

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



#### Form **990-PF**

# 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

		t of the Treasury			Treated as a Privat	e Founda	ition		1 2012
		venue Service		undation may	be able to use a copy of this			rting requirements	Open to public Inspection
		foundation	or tax year beginning			, and e	naing	A Employer identification	number
м	T m.	<b>CUDIT T</b>	MINITER TEE	ECTIVID A	MT ON			63.1100039	
			NDUSTRIES pox number if mail is not d				Room/suite	63-1190038	
		•	CIRCLE		address)		//ourivadite	B Telephone number 205-745-41	00
City	or t	own, state, and a	ZIP code					C If exemption application is p	ending, check here
<u>B</u>	<u>ES</u>	SEMER,	AL 35022						
G	heck	ali that apply:	Initial retur	'n	Initial return of a fo	ormer public o	charity	D 1. Foreign organizations	s, check here 🕨 🔲
			Final returi		Amended return			2	
			X Address cl		Name change			Foreign organizations me check here and attach co	mputation
H	_	type of organiz	ation: <b>X</b> Section  ) nonexempt charitable		kempt private foundation Other taxable private found:	etion		E If private foundation sta	
L Ea			assets at end of year	J Account		Accr	ual	under section 507(b)(1)	
		Part II, col. (c),	<del>-</del>		ther (specify)	( ACG	uai	F If the foundation is in a under section 507(b)(1)	
	·\$	art 11, 001. (0),	6.820.	(Part I, colu	ımn (d) must be on cash	basis.)		bilder section 507(b)(1)	(U), Clieck liefe
		☐ (The total of amore)	evenue and Expenses ounts in columns (b), (c), and all the amounts in column (	d (d) may not	(a) Revenue and expenses per books	(b) Net in	vestment ome	(c) Adjusted net	(d) Disbursements for charitable purposes
	1			<del></del>	199,235.			N/A	(cash basis only)
	2		gifts, grants, etc., rece of the foundation is not required		199,433.			N/A	<del> </del>
	3	Interest on saving	as and temporary	IV AUACII SCII D				<del> </del>	<del> </del>
	4	cash investments	interest from securitie	c				<del> </del>	<del> </del>
		Gross rents	mitorest mont securitie	3				<del> </del>	<del></del>
	Ь		or (loss)	•			<del></del>		
_	-			line 10					<del></del>
J.	bassets on line 6a				<del></del>				
e Se≘	7		ncome (from Part IV, line 2)	)			0.		
ZUT≾ Revenue	8	Net short-term		••					
	9	Income modific							
e X	10a	Gross sales less i and allowances	returns						
	Ь	Less Cost of goo	ods sold						
	C	Gross profit or	(loss)						
	11	Other income							
	12	Total. Add line	s 1 through 11		199,235.		0.	<u> </u>	
	13	-	officers, directors, trustee	s, etc	0.		0.	<u> </u>	0.
	14		e salaries and wages	-					
CS	15	•	employee benefits			<del></del>		<del></del>	
©\$	16a	Legal fees		MT 1	850.			<del> </del>	
×pe	0	Accounting fee Other profession		.TIT T	050.	<del></del>	0.	<u> </u>	0.
ē m	17	Interest		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					<del></del>
ativ	18	Taxes	CONTRACTOR OF THE PROPERTY OF				<del></del>		
istr	19	Depreciation a	nd depletion	(E)				<del>                                     </del>	<del>                                     </del>
aj.	20	Occupancy C	C	(B)		!			
Ad	21		nces, and meetings	LEN,					
ğ	22	Printing and pt	umc 1	,					
19 é	23	Other expense:							
Operating and Administrative Expenses $c^eta$	24	Total operating	g and administrative						
bei		-	lines 13 through 23		850.		0.		0.
O	25		gifts, grants paid		204,725.				204,725.
	26	-	s and disbursements.				_	}	
	<u> </u>	Add lines 24 ar			205,575.		0.	<b></b>	204,725.
	27	Subtract line 2							
			e over expenses and disbu		-6,340.				ļ <u>.</u>
	1		t income (if negative, en				0.	<del></del>	<del></del>
0005		<u>Adjusted net i</u>	NCOME (if negative, enter	-0-)	<u> </u>			N/A	<u> </u>

223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2012)

