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### Form 990-PF

Department of the Treasury

For calendar year 2012 or tax year beginning

Internal Revenue Service

### **Return of Private Foundation**

## or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

, and ending

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

9/27/2012

OMB No 1545-0052

Open to Public Inspectio

12/31/2012

Name of foundation A Employer identification number **AWT Family Foundation** 46-1101805 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) Foundation Source 501 Silverside Rd 123 (800) 839-1754 City or town, state, and ZIP code C If exemption application is pending, check here Wilmington DE 19809-1377 G Check all that apply X Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, Address change □ Name change check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end J Accounting method X Cash If the foundation is in a 60-month termination ☐ Accrual of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here line 16) ► \$ 897,372 (Part I, column (d) must be on cash basis ) Part Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income ıncome purposes books the amounts in column (a) (see instructions)) (cash basis only) 902.467 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► If the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 a Gross rents b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Ö Income modifications 64 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 8 O AFT 902,472 13 Compensation of officers, directors, trustees, etc Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) **b** Accounting fees (attach schedule) and Administrative c Other professional fees (attach schedule) 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 5,100 5,100 Operating 24 Total operating and administrative expenses. 5,100 Add lines 13 through 23 5,100 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 5,100 0 0 5,100 27 Subtract line 26 from line 12 897,372 a Excess of revenue over expenses and disbursements 5 **b** Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2012)

1 Cash—non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable Less allowance for doubtful accounts 4 Pledges receivable Less allowance for doubtful accounts 5 Grants receivable Less allowance for doubtful accounts 6 Receivables due from efficiers, directors, inustees, and other disqualified persons (attach schedule) 7 Ober neces are loss receivable Less allowance for doubtful accounts 8 Inventiones for sale or time cashed accounts 9 Propad expenses and deferred charges 10 a Investments—Use and state geomenea displants (attach schedule) 10 a Investments—Surport action (attach schedule) 11 investments—corporate stock (attach schedule) 12 Investments—corporate stock (attach schedule) 13 Investments—corporate stock (attach schedule) 14 Less accompliant deprecation (attach schedule) 15 Other assets (describe accounts) 16 Total assets (be be completed by all filters—see the nativuctions Also, see pages 1, sem 1) 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Total assets (describe P) 20 Total labilities (add lines 7 through 22) 20 Less thankings than	Pai	+ II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
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Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5 S	٦					
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Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize)  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)  5	ž	31	•			
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2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 . 5 Decreases not included in line 2 (itemize) 5 6 7 897,372 7 897,372	1			30 (must agree with		_
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5 Decreases not included in line 2 (itemize) 5						<u> </u>
	_				<b>—</b>	897,372
Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 897,372	_					<u> </u>
	_6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, c	olumn (b), line 30		897,372

