A. NEBBEN 1914 HIXSON MARINA ROAD HIXSON, TN 37343	DIRECTOR 1.00	0.	0.	0.
RAYBURN H. TANKERSLEY 216 HICKORY TRAIL GREENEVILLE, TN 37745	DIRECTOR 1.00	0.	0.	0.
HARRY D. WADE P.O. BOX 50754 KNOXVILLE, TN 379500754	DIRECTOR 1.00	0.	0.	0.
DOMINICK JACKSON 1500 INDUSTRIAL ROAD GREENEVILLE, TN 37745	PRESIDENT 1.00	0.	0.	0.
L. A. YONZ 1500 INDUSTRIAL ROAD GREENEVILLE, TN 37745	SECRETARY 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 4

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SCHOLARSHIPS-DOMINICK JACKSON; GRANTS TO CHARITABLE ORGANIZATIONS-L.A. YONZ
(423) 639-1171; 1500 INDUSTRIAL ROAD
GREENEVILLE, TN 377453541

TELEPHONE NUMBER

(423)639-1171

FORM AND CONTENT OF APPLICATIONS

SEE ATTACHED APPLICATIONS FOR BOTH SCHOLARSHIPS AND CHARITABLE
CONTRIBUTIONS

ANY SUBMISSION DEADLINES

SCHOLARSHIPS - NONE CHARITABLE CONTRIBUTIONS - NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

SCHOLARSHIPS ARE LIMITED TO DEPENDENTS OF EMPLOYEES OF UNAKA COMPANY, INC.
AND DEPENDENTS OF EMPLOYEES' SPOUSES. CHARITABLE CONTRIBUTIONS ARE
AVAILABLE TO ALL ORGANIZATIONS EXEMPT UNDER CODE SEC. 501(C). SEE ATTACHED
REGARDING THE MATCHING CHARITABLE GIFTS PROGRAM.



THE UNAKA FOUNDATION, INC
EIN 62-1530053
ATTACHMENT TO 990-PDF
PAGE 10, PART XV, #2(D)

Matching Charitable Gifts Program

Purpose of the Program

The purpose of the program is to increase Unaka Company's charitable contributions and to stimulate individual gifts from employees and others. Under this program, Unaka Company will match personal gifts of eligible contributors to those organizations that meet the requirements of eligibility set forth below.

Eligible Contributors

All regular salaried and hourly paid employees who have been employed one year or longer, retirees, and directors of Unaka Company and its subsidiaries are eligible to participate in this Matching Charitable Gifts Program.

Eligible Organizations

- Private or public schools, colleges, universities, and graduate professional schools in the United States qualified as not-for-profit institutions. Gifts may also be made to a properly certified alumni fund, foundation, or subdivision of the school which has been qualified to receive gifts for the school and its educational program.
- Organizations that are involved in public service on a broad scale. Examples include the American Cancer Society, American Red Cross, American Heart Association, United Way, etc.
- The organization must qualify as a charitable organization under section 501(c) of the Internal Revenue Code.

Matches will not be made for gifts made to religious institutions or political organizations.

Qualifying Gifts

- Unaka Company will match each eligible contributor's gift up to an aggregate of \$500.00 after one year of employment and up to \$5000.00 after two years of employment.
- The contribution must come from the personal funds of the contributor and be in cash or securities. The value of securities will be determined by the company as of the last sale or published bid price on the date of the gift.
- Unaka's Matching Charitable Gifts Program will match dollar for dollar for organizations in Greene County, TN; Sullivan County, TN; Marion County, SC; and Marlboro County, SC. For organizations outside these four counties, the company will match \$50 for each \$1.00.
- The employee cannot benefit personally from the contribution.
- For IRS purposes, Unaka must receive a receipt or a written acknowledgement for any gift.
- Matching gifts are not automatic. Unaka reserves the right to refuse any requests.

Amendment, Suspension, or Discontinuance

Unaka Company may at any time amend, suspend, or discontinue this matching of gifts. However, no amendment, suspension or discontinuance shall affect the obligation of the company to match gifts made prior to the date of such amendment, suspension, or discontinuance.

Unaka Company reserves the right to decide all questions of interpretation which may arise in connection with the administration of this program.

Contribution Instructions

Simply fill out the donor's portion of this brochure and mail it with your contribution to the organization of your choice. When your gift is received, an official of the organization will complete the remaining section of your form and return it to Unaka Company, Director of Human Resources, 1500 Industrial Rd., Greeneville, TN 37745.

