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### 990-PF

Department of the Treasury Internal Revenue Service

### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust

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

Open to Public Inspection

		lendar year 2012 or	ta	x year begir	ning			, 201	2, and endi	ng		, 20
		of foundation									A Employer identif	
_		MULHOLLEM CRA									20-383557	
-	Numb	er and street (or PO box	nur	nber if mail is no	t delivered	d to street	address)		Room/suit	е	B Telephone numb	er (see instructions)
		PAUL B MULHOL	LE	M JR.							(	) –
_		. BOX 192										
•	City or	town, state, and ZIP code										
	C 7 D 1	TOTE BY 4021	1								C If exemption application pending, check here	ation is
		LISLE, KY 4031	1				<del>1:::</del>			-		. —
G	Cne	ck all that apply		Initial retur			Initial return		public char	ity	D 1 Foreign organiza	
		}		Final return		-	Amended re			ĺ	2 Foreign organiza 85% test, check l	
_			_	Address ch			Name chang				computation .	
H	_	ck type of organizati				$\overline{}$					E If private foundatio	n status was terminated
1		ection 4947(a)(1) none					ther taxable pr				under section 507(t	)(1)(A), check here . ►
ı		market value of all a					method X C		crual		F If the foundation is	in a 60-month termination
		ear (from Part II, col			٥ ليا ١	ther (sp	ecify)	<b></b>			under section 507(b	)(1)(B), check here . ►
_		<b>▶ \$</b> 1,52				column	(d) must be or	cash basis	<u>)                                    </u>			
Ŀ	art	Analysis of Reven				(a) F	Revenue and	(b) Net in	restment		c) Adjusted net	(d) Disbursements for charitable
		total of amounts in col may not necessarily e				ex	penses per	inco	- 1	,,	income	purposes
_		column (a) (see instru	ctic	ns))			books					(cash basis only)
	1	Contributions, gifts, grants, et	c, r	eceived (attach sch	edule) .	<u></u>	140,448.					
	2			ation is not requ B								,
	3	Interest on savings and to					17,623.		17,623.			ATCH 1
	4	Dividends and interes	t fro	om securities			13,230.		13,230.			ATCH 2
	5 a	Gross rents										
	b	Net rental income or (loss	;)				*					
0	6 a	Net gain or (loss) from sa	ele o	of assets not on I	line 10		52,818.				* ,	,
2	Ь	Gross sales price for all assets on line 6a			,385.		, *					
Revenue	7	Capital gain net incom	ne (	from Part IV. I	ine 2) .				52,818.			
œ	8	Net short-term capital		•	-					-		
	9	Income modifications	_						•			
	10 a	Gross sales less returns and allowances										
	b	Less Cost of goods sold	_ [			*						
		Gross profit or (loss) (	atta	ch schedule)								
	11	Other income (attach										
	12	Total. Add lines 1 thro					224,119.		83,671.			
_	13	Compensation of officers				<del> </del>	C					-
	14	Other employee salari	es	and wages	•.•							
nses		Other employee salari Pension plans, employ	/ee	benefits	f	l c	PECFIVE					
)eu	16 a	Legal fees (attach sch	edu	ıle)		7						
EX	h	Accounting fees (attack	ch s		 'н 3	3	2,250.	100	2,250.			
9	_	Other professional fee	e (:	attach schedul			1PR 8, 627	013	8,627.			
äï	17	Pension plans, employ Legal fees (attach schi Accounting fees (attach Other professional fee Interest  Taxes (attach schedule) (a Depreciation (attach s Occupancy  Travel, conferences, a Printing and publication Other expenses (attach Total operating and a Add lines 13 through Contributions, gifts, g	- (		-, <u>.</u>	4		62				
<u>s</u>	18	Taxes (attach schedule) (s		nstructions\ATC	н 5	-	330					
¥	19	Depreciation (attach s	ch:	edule) and da			Maller L					
þ	20	Occupancy		ocuro, and de				<del> </del>				
S	21	Travel, conferences, a	nd	meetinge								-
an	-22	Printing and publication	nne u	ccangs				<u> </u>				
Bu	7 - 3 2	Other expenses (attac	h c	chedule\ 7 TC			40.					40
ati	2	Total operating and a	دة ان	ninistrative				1				1
ē	SO .	Add lines 42 through	วว :un	musuative ex	-		11,247.		10,877.			40
ō	25	Add lines 13 through	23			<del></del>	364,000.					364,000
							375,247.		10,877.			364,000
_	26	Total expenses and disburse			4 and 25	<del>                                     </del>	3,3,247.					1- 504,040
	27	Subtract line 26 from					_151 120					
		Excess of revenue over expe				-	-151,128.		72,794.		<del> </del>	
		Net investment incom				-			14,134.			<del> </del>
_	C	Adjusted net income	(If	negative, entei	r -U-).   .	ļ		<u> </u>				1

Part I	Ralanco Shoote	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
	- Dalance Stiects	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ng			
2		cash investments	524,028.	156,656.	156,656.
3	Accounts receivable ▶				
	Less allowance for dou	ubtful accounts ►			
4					
	Less allowance for dou	ubtful accounts ▶			
5					
6		officers, directors, trustees, and other		-,	
		tach schedule) (see instructions)			
7	· · · · · · · · · · · · · · · · · · ·	receivable (attach schedule)			
'		ubtful accounts >			
<u>د</u> 8	Inventories for sale or us				
7m					
¥ 10 a	Investments U.S. and state	deferred charges	160,034.	161,656.	180,987.
10 4	Investments - 0.5 and sta	e stock (attach schedule) ATCH 8	631,390.	916,928.	
"	Investments - corporate	e bonds (attach schedule) ATCH 9	225,540.	150,104.	157,166
11 6	Investments - land, building	ation	223,340.	130,104.	137,100.
12 13 14	Investments - mortgage Investments - other (atta Land, buildings, and	ach schedule)			
15	Other assets (describe	<b>▶</b> )			
16	Total assets (to be	completed by all filers - see the			
	ınstructions Also, see p	page 1, item I)	1,540,992.	1,385,344.	1,527,277.
17	Accounts payable and a	accrued expenses			
18	Grants payable				
ഗ്ല 19	Deferred revenue				•
<b>⋣</b> 20		ors, trustees, and other disqualified persons			
Liabilities 20 21 23	Mortgages and other ne	otes payable (attach schedule)			
⊐ <sub>22</sub>	Other liabilities (describ	e ▶)			
1					
23	Total liabilities (add line	es 17 through 22)	0	d	
alances 24 25	and complete lines	llow SFAS 117, check here  24 through 26 and lines 30 and 31.			
25					
26	Permanently restricted				
Net Assets or Fund B		not follow SFAS 117, nplete lines 27 through 31.			
g) 27	Capital stock, trust prin	ncipal, or current funds	1,540,992.	1,385,344.	
28	Paid-in or capital surplus, o	or land, bldg, and equipment fund			
<b>%</b> 29	Retained earnings, accum	ulated income, endowment, or other funds			
<u>ㅎ</u> 30	Total net assets or fun	d balances (see instructions)	1,540,992.	1,385,344.	
31	Total liabilities and	l net assets/fund balances (see			
	ınstructions)	<u> </u>	1,540,992.	1,385,344.	
Part	Analysis of Ch	anges in Net Assets or Fund	Balances		
		palances at beginning of year - Part	II, column (a), line 30 (r	must agree with	
		d on prior year's return)			1,540,992
2 Ente	er amount from Part I,	line 27a		2	-151,128
3 Oth	er increases not includ	line 27a ded in line 2 (itemize) ► ATCH 10		3	149
4 Add	lines 1, 2, and 3			4	1,390,013
		line 2 (temize) ► ATCH 11			4,669
6 Tota	al net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (b)	, line 30 6	1,385,344