orm 990-PF (2012) AWT Fam	nily Foundation			4	16-1101805 Page <b>3</b>
	nd Losses for Tax on Inve	estment Incor	ne		
(a) List and describe th	e kind(s) of property sold (e.g., real esta use, or common stock, 200 shs MLC Co	ite,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
a			D-Donation		
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale	1	ain or (loss) s (f) minus (g)
a					
b					
C				i	
d					
e					
	wing gain in column (h) and owned	t by the foundation	on 12/31/60	//\ O==== /O	2-1 (h)
Complete only for assets snow	· · · · · · · · · · · · · · · · · · ·				of (h) gain minus
(ı) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (ı) (į), if any		ot less than -0-) or (from col (h))
	as 01 12/3 1709	over wi	(j), il ally	LUSSES	(IIOIII COI (II))
<u>a                                      </u>					
b					
C					
d					
<u>e                                    </u>	1			ļ	
2 Capital gain net income or		also enter in Par enter -0- in Par		2	0
. •	or (loss) as defined in sections line 8, column (c) (see instructi	. , ,	,		
in Part I, line 8		, (,, .	}	3	0
	der Section 4940(e) for R	oduced Tax o	n Not Investm	ont Incomo	
For optional use by domestic p	private foundations subject to t	ne section 4940	(a) tax on net inv	estment income)	
f section 4940(d)(2) applies, le	eave this part blank				
, , , , , ,	•				
	ne section 4942 tax on the distr			e base period?	∐ Yes ∐ No
f "Yes," the foundation does no	ot qualify under section 4940(e	) Do not comple	ete this part		
1 Enter the appropriate ame	ount in each column for each y	ear, see the inst	tructions before n	naking any entries	
(a)	(b)				
Base period years Calendar year (or tax year beginning i	Adjusted qualifying distribution	ns Net value	(c)	I _	(d)
2011			(c) of noncharitable-use a	sseis i	(d) Distribution ratio
				sseis i	(d) Distribution ratio D) divided by col (c))
2010				sseis i	(d) Distribution ratio Distributed by col (c))  0 000000
2010				sseis i	(d) Distribution ratio Distribution ratio Distribution ratio O 000000 O 000000 O 000000
2009				sseis i	(d) Distribution ratio
2009 2008				sseis i	(d) Distribution ratio Distribution ratio Distribution ratio Distribution ratio O 000000 O 000000 O 000000 O 000000
2009				sseis i	(d) Distribution ratio
2009 2008 2007				(col (t	(d) Distribution ratio Distribution ratio Distribution ratio O 000000 O 000000 O 000000 O 000000 O 0000000 O 0000000
2009 2008 2007 2 Total of line 1, column (d)			of noncharitable-use a	sseis i	(d) Distribution ratio Distribution ratio Distribution ratio Distribution ratio O 000000 O 000000 O 000000 O 000000
2009 2008 2007  2 Total of line 1, column (d) 3 Average distribution ratio for	or the 5-year base period—divi	de the total on li	of noncharitable-use a	(col (t	(d) Distribution ratio Distribution ratio Distribution ratio O 000000 O 000000 O 000000 O 000000 O 0000000 O 0000000
2009 2008 2007  2 Total of line 1, column (d) 3 Average distribution ratio for		de the total on li	of noncharitable-use a	(col (t	(d) Distribution ratio Distribution ratio Distribution ratio O 000000 O 000000 O 000000 O 000000 O 0000000 O 0000000
2009 2008 2007  2 Total of line 1, column (d) 3 Average distribution ratio for	or the 5-year base period—divi	de the total on li	of noncharitable-use a	(col (t	(d) Distribution ratio Distribut
2009 2008 2007  2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the form	or the 5-year base period—divi	de the total on li	of noncharitable-use a	(col (t	(d) Distribution ratio Distribut
2009 2008 2007  2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the form	or the 5-year base period—divi	de the total on li	of noncharitable-use a	2 3	(d) Distribution ratio Distribut
2009 2008 2007  2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the for the number of years the form of the number of years the num	or the 5-year base period—divi undation has been in existence charitable-use assets for 2012 f	de the total on li e if less than 5 ye from Part X, line	of noncharitable-use a	2 3 4 5	(d) Distribution ratio Distribut
2009 2008 2007  2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the for 4 Enter the net value of nonce 5 Multiply line 4 by line 3 6 Enter 1% of net investment	or the 5-year base period—divi	de the total on li e if less than 5 ye from Part X, line	of noncharitable-use a	2 3 4	(d) Distribution ratio Distribut
2009 2008 2007  2 Total of line 1, column (d) 3 Average distribution ratio for the number of years the for the number of years the form of the number of years the num	or the 5-year base period—divi undation has been in existence charitable-use assets for 2012 f	de the total on li e if less than 5 ye from Part X, line	of noncharitable-use a	2 3 4 5	(d) Distribution ratio Distribut

