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# Form **990-PF**

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

OMB No 1545 0052

2012

Department of the Treasury Internal Revenue Service

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

	endar year 2012, or tax year beginning	, 2012	, and ending		,	
Name of f				Α	Employer identification num	nber
Number a	Rose Family Charitable and street (or PO box number if mail is not delivered to stre	et address)	Room/suite	В	73-1519254 Telephone number (see the	instructions)
3728	S. Elm Place PMB 520				(918) 455-241	·
City or tov			ZIP code 74011	С	If exemption application is	nending check here
	en Arrow ck all that apply   Initial return	Initial Return of a fori		1	, ,,	
u one	Final return	Amended return	ner public charity	D	1 Foreign organizations, chec	k here
	Address change	Name change		:	2 Foreign organizations meet	ing the 85% test, check
H C	¬ · · · · ·	(c)(3) exempt private for		]	here and attach computation	,
	Section 4947(a)(1) nonexempt charitable tr		private foundation	E	If private foundation status under section 507(b)(1)(A)	
	D U U (-) U 1(-)	ounting method X C	ash Accrual	۱_		لحا
►s		Other (specify) column (d) must be on	cash basis ) — — —	F	If the foundation is in a 60 under section 507(b)(1)(B)	
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investmen	nt T	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	"	income	for charitable
	sarily equal the amounts in column (a)					purposes (cash basis only)
	(see instructions) )	0.033	<u></u>			, , , , , , ,
	Contributions, gifts, grants, etc, received (att sch)  Ck fif the foundn is not reg to att Sch B	9,833.			, ,	[
	3 Interest on savings and temporary	У.			<del> </del>	
	cash investments	27.		27.	27.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	4 Dividends and interest from securities 5 a Gross rents	806.	80	06.	806.	
	b Net rental income or (loss)					Edit No.
Z013 R	6 a Net gain/(loss) from sale of assets not on line 10	5,196.	L-6a Stmt		, , , ,	198. 33. 4
© E	b Gross sales price for all assets on line 6a 61,136.				T RE	:EIVED
~ V E	7 Capital gain net income (from Part IV line 2)					
MAN	8 Net short-term capital gain     9 Income modifications		1		181 11	4 6 2013
≥≥ Ē	10 a Gross sales less returns and	* * * * * * * * * * * * * * * * * * *		<u></u>	181 MA	2
	allowances  h Less Cost of	\$ \$9.7 (	, , , , , , , , , , , , , , , , , , , ,	٠, ـ		
52 52	goods sold		, , ,		) OE	יייייין אם
53	c Gross profit/(loss) (att sch)					34,146,134, 144 (4)
SCANNED	11 Other income (attach schedule)					
ග් ර	12 Total. Add lines 1 through 11	15,862	8:	33.	833.	3
	13 Compensation of officers, directors, trustees, etc		1			
	14 Other employee salaries and wages					
	15 Pension plans, employee benefits 16a Legal fees (attach schedule)					
A D	b Accounting fees (attach sch)	360.				
M I	c Other prof fees (attach sch)	300.				
0 I P S	17 Interest					
E T R R	18 Taxes (attach schedule)(see instrs)	112.				
A A	19 Depreciation (attach sch) and depletion		1			
l i	20 Occupancy		<b>-</b>			1 2 2 2 2 2
GÉ	21 Travel, conferences, and meetings					
A E N X D P	22 Printing and publications 23 Other expenses (attach schedule)		ļ		<del></del>	
Ė	Bank Charges	8.			Í	
ž N	24 Total operating and administrative		<u> </u>			
S	expenses. Add lines 13 through 23	480.				
	25 Contributions, gifts, grants paid	15,195.	<u>'</u>	•		15,195.
	26 Total expenses and disbursements. Add lines 24 and 25	15,675.				15,195.
	27 Subtract line 26 from line 12:					
	a Excess of revenue over expenses and disbursements	187.		• -		من الله الله الله الله الله الله الله الل
	b Net investment income (if negative, enter -0-)	, ,		33.		
	C Adjusted net income (if negative, enter 0)		·		833.	1
BAA F	or Paperwork Reduction Act Notice, see ins	tructions.		TEE	A0301 12/06/12	Form 990-PF (2012)