Part IV Capital Gains and Losses for Tax on Investment Income

2-story b	d describe the kind(s) of property sold ( rick warehouse, or common stock, 200 :		(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
a SEE PART IV SCHE		Sils MILC CO)	D - Donation	(mo, day, yr /	
<b>b</b>	3000		<del> </del>		
c					
d			<del> </del>		
e					-
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a					•
b					
C					
d					
e					
Complete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69		Gains (Col (h) g	ain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	col	(k), but not less t Losses (from co	
a					
b			<del>                                     </del>		
C				<del></del>	
d			ļ		
e					
Capital gain net income or		gain, also enter in Part I, line 7			
	· · · · / [	(loss), enter -0- in Part I, line 7	2		52,818.
	or (loss) as defined in sections 12				
Part I, line 8	t I, line 8, column (c) (see inst	<u> </u>	3		0
Part V Qualification (	Under Section 4940(e) for Re	duced Tax on Net Investment	ncome		
	the section 4942 tax on the distrib not qualify under section 4940(e)		ase perio	d?	
	ount in each column for each year				∐ Yes X No
(a) Base penod years Calendar year (or tax year beginning in)		, see the instructions before makin	g any entr	ies	Yes 🔬 No
2011	(b) Adjusted qualifying distributions	c) Net value of nonchantable-use assets	g any entr	(d) Distribution in (col (b) divided by	atio
	Adjusted qualifying distributions 218,440.	(c) Net value of nonchantable-use assets  1,535,378.	g any entr	(d) Distribution ra	atio
2010	Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	g any entr	(d) Distribution ra	atio y col (c)) 0.142271 0.095505
2010 2009	Adjusted qualifying distributions  218,440.  137,613.  187,543.	(c) Net value of nonchantable-use assets 1,535,378. 1,440,898. 1,425,269.	g any entr	(d) Distribution ra	atio y col (c)) 0.142271
2009 2008	Adjusted qualifying distributions  218,440.  137,613.  187,543.  234,353.	(c) Net value of nonchantable-use assets  1,535,378.  1,440,898.  1,425,269.  1,753,426.	g any entr	(d) Distribution ra	ortio (co) 0.142271 0.095505 0.131584 0.133654
2009	Adjusted qualifying distributions  218,440.  137,613.  187,543.	(c) Net value of nonchantable-use assets 1,535,378. 1,440,898. 1,425,269.	g any entr	(d) Distribution ra	atio (co) (c)) 0.142271 0.095505 0.131584
2009 2008	Adjusted qualifying distributions  218,440.  137,613.  187,543.  234,353.	(c) Net value of nonchantable-use assets  1,535,378.  1,440,898.  1,425,269.  1,753,426.	g any entr	(d) Distribution ra	ortio (co) 0.142271 0.095505 0.131584 0.133654
2009 2008 2007 Total of line 1, column (d)	Adjusted qualifying distributions  218,440.  137,613.  187,543.  234,353.  167,299.	(c) Net value of nonchantable-use assets  1,535,378.  1,440,898.  1,425,269.  1,753,426.  1,251,837.	g any entr	(d) Distribution ra	ortio (co) 0.142271 0.095505 0.131584 0.133654
2009 2008 2007  Total of line 1, column (d) Average distribution ratio	Adjusted qualifying distributions  218,440. 137,613. 187,543. 234,353. 167,299.	(c) Net value of nonchantable-use assets  1,535,378.  1,440,898.  1,425,269.  1,753,426.  1,251,837.  e the total on line 2 by 5, or by the	2	(d) Distribution ra	0.142271 0.095505 0.131584 0.133654 0.133643
2009 2008 2007  Total of line 1, column (d) Average distribution ratio number of years the found	Adjusted qualifying distributions  218,440. 137,613. 187,543. 234,353. 167,299.  for the 5-year base period - divided dation has been in existence if less	(c) Net value of nonchantable-use assets  1,535,378.  1,440,898.  1,425,269.  1,753,426.  1,251,837.  e the total on line 2 by 5, or by the sthan 5 years	2 3	(d) Distribution is (col (b) divided by	atio (c)) 0.142271 0.095505 0.131584 0.133654 0.133643 0.636657
2009 2008 2007  Total of line 1, column (d) Average distribution ratio number of years the foun	Adjusted qualifying distributions  218, 440.  137, 613.  187, 543.  234, 353.  167, 299.  for the 5-year base period - divided dation has been in existence if less incharitable-use assets for 2012 from the content of	(c) Net value of nonchantable-use assets  1,535,378.  1,440,898.  1,425,269.  1,753,426.  1,251,837.  The total on line 2 by 5, or by the sthan 5 years  om Part X, line 5	2 3	(d) Distribution is (col (b) divided by	0.142271 0.095505 0.131584 0.133654 0.133643 0.636657
2009 2008 2007  Total of line 1, column (d) Average distribution ratio number of years the foun Enter the net value of nor Multiply line 4 by line 3	Adjusted qualifying distributions  218, 440.  137, 613.  187, 543.  234, 353.  167, 299.  for the 5-year base period - divided dation has been in existence if less incharitable-use assets for 2012 from the content of	(c) Net value of nonchantable-use assets  1,535,378.  1,440,898.  1,425,269.  1,753,426.  1,251,837.  The total on line 2 by 5, or by the sthan 5 years  om Part X, line 5	2 3 4 5	(d) Distribution is (col (b) divided by	0.142271 0.095505 0.131584 0.133654 0.133643 0.636657 0.127331
2009 2008 2007  Total of line 1, column (d) Average distribution ratio number of years the found Enter the net value of nor Multiply line 4 by line 3 Enter 1% of net investme	Adjusted qualifying distributions  218,440.  137,613.  187,543.  234,353.  167,299.  for the 5-year base period - divided dation has been in existence if less ancharitable-use assets for 2012 from the income (1% of Part I, line 27b).	(c) Net value of nonchantable-use assets  1,535,378.  1,440,898.  1,425,269.  1,753,426.  1,251,837.  e the total on line 2 by 5, or by the sthan 5 years  om Part X, line 5	2 3 4 5	(d) Distribution is (col (b) divided by	0.142271 0.095505 0.131584 0.133654 0.133643 0.636657 0.127331 420,719.
2009 2008 2007  Protal of line 1, column (d) Average distribution ratio number of years the found Enter the net value of nor Multiply line 4 by line 3 Enter 1% of net investme Add lines 5 and 6	Adjusted qualifying distributions  218, 440.  137, 613.  187, 543.  234, 353.  167, 299.  for the 5-year base period - divided dation has been in existence if less incharitable-use assets for 2012 from the content of	(c) Net value of nonchantable-use assets  1,535,378.  1,440,898.  1,425,269.  1,753,426.  1,251,837.  e the total on line 2 by 5, or by the sthan 5 years  om Part X, line 5	2 3 4 5 6	Distribution no (col (b) divided by	0.142271 0.095505 0.131584 0.133654 0.133643 0.636657 0.127331 420,719. 180,902. 728.

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions	)
1 a	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		7	28.
	here ▶ X and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of UP 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		7	728.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		7	728.
6	Credits/Payments			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 3, 280.			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d		3,2	280.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10		2,5	552.
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ 2,552. Refunded ▶ 11		·	
Par	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		Х
	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			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation >\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<u> </u>	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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			
	• 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?	_6_	X	ļ
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	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	IL, KY,			
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	8b	Х	
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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
	addresses	10		Х

over a bank, securities, or other financial account in a foreign country?	
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)	
person had advisory privileges? If "Yes," attach statement (see instructions)  Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address ► N/A  14 The books are in care of ► PAUL B. MULHOLLEM, JR. Telephone no ►  Located at ►P.O. BOX 192 CARLISLE, KY  ZIP+4 ► 40311  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.  16 At any time during calendar year 2012, 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 90-221 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.  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?  (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?  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  (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).  Yes X No	X
Note the foundation comply with the public inspection requirements for its annual returns and exemption application?	
Website address ► N/A  14 The books are in care of ► PAUL B. MULHOLLEM, JR. Telephone no ►  Located at ►P.O. BOX 192 CARLISLE, KY ZIP+4 ► 40311  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  16 At any time during calendar year 2012, 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 ►  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.  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 X No  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No  (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No  (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). Yes X No	X
The books are in care of ▶ PAUL B. MULHOLLEM, JR. Telephone no Located at ▶ P.O. BOX 192 CARLISLE, KY  ZIP+4 ▶ 40311  15 Section 4947(a)(1) nonexempt chantable 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.  16 At any time during calendar year 2012, 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 90-221 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.  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 X 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 X No  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No  (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).  Yes X No	
14 The books are in care of ▶ PAUL B. MULHOLLEM, JR. Telephone no Located at ▶ P.O. BOX 192 CARLISLE, KY  2IP+4 ▶ 40311  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    16 At any time during calendar year 2012, 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?	
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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.  16 At any time during calendar year 2012, 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 ▶  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.  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 over a bank, securities, or other financial account in a foreign country?	
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  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.  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?	
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.  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?	No
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.  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?	Х
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  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?	,
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  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?	
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?	
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	
disqualified person?  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  (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).  Yes  X  No  Yes  X  No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No  (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No  (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).  Yes X No  Yes X No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	
(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)?	
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)	
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)	.,
termination of government service, if terminating within 90 days)	**
Organizations relying on a current notice regarding disaster assistance check here	٠
were not corrected before the first day of the tax year beginning in 2012?	Х
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 2012, did the foundation have any undistributed income (lines 6d and	
6e, Part XIII) for tax year(s) beginning before 2012? Yes X No	
If "Yes," list the years ▶,	
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 )	Х
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	
<b>&gt;</b>	
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 2012 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 2012 )	
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	v
charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?   4b   Form 990-PF (	Χ

"NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  NONE  Total number of other employees paid over \$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	Par	t VII-B Statements Regarding Activities fo	r Which Form 47	20 May Be Requi	red (continued)		
(2) Influence the outcome of any specific public election (see section 4855), or to carry on directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a chantable, etc. organization described in section 509(4)(1) (20) exploited (50)(20)? (see instructions)  (5) Provide for any purposes other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  (6) Provide for any purposes other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  (7) Frovide organization section 53 445 or in a current notice regarding diseaster assistance (see instructions)?  (8) Provide organizations religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty for the grant?  (9) Organizations relying on a current notice regarding diseaster assistance (see instructions)?  (1) Frees, "affect the statement regions 54(4), does the foundation dam exemption from the tax because it mantalined expenditive responsibility for the grant?  (1) If "Yes," affect the statement regions 54(4), does the foundation dam exemption from the tax because it mantalined expenditive responsibility for the grant?  (2) Did the foundation, during the year, ceave any funds, directly or indirectly, to pay premiums on a personal benefit contract?  (1) Free" to 65, file From 8870  (2) A rives" to 65, file From 8870  (3) A rives," did the foundation receive any proceeds or have any net recome stribulable to the transaction?  (4) Previous to the stripe of the foundation receive any proceeds or have any net recome stribulable to the transaction?  (4) Contributions to the foundation of the foundation managers, Highly and Employees (	5a	During the year did the foundation pay or incur any amour	nt to				
directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc. organization described in section 596(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  (5) Provide for any purpose other than religious, charitable, sicentific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  (5) Provide for any purpose other than religious, charitable, sicentific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  (6) If any animare is "Yes" to Si(1)(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current required by Regulations section 53 4945-5(d)  5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  because it maintained expenditure responsibility for the grant?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes X No  b If "Yes" to 86, file Form 8870  A tan yit me during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes X No  To Intermation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  (a) Name and address of each employee paid more than \$50,000  (b) Title, and swenge of the transaction of the transaction of the party of th		(1) Carry on propaganda, or otherwise attempt to influen	ce legislation (section	4945(e))?	Yes X No	o	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		(2) Influence the outcome of any specific public elec-	tion (see section 4	955), or to carry on	,		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		directly or indirectly, any voter registration drive?			Yes X No	<b>o</b>	
(4) Provide a grant to an organization other than a chantable, etc., organization described in section 596(a)(1), (2), or (3), or section 496(d)(2)? (see instructions).  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  b if any answer is "Yes" to Sa(1)(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions).  Organization in the state of the previous of the grant?  At any time during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  At any time during the year, was the foundation a party to a prohibited tax shelter transaction?  Yes X No  But Y'es', did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract.  (a) Name and address of each employee pad more than \$50,000  (b) Title, and everage in the transaction of the transaction?  (c) Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee pad more than \$50,000  (b) Title, and everage in the properties of the pasting of the pa					<u> </u>		
section 508(a)11), (2), of (3), or seation 4940(d)(2)? (see instructions)							
(5) Prowde for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?.  b if any answer is "Yes" to Sa(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)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions).  Organizations relying on a current notice regarding disaster assistance (see instructions).  If "Yes," etiach the statement required by Regulations section 53 4945-5(d)  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8870  A At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes No  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  To and Contractors  (a) Name and address  (b) Tide, and average foundation distributions.  (c) Name and address  (d) Compensation (e) Expense account, other allowances to employee part of the position of the position of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (e) Expense account, other allowances of employee paid more than \$50,000 (b) Tide, and average founds in position of the position o		· ·				,	
b If any answer "Yes" to \$4,145, 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)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance of the formation of the same in required by Regulations section 53 4945-54(0)  B Did the answer is "Yes" to 80, file form 870  To 25 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  D Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract?  D Did the foundation, during the year, respective any religions at the same section?  To 25 to 80, file Form 8870  To 26 to 40 the foundation, during the year, respective any religions at the same section?  To 27 to 40, file Formation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address of each employee paid more than \$50,000  (b) Title, and exercise for the employee hearth paid employees for the employee hearth paid employees for the employee hearth paid of their ellowances of employee hearth paid employees (c) Compensation (es) in							
b if any answer is "Yes" to Saft)-(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)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  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?  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 contrated?  5b X if "Yes" to 8b, file Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  1 List all officers, directors, pricectors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and exerging (c) (Compensation (see instructions)). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and exerging devoted to position (c) Compensation (see instructions). If none, enter "NONE."  (b) Title, and exerging (c) Compensation (see instructions). If none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1 - see Instructions). If none, enter "NONE."  (d) Name and address of each employee paid more than \$50,000 (b) Title, and exerging devoted to position (c) Compensation				- ·			
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (check here.  If "Yes," is to question 54,04, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 494-5(d)  But the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  But the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes" to 6b, file Form 8870  To 4 at any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  To 5b  No 1 If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  To 1 List all officers, directors, trustees, foundation managers and their compensation (if the production of the prohibition of t	h					- 1	
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 the maintained expenditure responsibility for the grant?  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?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7b 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?  7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average hours are week devoted to position  (c) Compensation  (d) Compensation  (e) Expense account, other allowances  (e) Expense account, other allowances  (e) Expense account, other allowances  (e) Compensation  (f) Compensation  (e) Compensation  (f) Compensation  (e) Expense account, other allowances  (e) Expense account, other allowances  (e) Expense account, other allowances  (f) Compensation  (f) Compensation  (e) Expense account, other allowances  (f) Compensation	_			•	ocptions described in		1 1
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?  If "Yes," attach the statement required by Regulations section 53 4945-5(d)  8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  c St. No  b If "Yes" to 8b, file Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Information About Officers, Directors, Trustees, Foundation Managers, Highly and Emphoyees, and Contractors  List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee band pions and deferred compensation  (e) Expense account, other allowences  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee band more than \$50,000  (e) Expense account, other allowences  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee band pions to employee band giants and deferred compensation  (e) Expense account, other allowences  (f) Compensation  (a) Expense account, other allowences  (b) Title, and average hours per week devoted to position  (a) Compensation  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee band pions  (e) Expense account, other allowences  (e) Compensation  (f) Contributions to employee band pions  (g) Compensation  (g) Compensation  (g) Compensation							
because it maintained expenditure responsibility for the grant?    Yes, attach the statement required by Regulations section 53 4945-5(d)   Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?   Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   Did the foundation foundation aparty to a prohibited tax shelter transaction?   Ves	_						
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?					res rec		'
on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7 b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  7 b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average hours prives when devoted to position (fill not paid, enter 4-)  2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). 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 (e) Compensation (e) Compensation (e) Expense account, other allowances of expense of other employees paid over \$50,000	6.		• •	the to now accomm			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	oa	<del>-</del>	•	• • • •		_	
## "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?	L						
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address (b) Tills, and average hours per veek devoted to position of five highest-paid employees (other than those included on line 1 - see Instructions).  2 Compensation of five highest-paid employees (other than those included on line 1 - see Instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per veek devoted to position (c) Compensation (d) Contributions to employee baseful party and the property of the property of the property of the property of the response of the position of the response	D		try or indirectly, on a p	ersonal benetit contrac	·	· · ·   PD	<u> </u>
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b    Part VIII	<b>.</b>	•		-h-llt			'
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average hours per week devoted to position  (a) Name and address  (c) Compensation (find paid, enter 20-)  (d) Contributions to employee barefit plans, and deferred compensation of five highest-paid employees (other than those included on line 1 - see instructions). 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 paid employees (content than those included on line 1 - see instructions). 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 paid employees (content than those included on line 1 - see instructions). If none, enter "NONE."  (e) Expense account, other allowances  NONE  Total number of other employees paid over \$50,000			•	•			*
ATCH 12  Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  Total number of other employees paid over \$50,000  (b) Title, and average hours per week devoted to position and deferred compensation (e) Expense account, of the allowances (e) Expense account, of the allowance (e) Expense account, of the allowance (e) Expense account, of the allow							
(a) Name and address (b) Title, and average hours per week devoted to position  2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (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  (e) Expense account, other allowances  (f) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances  (f) Contributions to employee benefit plans and deferred compensation  (g) Contributions to employee benefit plans and deferred compensation  (g) Expense account, other allowances  (g) Expense account, other allowances  Total number of other employees paid over \$50,000		and Contractors					
(a) Name and address    hours per week devoted to position   center -0-)   center address	_1_	List all officers, directors, trustees, foundation m					
ATCH 12 0 C 0  C O  C O  C O  C O  C O  C O  C		(a) Name and address	hours per week	(If not paid,	employee benefit plans		
ATCH 12 0 0 0  Compensation of five highest-paid employees (other than those included on line 1 - see instructions). 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 (e) Expense account, other allowances of the reliable to		-	devoted to position	enter -0-y	and deterred compensation		
2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). 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 (c) Compensation (e) Expense account, other allowances of each employee benefit plans and deferred compensation (e) Expense account, other allowances of each employees paid over \$50,000 (c) Compensation (e) Expense account, other allowances (e) Expense account,	ATC			o	0	ļ	0
2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  NONE  Total number of other employees paid over \$50,000  (other than those included on line 1 - see instructions). If none, enter (c) Compensation  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances				-			
2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). 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 NONE  NONE  Total number of other employees paid over \$50,000							
2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). 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 NONE  NONE  Total number of other employees paid over \$50,000							
"NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  NONE  Total number of other employees paid over \$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."  (a) Name and address of each employee paid more than \$50,000  NONE  NONE  Total number of other employees paid over \$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."  (a) Name and address of each employee paid more than \$50,000  NONE  NONE  Total number of other employees paid over \$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."  (a) Name and address of each employee paid more than \$50,000  NONE  NONE  Total number of other employees paid over \$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	2	Compensation of five highest-paid employees	(other than thos	e included on line	1 - see instruct	ions). If n	one, enter
(a) Name and address of each employee paid more than \$50,000  NONE  NONE  Total number of other employees paid over \$50,000  (b) Title, and variety hours per week devoted to position  (c) Compensation  (c) Compensation  (c) Compensation  (d) Expense account, other allowances  (e) Expense account, other allowances  (e) Expense account, other allowances			·	·			· · · · ·
NONE  Total number of other employees paid over \$50,000	(a	) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		
Total number of other employees paid over \$50,000					- Compensation		
		NONE					
Total number of other employees paid over \$50,000							
	Tota	I number of other employees paid over \$50.000					
			5,_5,,5,,5			Form 99	<b>0-PF</b> (2012)