the Part VI instructions

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om	990-PF (2012) AWT Family Foundation 46-110	1805	Pa	ge <b>4</b>
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruc	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			
	here  and enter 1% of Part I, line 27b .			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			إ
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		- 0	
3	Add lines 1 and 2		의	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		0	
6	Credits/Payments			
	2012 estimated tax payments and 2011 overpayment credited to 2012 . 6a 6b			
	, , ,			
ս 7	Backup withholding erroneously withheld  Total credits and payments Add lines 6a through 6d		0	
8	Enter any penalty for underpayment of estimated tax. Check here		픳	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<u></u>	
11		-	0	
	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		Yes	No
. –	participate or intervene in any political campaign?	1a		X
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 <b>1a</b> or <b>1b</b> , 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		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$(2) On foundation managers ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax 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		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	NI/A	X
	of "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	₩
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	3		X
6	If "Yes," attach the statement required by General Instruction T			
0	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	Х	
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	X	<del>                                     </del>
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	DE			
b	o 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	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			

or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing

their names and addresses

Form	990-PF (2012) AWT Family Foundation 46-110	1805	Pa	ige <b>5</b>
Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<del></del>
	Mobelto address			
14	The books are in care of ▶ c/o Foundation Source Telephone no ▶	(800	839-	1754
	Located at ► 501 Silverside Road, Suite 123 Wilmington DE ZIP+4 ► 19809-1377		, , , , , , ,	<u> </u>
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			. П
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country		li	
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		- 1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		İ	
	(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 )			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2012?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
2-	20 , 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No.			
h				
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 penod (or longer penod 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			
	f the foundation had excess business holdings in 2012)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	14/4	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	-vu		
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		X

Fðm	990-F	PF (2012)	AWT Fa	amily Foundation									46-110	1805	Р	age 6
Pa	rt VI	-B St	atements	Regarding Activ	ities	fo <mark>r Which For</mark>	m 4	1720 May Be	Reg	uired	(contin	nue	d)			
5a		Carry on	n propagand e the outcon	undation pay or incur ar la, or otherwise attempt ne of any specific public ctly, any voter registrati	to influ	uence legislation (s on (see section 49		,			Ye		X No			
		Provide Provide	a grant to a	n individual for travel, st n organization other tha	udy, o n a ch	r other sımılar purp aritable, etc , orga	nızat				☐ Ye	s	X No			
		Provide education	for any purp onal purpose	(2), or (3), or section 4 cose other than religiouses, or for the prevention	of crue	itable, scientific, lit elty to children or a	eran	als?			Ye	'	X No			
b	Regi	ulations se	ection 53 49	5a(1)–(5), did <b>any</b> of the 145 or in a current notice a current notice regardir	eregar	ding disaster assis	stand	e (see instruction		sспbed		▶	$\dot{\Box}$	5b	N/A	
С	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			_	the year, receive any for the send of the	unds, d	directly or indirectly	y, to	pay ·			Ye	s	X No			
_	b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, file Form 8870															
	7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes X No															
	b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  7b N/A  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,															
	art v		and Conf		s, Dir	ectors, Truste	es,	Foundation	war	nager	s, riign	ily i	aid En	npioy	ees,	
1	List			ors, trustees, founda	ation	managers and t	heir	compensation	(se	e instr	uctions	).				
			a) Name and		(b)	Title, and average hours per week evoted to position	(c	) Compensation not paid, enter -0-)		(d) Cor employee	ntributions benefit pl	to lans		) Expens other allo		
SE	E AT	TACHME	NT													
					-										-	
		· · · · · · · · · · · · · · · · · · ·														
2		npensati er "NON		highest-paid employ	yees (	other than thos	e in	cluded on line	1—s	ee ins	truction	s).	If none,	·		
(a	ı) Nam	e and addr	ess of each en	mployee paid more than \$50	,000	(b) Title, and avera hours per week devoted to position	_	(c) Compensation	on	em plan	Contribution ployee being and defended by and defended by and defended by an armous attention between the contraction between	nefit erred	(e	e) Expens other all		
NC	NE						00								_,	
							00									
							00	·								
							00	-								
							00									