Form	990-F	PF (2012) Hazel Rose Family Charitable			73-15	
Part	3 (8)	Balance Sheets Attached schedules and amounts in the descript column should be for end-of year amounts only	ion	Beginning of year		of year
<u> </u>	- 133	(See instructions )		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing		192,851.	237,403.	237,403.
	2	Savings and temporary cash investments				
	3	Accounts receivable		AND THE PROPERTY OF THE PERSON		
		Less: allowance for doubtful accounts				
	4	Pledges receivable		en de la		24. 34. 14. 14. 14. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12
		Less allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach sch)				
A		Less allowance for doubtful accounts				
S S E T	8	Inventories for sale or use				
Ē	9	Prepaid expenses and deferred charges				
S	10 a	Investments – U.S. and state government obligations (attach schedule)				
	b	nivestments — corporate stock (attach schedule) L-10b Stmt	;	77,377.	33,013.	27,281.
		Investments — corporate bonds (attach schedule)		7,75	33,023.	
	11	Investments — land, buildings, and equipment basis				
		Less. accumulated depreciation (attach schedule)		. The second of		as policialitica halikalitalitalita (tili massilialitalita) . ma. 11 - a. 1
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis		WENT THIS LEADING		350
		Less accumulated depreciation (attach schedule)		. Martine and the state of the	T. risk Millet Blade St. 1	
	15	Other assets (describe	<b>.</b>			
	16	Total assets (to be completed by all filers – see the instructions Also, see page 1, item I)	<u>"</u>	270,228.	270,416.	264,684.
L	17	Accounts payable and accrued expenses	•			
A	18	Grants payable ·				
B	19	Deferred revenue	- 4			
I.	20	Loans from officers, directors, trustees, & other disqualified persons	L			
Ī	21	Mortgages and other notes payable (attach schedule)	I			
Ţ	22	Other liabilities (describe ►		0.	0.	
Ė S	23	Total liabilities (add lines 17 through 22)	12	0.	0.	
	==	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	FL	<u> </u>		
N F E U	24	Unrestricted	Ĭ			
E U T N	25	Temporarily restricted	[		_	
D	26	Permanently restricted				
A S S A E L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	<b>-</b> ×			
ĔĹ	27	Capital stock, trust principal, or current funds				
TASN	28	Paid-in or capital surplus, or land, building, and equipment fund	Ī			
С	29	Retained earnings, accumulated income, endowment, or other funds		270,228.	270,416	
O E R S	30	Total net assets or fund balances (see instructions)		270,228.	270,416	
5	31	Total liabilities and net assets/fund balances (see instructions)		270,228.	270,416	
Par	ėjiją	Analysis of Changes in Net Assets or Fund B	aland			The second of th
1	Tota	I net assets or fund balances at beginning of year — Part II				
_		of-year figure reported on prior year's return)			1	270,228.
2	⊏nte	er amount from Part I, line 27a			2	187.

3 Other increases not included in line 2 (itemize) Rounding 3 1.
4 Add lines 1, 2, and 3 4 270, 416.
5 Decreases not included in line 2 (itemize) 5
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30 6 270, 416.

(a) List and describ	e the kind(s) of property sold (e g , rese, or common stock, 200 shares MLC	al estate, (b)	How acquired — Purchase — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a					
b					<u> </u>
С					
đ					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b					
С					
d					
e	1	<u> </u>			
	ving gain in column (h) and owned by	,		(I) Gains (Coli	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any		ain minus column (k an -0-) or Losses (fr	
a					
b					
С					
d					
е					
2 Capital gain net income or (n	If (loss), er	enter in Part I, line 7 ter -0- in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6)	1		
If gain, also enter in Part I, Iii in Part I, Iine 8	ne 8, column (c) (see instructions) If	(loss), enter -0-	3		
Part V Qualification Und	er Section 4940(e) for Reduce	d Tax on Net Investment	t Income	<del></del>	
If 'Yes,' the foundation does not qu	ection 4942 tax on the distributable am alify under section 4940(e) Do not co	mplete this part	·	Yes	X No
	in each column for each year, see th		y entries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	(col	<b>(d)</b> Distributior umn (b) divided	
2011	15,396.	268,	367.		0.057369
2010	16,897.	267,			0.063272
2009	15,109.	271,			0.055690
2008	16,171.	299,			0.054045
2007	14,395.	286,			0.050184
				}	
2 Total of line 1, column (d)		i.	2		
				1	0.280560
4 Enter the net value of noncha	the 5-year base period — divide the to on has been in existence if less than 5		3		
		5 years	3		0.056112
5 Multiply line 4 by line 3	on has been in existence if less than t	5 years			0.056112 288,474.
	on has been in existence if less than t	5 years	4		0.056112 288,474. 16,187.
	on has been in existence if less than s	5 years	5		0.056112 288,474. 16,187.
6 Enter 1% of net investment in	on has been in existence if less than saritable-use assets for 2012 from Part income (1% of Part I, line 27b)	5 years	5		0.280560 0.056112 288,474. 16,187. 8. 16,195.