3 Five highest-paid independent contractors for professional services (see i	instructions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE	_	
	-	
	-	
	-	
	-	
otal number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis organizations and other beneficianes served, conferences convened, research papers produced, etc.	stical information such as the number of	Expenses
1 N/A		
	· · · · · · · · · · · · · · · · · · ·	
2		
3		<del> </del>
<b></b>		
4		
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
1 NONE	s i anu z	Amount
1		
2		
All other program-related investments See instructions		
3 NONE		
		1

Form **990-PF** (2012)

Page 8

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)	gn founda	tions,
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	1,160,652.
b	Average of monthly cash balances	1b	281,702.
С	Fair market value of all other assets (see instructions)	1c	
d		1d	1,442,354.
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		3	1,442,354.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		-
		4	21,635.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,420,719.
6	Minimum investment return. Enter 5% of line 5	6	71,036.
Pa	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 i	part )	
1	Minimum investment return from Part X, line 6	1	71,036.
2 a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012 (This does not include the tax from Part VI) 2b	1	
С	Add lines 2a and 2b	2c	728.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	70,308.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	70,308.
6	Deduction from distributable amount (see instructions)	6	
7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	70,308.
Pa	art 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	364,040.
b	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	
2			
	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	364,040.
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	728.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	363,312.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	lculating w	hether the foundation

Form **990-PF** (2012)

Page 9

	rt XIII Undistributed Income (see Instruc	tions)	<del></del>		Page 3
1	Distributable amount for 2012 from Part XI,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1	· · · · · · · · · · · · · · · · · · ·				70,308.
2	Undistributed income, if any, as of the end of 2012				,
_	Enter amount for 2011 only				
	Total for pnor years 20 10 20 09 20 08				
3	Excess distributions carryover, if any, to 2012				
а	From 2007 110,297.				
	From 2008 152,106.				
С	From 2009 116,599.				
d	From 2010 68,026.		ļ		
е	From 2011				
	Total of lines 3a through e	591,899.			
4	Qualifying distributions for 2012 from Part XII,				
	line 4 ▶ \$364,040.				
а	Applied to 2011, but not more than line 2a				
b	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 2012 distributable amount				70,308.
е	Remaining amount distributed out of corpus	293,732.			
5	Excess distributions carryover applied to 2012 (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:	005 601			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	885,631.			
	Pnor years' undistributed income Subtract line 4b from line 2b				
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.				
đ	Subtract line 6c from line 6b Taxable				
е	amount - see instructions				
f	Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				
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 2007 not applied on line 5 or line 7 (see instructions)	110,297.			
9	Excess distributions carryover to 2013.				
	Subtract lines 7 and 8 from line 6a	775,334.			
10	Analysis of line 9				
а	Excess from 2008 152,106.				
b	Excess from 2009 116,599.				
С	Excess from 2010 68,026.				
d	Excess from 2011 144,871.				
e	Excess from 2012 293,732.				

Do	WW Brivete Open	sting Foundations (s	aa inatriiatiana an	d Dort VIII A guantin	= O)	NOT ADDITIONE
	rt XIV Private Oper					NOT APPLICABLE
1 a	If the foundation has i				ating	
	foundation, and the ruling	is effective for 2012, ent	er the date of the ruling	'	. •	<del></del>
b	Check box to indicate wh	ether the foundation is a j	private operating found	dation described in section	1 4942(	j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		/o\ Tatal
2 a	justed net income from Part	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	for the minimum investment				, , , , , , , , , , , , , , , , , , ,	
	return from Part X for each					
	year listed			<del></del>	<del>                                     </del>	<del>                                     </del>
b	85% of line 2a					<del></del>
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
d	Amounts included in line 2c not				1	
	used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of					
	exempt activities Subtract line				•	
3	2d from line 2c  Complete 3a, b, or c for the			<del> </del>	+	
•	alternative test relied upon					
а	"Assets" alternative test - enter	İ				
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section					
b	4942(j)(3)(B)(i)				•	
	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on secunties					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general					***
	public and 5 or more					o c
	exempt organizations as provided in section 4942					
	(j)(3)(B)(III)	ļ <u> </u>				
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income					
Pa	art XV Supplement	ary Information (Co	mplete this part	only if the found	dation had \$5,000	or more in assets
	at any time of	during the year - see	instructions.)			
1	Information Regardin	g Foundation Manager	5:			
а	List any managers of	the foundation who ha	ave contributed mo	re than 2% of the tot	al contributions recei	ved by the foundation
	before the close of any	tax year (but only if the	ey have contributed	more than \$5,000) (\$	See section 507(d)(2)	)
	NONE					
_		the foundation who e	wn 10% or more (	of the stock of a corr	poration (or an equal	ly large portion of the
b		ship or other entity) of				ly large portion of the
	Ownership of a partile	Ship of other entity) of	willon the loundatio	illias a 10 /0 or greate	i iliterest	
	N/A					
2	Information Regardin	g Contribution, Grant,	Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ▶ X If t	he foundation only m	nakes contributions	to preselected char	ritable organizations	and does not accept
		or funds. If the founda				
		olete items 2a, b, c, and		•	•	•
-	The name, address, a	nd telephone number (	or e-mail of the pers	on to whom application	ns should be addressed	
α	. no name, address, a	totophone number (	o man or the pers	o to mon application	Jilodia Do GGGIGGGG	-
	The form in which are	المراجع والمارية والمحمودة		non and materials that	r abould raduda	<del></del>
D	The form in which app	ilications should be sub	militeu and informat	ion and materials the	y stroutu include	
С	Any submission deadl	ines			<del></del>	
d	Any restrictions or li	mitations on awards	such as by dend	raphical areas charit	able fields, kinds of	institutions or other
<b>~</b>	factors		goog	arodo, onani		

Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid During Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Continuation	
a Paid during the year		1		
ATCH 13				
			j '	
			1	
		-		
			1	1
				İ
Total			▶ 3a	364,000.
b Approved for future payment		<del></del>		
2 / pp/orea /o/ valure payment				
•	1			
			ļ.	
	1			
Total	<u></u>	<u> </u>	▶ 3b	