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

Form 990-PF (2012) AWT Fam	nily Foundation		46-1101805 Page <b>7</b>
	n About Officers, Directors, Trustees, Factors (continued)	Foundation Managers, Highly Paid	d Employees,
	ndent contractors for professional services (see	instructions). If none, enter "NONE."	-
	of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	or each porcen para more area que, esc	(2) 1)50 51 551105	(o) compensation
NONE			
			<del></del>
-			
Total number of others receive	ing over \$50,000 for professional services	<b>•</b>	· · · · · · · · · · · · · · · · · · ·
Total Humber of others receive	ing over \$50,000 for professional services		
Part IX-A Summary	of Direct Charitable Activities		
	ct chantable activities during the tax year Include relevant sta er beneficianes served, conferences convened, research pape		Expenses
1	······································		
'		***************************************	
2			
3			
4			<del>. ·</del>
Part IX-B Summary	of Program-Related Investments (see	netructions)	<u>.</u>
	ated investments made by the foundation during the tax year of		Amount
1	ned investments made by the foundation during the tax year t	on lines I alle 2	Amount
1			
2			
All other program-related investments	s See instructions		
3			
Total Add lines 1 through 3			0
Total. Add lines 1 through 3			U

Par	t X Minimum Investment Return (All domestic foundations must complete this part. Fore	eign foundatio	ns,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	114,672
С	Fair market value of all other assets (see instructions)	. 1c	0
d	Total (add lines 1a, b, and c)	1d	114,672
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d .	3	114,672
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions) .	4	1,720
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	112,952
6	Minimum investment return. Enter 5% of line 5 MIR Prorated - Short Year	6	1,485
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this part	)	
1	Minimum investment return from Part X, line 6	1	1,485
2a	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)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,485
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,485
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	1,485
Des	VII Outlife in a Distail outline (and instructions)		
Par	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	5,100
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes .	2	
3	Amounts set aside for specific charitable projects that satisfy the	26X	
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	5,100
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,100
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundation	
	qualifies for the section 4940(e) reduction of tax in those years		

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	990-PF (2012) AWT Family Foundation				46-110 <sup>-</sup>	
	t XIV Private Operating Foundations			question 9)		N/A
1 a	If the foundation has received a ruling or determination, and the ruling is effective for 2012, enter			•		
	Check box to indicate whether the foundation is a	private operating foi	undation described i	n section	4942(J)(3) or	4942(J)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		
	income from Part I or the minimum investment return from Part X for each	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	year listed .			<u> </u>	, ,	0
b	85% of line 2a					0
C	Qualifying distributions from Part XII, line 4 for each year listed					
	·		<u> </u>	<del> </del>		0
u	Amounts included in line 2c not used directly for active conduct of exempt activities .					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
3	Subtract line 2d from line 2c	<u>,                                      </u>				0
J	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying					
b	under section 4942(j)(3)(B)(i) "Endowment" alternative test—enter 2/3					0
L.	of minimum investment return shown in					
	Part X, line 6 for each year listed					0
C	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments					
	on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public			1.		0
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	• • • • • • • • • • • • • • • • • • • •					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Co	mplete this par	rt only if the for	undation had \$5	,000 or more in	
	assets at any time during the ye	ar—see instru	ctions.)			
1	Information Regarding Foundation Manage					
a	List any managers of the foundation who have cor				the foundation	
	before the close of any tax year (but only if they ha		e than \$5,000) (See	e section 507(d)(2) )		
		gton Timmons	ok of a pornoration (	os on nevelly large no	setion of the	
	<ul> <li>List any managers of the foundation who own 10% ownership of a partnership or other entity) of which</li> </ul>				ordon of the	
NC	NE		• • • • • • • • • • • • • • • • • • • •			
2	Information Regarding Contribution, Grant	, Gift, Loan, Scho	olarship, etc., Pro	grams:		<u> </u>
	Check here X if the foundation only makes		-	-	es not accept	
	unsolicited requests for funds. If the foundation ma					
	other conditions, complete items 2a, b, c, and d					
ā	The name, address, and telephone number or e-n	nail of the person to	whom applications	should be addressed		
_			<del></del>			
ŧ	The form in which applications should be submitte	d and information a	nd materials they sh	nould include		
_	Any submission deadlines					
	-					
	Any restrictions or limitations on awards, such as	by geographical are	as, chantable fields	, kınds of ınstitutions.	or other	<u> </u>
	factors			,		