	-1519254		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – sec	instructions	·)	
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 instrs)		<u> </u>	
b Domestic foundations that meet the section 4940(e) requirements in Part V.	11		17
check here ► and enter 1% of Part I, line 27b	1500 3 12 1	1 4 8 3	इंग्रें
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	M. 1827		
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		<u>0.</u> 17.
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		17.
6 Credits/Payments		No.	
a 2012 estimated tax pmts and 2011 overpayment credited to 2012			1.88
b Exempt foreign organizations — tax withheld at source 6 b		ا الموالية الموالية ا	Š, ₹, }
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld 6 d			23.5
7 Total credits and payments Add lines 6a through 6d	7		
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		17.
Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	<del></del>	0.
Enter the amount of the for orealized to 2013 estimated tax	<b>^</b>   11		
Part VII-A Statements Regarding Activities		TT - 1 V	
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes 1 a	X No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b	x
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 pur or distributed by the foundation in connection with the activities	blished		
c Did the foundation file Form 1120-POL for this year?		1 c	x
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1-36-38	
(1) On the foundation \$\ \\$ \\$ \\$ (2) On foundation managers \$\ \\$ \\$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed of	<u></u>		外。對
foundation managers \$	<i>/</i> (1		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?  If 'Yes,' attach a detailed description of the activities		2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	<b>;</b>		انناف
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	,	3	x
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		4 b	
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			
<ul> <li>Are the requirements of section 508(e) (relating to sections 494) through 4945) satisfied either</li> <li>By language in the governing instrument, or</li> </ul>			
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that co with the state law remain in the governing instrument?</li> </ul>	onflict	6 X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7 X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions)			
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>		8 b X	_
	4040437C		+
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete		9	x
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their rand addresses		10	х
BAA	Fo	orm <b>990-PF</b>	· (2012)

rai	t vii A   Statements Regarding Activities (Continued)			
11,	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12	'	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address N/A			
14	The books are in care of Glenda Durano Telephone no (505)	797	-271	<u>5</u>
	Located at P. O. Box 90625 Albuquerque NM ZIP + 4 87199			СТ.
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	163	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.	<i>3</i> .,	.ø -	ž
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
1 :	a During the year did the foundation (either directly or indirectly)	202.	.,^^,, ', 15*	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes x No		12 to 1	1.1251
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			7
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		30,	·
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No	27.4	345	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No	2 10		hvq.
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No			
1	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)?	1 b	1 7	
	Organizations relying on a current notice regarding disaster assistance check here	<b>P</b>		· · · · ·
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1 c	***	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))			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?  Yes X No	1	E.	
	If 'Yes,' list the years 20, 20, 20	. 42 .	1. Tr.	
	<b>b</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 ) .	2 b	<u>i.</u>	
,	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here  20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20	ر مهومها ماک ایوا		, s,
3	a 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			
	b If 'Yes,' did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012)	3 b	1 1 1	- 1
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		х
	I. Dalilla Co I. I	,.		, '
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of		<u>                                     </u>	
	the tax year beginning in 2012?	4 b	<u></u>	X
BAA	<b>A</b> Fo	orm 99	0-PF (	2012)

Form 990-PF (2012) Hazel Rose Family Part VII:B: Statements Regarding Activit	Charitable	4720 May Re Pegi	73-151	9254 Page 6
5 a During the year did the foundation pay or incur		4/20 may be need	ined (commuca)	
(1) Carry on propaganda, or otherwise attemp	•	(section 4945(e))?	Yes X	No Real Real
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	c election (see section 4	•	O. O	No
(3) Provide a grant to an individual for travel,	ırposes?	├─ <b>┤</b>	No Company	
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section			Yes X	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention			Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53 4945 or in (see instructions)?			ns .	5 b
Organizations relying on a current notice regains	ding disaster assistance	check here	•	1 Jan
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure respons	he foundation claim exer sibility for the grant?	nption from the	Yes	No No
If 'Yes,' attach the statement required by Regu	lations section 53 4945-	5(d)		
6 a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes X	
<b>b</b> Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	ums, directly or indirectly	y, on a personal benefit	contract?	6b X
7 a At any time during the tax year, was the found	ation a narty to a probib	ited tax shelter transact	ion? Yes X	No Silvinia
<b>b</b> If 'Yes,' did the foundation receive any proceed			ليا لسا	7 b
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees,
1 List all officers, directors, trustees, foundation	n managers and their co	ompensation (see instru	ıctions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e)Expense account, other allowances
Diane Love Karnuth 3728 South Elm Place PMB 520 Broken Arrow OK 74011	President	0.	0.	0.
Glenda L. Durnao P. O. Box 90625	-			0.
Albuquerque NM 87199-062	Sec-Treas.	0.	0.	0.
				<u></u>
	-			
	1			
2 Compensation of five highest-paid employee			<del>, , , , , , , , , , , , , , , , , , , </del>	er 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e)Expense account, other allowances
None				
	1			
	+			
	-			
	<u> </u>			
	<del> </del>			
	]			
Total number of other ampleyees and area (CO 00)	1	1	<u> </u>	
Total number of other employees paid over \$50,000 BAA		2/25/12		None Form <b>990-PF</b> (2012)