For	m 99	0-PF (2012) MITCHELL INDUSTRIES FOUN	NDATION	63-1	<u>1190038</u> Page 2
Part II Balance Sheets Attached schedules and amounts in the description Beginning of year			End of		
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	13,160.	6,820.	
	1	Savings and temporary cash investments			
	1	Accounts receivable >			
	•	Less; allowance for doubtful accounts			
	<u>a</u>	Pledges receivable ►			· · · · · · · · · · · · · · · · · · ·
	7	Less: allowance for doubtful accounts			
	_ ا	Grants receivable			
	1 ]	· ·			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
		Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
	١.,	Less accumulated depreciation			
	12	Investments mesterns leave			· · · · · · · · · · · · · · · · · · ·
	13	Investments - other			<del></del>
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			<del></del>
	15	Other assets (describe ►)			
_	16	Total assets (to be completed by all filers)	13,160.	6,820.	6,820.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ş	19	Deferred revenue .			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
Ξ	i .	Other liabilities (describe >			
			· · · · · · · · · · · · · · · · · · ·		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	20	Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
Š	24	Unrestricted			
ag	25	Temporarily restricted			
8	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
F	ĺ	and complete lines 27 through 31.			
ş	27	Capital stock, trust principal, or current funds	0.	0.	
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ä	29	Retained earnings, accumulated income, endowment, or other funds	13,160.	6,820.	
š	30	Total net assets or fund balances	13,160.	6,820.	
_					
	31	Total liabilities and net assets/fund balances	13,160.	6,820.	
$\equiv$					
LP	art	Analysis of Changes in Net Assets or Fund Ba	nances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	<u></u>	· · · · · · · · · · · · · · · · · · ·	
•		the same with and of year fraues consisted on noise year to return.			12 160
^	•	r amount from Part I. line 27a		. 1	13,160.
		••••		2	-6,340.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	6,820.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	<u> Fota</u>	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	. 6	6,820.
					Form <b>990-PF</b> (2012)

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

Form 990-PF (2012)

191,392.

204,725.

0.

3

6

7

8 Enter qualifying distributions from Part XII, line 4

Add lines 5 and 6

Enter 1% of net investment income (1% of Part I, line 27b)

	n 990-PF (2012) MITCHELL INDUSTRIES FOUNDATION	<u>63-1</u>				Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948 -	see ii	nstru	ctio	ns)
18	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)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1 1				0.
	of Part I, line 27b		-			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					•
	2012 estimated tax payments and 2011 overpayment credited to 2012					
	Exempt foreign organizations - tax withheld at source	1				
	Tax paid with application for extension of time to file (Form 8868)	1				
	Backup withholding erroneously withheld  6d	1				
		1,				Λ
_	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		<del></del>		0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11 D	Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ Refunded ▶  art VII-A Statements Regarding Activities	11				
					V	NI.
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	; in	Î		Yes	
	any political campaign?	••		1a		X
ı	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or			ı	1
	distributed by the foundation in connection with the activities.				ı	
	Did the foundation file Form 1120-POL for this year?			1c		X
(	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			.	ı	
	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers. $\blacktriangleright$ \$	<u>-</u>		.		
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. > \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.			,	İ	
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		<u>X</u> _
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
t	olf "Yes," has it filed a tax return on Form 990-T for this year?	N/	A	4b	_	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.			i		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or		İ			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	e law	•	- 1		
	remain in the governing instrument?			6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?		.	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	AL					
ł	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			{	ļ	
	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 call	endar	·			
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	1	х
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses			10		X
			Form	990	-PF (	
						-,

	990-PF (2012) MITCHELL INDUSTRIES FOUNDATION	63-1190	038	F	Page <b>5</b>
Pa	art 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			7	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	orivileges?			_
	If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address NONE				
14	The books are in care of ▶ PHIL MAZUR Telephone no.	$\triangleright$ (205)7	<u> 145-4</u>	110	0
	Located at ► 200 KILSBY CIRCLE, BESSEMER, AL	ZIP+4 ▶ <u>35</u>	022		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			<b>&gt;</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/ <u>A</u>	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,	-	[	Yes	No
	securities, or other financial account in a foreign country?	_	16	j	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign				
	country				
Pa	rt 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?	es X No	1 1	1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1 1	1	
	a disqualified person?	es 🗶 No		į	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	'es 🗓 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	'es 🗓 No	1 1	]	
	(5) Transfer any income or assets to a disqualified person (or make any of either available		1		
	for the benefit or use of a disqualified person)?	'es 🗓 No	} {	1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		1 1	Ų	
	if the foundation agreed to make a grant to or to employ the official for a period after			ſ	
	termination of government service, if terminating within 90 days.)	'es 🗓 No	1 1	Ì	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		1	1	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		1 1		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		1 1		
	before the first day of the tax year beginning in 2012?		1c		<u> </u>
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) beginns	ng	1 1		
	before 2012?			j	
	If "Yes," list the years ,,		1	İ	
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	:t	1 1		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attac	n		ŀ	
	statement - see instructions.)	.N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	<b>&gt;</b>		1 1	1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			- 1	
	during the year?	es X No	1 1	-	
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons a	iter			
	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	1 1	ì	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule	<b>)</b> ,	}		
	Form 4720, to determine if the foundation had excess business holdings in 2012.)	N/A	3b		
<b>4</b> a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2012?	<u></u> _	4b		Х
_	<del>-</del> - <del></del>	For	m <b>990</b> -	PF (2	2012)