**OR SCHOLARSHIP GRANT FROM THE UNAKA
SCHOLARSHIP FOUNDATION**

Company where parent works _____ Date _____

Name _____ Age _____ Sex _____ SSN _____

Address _____ Tel No _____
_____ Marital Status _____

Parent's Name _____
_____ Father _____ Dept where parent works _____
_____ Mother _____ Dept where parent works _____

High School Attended _____ Year Graduated _____
Scholastic Average _____ Major Subjects _____

College or University Selected or Attending _____
Address _____
Have you made application for entrance to this School? _____

Have you been accepted? _____ *No of Hours enrolled _____
*Applicant must maintain 12 hours (1/2 grant for 8-12 hours) per semester for Undergraduate
Program, 6 hours for Graduate School

TO BE SIGNED BY THE PARENT(S) OF THE APPLICANT:

I/We the parents of _____ consent to the acceptance of a
scholarship grant from the Unaka Scholarship Foundation in the amount of \$_____ and
approve of the school selected to receive these funds. We agree to encourage our child to abide
by all rules and conditions set forth by the Administrative Committee governing the granting of
this scholarship

Father Date Mother Date

TO BE SIGNED BY THE APPLICANT:

I hereby make application to receive a scholarship grant in the amount of \$_____ from
the Unaka Scholarship Foundation and if approved, agree to abide by all the rules and conditions
set forth by the Administrative Committee governing the granting of this scholarship.

Signature of Applicant Date

APPROVED – ADMINISTRATIVE COMMITTEE

DATE _____

Chairman

SCHOLARSHIP RECIPIENTS
Fall Semester 2011

MECO

Student	Parent	Address	College/University Attending	Amount	CHECK #	ACKNOWLEDGED
Joshua Lynn Brooks	Mechelle Brooks	208 Brooks Drive Greeneville, TN 37743	Walters State Community College	1,000 00		
Chasli Hodges	Stephen Hodges	1123 Gala Court Russelville, TN 37860	Walters State Community College	1,000 00		
Tyler Kelley	Loretta Kelley	473 Britton Ave	East Tennessee State University	1,000 00		
Christopher Van Gorp	Marina Van Gorp	226 Northwood Lane Greeneville, TN 37743	Northeast State Technical College	0 00	Returned	

SOPAKCO - SC

Marquita Brngman	Tara Brngman	518 Morgan Circle Mullins, SC 29574	Florence-Darlington Technical College	Returned
Jessica F Covington	Lue Covington	300 E. College Avenue Hartsville, SC 29580	Coker College	1,000.00
Sean Dorsey	Laray Ross	319 North East Front Street Mullins, SC 29574	Morris College	1,000.00
Kassie A. Driggers	Barbara Driggers	115 Maple Street Latta, SC 29565	Francis Marion University	1,000.00
Kevin B Driggers	Barbara Driggers	115 Maple Street Latta, SC 29565	Clemson University	1,000.00
Adrian Davis	Alice Paige	6366 Golden Ct Mullins, SC 29574	Florence Darlington Technical College	1,000.00
Shanique N. Green	Tina M Crawford	3525 Quail Roost Road Mullins, SC 29574	Florence-Darlington Technical College	500.00
Jenica Hemingway	Curlene Hemingway	1550 Terrell Mill Rd, Apt 16P Marietta, GA 30067	Life University	1,000.00
Ashley Levner	Debbie Levner	156 Gordon Lane Hamlet, NC 28345	Richmond Community College	1,000.00
MyQweshia Littles	Mary Littles	6106 Daisy Road Latta, SC 29565	Florence-Darlington Technical College	1,000.00
Calitin McCaustland	David McCaustland	729 Lakeshore Drive Bennettsville, SC 29512	USC- Upstate	1,000.00
Ryan J McCreary	Bill McCreary	1809 Nighthawk Drive Florence, SC 29501	University of South Carolina	1,000.00
Crystal Brook Miles	Paula Huggins	716 Cherry Street Galvanis Ferry, SC 29544	Francis Marion University	1,000.00
Arlica Nelson	Willie Nelson	6009 Braddy Ct Mullins, SC 29574	Francis Marion University	1,000.00
Breanna Janien Owens	Ricky O Owens	405 N Smith Street Mullins, SC 29574	Savannah State University	1,000.00
Tiffany Nicole Oxendine	Wanda Oxendine	130 East Canal Road Sellers, SC 29592	Florence-Darlington Technical College	Returned
Alexandra Rogers	Michael Rogers	806 Bethea Ext Sellers, SC 29592	Horry Georgetown technical College	1,000.00
Dorothy Rogers	Michael Rogers	806 Bethea Ext Latta, SC 29565	Coastal Carolina University	1,000.00
Tanja Sellers	Willie Sellers	882 Bennettsville Fire Tower Rd Bennettsville, SC 29512	University of South Carolina	1,000.00