Form 990-PF (2012) Hazel Rose Family Charitable  Part VIII   Information About Officers, Directors, Trustees, Foundand Contractors (continued)	73–151 dation Managers, Highly Paid E	
3 Five highest-paid independent contractors for professional services (see ins	tructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services	,	None
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 N/A		<del></del>
		0.
2		
3		
3		
4		
Part IX-B Summary of Program-Related Investments (see instruc	ctions)	
Describe the two largest program-related investments made by the foundation during	ng the tax year on lines 1 and 2	Amount
1 N/A		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.
2		
All other program-related investments. See instructions		
3		
<u> </u>		
Total. Add lines 1 through 3	-	None
BAA		Form 990-PF (2012)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities 1 a 63,923. b Average of monthly cash balances 1 b 228,944. c Fair market value of all other assets (see instructions) 1 c d Total (add lines la. b. and c) 1 d 292,867. e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 292,867. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 4,393. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 288,474. Minimum investment return. Enter 5% of line 5 6 14,424. Partix Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here land do not complete this part.) Minimum investment return from Part X, line 6 1 14,424. 2 a Tax on investment income for 2012 from Part VI, line 5 2 a b Income tax for 2012 (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b 2 c 17. Distributable amount before adjustments. Subtract line 2c from line 1 3 14,407. 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 14,407. 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 14,407. **Part XIII** Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 15,195. **b** Program-related investments — total from Part IX-B 1 b 0. Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a b Cash distribution test (attach the required schedule) 3 b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 15,195. 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 0. Adjusted qualifying distributions. Subtract line 5 from line 4 6 15,195. 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

Form **990-PF** (2012)

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## Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	<b>(d)</b> 2012
1 Distributable amount for 2012 from Part XI, line 7				14,407.
2 Undistributed income, if any, as of the end of 2012		,		14,407.
a Enter amount for 2011 only .		` .		•
<b>b</b> Total for prior years 20 , 20 , 20				
3 Excess distributions carryover, if any, to 2012:				,
a From 2007 193.	s ,	,		
<b>b</b> From 2008 1,318.	,		,	
c From 2009 1,554.		-		
d From 2010 3,548.	٠٠٠ إ٠١	, ,		,
e From 2011 2,090.	/ \ \\		. ,	į.
f Total of lines 3a through e	8,703.	*		
4 Qualifying distributions for 2012 from Part			. 7	·
XII, line 4 * \$15,195.	- 1		-	
a Applied to 2011, but not more than line 2a	·			
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)	***		*	
c Treated as distributions out of corpus (Election required — see instructions)		-, 22,54		
d Applied to 2012 distributable amount			• •	14,407.
e Remaining amount distributed out of corpus	788.	120	. 4	12 Ju
5 Excess distributions carryover applied to 2012		, , , , , , , , , , , , , , , , , , , ,		
(If an amount appears in column (d), the same amount must be shown in column (a))			c 2 4	*
6 Enter the net total of each column as		,	,	
indicated below:		, , , , , , , , , , , , , , , , , , ,		
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	9,491.	, ,		- '- ''
<b>b</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	2 <sup>2</sup> 5 8 254		ž. 🥳 :	
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		. 疾
e Undistributed income for 2011 Subtract line 4a from	,	•		-
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be		, ,		
distributed in 2013	+			0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				-
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	193.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	9,298.	• ,		
10 Analysis of line 9				
a Excess from 2008 1, 318.		,		
<b>b</b> Excess from 2009 1,554.	,			-
c Excess from 2010 3,548.			. 34	
d Excess from 2011 2,090.			,	
e Excess from 2012 788.	<u> </u>	<u> </u>	<u> </u>	