orm 990-PF (2012) MITCHELL INDUSTRIES FOUN	DATION		<u>63-11900</u>	38 Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	<u></u>
5a During the year did the foundation pay or incur any amount to:	<u> </u>			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	<b>□ Y</b> €	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o		ectly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
the prevention of cruelty to children or animals?	or oddounomar par poodo, or		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uno	ler the excentions described	•	.3 110	
section 53.4945 or in a current notice regarding disaster assistance (see instru	<u>=</u>	in ricgulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			30
		· ·		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			l	
expenditure responsibility for the grant?		I/A LY	No انعا	
If "Yes," attach the statement required by Regulations section 53 4945	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		-, <u></u>	
a personal benefit contract?		Ye		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	-		6b X
If "Yes" to 6b, file Form 8870.			l	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		\ X:		<del></del>
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/	
Faid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		(-) Componentian	(d) out-tubers	1
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Harric and additions	to position	enter -0-)	compensation	allowances
SEE STATEMENT 2		0.	0.	0.
	· ·			
		<u> </u>		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		<u> </u>
			(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
NONE	acvoted to position		compensation	allowalices
NONE				
			<u>.                                    </u>	<del></del>
		}		
				<del></del>
		-		
			<u> </u>	
Total number of other employees paid over \$50,000	- <del></del>		▶	0
			Form	990-PF (2012)

	3-1190038 Pag	ge 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensa	ation
NONE		
<del></del>		
<del></del>	<del></del>	
Total number of others receiving over \$50,000 for professional services	<b>D</b>	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses	
1 N/A	<del> </del>	
	$\neg$	
	<u> </u>	
2		
3		
	_	
<u> </u>	<del></del>	
4	$\dashv$	
	_	
Part IX-B Summary of Program-Related Investments	<del></del>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
1 N/A		
		0.
2	_	
	_	
All atternments and advantage of the control of the	<del></del>	
All other program-related investments. See instructions.		
	$\dashv$	
	7	
Total. Add lines 1 through 3	·	0.
	Form <b>990-PF</b> (2	

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	9,990.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	9,990.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	9,990.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	150.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,840.
6	Minimum investment return. Enter 5% of line 5	6	492.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	492.
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.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	492.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	492.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	492.
P	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	204,725.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	<u></u>
þ	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	204,725.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	204,725.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	ualifies for	the section

Form **990-PF** (2012)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,		<del></del>		<del></del>
line 7				492.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:				, – – — — — — — — — — — — — — — — — — —
		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007 180,489.				
b From 2008 190,782.				
c From 2009 208,950.				
d From 2010 133, 150.				
e From 2011	252 524			
f Total of lines 3a through e	862,621.			<u> </u>
4 Qualifying distributions for 2012 from				
Part XII, line 4: ►\$ 204,725.				
a Applied to 2011, but not more than line 2a	<del></del>	<del></del>	0.	
<b>b</b> Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		<del></del>
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	U •			400
d Applied to 2012 distributable amount	204,233.			492.
e Remaining amount distributed out of corpus	204,233.		<del></del>	0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))				0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,066,854.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				<u> </u>
7 Amounts treated as distributions out of		:		
corpus to satisfy requirements imposed by			ji	
section 170(b)(1)(F) or 4942(g)(3)	0.			·
8 Excess distributions carryover from 2007	400 400			
not applied on line 5 or line 7	180,489.			<del></del>
9 Excess distributions carryover to 2013.	225 255			
Subtract lines 7 and 8 from line 6a	886,365.			
10 Analysis of line 9:		1		
a Excess from 2008 190,782.				
b Excess from 2009 208, 950.				
c Excess from 2010 133,150.				
d Excess from 2011 149,250. e Excess from 2012 204,233.				
e Excess from 2012 204, 233.				F 000 DE (0040)

3 Grants and Contributions Paid During th	e Year or Approved for Future	Payment		<del></del>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		·
a Paid during the year				
		!		
		}		
		1		
ALABAMA BALLET	NONE	NON-PROFIT	UNRESTRICTED	
		ORGANIZATION	<del></del>	15,500
ALLEGHANY COUNTY RESCUE SQUAD	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	1 000
		DRGANIZATION		1,000
ALYS STEPHENS CENTER	NONE	NON-PROFIT	UNRESTRICTED	
ALIS SIBPHENS CENTER	NONE	ORGANIZATION	DARESTRICIED	4.975
			,	
COLLEGE FOUNDATION OF UVA	NONE	NON-PROFIT	UNRESTRICTED	
		ORGANIZATION		3,000
CORNERSTONE SCHOOLS OF ALABAMA	NONE	NON-PROFIT	UNRESTRICTED	
Total SEE C	ONTINUATION SHE	DRGANIZATION でかくなり	<b>▶</b> 3a	5,000
b Approved for future payment	DITTINGENTION DIME			204,725
NONE	,	Í		
NONE		İ		
		1		
		<del> </del>		
Total	<u></u>	<u> </u>	<b>▶</b> 3b	
. 7181			For	rm <b>990-PF</b> (2012)