Total

	990-PF (2012) AWT Family Foundation			46-11	01805 Page <b>11</b>
Par	t XV Supplementary Information (contin	ued)	•		_
3	Grants and Contributions Paid During t	he Year or Approved	for Future I	Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	
a	Paid during the year	-			
			,		
					ı
			[		
				'	
	Total	1	I.	<b>▶</b> 3a	(
b	Approved for future payment				
			!		
				1	
			1		
			1		

<u>0</u>

**▶** 3b

Enter gross amounts unless otherwise indicated	<del>- 1 </del>	siness income	Excluded by section	n 512, 513, or 514	(e)
1 Program conuce revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue a					
b	_				
С	¬ <del>  </del>				
d	_	<u> </u>	<del>-</del>		
е	-	-			
f	- <del></del>		· · · · · · · · · · · · · · · · · · ·		
g Fees and contracts from government agencies	- <del></del>		<del>                                     </del>		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	5	· · · · · ·
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property .					
6 Net rental income or (loss) from personal property .					<del>-</del>
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory	-	_		-	
9 Net income or (loss) from special events		-			<u>"</u>
10 0					
11 Other revenue a					
b					
c				<del></del>	-
d					
e	_				
40 0 14 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4					
12 Subtotal Add columns (b), (d), and (e)			)	5	0
13 Total. Add line 12, columns (b), (d), and (e)			)	<u>5</u>	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)		·			5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A		t of Exempt F	Purposes	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)  Part XVI-B  Relationship of Activities to the A  Line No.  Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)  Part XVI-B  Relationship of Activities to the A  Line No.  Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)  Part XVI-B  Relationship of Activities to the A  Line No.  Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)  Part XVI-B  Relationship of Activities to the A  Line No.  Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)  Part XVI-B  Relationship of Activities to the A  Line No.  Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)  Part XVI-B  Relationship of Activities to the A  Line No.  Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)  Part XVI-B  Relationship of Activities to the A  Line No.  Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)  Part XVI-B  Relationship of Activities to the A  Line No.  Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the A Line No. Explain below how each activity for which inco	me is reported in col	t of Exempt F	Purposes VI-A contributed in	13	5