CROWN POINT

Taylor Baran	Lance Baran	6970 W 105th Pl Crown Point, IN 46307	Purdue University	1,000.00
Jeffrey W. Gates	Kevin Gates	3151 Burge Drive Crown Point, IN 46307	Indiana University Law School	1,000.00
Jessica L. Gates	Kevin Gates	3151 Burge Drive Crown Point, IN 46307	University of Southern Indiana	1,000.00

SOPAKCO - Warehousing

Katie E. Barron	Anita Powers	549 1/2 Alcoa Dr Kingsport, TN 37660	King College	1,000.00
Johnathon Casey Raines	Bobby Raines	680 Sunnyside Road Greeneville, TN 37743	Walters' State Community College	0.00 Returned

UNAKA

0.00

TOTAL \$23,500.00

SCHOLARSHIP RECIPIENTS
Spring Semester 2012

MECO

Student	Parent	Address	College/University Attending	Amount	CHECK #	ACKNOWLEDGED
Joshua Lynn Brooks	Mechelle Brooks	208 Brooks Drive Greeneville, TN 37743	Walters State Community College	500 00		
Chasli Summer Hodges	Stephen Hodges	1908 Morningside Dr Apt# 4 Morristown, TN 37813	Walters State Community College	1,000 00		
Tyler Kelley	Loretta Kelley	473 Britton Ave Greeneville, TN 37743	East Tennessee State University	1,000 00		
				0 00		

SOPAKCO - SC

Jessica F. Covington	Lue Covington	300 E College Avenue Hartsville, SC 29580	Coker College	1,000 00
Sean Dorsey	Laray Ross	319 North East Front Street Mullins, SC 29574	Moris College	1,000 00
Kassie A. Driggers	Barbara Driggers	115 Maple Street Latta, SC 29565	Francis Marion University	1,000 00
Kevin B. Driggers	Barbara Driggers	115 Maple Street Latta, SC 29565	Clemson University	1,000 00
Shanique N Green	Tina M Crawford	3525 Quail Roost Road Mullins, SC 29574	Florence-Darlington Technical College	1,000 00
Jenica Hemingway	Curlene Hemingway	1550 Terrell Mill Rd Apt 16P Marietta, GA 30067	Life University	1,000 00
Ashley Leviner	Debbie Leviner	156 Gordon Lane Hamlet, NC 28345	Richmond Community College	1,000 00
Caitlin McCausland	David McCausland	729 Lakeshore Drive Bennettsville, SC 29512	USC- Upstate	1,000 00
Ryan J. McCreary	Bill McCreary	1809 Nighthawk Drive Florence, SC 29501	University of South Carolina	1,000 00
Crystal Brook Miles	Paula Huggins	716 Cherry Street Galivants Ferry, SC 29544	Francis Marion University	1,000 00
Anca Nelson	Willie Nelson	6009 Braddy Ct Mullins, SC 29574	Francis Marion University	1,000 00
Alexandra Rogers	Michael Rogers	806 Bethea Ext Latta, SC 29565	Horry Georgetown technical College	1,000 00
Dorothy Rogers	Michael Rogers	806 Bethea Ext Latta, SC 29565	Coastal Carolina University	1,000 00

CROWN POINT				
Taylor Baran	Lance Baran	6970 W. 105th Pl Crown Point, IN 46307	Purdue University	1,000 00
Jeffrey W. Gates	Kevin Gates	3151 Burge Drive Crown Point, IN 46307	Indiana University Law School	1,000 00
Jessica L. Gates	Kevin Gates	3151 Burge Drive Crown Point, IN 46307	University of Southern Indiana	1,000 00
SOPAKCO - Warehousing				
Katie E Barron	Anita Powers	549 1/2 Alcoa Dr. Kingsport, TN 37660	King College	1,000 00
				0 00
UNAKA				
				0 00
TOTAL				\$19,500.00

