

### 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



efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Department of the Treasury

Internal Revenue Service

DLN: 93491134020783

OMB No 1545-0052

**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

Open to Public

_				04.0040				Inspection
		endar year 2012, or tax year b	eginning 01-	01-2012 , an	d en	ding 12-31-	2012 lentification numb	er
LA	RRY &	NORMA PRICE FAMILY					ientineation name	u .
%	DR LAF	BLE FOUNDATION RRY R PRICE				74-2819831		
		d street (or P O box number if mail is not delive ASTELLANO	ered to street address	s) Room/suite		· ·	ımber (see ınstructio	ns)
	ite 202					(915) 581-815	2	
	City or town, state, and ZIP code EL PASO, TX 79912					<b>C</b> If exemption	application is pendin	ng, check here 🕨 🦵
<b>G</b> C	heck	all that apply     Initial return	Initial return o	f a former public cha	rity	<b>D 1.</b> Foreian o	rganizations, check h	ere ▶ □
_			Amended retu		,		organizations meeting	• •
			Name change				re and attach comput	
		ype of organization 🔽 Section 501(c						
		n 4947(a)(1) nonexempt charitable trus				F If private fo	undation status was i	terminated
			ounting method Other (specify)	▼ Cash	rual		n 507(b)(1)(A), ched	
				_ t be on cash basıs.)			ation is in a 60-mont	
Pa	rt I	Analysis of Revenue and Ex		<u> </u>		T under section	n 507(b)(1)(B), ched	(d) Disbursements
total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)		(a) Revenue and expenses per books	(b) I	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , received (atta	ach schedule)	113,250				
	2	Check ► ☐ if the foundation is <b>not</b> required	to attach Sch B					
	3	Interest on savings and temporary ca		4		4		
	4	Dividends and interest from securities	3	1,988		1,988		
	5a	Gross rents						
	ь	Net rental income or (loss)						
Revenue	6a	Net gain or (loss) from sale of assets	not on line 10	182				
	ь	Gross sales price for all assets on line 6a	50,196					
₩.	7	Capital gain net income (from Part IV	, line 2)			182		
œ	8	Net short-term capital gain						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	b	Less Cost of goods sold						
	C	Gross profit or (loss) (attach schedule						
	11	Other income (attach schedule) .						
	12	Total. Add lines 1 through 11		115,424		2,174		
	13	Compensation of officers, directors, tr	-	0				
φ.	14	Other employee salaries and wages						
Expenses	15	Pension plans, employee benefits .						
8	16a	Legal fees (attach schedule)						
	b	Accounting fees (attach schedule).						
ΠVE	1 C	Other professional fees (attach sched Interest						
trai	17 18	Taxes (attach schedule) (see instructions)		<b>%</b> 150		150		
S	19	Depreciation (attach schedule) and de	anletion	150				
<u>Ē</u>	20	Occupancy						
Ă	21	Travel, conferences, and meetings.						
and Administrative	22	Printing and publications						
Ř	23	Other expenses (attach schedule).		<b>%</b> 145		145		
Operating	24	Total operating and administrative ex		<u> </u>				
ğ		Add lines 13 through 23	-	295		295		
ŏ	25	Contributions, gifts, grants paid		107,323				107,323
	26	Total expenses and disbursements. Add In		107,618	<del>                                     </del>	295		107,323
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expenses and	disbursements	7,806				
	ь	Net investment income (if negative, e	nter -0-)			1,879		
	c	Adjusted net income (if negative, ente	er-0-)					

히	27	Capital stock, trust principal, or current funds	91,	498
		Paid-in or capital surplus, or land, bldg , and equipment fund		
Assets	29	Retained earnings, accumulated income, endowment, or other funds		
	J	Total net assets or fund balances (see page 17 of the		
Net		ınstructions)	91,	498
-	31	Total liabilities and net assets/fund balances (see page 17 of		
		the instructions)	91,	498
	rt II			
1		Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree		
_		with end-of-year figure reported on prior year's return)	1	83,692
2		Enter amount from Part I, line 27a	2	7,806
3		Other increases not included in line 2 (itemize) 🟲	3	
4		Add lines 1, 2, and 3	4	91,498
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	91,498
				Form <b>990-PF</b> (2012)