Part XVI-A	Analysis of Income-Producing	<b>Activities</b>
------------	------------------------------	-------------------

	Unrelated	business income	F		<del></del>
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	ed by section 512, 513, or 514  (d)  Amount	(e) Related or exempt
1 Program service revenue:	code		code	Amount	function income
a			<u> </u>		
b					
c					
d					
e		-			
f					
g Fees and contracts from government agencies			1 1		<del></del> -
2 Membership dues and assessments			1 1		
		<u> </u>	<del> </del>	<del>- · ·</del>	
3 Interest on savings and temporary cash					
investments	<del></del>		+		_
4 Dividends and interest from securities			+		
5 Net rental income or (loss) from real estate:					
a Debt-financed property			$\perp$		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
nroporty			1 1		
7 Other investment income			1		··
8 Gain or (loss) from sales of assets other			1 1		
• •	l i		1		
than inventory	-		+		
9 Net income or (loss) from special events	<del> </del>		1 1		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1 1				
a		<del></del>			
b					
c					
d		.,		****	
e					<del></del> .
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.
13 Total. Add line 12, columns (b), (d), and (e)			<u>'</u>	13	0.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other than	me is reported in	column (e) of Part XVI-A		<u> </u>	iplishment of
					<u> </u>
		-			
					•
				<del></del>	· · · · · · · · · · · · · · · · · · ·
					·
		· · · <del></del>		<del></del>	
				<u> </u>	
			_	<del> </del>	<del></del>
				<u></u>	
223621 12-05-12	_			-	Form <b>990-PF</b> (2012)

Part	XVII	Information Re Exempt Organ	egarding Trar		ind Transactions	s and	Relations	hips With Nor	ncharitable		ige 13
1 Dic	the org	janization directly or indi	rectly engage in any	y of the followin	g with any other organiz	ation des	cribed in secti	on 501(c) of		Yes	No
the	Code (	other than section 501(c)	)(3) organizations)	or in section 52	7, relating to political or	ganizatıo	ns?				
a Tra	ansfers 1	from the reporting found	ation to a noncharit	able exempt or	ganization of:					1	i
(1)	Cash					_			1a(1)	<u></u>	_X
(2)	Other	assets						·	1a(2)		X
<b>b</b> Ott	ner trans	sactions:									
(1)	Sales	of assets to a noncharita	ble exempt organiza	ation			-		1b(1)		X
(2)	Purch	ases of assets from a no	ncharitable exempt	organization			-		1b(2)		X
(3)	Renta	l of facilities, equipment,	or other assets						1b(3)		X
(4)	Reimb	oursement arrangements	i						1b(4)		Х
(5)	Loans	or loan guarantees							1b(5)		X
(6)	Perfor	mance of services or me	mbership or fundra	aising solicitatio	ns .				1b(6)	L_	X
c Sh	arıng of	facilities, equipment, ma	ıılıng lists, other ass	ets, or paid em	ployees <sub>.</sub>				1c		X
d If t	he answ	er to any of the above is	"Yes," complete the	e following sche	dule. Column (b) should	i always s	show the fair n	narket value of the g	oods, other as	sets,	-
or	services	given by the reporting f	oundation. If the foi	undation receive	ed less than fair market	value ın a	ny transaction	or sharing arrangei	ment, show in		
CO		the value of the goods,	other assets, or ser	vices received.							
( <b>a)</b> Line r	00	(b) Amount involved	(c) Name (	of noncharitable	exempt organization		(d) Description	of transfers, transaction	ns, and sharing a	rangeme	ents
			L	N/A							
			<u> </u>	<del></del>							
			<u> </u>								
				- <del></del>							
								- <del></del>			
					<del></del>						
			<u> </u>								
			<u> </u>								
			<u> </u>			\					
2a Is	the foun	dation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt org	janization	s described				
IN:	section	501(c) of the Code (other	r than section 501(d	c)(3)) or in sect	ion 527?			•	Yes	X	] No
b if	Yes," co	mplete the following sch			· · · · · · · · · · · · · · · · · · ·						
		(a) Name of org	janization		(b) Type of organization	on		(c) Description of re	lationship		
		N/A									
					<del></del>						
					<del></del>						
					<del></del>						
0:-		penalties of perjury, I declare lief, it is true, correct, and cor							May the IRS		
Sign Here		0- 11				<b>N</b>		,	return with the		
HELE		· jaues	-		10.10.13	_ <b>Z</b>	I MASUR	Lexi	_	:	J No
	Sign	ature of officer or trustee		Dranassia	Date		Title	Chook -	DTIN		
•	į	Print/Type preparer's na	ıme	Preparer's si	gnature	Date			PTIN		
Do:-		TAINS A			[ []	-	,,,,,,	self- employed	50065		
Paid	ara-	JOHN SHANK		1	V1-1-E		15/13		P00167		
Prep Use		Firm's name BAR	FIELD, M	URPHY,	SHANK, & SI	HTIN	, LLC	Firm's EIN > 4	b-14988	70	
Jac '	City	Firm's address ▶ 11	O1 DITTOR	7113 (17)	BELOW DO			<del> </del>			
	- 1	i ii iii o auuless 📂 🛨 🛨	LL KIVEK(	CUMDE O	CLTCE KD			1			