Form 990-PF (2012) Hazel Rose Family	Charitable	etions and Dar	t VIII A guestier	73-1519254	<del></del>
1 a If the foundation has received a ruling or de	<u>`</u>			<del></del>	N/A
is effective for 2012, enter the date of the ri	uling		-	•	,
b Check box to indicate whether the foundation	<del></del>	ating foundation de	<del></del>	4942(j)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for	Tax year (a) 2012	<b>(b)</b> 2011	Prior 3 years (c) 2010	(d) 2009	(e) Total
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under</li></ul>					
section 4942(j)(3)(B)(i) <b>b</b> 'Endowment' alternative test — enter 2/3 of					
minimum investment return shown in Part X, line 6 for each year listed					
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 and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income  PartXV: Supplementary Information		1			
assets at any time during the same a List any managers of the foundation who have close of any tax year (but only if they have	e year — see in ers: ave contributed mo	ore than 2% of the t	otal contributions re		
<b>b</b> List any managers of the foundation who can a partnership or other entity) of which the	wn 10% or more of foundation has a 10	f the stock of a corp 0% or greater intere	poration (or an equa est	ally large portion of the	e ownership of
2 Information Regarding Contribution, Grar Check here ► X if the foundation only r requests for funds If the foundation makes complete items 2a, b, c, and d	nakes contributions s gifts, grants, etc (	s to preselected cha (see instructions) to	ritable organization individuals or orga	nizations under other	
a The name, address, and telephone number	r or e-mail of the p	erson to whom app	lications should be	addressed	
b The form in which applications should be	submitted and infor	mation and materia	ils they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	ohical areas, charita	ible fields, kinds of	institutions, or other fa	actors
ВАА	т	EEA0310 12/23/12	<del></del>		Form <b>990-PF</b> (2012)

Form 990-PF (2012) Hazel Rose Family Charitable

Rati XVI Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions F	Paid Duri	ng the Yea		re Payment		<del></del>
		ff recipient is an individual, show any relationship to any foundation manager or		Purpose of grant or contribution	Amount	
Name and address (home or business)		substantial contributor	recipient		<del></del>	
a Paid during the year						
John Smithwick Minis	stries				[	
P. O. Box 1860						
Catoosa	OK	74015		501c3	Religious	1,000.
Kirk Karnuth Ministr						
3728 S. Elm PLace PM					Educational	
Broken Arrow	OK	74011		501c3	Religous	1,000.
Therapetics				ļ		
9433 51st Street J					Educational	
Tulsa	OK	74145		501c3	Welfare	250.
Hands Changing Legac	cies					
13749 S. Nyssa Place	<u> </u>				Welfare	
Glenpool	OK	74033		501c3	Religous	1,000.
Samarıtan's Purse						
P. O. Box 3000					Welfare	
Boone	NC	28607		501c3	Religous	600.
World Vision				1	<b>\</b>	
P. O. Box 70359					Welfare	
Tacoma	WA	98481		501c3	Religous	600.
Navigators					_	
P. O. Box 6000						
Colorado Springs	CA	80934		501c3	Religous	150.
Oasıs Network						
P. O. Box 1924						
Tulsa	ок	74101		501c3	Religous	500.
Metro Ministries						
P. O. Box 409						
Brooklyn	NY	11237	, ]	501c3	Welfare	1,000.
See Line 3a statement						_,,
oso zwa od otatowam						
						9,095.
						,
				1		
Total			<u> </u>		► 3a	15,195.
b Approved for future payme	nt			Τ		20/200
				·		
				1		
			1			
				[		
					1	
			1	1	<u> 1</u>	
Total					► 3b	Pl