Unaka Foundation
06/30/2012 Scholarship Summary
Scholarship Grants

Fall 2011 Grants	\$	27,500 00 ①
Spring 2012 Grants	\$	19,500 00 ②
	\$	<u>47,000 00</u>
Refunded Scholarships	\$	(4,000 00) ③
Grand Total	\$	<u>43,000 00</u>

NO SCHOLARSHIP RECIPIENT IS RELATED
TO ANY FOUNDATION MANAGER OR
SUBSTANTIAL CONTRIBUTOR

UNAKA FOUNDATION INC.
MATCHING CHARITABLE CONTRIBUTIONS
FOR YEAR ENDING JUNE 30, 2012

PAYEE	CK#	AMOUNT	CONTRIBUTOR
AMERICAN CANCER SOCIETY		5,119.00	MECO/UNAKA EMPLOYEES
AMERICAN CANCER SOCIETY		920.93	MECO/UNAKA EMPLOYEES
TUSCULUM COLLGE		500.00	EARL
UNIVERSITY OF TENNESSEE		4,800.00	CARTER
UNIVERSITY OF TENNESSEE		1,600.00	JACKSON
HOLSTON HOME FOR CHILDREN		70.00	PHILLIPS
TEXAS A&M KINGSVILLE FOUNDATION		2,821.74	MCCORMICK
UNITED WAY OF GREENE COUNTY		792.00	MECO/UNAKA EMPLOYEES
UNITED FUND OF MARION COUNTY		225.00	SOPAKCO EMPLOYEES
NATIONAL MS SOCIETY		1,141.50	MECO/UNAKA EMPLOYEES
LAUGHLIN HEALTHCARE FOUNDATION		2,000.00	JACKSON
AMERICAN HEART ASSOCIATION		50.00	WINTER
AMERICAN RED CROSS		100.00	WINTER
AMERICAN RED CROSS		1,000.00	HOOD
MARCH OF DIMES		25.00	WINTER
UNITED WAY OF GREENE COUNTY		792.00	MECO/UNAKA EMPLOYEES
UNITED FUND OF MARION COUNTY		80.00	SOPAKCO EMPLOYEES
JUINOR ACHIEVEMENT		1,000.00	JACKSON
AID NET GREENEVILLE		4,000.00	MCCORMICK/JACKSON
HOLSTON HOME FOR CHILDREN		140.00	PHILLIPS
AMERICAN CANCER SOCIETY		3,173.25	MECO/UNAKA EMPLOYEES
BSA SEQUOIA COUNCIL		300.00	YONZ
TUSCULUM COLLGE		500.00	EARL
		<u>31,150.42</u>	

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. THE UNAKA FOUNDATION, INC.	Employer identification number (EIN) or ☒ 62-1530053
	Number, street, and room or suite no. If a P.O. box, see instructions 1500 INDUSTRIAL ROAD	Social security number (SSN) ☐
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. GREENEVILLE, TN 37745-3541	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

L.A. YONZ

- The books are in the care of ► **1500 INDUSTRIAL ROAD - GREENEVILLE, TN 37745-3541**
Telephone No ► **423-639-1171** FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2013**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
► ☐ calendar year _____ or
► ☒ tax year beginning **JUL 1, 2011**, and ending **JUN 30, 2012**.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
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.	3b	\$	16.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 1-2012)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	THE UNAKA FOUNDATION, INC.	☒ 62-1530053
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	1500 INDUSTRIAL ROAD	☐
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	GREENEVILLE, TN 37745-3541	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

L.A. YONZ

- The books are in the care of ☒ 1500 INDUSTRIAL ROAD - GREENEVILLE, TN 37745-3541
Telephone No. ☒ 423-639-1171 FAX No. ☐

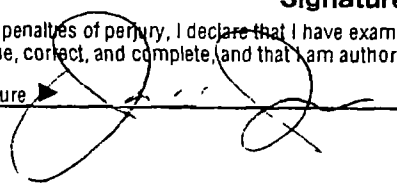
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until MAY 15, 2013
- 5 For calendar year _____, or other tax year beginning JUL 1, 2011, and ending JUN 30, 2012
- 6 If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return
☐ Change in accounting period
- 7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO OBTAIN THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
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 amount paid previously with Form 8868.	8b	\$	16.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0.

Signature and Verification must be completed for Part II only.

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  Title Cr Date 2/14/13

Form 8868 (Rev. 1-2012)

Certified No. 1

Date 2/14/13