BIRMINGHAM, AL 35244

Phone no.

205-982-5500

Form **990-PF** (2012)

#### 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** MITCHELL INDUSTRIES FOUNDATION 63-1190038 Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private 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 Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, chantable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

#### MITCHELL INDUSTRIES FOUNDATION

63-1190038

Part I	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	MITCHELL INDUSTRIES  200 KILSBY CIRCLE  BESSEMER, AL 35022	\$199,235.	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			
			Person Payroll Oncash Complete Part II if there is a noncash contribution )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
<del></del>		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
22452 12-2		\$Sahadula B/Farm	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)			

Employer identification number

#### MITCHELL INDUSTRIES FOUNDATION

63-1190038

Part II	Noncash Property (see instructions). Use duplicate copies of P	art 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
		\$	
(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
3453 12-21	-12		90, 990-EZ, or 990-PF) (

	(Form 990, 990-EZ, or 990-PF) (2012)		Pag					
Name of orga	nization		Employer identification number					
мттснь	LL INDUSTRIES FOUNDATION	אר	63-1190038					
Part III	Exclusively religious, charitable, etc., indivi year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	dual contributions to section 501(c e following line entry. For organization, contributions of \$1,000 or less for	c)(7), (8), or (10) organizations that total more than \$1,000 for those completing Part III, enter r the year. (Enter this information once)					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
_		(e) Transfer of gif	ft					
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I	(b) ruipose or gitt	(c) Ose of girl	(d) Description of now girt is need					
_	(e) Transfer of gift							
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
		(e) Transfer of git	ft					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
(a) No								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
——   								
	Transferee's name, address, an	(e) Transfer of gif	Relationship of transferor to transferee					
			<u> </u>					