## Part XVI-A Analysis of Income-Producing Activities

		ed business income	<del></del>	by section 512, 513, or 514	(e) ,
Program service revenue.	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a			code		
b	-				
C	-				
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			25	27.	
Dividends and interest from securities			25	806.	
Net rental income or (loss) from real estate	\$.47 . CT	PROPERTY PROPERTY TO AREA		Cores North	\$450 at \$1500 at \$1.000
a Debt-financed property			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
<b>b</b> Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	5,196.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			1		
Other revenue	744574.W	<b>建设的设计</b>	77.5.3	2 3 14 4 K 17 4 1 1 1 1 1	<b>48</b> (2)(4):4.895
a		7 2 1			
b					
C			<del>                                     </del>		
d					
e			<del></del>		
Subtotal Add columns (b), (d), and (e)	33000		Q1.4.4	6,029.	
			Dw. 0.240 3 5	13	6,029
3 Total. Add line 12, columns (b), (d), and (e)					
	ions )				
art.XVI-B: Relationship of Activities to the Response below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the
Total. Add line 12, columns (b), (d), and (e) be worksheet in line 13 instructions to verify calculated art XVI-B. Relationship of Activities to the	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the structions )
B Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculated to the columns (b). Explain below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the istructions )
Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculated with XVI-B. Relationship of Activities to the No. Explain below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the istructions )
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated with XVI-B. Relationship of Activities to the No. Explain below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the istructions )
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculated with XVI-B: Relationship of Activities to the No. Explain below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the istructions )
B Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculated art. XVI-B Relationship of Activities to the line No. Explain below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the istructions )
B Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculated to the columns (b). Explain below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the istructions )
B Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculated art. XVI-B Relationship of Activities to the line No. Explain below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the istructions )
B Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculated art. XVI-B Relationship of Activities to the line No. Explain below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the istructions )
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculate art. XVI-B. Relationship of Activities to the line No. Explain below how each activity for which	ncome is repo	orted in column (e) of Pa	art XVI-A	A contributed importantly	y to the istructions )

# Form 990-PF (2012) Hazel Rose Family Charitable 73-1519254 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

<u> </u>			<del></del>				12 1 8" 620% T
describ relating a Transfe (1) Cas (2) Oth b Other ti (1) Sal (2) Pur (3) Rei (4) Rei (5) Loa (6) Pei c Sharing d If the a	ed in section 501 (c) to political organizers from the reporting the respective shapes assets from the respective shapes of assets to a number of assets from the facilities, equipment arranger formance of services of facilities, equipment of faci	of the Code (otherations?  on foundation to a concharitable exery  on a noncharital cuipment, or other gements  ees or membershiment, mailing lister above is 'Yes,' or services given to the category of the concentration	ble exempt organization	organizations; ganization of	or in section 527	s show the fair r	et value in
(a) Line no.	(b) Amount involved		of noncharitable exempt organizat				nd sharing arrangements
(a) Line no.	(b) Amount involved	(c) Haric (	or monental trable exempt or gamzan	,1011	bescription of dans	ers, transactions, a	nd sharing arrangements
		.					
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	····						
		<u> </u>					
describ	foundation directly oped in section 501 (c). 'complete the follow	c) of the Code (ot	ated with, or related to, one ther than section 501(c)(3)	e or more tax- ) or in section	exempt organizat 527?	ions	Yes X No
	a) Name of organiz		(b) Type of organ	uzation	16	Description of r	elationship
	d) Name of organiz		(b) Type of organ	12011011		bescription or i	Ciationship
					+	· · · · · · · · · · · · · · · · · · ·	
			<del> </del>		<del> </del>		
					+	<del>_</del>	
<del> </del>							
	<del></del>		<u> </u>				
Under	r penatties of perjury, I de ct, and complete Declara	eclare that I have examition of preparer (other	nined this return, including accomp r than taxpayer) is based on all info	anying schedules a ormation of which (	and statements, and to preparer has any knowl	the best of my knowl edge	edge and belief, it is true,
Sign \	1/1 1/10	Al line	2				May the IRS discuss
Here	\M\/\\\\\	Mulle	05/06	. /12	C = = / M== = = ===		this return with the preparer shown below
l —	nature of officer or truste	70,10		/13	Sec/Treasu	rer	(see instructions)?
	Print/Type preparer		Preparer's signature		Date ,	<del></del>	Yes X No
			Freparer's Signature	/ 4	5/4/13	Check	of PIIN
Paid	Julia Ann	Hawkins	Julialina	tampini	13/ -//3	self-employed	-
Preparer	Firm's name	J. A. Haw	kins, Inc.			Firm's EIN 27-	-0808635
Use Only	Firm's address	1417 Carl	ısle NE, Suıte A	<u> </u>			
<b>- ····</b>		Albuquerq	ue	NM 8	7110	Phone no (5	05) 265-6773
BAA							Form <b>990-PF</b> (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
Hazel Rose Family Charitable		73-1519254
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treate	d 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	s a private foundation
		Ta private roundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule	
, ,	•	ad a Cassial Dula Cassianteriations
<b>Note.</b> Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule a	nd a Special Rule See Instructions
General Rule		
For an organization filing Form 990, 990-E2 contributor (Complete Parts I and II)	, or 990-PF that received, during the year, \$5,000 or r	nore (in money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi) and received	orm 990 or 990-EZ that met the 33-1/3% support test I from any one contributor, during the year, a contribut VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Par	tion of the greater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) organize total contributions of more than \$1,000 for the prevention of cruelty to children or anim	ation filing Form 990 or 990-EZ that received from any use exclusively for religious, charitable, scientific, literals Complete Parts I, II, and III	y one contributor, during the year, ary, or educational purposes, or
contributions for use exclusively for religious of this box is checked, enter here the total of	ation filing Form 990 or 990-EZ that received from any s, charitable, etc. purposes, but these contributions di ontributions that were received during the year for an unless the General Rule applies to this organization be	d not total to more than \$1,000 exclusively religious, charitable, etc,
religious, charitable, etc, contributions of \$5	5,000 or more during the year	<b>▶</b> \$
Caution: An organization that is not covered by the Canswer 'No' on Part IV, line 2, of its Form 990, or chemeet the filing requirements of Schedule B (Fo	General Rule and/or the Special Rules does not file Schedule eck the box on line H of its Form 990-EZ or on Part I, line 2, rm 990, 990-EZ, or 990-PF)	B (Form 990, 990-EZ, or 990-PF) but it <b>must</b> of its Form 990-PF, to certify that it does not
BAA For Paperwork Reduction Act Notice, se or 990-PF.	e the Instructions for Form 990, 990EZ, Sche	dule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2012)