	90-PF (2012)		-1 1 <del>-</del>					Page <b>3</b>
Part 1	Capital Gains an	d Losses for Tax on Inve	stment Inc	ome				
		e kınd(s) of property sold (e g , re se, or common stock, 200 shs  N			( <b>b)</b> How acquire P—Purchase D—Donation	(c) Da	ate acquired , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
1 a	SENTINEL SHORT MA	TURITY				201	12-01-31	2012-03-09
b	ALPINE ULTRA SHORT	Г ТАХ ОРТ				201	11-06-16	2012-03-15
	SENTINEL SHORT MA	TURITY GOVT				201	11-03-31	2012-03-09
d	SENTINEL SHORT MA	TURITY GOVERNMENT				200	09-04-14	2012-03-09
<u>_</u>						+		
	e) Gross sales price	(f) Depreciation allowe	1	•	or other basis pense of sale			or (loss) ) mınus (g)
a		141	P	ius ex	14		(e) plus (i)	) IIIIIIus (g) 1
b		500			50	_		
	7	,617			7,64			-32
С .			+					
d	41	,938			41,72	. 5		213
е								
Со	mplete only for assets sho	owing gain in column (h) and owne						(h) gain minus
(i)	FM V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69		-	ess of col (ı) ol (j), ıf any	COI		less than -0-) <b>or</b> om col (h))
a		as 0(12/31/09	<u>'</u>	OVEIC	or (j), ir arry		203363 (11	1
								-
b								2.2
С						_		-32
d								213
е								
2	Capital gain net income	or (net capital loss)			n Part I , line 7 in Part I , line 7	2		182
3	Net short-term capital g	gaın or (loss) as defined in sectio	ns 1222(5) a	nd (6)	,	_		
	<u> </u>	rt I, line 8, column (c) (see instru	ictions) If(lo	ss), er	iter -0-	.		
	ın Part I, lıne 8			•		3		
Part	V Qualification Un	der Section 4940(e) for F	Reduced Ta	x on	Net Investme	ent In	come	
(For opt	ional use by domestic priv	vate foundations subject to the se	ection 4940(a	a) tax o	on net investmen	income	e )	
	,	•		.,			- /	
Ifsection	on 4940(d)(2) applies, lea	ve this part blank						
		section 4942 tax on the distribut qualify under section 4940(e) Do				eriod?		┌ Yes ┌ No
<b>1</b> Ent	ter the appropriate amount	t ın each column for each year, s	ee page 18 of	the in	structions before	makıng	anv entries	
	(a)		I		T		(d)	
Base	period years Calendar	(b) Adjusted qualifying distributions	Net value of r	(c)	table-use assets		Distribution	
year (d	or tax year beginning in)		Net value of f	ioricriari		(	col (b) divided	, , , , ,
	2011	73,647			76,434			0 963537
	2010	62,572			63,053			0 992371
	2009	75,659			64,661			1 170087
	2008	111,399			49,811			2 236434
	2007	106,034			25,885			4 096349
2	<b>Total</b> of line 1, column (	d)			[	2		9 458778
3		tio for the 5-year base period—di				_		
	the number of years the	foundation has been in existence	e ıf less than !	5 year	s <u> </u>	3		1 891756
4	Enter the net value of no	oncharitable-use assets for 2013	2 from Part X,	line 5	[	4		83,716
					Γ			
5	Multiply line 4 by line 3					5		158,370
6	Enter 1% of net investn	nent income (1% of Part I, line 2	7b)			6		19
7	Add lines 5 and 6					7		158,389
				•	· · · ·			
8		itions from Part XII, line 4			<u> </u>	8		107,323
	If line 8 is equal to or gi the Part VI instructions	reater than line 7, check the box	ın Part VI, lın	e 1b, a	and complete that	part us	ing a 1% tax	rate See

	990-PF (2012)			age <b>4</b>
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here T and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			38
	here Fand enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2			38
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			38
6	C redits/P ay ments			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 108			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868)  6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			108
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>b</b>			70
11	Enter the amount of line 10 to be Credited to 2013 estimated tax F 70 Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt partıcıpate or ıntervene ın any political campaign?	. 1a		No
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of			
	the instructions for definition)?	1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	<b>1</b> c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation 🕨 \$ (2) On foundation managers 🕨 \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  • By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions			
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	TX			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ▶		l	
4.4			0150	
14	The books are in care of DR LARRY R PRICE  Telephone no (915)	581-	8152	
	Located at ► 124 W CASTELLANO SUITE 202 EL PASO TX ZIP+4 ► 79912			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		!	▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over			
	a bank, securities, or other financial account in a foreign country?	16		
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign			
	country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 🔽 No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundatıon agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) <b>Yes</b> 🔽 <b>No</b>			
b	If any answer is "Yes" to $1a(1)-(6)$ , did <b>any</b> 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 page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
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?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years 🕨 20, 20, 20			
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 <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		No
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
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, <b>(2)</b> 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	<b>-</b> 21-		
4	If the foundation had excess business holdings in 2012.).	3b		NI -
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	AL.		<b>ķ</b> 1
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	ı I	No