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ter gross amounts unless otherwise indicated	Unreia	ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	( <b>d)</b> Amount	Related or exempt function income (See instructions)
a			<u> </u>		
b					
с					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					<del></del> .
Interest on savings and temporary cash investments			14	17,623.	· · · · · · · · · · · · · · · · · · ·
Dividends and interest from securities			14	13,230.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property			_		,
Net rental income or (loss) from personal property					
Other investment income			10	FO 010	
Gain or (loss) from sales of assets other than inventory			18	52,818.	
Net income or (loss) from special events			<del>                                     </del>		
Gross profit or (loss) from sales of inventory			<del> </del>		
Other revenue a			<del> </del>		
b			ļ		
C					
d			<u> </u>		
e	8		-	83,671.	
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)		L	<u> </u>		
e worksheet in line 13 instructions to venfy calc art XVI-B Relationship of Activities	to the A	complishment of E	xempt Purp		uted importantly to
e worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities	to the Ac	ccomplishment of Ex	kempt Purp	e) of Part XVI-A contrib	
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Part >	(VII	Information Re Exempt Organ		sfers To and Trans	actions an	d Relationships With Non	charitabl	e
iu Iu	secti rganiz	on 501(c) of the Co ations?	de (other than se	ection 501(c)(3) organiza	ations) or in s	ny other organization described section 527, relating to political	Yes	No
			-	noncharitable exempt o	_			١.,
							1a(1)	$\frac{X}{X}$
							1a(2)	<del>  ^</del> -
-		ransactions	nahasitahla ayam	nt organization			45.43	x
(1	) Dur	es or assers to a nor	nchantable exem	pi organization			1b(1)	X
							1b(2) 1b(3)	$\frac{x}{x}$
							1b(4)	X
							1b(5)	X
ì	) Per	formance of service	s or membership	or fundraising solicitation	ns			Х
								X
d If	the a	answer to any of th	e above is "Yes,	" complete the followin	g schedule	Column (b) should always show if the foundation received less	w the fair r	
						of the goods, other assets, or s		
(a) Line	no	(b) Amount involved	(c) Name of no	ncharitable exempt organization	(d) De	scription of transfers, transactions, and sha	ппд аптапдет	ents
	_	N/A			N/A			
				_ <del></del>				
	-+							
<del>-</del>	-+	<del></del>						
	-	<del></del>	<del></del>			<del></del>		
	_							
		·						
d	escrib		of the Code (oth			ore tax-exempt organizations	Yes [	 ⊠ No
		(a) Name of organizatio	n e	(b) Type of organizati	ion	(c) Description of relation	nship	
						· · · · · · · · · · · · · · · · · · ·		
<del></del>		· · · · · · · · · · · · · · · · · · ·						
Sign Here	correc	t, and complete political or o	are that I have examine if leparer other than tax	payer) is based on all information of	which preparer has	May the IF	dge and belief,	return
	Sign	nature of officer or trustee		Date	Title	(see instruction	ons)? X Yes	No
	1	Print/Type preparer's	s name	Preparer's signature	<del></del>	Date Check If	PTIN	
Paid -		TIMOTHY N. TH	OMPSON	Takuma		3-19-13 self-employed	P004338	70
Prepa			RICEWATERHOU			Firm's EIN ▶13-4		
Use (	Only	Firm's address ▶ ON						

Phone no 312-298-2000

60606

CHICAGO, IL

### 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

2012

Name of the organization		Employer identification number
THE MULHOLLEM CRAVENS	FOUNDATION	20-3835578
Organization type (check one)		20 3033370
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II	or more (in money or
under sections 509(a) the greater of (1) \$5,0 Complete Parts I and I  For a section 501(c)(7 during the year, total or educational purpos  For a section 501(c)(7 during the year, contri	('), (8), or (10) organization filing Form 990 or 990-EZ that received from a contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitales, or the prevention of cruelty to children or animals. Complete Parts I, II, ('), (8), or (10) organization filing Form 990 or 990-EZ that received from a butions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the \$1,000. If this box is checked, enter here the total contributions that were	e year, a contribution of 990-EZ, line 1  any one contributor, ble, scientific, literary, and III  any one contributor, ese contributions did e received during the
	religious, charitable, etc., purpose. Do not complete any of the parts unles ation because it received nonexclusively religious, charitable, etc., contril	butions of \$5,000 or
990-EZ, or 990-PF), but it $must$	not covered by the General Rule and/or the Special Rules does not file S answer "No" on Part IV, line 2 of its Form 990, or check the box on line H , to certify that it does not meet the filing requirements of Schedule B (For	of its Form 990-EZ or on

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) (2012)

Employer identification number 20-3835578

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_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311	<b>\$</b> 75,000.	Person X 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
2_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311	\$1,067.	Person X Payroll X 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
3 _	PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311	<b>\$</b> 7,035.	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
			(d) Type of contribution  Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
No.	PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192	Total contributions	Person X Payroll X (Complete Part II if there is
No. 4 4 (a)	Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311  (b)	\$ 6, 452.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
No. 4 4 (a) No.	Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311  (b)  Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192	\$6,452.	Type of contribution  Person Payroll Noncash  (Complete Part II if there is a noncash contribution)  (d) Type of contribution  Person Payroll Noncash  (Complete Part II if there is

Employer identification number 20-3835578

'Daiet i	Contributore	(coo instructions)	. Use duplicate copies	of Dart Lif additions	I chace is needed
	CONTINUEDIS	1500 1150 4000151	. Use uubiicale cobies	oi Faittii auullona	I Space is necueu.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7_	PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311	\$5,601.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Total contributions	(d)
8	Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311	\$5,826.	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
9 _	PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311	\$7,420.	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
		Total contributions - \$5,018.	
No.	Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192	Total contributions - \$5,018.	Person X Payroll X Noncash X (Complete Part II if there is
No	Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311  (b)	Total contributions - \$ 5,018 (c)	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
10 	Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311  (b)  Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192	Total contributions  - \$5,018.  - (c) Total contributions	Person   X     Payroll     Noncash     (Complete Part II if there is a noncash contribution )   (d)     Type of contribution     Person   X     Payroll   X     Noncash   X     (Complete Part II if there is
(a) No	Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311  (b)  Name, address, and ZIP + 4  PAUL MULHOLLEM, JR. & VALERIE CRAVENS  P.O. BOX 192  CARLISLE, KY 40311  (b)	Total contributions  - \$ 5,018.  - (c) Total contributions  - \$ 8,114.  - (c)	Person   X     Payroll     Noncash     (Complete Part II if there is a noncash contribution )   (d)     Type of contribution     Person   X     Payroll   X     (Complete Part II if there is a noncash contribution )   (d)

Name of organization THE MULHOLLEM CRAVENS FOUNDATION

Employer identification number 20-3835578

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
2_	33 SHS EASTMAN CHEMICAL CO		
		\$2,202.	12/24/2012
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3_	731 SHS HELIX ENERGY SOLUTIONS	<b>s</b> 14,839.	12/24/2012
		<b>4</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4_	81 SHS INTERCONTINENTALEXCHANGE INC		
		\$10,128.	_12/24/2012
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
from	• •	FMV (or estimate)	
from Part I	Description of noncash property given	FMV (or estimate)	
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
from Part I	Description of noncash property given  268 SHS INTUIT INC  (b)	\$16,426.  (c) FMV (or estimate)	Date received12/24/2012
from Part I  (a) No. from Part I	Description of noncash property given  268 SHS INTUIT INC  (b)  Description of noncash property given	\$16,426.  (c) FMV (or estimate)	Date received12/24/2012
from Part I  (a) No. from Part I	Description of noncash property given  268 SHS INTUIT INC  (b)  Description of noncash property given	\$16,426.  (c) FMV (or estimate) (see instructions)	Date received  12/24/2012  (d)  Date received
from Part I  (a) No. from Part I  (a) No. from	Description of noncash property given  268 SHS INTUIT INC  (b)  Description of noncash property given  611 SHS MONOLITHIC PWR SYSTEMS INC  (b)	\$	Date received

Employer identification number 20-3835578

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
8_	286 SHS SBA COMMUNICATIONS CRP A		
		\$20,232.	_12/24/2012
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9_	192 SHS SNAP ON INC COM		
		\$15,093.	12/24/2012
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
10_	346 SHS TJX COS INC NEW		
		\$14,605.	_12/24/2012
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
from	, ,	FMV (or estimate)	
from Part I	Description of noncash property given	FMV (or estimate)	
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
from Part I  - 11  (a) No. from	Description of noncash property given  388 UNITED NAT FOODS INC  (b)	\$ 20,983.  (c)  FMV (or estimate) (see instructions)	Date received  12/24/2012  (d) Date received
from Part I  11  (a) No. from Part I	Description of noncash property given  388 UNITED NAT FOODS INC  (b)  Description of noncash property given	\$ 20,983.  (c) FMV (or estimate)	Date received12/24/2012
from Part I  11  (a) No. from Part I	Description of noncash property given  388 UNITED NAT FOODS INC  (b)  Description of noncash property given	\$ 20,983.  (c) FMV (or estimate) (see instructions)	Date received  12/24/2012  (d) Date received
(a) No. from Part I	Description of noncash property given  388 UNITED NAT FOODS INC  (b)  Description of noncash property given  180 SHS VALSPAR CORP COM  (b)	\$ 20,983.  (c)  FMV (or estimate) (see instructions)  \$ 11,201.  (c)  FMV (or estimate) (see instructions)	Date received

Name of organization THE MULHOLLEM CRAVENS FOUNDATION

Employer identification number

20-3835578

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 evolucively religious, charitable, etc.