Par	XVII	Information Reg Exempt Organize	_	sfers To and Tran	sactions a	nd Rel	ationships W	th Nonchari	able		
i	in sectio	organization directly on 501(c) of the Code ations?	or indirectly en							Yes	No
a	Transfe (1) Cas	ers from the reporting t						<i></i>	1a(1)		X X
b	Other to (1) Sal	ner assets ransactions: es of assets to a nonc	charitable exer	npt organization					1a(2) 1b(1)		X X X
-	(3) Rei	rchases of assets from ntal of facilities, equipa imbursement arranger	ment, or other	assets					1b(2) 1b(3) 1b(4)		X X
(	(6) Per	ans or loan guarantee: formance of services of facilities, equipme	or membershi	p or fundraising solici	tations				1b(5) 1b(6) 1c		X X X
,	value o	nswer to any of the ab f the goods, other ass n any transaction or sh	ets, or service	s given by the reporti	ng foundation	. If the	foundation receive	red less than fa	ir marke	at ad.	
(a) L	ne no.	(b) Amount involved	(c) Name	of noncharitable exempt org	anization	(d) De	scription of transfers,	transactions, and si	naring arra	ingeme	nts
									<del></del>		
			ļ								
		<del></del>	ļ				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
<del></del>		·	<del> </del>		<del></del>	<del></del>	<del></del>				
	+	<del></del>	<del> </del>	•				<del>*************************************</del>	···········		
								····			
			<del>                                     </del>	<del> </del>			·				
	describ	oundation directly or in ed in section 501(c) o " complete the following	f the Code (ot						Yes X	] No	
	<del></del>	(a) Name of organization		(b) Type of o	organization		(c)	Description of relati	onship		
							·				
	-							·· · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·					<del></del> -				
		<del> </del>									
	1 ln	der penalties of perjury, I declare	that I have examined	this return, including accompany	ng schedules and sta	etements, a	nd to the best of my know	ledge and belief, it is to	Je,		
Sig He	j <b>n</b>   🏻	mect, and complete. Declaration of			tion of which prepare	r has any k		May the IRS with the prep	discuss the	m belov	
	7	Signature of officer or truster	8	Date	Title	· · · · · · · · · · · · · · · · · · ·			. الجب		
Pal		Print/Type preparer's n	ame	Preparer's signature  Jeffrey D. Hask	ااه		Date 2/5/2013	Check if	PTIN	E770	
	parer	/ Charles annual De Co	nundation Sam		VCII -		3/6/2013	self-employed	<u> </u>		
lise	• Only	Firm's name Fo	oundation Sou	ICA	-			1 HIII S EIN - (	1-0398	<del>34/</del>	

Firm's address One Hollow Lane, Suite 212, Lake Success, NY 11042

Phone no. (800) 839-1754

### 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
AWT Family Foundation		46-1101805
Organization type (checl	(one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a priv	rate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private	foundation
	501(c)(3) taxable private foundation	
· -	n is covered by the General Rule or a Special Rule.	
Note. Only a section 5010 instructions	(c)(7), (8), or (10) organization can check boxes for both the General F	Rule and a Special Rule See
matractions		
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, s by one contributor. Complete Parts I and II	\$5,000 or more (in money or
Special Rules		
sections 509(a)(1	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% su ) and 170(b)(1)(A)(vi) and received from any one contributor, during ti 2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990	he year, a contribution of the greater
the year, total co	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receive intributions of more than \$1,000 for use <i>exclusively</i> for religious, charities, or the prevention of cruelty to children or animals. Complete Pair	able, scientific, literary, or
the year, contributed total to more that year for an exclu	I(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receive utions for use <i>exclusively</i> for religious, charitable, etc., purposes, but then \$1,000 of this box is checked, enter here the total contributions that sively religious, charitable, etc., purpose Do not complete any of the paganization because it received nonexclusively religious, charitable, etc.	hese contributions did not were received during the parts unless the <b>General Rule</b>
990-EZ, or 990-PF), but i	that is not covered by the General Rule and/or the Special Rules doe t <b>must</b> answer "No" on Part IV, line 2 of its Form 990, or check the bo 90-PF, to certify that it does not meet the filing requirements of Sched	es not file Schedule B (Form 990, x on line H of its Form 990-EZ or on

Name of organization Employer identification number
AWT Family Foundation 46-1101805

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	The KWT Testamentary CLAT c/o Charles Timmons, 110 Pine Forest Drive Greenville SC 29601 Foreign State or Province Foreign Country	\$892,467	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Timmons, Allen W 540 Crescent Avenue Greenville SC 29601 Foreign State or Province Foreign Country	\$10,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	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
	Foreign State or Province Foreign Country	\$	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
	Foreign State or Province Foreign Country	\$	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
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization Employer identification number
AWT Family Foundation 46-1101805