If request 2 an individual   Foundation   Purpose of grant or   Amount   Statis of   Purpose of grant or   Amount   Statis of   Purpose of grant or   Statis of   Statis of   Purpose of grant or   Statis of   Statis of   Statis of   Purpose of grant or   Statis of   Statis of   Purpose of grant or   Statis of   Stat	Part XV Supplementary Information 3 Grants and Contributions Paid During the				
Name and address (home or business)  show any relationship to any foundation manager is states of respect from the states of resp		If recipient is an individual.			
CRIMSON TIDE FOUNDATION  NONE  NON-PROFIT DEGANIZATION  CRIPPLED CHILDREN'S FOUNDATION  NONE  NON-PROFIT DEGANIZATION  SLENNWOOD INC.  NONE  NON-PROFIT DEGANIZATION  JUNIOR ACHIEVEMENT  NONE  NON-PROFIT DEGANIZATION  JUNIOR ACHIEVEMENT  NONE  NON-PROFIT DEGANIZATION  JUNIOR ACHIEVEMENT  NONE  NON-PROFIT DEGANIZATION  JUNESTRICTED  JUNES	· · · · · · · · · · · · · · · · · · ·	show any relationship to	status of	Purpose of grant or contribution	Amount
DRGANIZATION  CRIPPLED CHILDREN'S FOUNDATION  NONE  NON-PROPIT  DRGANIZATION  1.1  JUNIOR ACHIEVEMENT  NONE  NON-PROPIT  DRGANIZATION  MCWANE CENTER  NONE  NON-PROPIT  DRGANIZATION  JUNIOR ACHIEVEMENT  NONE  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NONE  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NONE  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NONE  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NONE  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  NON-PROPIT  DRGANIZATION  ACHIEVEMENT  DRGANIZATION  ACHIEVEME	Mainte and address (nonce of business)	or šubstantial contributor	recipient		
CRIPPLED CHILDREN'S FOUNDATION NONE NON-PROPIT UNRESTRICTED  GLENWOOD INC. NONE NON-PROPIT UNRESTRICTED  JUNIOR ACHIEVEMENT NONE NON-PROPIT UNRESTRICTED  MCWANE CENTER NONE NON-PROPIT UNRESTRICTED  ST FETERS ANGLICAN CHURCH NONE NON-PROPIT UNRESTRICTED  THE ROARING GAP FUND NONE NON-PROPIT UNRESTRICTED  THE ROARING GAP FUND NONE NON-PROPIT UNRESTRICTED  THE SALVATION ARMY NONE NON-PROPIT UNRESTRICTED  GLOBAL TEAMS NONE NON-PROPIT UNRESTRICTED	CRIMSON TIDE FOUNDATION	NONE		UNRESTRICTED	10,000
SLENWOOD INC.  NONE  NON-PROFIT  DRGANIZATION  11  JUNIOR ACHIEVEMENT  NONE  NON-PROFIT  ORGANIZATION  NON-PROFIT  ORGANIZATION  12  MCWANE CENTER  NONE  NON-PROFIT  ORGANIZATION  NON-PROFIT  ORGANIZATION  NON-PROFIT  ORGANIZATION  NON-PROFIT  ORGANIZATION  NON-PROFIT  ORGANIZATION  NON-PROFIT  ORGANIZATION  NON-PROFIT  ORGANIZATION  NON-PROFIT  ORGANIZATION  10  THE SALVATION ARMY  NONE  NON-PROFIT  ORGANIZATION  10  THE SALVATION ARMY  NONE  NON-PROFIT  ORGANIZATION  JUNESTRICTED  ORGANIZATION  10  THE SALVATION ARMY  NONE  NON-PROFIT  ORGANIZATION  JUNESTRICTED  ORGANIZATION  JUNE					
DRGANIZATION  JUNIOR ACHIEVEMENT  NONE  NON-PROPIT  DRGANIZATION  MCWANE CENTER  NONE  NON-PROPIT  DRGANIZATION  JUNESTRICTED  MCWANE CENTER  NONE  NON-PROPIT  DRGANIZATION  MCWANE CENTER  NONE  NON-PROPIT  DRGANIZATION  NONE  NON-PROPIT  DRGANIZATION  MRESTRICTED  THE ROARING GAP FUND  NONE  NON-PROPIT  DRGANIZATION  MRESTRICTED  THE SALVATION ARMY  NONE  NON-PROPIT  DRGANIZATION  JUNESTRICTED  MRESTRICTED  MRESTRICTED  MRESTRICTED	CRIPPLED CHILDREN'S FOUNDATION	NONE		UNRESTRICTED	2,500
JUNIOR ACHIEVEMENT NONE NON-PROFIT UNRESTRICTED  MCWANE CENTER NONE NON-PROFIT UNRESTRICTED  ST PETERS ANGLICAN CHURCH NONE NON-PROFIT UNRESTRICTED  THE ROARING GAP FUND NONE NON-PROFIT UNRESTRICTED  THE SALVATION ARMY NONE NON-PROFIT UNRESTRICTED  THE SALVATION ARMY NONE NON-PROFIT UNRESTRICTED  GLOBAL TEAMS  NONE NON-PROFIT UNRESTRICTED  1	GLENWOOD INC.	NONE		UNRESTRICTED	12,500
DRGANIZATION  MCWANE CENTER  NONE  NON-PROFIT  DRGANIZATION  2  ST PETERS ANGLICAN CHURCH  NONE  NON-PROFIT  DRGANIZATION  NON-PROFIT  DRGANIZATION  10  THE SALVATION ARMY  NONE  NON-PROFIT  DRGANIZATION  10  GLOBAL TEAMS  NONE  NON-PROFIT  DRGANIZATION  1  DRESTRICTED  DRGANIZATION  1  DRESTRICTED  DRGANIZATION  1					
ST PETERS ANGLICAN CHURCH  NONE  NON-PROFIT  ORGANIZATION  84  THE ROARING GAP FUND  NONE  NON-PROFIT  ORGANIZATION  10  THE SALVATION ARMY  NONE  NON-PROFIT  ORGANIZATION  1  GLOBAL TEAMS  NONE  NON-PROFIT  UNRESTRICTED  ORGANIZATION  1	JUNIOR ACHIEVEMENT	NONE		UNRESTRICTED	1,000
THE ROARING GAP FUND  NONE  NON-PROFIT  ORGANIZATION  THE SALVATION ARMY  NONE  NON-PROFIT  ORGANIZATION  10  GLOBAL TEAMS  NONE  NON-PROFIT  UNRESTRICTED  11  UNRESTRICTED	MCWANE CENTER	NONE		UNRESTRICTED	2,500
THE SALVATION ARMY  NONE  NON-PROFIT  ORGANIZATION  1  GLOBAL TEAMS  NONE  NON-PROFIT  UNRESTRICTED  NON-PROFIT  UNRESTRICTED	ST PETERS ANGLICAN CHURCH	NONE		UNRESTRICTED	84,500
THE SALVATION ARMY  NONE  NON-PROFIT  ORGANIZATION  1  GLOBAL TEAMS  NONE  NON-PROFIT  UNRESTRICTED	THE ROARING GAP FUND	NONE		UNRESTRICTED	10,000
ORGANIZATION 1  GLOBAL TEAMS NONE NON-PROFIT UNRESTRICTED	THE SALVATION ARMY	NONE	NON-PROFIT	UNRESTRICTED	
					1,000
	GLOBAL TEAMS	NONE		UNRESTRICTED	3,000
TOCQUEVILLE SOCIETY NONE NON-PROFIT UNRESTRICTED  ORGANIZATION 10	TOCQUEVILLE SOCIETY	NONE		UNRESTRICTED	10,000,