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. See instructions.) > \$

t	Jse duplicate copies of Part III if addition	nal space is needed		
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held
		(e) Transfe	r of aift	
		(5) 11211515		
	Transferee's name, address, an	d ZIP + 4	Relation	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use c	of gift	(d) Description of how gift is held
		(e) Transfe	er of gift	
	Transferee's name, address, an	nd ZIP + 4	Relation	ship of transferor to transferee
		·		
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held
		(e) Transfe	er of aift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		<b></b>		
		(e) Transfe	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee

THE MULHOLLEM CRAVENS FOUNDATION 20-3835578
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of F		TO ALLE LO		ription	N INVESTMENT INCOME P Date Date		Date sold	
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	D	acquired Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adj basis	Ш	or (loss)	
		TOTAL CAPITA	AL GAIN DIS	TRIBUTIONS			8,003.	
21,545.		MERRILL LYNC PROPERTY TYPE 20,888.			ATTACHE	Р	VARIOUS	VARIOUS
,		MERRILL LYNO			ATTACHE	P		VARIOUS
398,837.		354,679.					44,158.	
FOTAL GAIN(L	oss)						52,818.	

# FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	14,048. 3,575.	17,623.
REVENUE AND EXPENSES PER BOOKS	14,048. 3,575.	17,623.
		TOTAL
	U.S. INTEREST	
DESCRIPTION	MERRILL LYNCH MERRILL LYNCH -	

SECURITIES
FROM
INTEREST
AND
- DIVIDENDS
PART I -
990PF.
FORM

NET INVESTMENT INCOME	13,230.	13,230.
REVENUE AND EXPENSES PER BOOKS	13,230.	13,230.
		TOTAL
DESCRIPTION	MERRILL LYNCH	

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CHARITABLE <u>PURPOSES</u>		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	2,250.	2,250.
REVENUE AND EXPENSES PER BOOKS	2,250.	2,250.
	ERS	TOTALS
DESCRIPTION	PRICEWATERHOUSECOOPERS	

## FORM 990PF, PART I - OTHER PROFESSIONAL FEES

	NET	INVESTMENT	INCOME	8,627.
REVENUE	AND	EXPENSES	PER BOOKS	8,627.
			DESCRIPTION	MERRILL LYNCH FEES

8,627.

8,627.

TOTALS

### FORM 990PF, PART I - TAXES

REVENUE
AND
EXPENSES
PER BOOKS

DESCRIPTION

FOREIGN TAXES OTHER FOREIGN TAX PAYMENTS

299. 31.

TOTALS

330.

9

ATTACHMENT

- OTHER EXPENSES FORM 990PF, PART I

ILLINOIS CHARITY BUREAU FUND ILLINOIS SECRETARY OF STATE KENTUCKY STATE TREASURER DESCRIPTION

15. 15. PER BOOKS EXPENSES

REVENUE

AND

40.

TOTALS

15. 10. PURPOSES

CHARITABLE

40.

OBLIGATIONS
STATE
AND
U.S.
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PART
990PF,
FORM

Т 7	ENDING <u>FMV</u>
ATTACHMENT	ENDING BOOK VALUE
, FAKI II - 0.3. AND STAIE OBLIGATIONS	77
FORM SOUFF,	DESCRIPTION

161,656.

180,987.

180,987.

161,656.

US OBLIGATIONS TOTAL

MERRILL LYNCH

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FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

MERRILL LYNCH - MUTUAL FUNDS MERRILL LYNCH - EQUITIES

ING	VALUE
END	BOOK

ENDING FMV

> 697,044. 219,884.

725,541. 306,927.

1,032,468.

916,928.

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FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

MERRILL LYNCH

ENDING BOOK VALUE

ENDING FMV\_

150,104.

157,166.

157,166.

TOTALS

150,104.

### FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION	AMOUNT
NONDIVIDEND DISTRIBUTIONS DIV INC EARNED IN 2011, RECEIVED IN 2012 FOREIGN TAXES PAID, NOT EARNED	11. 107. 31.
TOTAL	149.

### FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION	AMOUNT
PREMIUM AMORTIZATION CGD EARNED IN 2012, PAID IN 2013 DIV INC EARNED IN 2012, PAID IN 2013 NONDEDUCTIBLE ESTIMATED TAX PAYMENTS OTHER DECREASE	298. 1,218. 148. 2,640. 365.
TOTAL	4,669.

FORM 990PF, PART VIII - LIST OF OFFICERS, DI	ERS, DIRECTORS, AND TRUSTEES		ATTACHMENT 12	
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION			
PAUL B. MULHOLLEM, JR. C/O PAUL B MULHOLLEM JR. P.O. BOX 192 CARLISLE, KY 40311	DIRECTOR	0	0	0
VALERIE K. CRAVENS C/O PAUL B MULHOLLEM JR. P.O. BOX 192 CARLISLE, KY 40311	DIRECTOR	0	0	0
SYLVIA J. CRAVENS 141 KENTUCKY AVE. LEXINGTON, KY 40502	DIRECTOR	0	0	0

GRAND TOTALS

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CENTER FOR WOMEN IN RACING	NONE	TO FURTHER THE MISSION OF THE DONEE	2,000.
CENTRAL KENTUCKY RIDING FOR HOPE	NONE	TO FURTHER THE MISSION OF THE DONEE	20,000.
COMMONWEALTH FUND FOR KET	NONE	TO FURTHER THE MISSION OF THE DONEE	10,000.
FFA FOUNDATION	NONE	TO FURTHER THE MISSION OF THE DONEE	50,000.
GOD'S PANTRY	NONE	TO FURTHER THE MISSION OF THE DONEE	25,000.
ND MUSEUM OF ART	NONE	TO FURTHER THE MISSION OF THE DONEE	2,000

ATTACHMENT 13\_(CONT'D)

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RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	FOUNDATION STATUS OF RECIPIENT AMOUNT	TO FURTHER THE MISSION OF THE DONEE	TO FURTHER THE MISSION OF THE DONEE	TO FURTHER THE MISSION OF THE DONEE	TO FURTHER THE MISSION OF THE DONEE	TO FURTHER THE MISSION OF THE DONEE	TO FURTHER THE MISSION OF THE DONEE
RELATIONSHIP TO SUBS	FOUNDATION ST	EIY NONE	NONE	NONE	NONE	NONE	NONE
	RECIPIENT NAME AND ADDRESS	NICHOLAS COUNTY HISTORICAL SOCIETY	SI. MARY SCHOOL	PARIS-BOURBON COUNTY YMCA	KALP	THE CARNEGIE CENTER	CARLE DEV FOUNDATION

TOTAL CONTRIBUTIONS PAID 364,000\_

### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T.

► Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

Employer identification number

THE MULHOLLEM CRAVENS FOUNDATION 20-3835578 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (e) Cost or other basis (a) Description of property (Example 100 shares 7% preferred of "Z" Co ) (b) Date acquired (c) Date sold (d) Sales price the entire year Subtract (e) from (d) (mo , day, yr ) (mo, day, yr) (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 657. Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 Net short-term gain or (loss) from partnerships. S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2011 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back 657. Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for the entire year Subtract (e) from (d) (a) Description of property (b) Date acquired (e) Cost or other basis (d) Sales price (Example 100 shares 7% preferred of "Z" Co ) (mo, day, yr) (mo , dav, vr ) (see instructions) 6a **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6b 44,158. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions 8,003. 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2011 Capital Loss Carryover Worksheet .....

Schedule D (Form 1041) 2012

52,161.

Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a,

Schedule D (Form 1041) 2012			Page <b>2</b>
Part III Summary of Parts I and II  Caution: Read the instructions before completing this part.	(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
3 Net short-term gain or (loss) 13	(555557)		657.
4 Net long-term gain or (loss):			
a Total for year			52,161.
b Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b	1		
c 28% rate gain			
5 Total net gain or (loss). Combine lines 13 and 14a   15			52,818.
lote: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo	orm 990-T, Part I, line 4	la) If lines 14a and 1	5, column (2), are ne
ains, go to Part V, and <b>do not</b> complete Part IV. If line 15, column (3), is a net los ecessary	s, complete Part IV an	d the <b>Capital Loss Ca</b>	myover Worksheet, as
Part IV Capital Loss Limitation			
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, I	line 4c if a trust) the sn	naller of	
a The less on line 45 column (2) on h #2 000		4 -   /	)
lote: If the loss on line 15, column (3) or b \$3,000 or if Form 1041, page	1, line 22 (or Form 99)	0-T, line 34), is a loss	, complete the Capita
oss Carryover Worksheet in the instructions to figure your capital loss carryover			
Part V Tax Computation Using Maximum Capital Gains Rates	403		
form 1041 filers. Complete this part only if both lines 14a and 15 in column		mount is entered in	Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more tha Caution: Skip this part and complete the Schedule D Tax Worksheet in the instru			
Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or	cuons II		
Description 1041, line 2b(1), and Form 4952, line 4g are more than zero			
form 990-T trusts. Complete this part only if both lines 14a and 15 are ga	uns or qualified divid	dends are included	in income in Part I
f Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and o	complete the Schedu	le D Tax Workshee	et in the instructions
either line 14b, col (2) or line 14c, col (2) is more than zero	•		
7 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17		
8 Enter the smaller of line 14a or 15 in column (2)	• • • • • • • • • • • • • • • • • • • •		
but not less than zero			
9 Enter the estate's or trust's qualified dividends		*	
from Form 1041, line 2b(2) (or enter the qualified		*	
dividends included in income in Part I of Form 990-T) 19			
20 Add lines 18 and 19			
If the estate or trust is filing Form 4952, enter the			
, , , , , , , , , , , , , ,		,	
amount from line 4g, otherwise, enter -0 ▶		x .	
, , , , , , , , , , , , , , , , , , , ,	22		
3 Subtract line 22 from line 17 If zero or less, enter -0-	23		
A Enter the employ of the employ on line 47 or \$2.400			
Enter the smaller of the amount on line 17 or \$2,400	24		
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box.			
No. Enter the amount from line 23			
Subtract line 25 from line 24	26		
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22		<del></del>	
S Enter the amount from line 26 (If line 26 in blank anter 0.)			
Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
Q Cubirnat line 29 from line 27			
Subtract line 28 from line 27	29		
Multiply line 29 by 15% ( 15)		30	
Figure the tax on the amount on line 23. Use the 2012 Tax Rate Sch			
(see the Schedule Ginstructions in the instructions for Form 1041)		31	
9 Add hara 20 and 24			
Add lines 30 and 31		32	
Figure the tax on the amount on line 17. Use the 2012 Tax Rate Sch	nedule for Estates ar	nd Trusts	
(see the Schedule Ginstructions in the instructions for Form 1041)	<u>.</u>	33	<del></del>
Tax on all taxable income. Enter the smaller of line 32 or line 33 here			
G, line 1a (or Form 990-T, line 36)		34	

Schedule D (Form 1041) 2012

### **SCHEDULE D-1** (Form 1041)

### Continuation Sheet for Schedule D (Form 1041) Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 1041) and its separate instructions is at www.irs.gov/form1041.

Employer identification number

Part I Short-Term Capital Gains a	ind Losses - Asse	ets Held One Year	or Less		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
ia MERRILL LYNCH #04A12 - S/T	r		_		
- SEE ATTACHED	VARIOUS	VARIOUS	21,545.	20,888.	657
			*		
		-			
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		***		-	
		-			
	<del>                                     </del>	<del> </del>			<u> </u>
		1			
		<u> </u>		<u> </u>	

art II Long-Term Capital Gains an	d Losses - Asse	ts Held More Tha	n One Year		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d
MERRILL LYNCH #04A12 - L/T					
- SEE ATTACHED	VARIOUS	VARIOUS	398,837.	354,679.	44,158
					<del>-</del> -
	<del> </del>				<u> </u>
		<u>.</u>			
			-		
	-				
Total. Combine the amounts in column					



Account No. 874-04A12

Taxpayer No. 20-3835578

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### THE MULHOLLEM CRAVENS

## 2012 ANNUAL STATEMENT SUMMARY

The following sections are provided to facilitate your review and the preparation of your tax return.

The 2012 Proceeds from Broker and Barter Exchange Transactions section includes both sales of positions for "covered securities" and "noncovered securities." A covered security includes those with a purchase date within the following timeline: Equities acquired on or after January 1, 2011 and Mutual Funds acquired on or after January 1, 2012 Legislation requires reporting the gross proceeds of the sales of "covered" and "noncovered" securities and the adjusted cost basis for "covered securities." Any sale of a security that is considered a "noncovered security" will still be included in this section with the adjusted cost basis (where available)

IN CORP CUSIP Number 278058102 5,450.09 4,935 63 0 00 514.46 514.46	CUSIP Number         291011104         727 63         730.95         0.00           Sale         05/04/12         09/27/12         727 63         689 25         0.00           Sale         05/18/12         09/27/12         727 63         684 60         0.00           Sale         07/31/12         09/27/12         2,668.00         2,624 05         0.00           Security Subtotal         4,850.89         4,728.85         0.00	CUSIP Number 54400A605 3.01 2 89 0.00
	CUSIP Number 278058102 09/27/12 12/03/12 5,450.09 4,935 63 0 00	63 730.95 63 0.00 63 689.25 63 0.00 63 684.60 0.00 600 63 684.85 0.00 600 63 684.85 0.00

(157.96)

0.00

7,152.84

6,99488

NONCOVERED TRANSACTIONS - 1099-B Line 6a. (cost basis not reported to the IRS)

Covered Short Term Capital Gains and Losses Subtotal

CUSIP Number 922908744 07/07/11 02/13/12

VANGUARD VALUE ETF 125 0000 Sale

636.62

0.00

9,667.37

10,303.99

THE MULHOLLEM CRAVENS

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		2012 AN	2012 ANNUAL STATEMENT SUMMARY	TEMENT SL	IMMARY		
1099-B	2012 PROC	EEDS FROM	BROKER &	<b>SARTER EXC</b>	PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	SACTIONS	
Transaction 1e Quantity Description	1b. Date of Acquisition	1a Date of Sale or Exchange	2a. Amount	3 Cost Basis	5 Wash Sale Loss Disallowed	Gain or (Loss)	Remarks
BLACKROCK LG CAP VALUE I .6910 Sale 1.0000 Sale 43.0000 Sale	CUSIP Number 12/15/11 12/15/11 12/15/11	09250J817 02/13/12 11/13/12 11/13/12	10 71 15 35 660 06	9 47 11.90 589.53	0000	124 345 70.53	
Security Subtotal			686.12	610.90	0.00	75.22	
NEUBERGER LC DS GR INST .6210 Sale	CUSIP Number 12/19/11	<b>641224373</b> 02/13/12	4 71	4 19	00 0	0.52	
GLDMN SCHS GRW OPP INSTL 73 0000 Sale 1.0000 Sale 5250 Sale 3.0000 Sale	CUSIP Number 12/08/11 12/08/11 12/08/11 12/08/11	38142Y401 02/13/12 02/13/12 02/13/12 02/13/12	1,805.29 24.73 12.98 74.20	1,638 85 17.17 11 79 67.35	0000	166 44 7 56 1.19 6 85	
Security Subtotal			1,917.20	1,735.16	0.00	182.04	
BLKRK ENRGY & RES INSTL 13 0000 Sale 1 0000 Sale 8 0000 Sale .8080 Sale 5.0000 Sale	CUSIP Number 12/13/11 12/13/11 12/13/11 12/13/11	091937532 11/13/12 11/13/12 11/13/12 11/13/12	408 71 31.44 251.52 25 40 157 21	484 50 38 39 298.16 30 11 186 34	000000	(75.79) (6.95) (46.64) (4.71) (29.13)	
Security Subtotal			874.28	1,037.50	0.00	(163.22)	
ARTIO INTL EQUITY II I 1.0000 Sale 2080 Sale 71.0000 Sale	CUSIP Number 12/29/11 12/29/11 12/29/11	<b>04315J837</b> 02/13/12 02/13/12 02/13/12	10.56 2.20 749.77	8 27 1 96 668.81	0.00	2 29 0 24 80.96	
Security Subtotal			762.53	679.04	00:0	83.49	
DAVIS NY VENTURE FD CL Y 0240 Sale	CUSIP Number 12/22/11	<i>239080401</i> 02/13/12	0 84	0.78	00 0	90 0	
Noncovered Short Term Capital Gains and		Losses Subtotal	11,240.56	11,220.41	0.00	20.15	
NET SHORT TERM CAPITAL GAINS AND LOSSES	AND LOSSES		21,544.55	20,887.78	0.00	656.77	