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

Name of or	=			Employer identification number
Part III	ly Foundation  Exclusively religious, charitable, etc., ind	ividual contribution	s to section 5	46-1101805
raitill	total more than \$1,000 for the year. Compl			
	For organizations completing Part III, enter the			
	contributions of \$1,000 or less for the year			
	Use duplicate copies of Part III if additional s	•		
(a) No.				
from Part I	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is held
			<u> </u>	
		(e) Transfei	r of gift	
	Transferee's name, address, and ZI	P + 4	Relatio	nship of transferor to transferee
	For Prov Country			
(a) No.	TOT FIOV Country	<u> </u>		
from	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is held
Part I				
		(e) Transfe	r of gift	
	Transferee's name, address, and ZI	P + 4	Relatio	nship of transferor to transferee
	For Drou			
(a) No.	For Prov Country	<b>_</b>	<del></del>	-
from	(b) Purpose of gift	(c) Use o	f gift	(d) Description of how gift is held
Part I				
		(e) Transfe	r of gift	
	Transferee's name, address, and Z	P+4	Relatio	nship of transferor to transferee
	For Down			
(a) No.	For Prov Country			
from	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held
Part I				
		(e) Transfe	r of gift	
			•	
	Transferee's name, address, and Z	P + 4	Relatio	onship of transferor to transferee
	For Prov Country			

Part I, Line 23 (990-PF) - Other Expenses

		5,100	0	0	5,100
		Revenue and Expenses	Net Investment	Adjusted Net	Disbursements for Charitable
	Description	per Books	Income	Income	Purposes
1	Administrative Set-Up Fee	3,750	0		3,750
2	Delaware Incorporation Fees	500	0		500
3	IRS Application Fees	850	0		850

## Part VII-A, Line 10 (990-PF) - Substantial Contributors

AWT Family Foundation

Check "X"   Street   City     Allen W Timmons   540 Crescent Avenue   Greenville     Ava Withington Timmons   540 Crescent Avenue   Greenville     The KWT Testamentary CLAT   110 Pine Forest Dr   Greenville		State Zip Code Foreign Country	SC 29601	SC 29601	SC 29601
Check "X"  If Business  540 Crescent /  540 Crescent /  110 Pine Fores		City	Greenville	Greenville	Greenville
	ck "X"		540 Crescent Avenue	540 Crescent Avenue	_
- ~ ~	Che	_	Allen W Timmons	Ava Withington Timmons	The KWT Testamentary CLAT

# Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Account			- 1			Į
Ž						
Benefits	0			0		
Compensation	0			0	_	
Per Week	9			9		
	President /	Director /	Secretary	Vice	President	
Foreign Country						
Zip Code	19809			19809		
State	DE			翌		
Cıty	Wilmington			Milmington		
Street	Foundation Source 501 Silverside Rd N			Foundation Source 501 Silverside Rd V		
if Business						
Name	Allen W Timmons			Ava Withington Timmons	,	
	if Business Street City State Zip Code Foreign Country Title Per Week Compensation	e f Business Street City State Zip Code Foreign Country Title Per Week Compensation  Foundation Source 501 Silverside Rd Milimington DE 19809 President / 100 0 0	e f Business Street City State Zip Code Foreign Country Title Per Week Compensation  Foundation Source 501 Silverside Rd Milmington DE 19809   President / 1 00   Director / Dir	e f Business Street City State Zip Code Foreign Country Title Per Week Compensation On DE 19809 President 1 100 Decicion Decision Source 501 Silverside Rd Milmington DE 19809 President Source 501 Silverside Rd Milmington DE 19809 Preside Rd Milmington DE	e         if Business         Street         City         State         Zp Code         Foreign Country         Title         Per Week         Compensation           Foundation Source 501 Silverside Rd         Wilmington         DE         19809         President / President / President / Title         Per Week         Compensation           Impured         Foundation Source 501 Silverside Rd         Wilmington         DE         19809         Vice         1 00         0	e         f Business         Street         City         State         Zp Code         Foreign Country         Title         Per Week         Compensation           Foundation Source 501 Silverside Rd         Wilmington         DE         19809         President / Secretary         1 00         0           Imons         Foundation Source 501 Silverside Rd         Wilmington         DE         19809         Vice         1 00         0