1 of Part 1

Hazel Rose Family Charitable

Page 1 of Employer identification number 73-1519254

Partil Contributors	(see instructions)	Use duplicate copies of Part Lif additional space is needed
---------------------	--------------------	---

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Nadine N. Holloway  3029 Quail Creek Road  Oklahoma City OK 73120	\$9,833.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II if there is a noncash contribution )
(a) Number	(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) Number	(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) Number	(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) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash  (Complete Part II if there is a noncash contribution)
	· · · · · · · · · · · · · · · · · · ·	<del></del>	1

Page

1 to

1 of Part II

Name of organization

Hazel Rose Family Charitable

Employer identification number

73-1519254

## 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
1	50 Shares of Brookshire Stock		
		\$ 1,690.	06/07/12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	60 Shares of Spyder Stock		
		\$ 5,118.	06/07/12
(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
		\$	
RΔΔ	<u> </u>	hedule <b>B</b> (Form 990, 990-F)	7 or 990 PE) (201

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Schedule **B** (Form 990, 990-EZ, or 990-PF) (2012)

Name

#### Net Gain or Loss From Sale of Assets

2012

Employer Identification Number Hazel Rose Family Charitable 73-1519254 Asset Information: Description of Property Amerigroup Corporation (AGP) Date Acquired How Acquired 07/06/11 Purchased Date Sold Name of Buyer 12/24/12 Cost or other basis (do not reduce by depreciation) Sales Price 7,498. 9,200. Sales Expense Valuation Method Cost 1,702. Accumulation Depreciation Total Gain (Loss) Description of Property Chesapeake Energy Corp (CHK) Date Acquired How Acquired 05/04/12 Purchased Date Sold Name of Buyer 09/26/12 Sales Price 1,857. Cost or other basis (do not reduce by depreciation) 1,742. Sales Expense Valuation Method 115. Accumulation Depreciation Total Gain (Loss) Description of Property SPDR Tr. S&P 500 ETF (SPY) Date Acquired How Acquired 07/07/10 Purchased Date Sold Name of Buyer 05/09/12 Sales Price Cost or other basis (do not reduce by depreciation) 1,346. 1,049. Valuation Method Sales Expense. Total Gain (Loss) 297. Accumulation Depreciation SPDR Tr. S&P 500 ETF(SPY) Description of Property Date Acquired 01/21/11 How Acquired Purchased Date Sold. Name of Buyer. 05/09/12 Cost or other basis (do not reduce by depreciation) Sales Price 12,117. 11,626. Valuation Method Sales Expense Total Gain (Loss) Accumulation Depreciation 491. Description of Property SPDR Tr. S&P 500 ETF(SPY) How Acquired Date Acquired 02/17/11 Purchased Date Sold 10/23/12 Name of Buyer Cost or other basis (do not reduce by depreciation) Sales Price 14,083. 13,381. Sales Expense Valuation Method 702. Total Gain (Loss) Accumulation Depreciation Description of Property SPDR Tr. S&P 500 ETF(SPY) How Acquired Date Acquired 02/17/11 Date Sold: Name of Buyer 10/23/12 Sales Price 2,817. Cost or other basis (do not reduce by depreciation) 2,676. Sales Expense Valuation Method Total Gain (Loss) Accumulation Depreciation 141. SPDR Tr. S&P 500 ETF(SPY) Description of Property 03/15/11 How Acquired Date Acquired Purchased Date Sold: 10/23/12 Name of Buyer Sales Price Cost or other basis (do not reduce by depreciation) 14,083. 12,850. Valuation Method Sales Expense 1,233. Accumulation Depreciation Total Gain (Loss) Description of Property SPDR Tr. S&P 500 ETF(SPY) Date Acquired How Acquired 03/15/11 Purchased Date Sold Name of Buyer 10/23/12 Cost or other basis (do not reduce by depreciation) Sales Price 5,633. 5,118. Valuation Method Sales Expense Accumulation Depreciation. Total Gain (Loss) 515.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