Taxpayer No.	20-3835578

Page 10 of 2			Remarks										
		SACTIONS	Gain or (Loss) R			00 0	5,125.47 404 55	5,530.02	4,134,51 749.82 258.89 348 16	5,491.38	8,556.57 1,534 08 1,107 24	11,197.89	282 35 3.65 753 31 753 31 3 34 3 23.19 0 69 1.46 70 20 3,223 63 1 37 3 84 46 (1,543.67)
<u>Vo.</u> 78	MMARY	EDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	5 Wash Sale Loss Disallowed			0.00	0000	00'0	0000	00.00	0.00	0.00	000000000000000000000000000000000000000
<u>Taxpayer No.</u> 20-3835578	2012 ANNUAL STATEMENT SUMMARY	<b>BARTER EXC</b>	3. Cost Basis		IRS)	75,000 00	19,721.60 6,428 40	26,150.00	15,898 78 4,062.64 5,337.00 7,206 30	32,504.72	19,497 73 4,239 80 10,440 55	34,178.08	927 42 11 86 3,015 62 12.17 1,894.75 4 09 1,060 00 1,060 00 13 98 669 75 17,998.87
Account No. 874-04A12	ANNUAL STA	M BROKER &	sale 2a. Amount		reported to the	75,000 00	24,847.07 6,832 95	31,680.02	20,033.29 4,812.46 5,595.89 7,554.46	37,996.10	28,054.30 5,773.88 11,547.79	45,375.97	1,209.77 15.51 3,768.93 1,551 2,217.94 1,228.00 1,288.00 10.62 598.65 24,375.79 15,35 16,455.20
Account No 874-04A12	2012	CEEDS FRO	1a. Date of Sale or Exchange	- 1099-B Line 1c.	(cost basis not	er 36962GYY4 06/15/12	er 922908751 02/13/12 02/13/12		ar 922908744 02/13/12 02/13/12 02/13/12 02/13/12		sr 922908736 02/13/12 02/13/12 02/13/12		or 09250J817 02/13/12 02/13/12 02/13/12 02/13/12 02/13/12 11/13/12 11/13/12 11/13/12 11/13/12 11/13/12 11/13/12
		2012 PROCE	1b. Date of Acquisition	1099 - 1099	099-B Line 6a.	CUSIP Number 01/05/06	CUSIP Number 05/07/10 12/31/10		CUSIP Number 08/14/09 09/18/09 12/31/10 12/31/10	! :	CUSIP Number 08/14/09 09/18/09 12/31/10		CUSIP Number 07/21/09 07/22/09 07/22/09 08/14/09 08/17/09 09/18/09 09/18/09 09/18/09 05/07/10 05/07/10 05/07/10 05/07/10 07/07/11
Merrill Lynch Sank of America Corporation	THE MULHOLLEM CRAVENS	1099-B	Transaction 1e Quantity Description	LONG TERM CAPITAL GAINS AND LOSSES	NONCOVERED TRANSACTIONS - 1099-B Line 6a. (cost basis not reported to the IRS)	NM GENL ELEC CAP CORP BE 75000 0000 Sale	VANGUARD SMALL CAP 320.0000 Sale 88.0000 Sale	Security Subtotal	VANGUARD VALUE ETF 358 0000 Sale 86.0000 Sale 100.0000 Sale		VANGUARD GROWTH ETF 413.0000 Sale 85.0000 Sale 170.0000 Sale		BLACKROCK LG CAP VALUE I 78 0000 Sale 1 0000 Sale 1 0000 Sale 1 0000 Sale 1 0000 Sale 1 3000 Sale 80 0000 Sale 6920 Sale 1 588.000 Sale 1 1000 Sale 1 1000 Sale 1 1000 Sale 1 1000 Sale 1 10000 Sale 1 1000 Sale 1 1000 Sale 1 1000 Sale 1 1000 Sale 1 1000 Sale

## THE MULHOLLEM CRAVENS

Merrill Lynch Sank of America Corporation

Transaction 1e. Quantity Description  NEUBERGER LC DS GR INST 17,0000 Sale 9 0000 Sale 1 0000 Sale 1 0000 Sale 753,0000 Sale 310,0000 Sale 310,0000 Sale 310,0000 Sale 310,0000 Sale 1 0000 Sale 310,0000 Sale 1 0000 Sale 1 00000 Sale	2012 PROCI 1b Date of Acquisition CUSIP Number 01/15/09 07/21/09 07/24/09 08/14/09 09/18/09 08/14/09 08/14/09 08/14/09	<b>77</b> ○ ★    ₹₩₩₩₩₩₩ ₩ ₩₩₩₩	INUAL STA BROKER & 2a Amount 129.03 68.31 7,035.93 5,715.26 2,352.91 15,309.03 17,953.98 2,423.53 2,720.30	2012 ANNUAL STATEMENT SUMMARY S FROM BROKER & BARTER EXCHANGE    s troop BROKER & BARTER EXCHANGE    s troop Basis    s troop Broker    s troop Basis    s troop Basis    s troop Basis    s troop Basis    s troop Broker    s troo	EXCHANGE TRANSACTIONS  5 Wash Sale 574 0.00 43 536 0.00 1,597 5.96 0.00 1,191 4.00 0.00 1,191 4.00 0.00 3,235 3.96 0.00 3,235 3.96 0.00 3,235 3.96 0.00 8,624 5.40 0.00 8,624 6.40 0.00 8,624	SACTIONS  Gain or (Loss)  43.29 22.95 1,597.85 1,191.26 3,235.07 3,235.07 8,624.84 685.70 8 12 8 12	Remarks
Sale Sale Sale <b>Security Subtotal</b>	09/18/09 12/09/10 12/31/10	333	2,720.30 395.68 7,171.70 <b>30,689.92</b>	2,105 40 384 16 7,061 50 <b>20,634.64</b>	0.00	614 90 11 52 110 20 <b>10,055.28</b>	
BLKRK ENRGY & RES INSTL 706 0000 Sale	CUSIP Number 07/07/11	<i>091937532</i> 11/13/12	22,196 64	33,407 92	00 0	(11,211.28)	
	CUSIP Number 03/06/09 07/21/09 07/22/09 08/14/09 09/18/09 12/30/10 12/31/10 12/31/10	04315J837 02/13/12 02/13/12 02/13/12 02/13/12 02/13/12 02/13/12 02/13/12	18,479.99 3,611.52 10.55 2,407.68 2,196.48 2,154.24 960.96 10.56 8,310.73	13,229 99 3,632 03 10.60 2,594.64 2,552 15 2,419.44 1,127.49 1,188 9,806.02	000000000	5,250.00 (20.51) (0.05) (186.96) (355.67) (265.20) (16.96) (16.20) (16.20)	
Security Subtotal OPP FD F Sale Sale Sale Sale Sale Sale Sale Sale	CUSIP Number 03/06/09 07/21/09 08/14/09 08/17/09 11/23/10	54400A605 03/12/12 03/12/12 03/12/12 03/12/12 03/12/12	38,142.71 14,029.08 3,765 10 2,095.36 16.37 16.37	35,384,24 6,513 20 2,442.59 1,478 39 1,24 2,438 85 14.06	000000	2,7884/ 7,515.88 1,322.51 616.97 5.13 786.04	

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### THE MULHOLLEM CRAVENS

## 2012 ANNUAL STATEMENT SUMMARY

		7107						
1099-B	2012 PROC	EEDS FROM	<b>BROKER &amp;</b>	BARTER EXC	2012 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS	SACTIONS		
Transaction 1e. Quantity Description	1b Date of Acquisition	1a Date of Sale or Exchange	e 2a Amount	3 Cost Basis	5. Wash Sale Loss Disallowed	Gain or (Loss) Remarks	Remarks	
LORD ABBETT VAL OPP FD F 13 0000 Sale 100.0000 Sale Security Subtotal	CUSIP Number 11/23/10 12/31/10	54400A605 03/12/12 03/12/12	212 81 1,637 01 <b>24,996.99</b>	188 75 1,585 00 <b>14,672.08</b>	0.00	24.06 52.01 <b>10,324.91</b>		
DAVIS NY VENTURE FD CL Y 45.0000 Sale 69 0000 Sale 1 0000 Sale 111 0000 Sale 1.0000 Sale 33.0000 Sale 34.0000 Sale	CUSIP Number 01/15/09 03/06/09 03/09/09 08/14/09 09/18/09 09/18/09	239080401 02/13/12 02/13/12 02/13/12 02/13/12 02/13/12 02/13/12	1,592 54 2,441.91 3,928 29 3,928 29 35.39 1,167 88	991 35 1,212 33 1,098 00 27 19 992 64 29 00	0000000	601.19 1,229.58 17.95 830.29 8 20 175.24		
Security Subtotal		I	9,235.53	6,367.95	0.00	2,867.58		
Noncovered Long Term Capital Gains and Losses	ains and Losses	Subtotal	398,836.16	354,678.51	0.00	44,157.65		
NET LONG TERM CAPITAL GAINS AND LOSSES	IND LOSSES		398,836.16	354,678.51	0.00	44,157.65		
TOTAL SALES PROCEEDS FOR CAPITAL GAINS ANI TOTAL REPORTED SALES PROCEEDS	ITAL GAINS AN JS	ID LOSSES	420,380.71 420,380.71					

## 2012 REALIZED CAPITAL GAIN AND LOSS SUMMARY

NONCOVERED LONG TERM GAINS/LOSSES	44,157.65
COVERED LONG TERM GAINS/LOSSES	0.00
NONCOVERED SHORT TERM GAINS/LOSSES	20.15
COVERED SHORT TERM GAINS/LOSSES	636.62