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Continuation	
LIFESONG FOR ORPHANS	none	NON-PROFIT ORGANIZATION	UNRESTRICTED	1,000,
PRESCHOOL PARTNERS	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	5,000.
ALSA - ALABAMA	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	1,000.
BAYLOR SCHOOL	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	1,000.
CHILDREN'S HOSPITAL FOUNDATION	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	5,000.
LANCER PTO	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	2,000,
UAB NEUROSURGERY WOMEN'S	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	1,000.
ENTER LIFE MINISTRIES	none	NON-PROFIT ORGANIZATION	UNRESTRICTED	2,000.
THE ALTAMONT SCHOOL	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	1,250.
JONES VALLEY URBAN FARM	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	2,000.
Total from continuation sheets	<u> </u>			

Part XV Supplementary Information 3 Grants and Contributions Paid During the N				
Recipient		Τ		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	Тестрієт		
UAB SCHOOL OF NURSING	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	10,000
				•
GREATER BIRMINGHAM HUMAN SOCIETY	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	1,000
HAND IN PAW	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	500
THE KING'S HOME	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	1,500
JIMMIE HALE MISSION	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	500,
MAKE A WISH FOUNDATION	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	1,000,
NATIONAL MULTIPLE SCLEROSIS SOCIETY	NONE	NON-PROFIT ORGANIZATION	UNRESTRICTED	2,500,
Total from continuation sheets				

FORM 990-PF	ACCOUNTI	NG FEES		STAT	EMENT
DESCRIPTION	(A) EXPENSES PER BOOKS		T- ADJU		(D) HARITABL PURPOSES
BARFIELD, MURPHY, SHANK, & SMITH, P.C.	850.		0.		0
TO FORM 990-PF, PG 1, LN 16B	850.		0.		0
FORM 990-PF PART VIII - TRUSTEES	LIST OF OF AND FOUNDA			STAT	EMENT
NAME AND ADDRESS		LE AND HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
GUY K MITCHELL, JR. 2809 PUMPHOUSE ROAD BIRMINGHAM, AL 35243	PRESI 0	DENT .50	0.	0.	0
KATHARINE J MITCHELL 2809 PUMPHOUSE ROAD BIRMINGHAM, AL 35243		PRESIDENT.50	0.	. 0.	0
GUY K MITCHELL, III 2617 CALDWELL MILL LANE BIRMINGHAM, AL 35243	DIREC	TOR .50	0.	. 0.	0
DOROTHY L. MITCHELL 3361 FARING ROAD BIRMINGHAM, AL 35223	DIREC	TOR .50	0.	0.	0
MALVINA M. WHATLEY 10 PINE CREST ROAD	DIREC	TOR .50	0.	. 0.	0

0.

0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

0.

#### Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No. 1545-1709

• If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		•	<b>X</b>
-	re filing for an Additional (Not Automatic) 3-Month Ex	-	·	this form)		
Do not co	omplete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	orm 8868.	
	c filing (e-file). You can electronically file Form 8868 if y					poration
	o file Form 990-T), or an additional (not automatic) 3-mo					
	file any of the forms listed in Part I or Part II with the ex-				·	
	Benefit Contracts, which must be sent to the IRS in pap					
	irs gov/efile and click on e-file for Chanties & Nonprofits				-	
Part I	Automatic 3-Month Extension of Time	•. Only s	submit original (no copies nee	eded).		
A corpora	ation required to file Form 990-T and requesting an autor					
Part I only	/					<b>▶</b> □
	corporations (including 1120-C filers), partnerships, REMorne tax returns.	IICs, and t	rusts must use Form 7004 to reques	t an exter	nsion of time	
Type or	Name of exempt organization or other filer, see instru	ctions.		Employe	r identification num	nber (EIN) or
print	MITCHELL INDUSTRIES FOUNDA	rion			63-11900	38
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, s 2055 HIGHWAY 87	ee instruc	tions.	Social se	ecunty number (SS	N)
return See instructions	City, town or post office, state, and ZIP code. For a for ALABASTER, AL 35007	oreign add	fress, see instructions.			
Enter the	Return code for the return that this application is for (file	a senara	te application for each return)			0 4
		· ·				٠
Applicati	on	Return	Application			Return
Is For		Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
	0 (individual)	03	Form 4720			09
Form 990		04	Form 5227			10
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above) TRAY IVEY	06	Form 8870			12
	ooks are in the care of > 2055 HIGHWAY 8'	7 31	INDACTED AT 2500	7		
	cooks are in the care of $\triangleright$ 2033 RIGHWAT 8 tone No. $\triangleright$ (205) 621-1217	/ - A	FAX No. ► (205) 664-			
	•			3000		
	organization does not have an office or place of business					<b>▶</b>
	s for a Group Return, enter the organization's four digit					
box ▶ l	quest an automatic 3-month (6 months for a corporation				ers the extension i	is for.
1 116	AUGUST 15, 2013 , to file the exemp				The extension	
is fo	or the organization's return for:	t Organiza	don return for the organization hame	su above.	THE EXTENSION	
	X calendar year 2012 or					
أَحَ	tax year beginning	an	nd ending			
	tax your boginning	,			<del> '</del>	
2 If th	ne tax year entered in line 1 is for less than 12 months, $c\Box$ Change in accounting period	heck reas	on: Initial return	Final retu	π	
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
	nonrefundable credits. See instructions.				\$	<u> </u>
	nis application is for Form 990-PF, 990-T, 4720, or 6069,	-				•
						0.
	ance due. Subtract line 3b from line 3a. Include your pa	•	· · · · · · · · · · · · · · · · · · ·			_
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	<u> </u>
	If you are going to make an electronic fund withdrawal v			orm 8879		
LHA F	or Privacy Act and Paperwork Reduction Act Notice,	see instri	uctions.		Form <b>8868</b> (F	Rev. 1-2013)

223841 01-21-13

Form 8868	8 (Rev 1-2013)					Page 2
	re filing for an Additional (Not Automatic) 3-Month Ex	tension, o	complete only Part II and check this	box		▶ X
	y complete Part II if you have already been granted an a				8868	
<ul><li>If you a</li></ul>	re filing for an Automatic 3-Month Extension, complete					
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origina	al (no c	opies nee	ded).
			Enter filer's	identifyii	ng number,	see instructions
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	r identificati	on number (EIN) or
print						
File by the	MITCHELL INDUSTRIES FOUNDAT	ION			63-11	.90038
due date for filing your	Number, street, and room or suite no. If a P.O. box, so	ee instruc	tions	Social se	curity numb	per (SSN)
return See	200 KILSBY CIRCLE					
instructions	City, town or post office, state, and ZIP code For a for BESSEMER, AL 35022	oreign add	ress, see instructions			
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)		•	0 4
Application	on .	Return	Application			Return
Is For	<i>7</i> 11	Code	Is For			Code
	or Form 990-EZ	01	13 7 01			Code
Form 990-		02	Form 1041-A			08
	0 (individual)	03	Form 4720			09
Form 990-		04	Form 5227			10
	-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870			12
	o not complete Part II if you were not already granted			iously file	ed Form 88	
Teleph	PHIL MAZUR  books are in the care of $\triangleright$ 200 KILSBY CIRC  one No $\triangleright$ (205) 745-4100  organization does not have an office or place of business		FAX No ► (205)664-3			
	s for a Group Return, enter the organization's four digit (			Ethiologofo	r tha whala	group obselv thus
box ▶	If it is for part of the group, check this box		ch a list with the names and ElNs of			
			BER 15, 2013	anmenic	iers uie exte	ension is for
	calendar year 2012, or other tax year beginning			_		
	e tax year entered in line 5 is for less than 12 months, c	hock rose	on Initial return	Final	otum.	
, iii	Change in accounting period	HICCK ICAS	oniiida/retorii		etum	
7 Stat	te in detail why you need the extension					
	DITIONAL TIME IS NEEDED TO	GATHE	R INFORMATION TO CO	OMPLE	TE AN	ACCURATE
	TURN.			J.11 D.		1100014112
8a If th	is application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069. e	nter the tentative tax, less any	1	<u> </u>	· · · · · · · · · · · · · · · · · · ·
	refundable credits See instructions			8a	s	0.
	is application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
	payments made Include any prior year overpayment all					
	viously with Form 8868		• • • • • •	8b	\$	0.
c Bala	ance due. Subtract line 8b from line 8a Include your pa	yment wit	h this form, if required, by using			
	EFTPS (Electronic Federal Tax Payment System). See instructions				\$	0.
	Signature and Verificat	ion mus	st be completed for Part II o			
Under pena it is true, co	alties of perjury, I declare that I have examined this form, includi orrect, and complete, and that I am authorized to prepare this fo	ing accomp irm.	anying schedules and statements, and to	the best o	f my knowled	ge and belief,
Signature	► Title ► C	CPA		Date	<b>•</b>	
				2410		8868 (Rev. 1-2013)