D			D	D
Recipient	If recipient is	Foun-	Purpose of	Person or
	an individual,	dation	grant or contribution	Business
Name and address	show any	status		Checkbox
(home or business)	relationship to	of re-		
	any foundation	cipient		Amount
	manager or			
	substantial			
	contributor			
a Paid during the year				
Word Made Flesh				Person or
P. O. Box 70			Welfare	Business X
Omaha NE 68101		501.03	Religious	600.
Calvary Chapel		30103	Religious	Person or
4001 Osuna NE				Business X
Albuquerque NM 87109		501.23	Religious	1,100.
		30163	Religious	Person or
Heifer Project				Business X
P. O. Box 6021			 Welfare	, —
Albertiea MN 56007	<del> </del>	501c3	wellare	600.
Project 1615				Person or
P. O. Box 471615			Welfare	Business X
Tulsa OK 74147	<u> </u>	501c3	Religious	1,000.
World Compassion				Person or
POBox_92			Welfare	Business X
Tulsa OK 74101	ļ <u> </u>	501c3	Religious	500.
Assn. of Faith Christian Min.				Person or
P. O. Box 1918				Business X
Wilman NV 56201		501c3	Religious	500.
Restoration House				Person or
P. O. Box 1255			Welfare	Business X
Broken Arrow OK 74013		501c3	Education	500.
Bridges for Peace				Person or
P. O. Box 410037			Welfare	Business X
Melbourne FL 32941		501c3	Religious	600.
International Justice Mission				Person or
P. O. Box 58147		]	Welfare	Business X
Washington DC 20037		501c3	Edication	600.
TCU Office of Religious Aff.				Person or
P. O. Box 297310		.	Education	Business X
Ft. Worth TX 76129		501c3	Religious	1,100.
My Refuge House		.		Person or
P. O. Box 4864				Business X
Diamond Bar CA 91765		501c3	Welfare	600.
Parkland Foundation				Person or
2777 N. Stemmons Freeway Ste 1700			Welfare	Business X
Dallas TX 75207		501c3	Education	1,000.
TCU Scholarship Fund				Person or
1600 University Avenue				Business X
Ft. Worth TX 76129		501c3	Education	150.
SAGU/Adrianne Lovato				Person or
1200 Sycamore Street				Business X
Waxahachie TX 75165		501c3	Religious	75.
New Life Assembly				Person or
5146 Leonard Blvd.				Business X
Lehigh Acres FL 33973		501c3	Religious	20.
	<del></del>			

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year  TCU Clark Society  1600 University Ave.  Ft. Worth TX 76129  Ann Neese Mem. Func  C/O CEC 807 Mountain Road NE		501c3	Education	Person or Business X Person or Business X
Albuquerque NM 87102	l	501c3	Education	50.

Total

9,095.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

		End of Year	
	Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value
APKT		33,013.	27,281.
Total		33,013.	27,281.

#### **Supporting Statement of:**

Form 990-PF, p2/Line 10b(a)

Description	Amount
APKT	7,668
AGP	7,498
BRK B	6,118
CTRP	9,975
JKS	7,213
SPY	38,906
Rounding	
Total	77,377

#### **Supporting Statement of:**

Form 990-PF,p12/Line 3 Column (d)

Description	Amount
FDIC Insured Deposit Account	27.
Total	27.

#### **Supporting Statement of:**

Form 990-PF,p12/Line 4 Column (d)

Description	Amount
Ameritrade - Dividends	806.
Total	806.

### **Supporting Statement of:**

Investments/Line 10b Book-1

Description	Amount
АРКТ	7,668.
BRK B	8,157.
CTRP	9,975.
JKS	7,213.

Total \_\_\_\_\_33,013.

## **Supporting Statement of:**

## Investments/Line 10b FMV-1

	Description	Amount
APKT		2,417.
BRK B		19,386.
CTRP		3,962.
JKS		1,516.
Total		27,281.