		<b>3</b>	**************************************	мау ве кеquireu ( <i>coi</i>			
5a	During the year did the foundation	n pay or incur any amount	t to				
	(1) Carry on propaganda, or other	wise attempt to influence	e legislation (section 49	45(e))? <b>Yes</b>	✓ No		
	(2) Influence the outcome of any	specific public election (	see section 4955), or to	carry			
	on, directly or indirectly, any	voter registration drive?.		Г Yes	▼ No		
	(3) Provide a grant to an individua	al for travel, study, or oth	ner sımılar purposes?	☐ Yes	┌ No		
	(4) Provide a grant to an organiza	ition other than a charital	ble, etc , organızatıon de	scribed			
	ın section 509(a)(1), (2), or (	3), or section 4940(d)(2)	)? (see instructions)	Г Yes	▼ No		
	(5) Provide for any purpose other	than religious, charitable	e, scientific, literary, or				
	educational purposes, or for t	he prevention of cruelty t	o children or animals?.	Yes	✓ No		
b	If any answer is "Yes" to 5a(1)-(!	5), dıd <b>any</b> of the transac	tions fail to qualify under	the exceptions described i	n		
	Regulations section 53 4945 or i	n a current notice regard	ıng dısaster assıstance	(see instructions)?		. 5b	
	Organizations relying on a curren	t notice regarding disasti	er assistance check here	e	<b>▽</b>		
С	If the answer is "Yes" to question	5a(4), does the foundati	on claım exemptıon from	the			
	tax because it maintained expend	liture responsibility for th	ne grant?......	Г Yes	┌ No		
	If "Yes," attach the statement requi	ired by Regulations section	n 53.4945–5(d).				
6a	Did the foundation, during the yea	ır, receive any funds, dire	ectly or indirectly, to pay	premiums on			
	a personal benefit contract?				┌ No		
b	Did the foundation, during the yea	ir, pay premiums, directly	or indirectly, on a perso	onal benefit contract?		6b	
	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, w	as the foundation a party	to a prohibited tax shel	ter transaction? <b>TYes</b>	√ No		
b	If yes, did the foundation receive	any proceeds or have an	y net income attributable	e to the transaction?		7b	No
Da		t Officers, Directors	s, Trustees, Founda	ition Managers, Highl	y Pai	d Emp	loyees,
	and Contractors						
	1 !-			!			
1	List all officers, directors, trustees		ı				
1	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (c) (If not paid, enter	(d) Contributions to employee benefit plans	1 ' '		e account,
1		(b) Title, and average	(c) Compensation	(d) Contributions to	1 ` `		e account, owances
		(b) Title, and average hours per week devoted to position TRUSTEE	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred compensation	1 ` `		•
LARR 23 D	(a) Name and address YR PRICE DIAMOND CREST	(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	1 0		owances
LARR 23 D EL P	(a) Name and address YR PRICE DIAMOND CREST ASO,TX 79902	(b) Title, and average hours per week devoted to position TRUSTEE 0	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	0		owances 0
LARR 23 D EL P NORN	(a) Name and address YRPRICE DIAMOND CREST ASO,TX 79902 MA PRICE	(b) Title, and average hours per week devoted to position TRUSTEE 0 TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	1 0		owances
LARR 23 E EL P NORM 23 E	(a) Name and address YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST	(b) Title, and average hours per week devoted to position TRUSTEE 0	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	0		owances 0
LARR 23 E EL P NORN 23 E EL P	(a) Name and address YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902	(b) Title, and average hours per week devoted to position TRUSTEE 0 TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	0	ther allo	owances 0
LARR 23 E EL P NORN 23 E EL P	(a) Name and address YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST	(b) Title, and average hours per week devoted to position TRUSTEE 0 TRUSTEE 0	(c) Compensation (If not paid, enter -0-)  0  those included on line 1-	(d) Contributions to employee benefit plans and deferred compensation	0	ther allo	owances 0
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  comployees (other than to the comployees)	(c) Compensation (If not paid, enter -0-)  0  those included on line 1-	(d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none,  (d) Contributions to employee benefit	0 enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902 Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE 0 TRUSTEE 0 employees (other than the content of the content	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	0 enter` (e)	`NONE."	owances 0
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none,  (d) Contributions to employee benefit	0 enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	0 enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	0 enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	0 enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	0 enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	0 enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	0 enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	enter` (e)	`NONE."	owances  0  0  e account,
LARR 23 D EL P NORM 23 D EL P	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position TRUSTEE  TRUSTEE  TRUSTEE  (b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	enter` (e)	`NONE."	owances  0  0  e account,
LARR 23	(a) Name and address  YR PRICE DIAMOND CREST ASO,TX 79902 MA PRICE DIAMOND CREST ASO,TX 79902  Compensation of five highest-paid	(b) Title, and average hours per week devoted to position  TRUSTEE  TRUSTEE  (b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)  0  those included on line 1- age (c) Compensation	-see instructions). If none,  (d) Contributions to employee benefit plans and deferred compensation  -see instructions). If none, employee benefit plans and deferred	enter` (e)	`NONE."	owances  0  0  e account,

Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Higl	hly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NONE	".
Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".  Name and address of each person paid more than \$50,000  (b) Type of service  I number of others receiving over \$50,000 for professional services.		(c) Compensation
Total number of others receiving over \$50,000 for professional services.		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	(coo instructions)	
Describe the two largest program-related investments made by the foundation during		A mount
1 NONE		
2		
All other program-related investments See page 24 of the instructions  3	S	

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	82,355
b	A verage of monthly cash balances	1b	2,636
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c)	1d	84,991
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	84,991
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	1,275
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	83,716
6	Minimum investment return. Enter 5% of line 5	6	4,186
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations foreign organizations check here ►  and do not complete this part.)	atıng	foundations and
1	Minimum investment return from Part X, line 6	1	4,186
2a	Tax on investment income for 2012 from Part VI, line 5   2a   38		
ь	Income tax for 2012 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	38
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,148
4	Recoveries of amounts treated as qualifying distributions	4	•
5	Add lines 3 and 4	5	4,148
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	4,148
Par	t XII Qualifying Distributions (see instructions)		,
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	107,323
ь	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	<u> </u>	
_	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)	За	0
a			0
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	107,323
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	
_	income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	107,323

the section 4940(e) reduction of tax in those years

	oliuisti ibuteu filcollie (see ilisti	uctions)			
		(a) Corpus	(b) Years prior to 2011	(c) 2011	<b>(d)</b> 2012
1	Distributable amount for 2012 from Part XI, line 7	001745	rears prior to Lot 1	2011	4,148
	Undistributed income, if any, as of the end of 2012				-,
	Enter amount for 2011 only			0	
	Total for prior years 2010, 2009, 2008		0		
3	Excess distributions carryover, if any, to 2012 From 2007 104,772				
	From 2008				
	From 2009				
	From 2010				
	From 2011 69,867				
	Total of lines 3a through e	415,530			
	Qualifying distributions for 2012 from Part	,			
7	XII, line 4 <b>&gt;</b> \$ 107,323				
а	Applied to 2011, but not more than line 2a			0	
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2012 distributable amount				4,148
	Remaining amount distributed out of corpus	103,175			
	Excess distributions carryover applied to 2012				
	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	518,705			
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				
d	Subtract line 6c from line 6b Taxable amount —see instructions		0		
_	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				
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	404 773			
	applied on line 5 or line 7 (see instructions)	104,772			
9	Excess distributions carryover to 2013.	440.000			
	Subtract lines 7 and 8 from line 6a	413,933			
	Analysis of line 9				
	Excess from 2008 108,954				
	Excess from 2009				
	Excess from 2010				
е	Excess from 2012 103,175				

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines

factors

See Additional Data Table	Form 990-PF (2012)	matica (continued)			Page <b>11</b>
Recipient Name and address (home or business)  a Paid during the year See Additional Data Table  If recipient is an individual, show any relationship to any foundation manager or substantial contributor  a Purpose of grant or contribution  Foundation recipient  Foundation  Foundation recipient  Foundation r	3 Grants and Contributions Paid	nation (continued) I During the Year or App	roved for F	uture Payment	_
Total	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
See Additional Data Table  Total		or substantial contributor	recipient		
	a Paid during the year See Additional Data Table	or substantial contributor	recipient		
b Approved for future payment	Total				107,323
	<b>b</b> Approved for future payment				
Tabal h. Oh					

	PF (2012) I-A Analysis of Income-Produc	cina Activitie	<u> </u>			Page <b>1</b> 2
	s amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
-	n service revenue	(a) Business code	(b)	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
						·
c						
	and contracts from government agencies	;				
2 Membe	ership dues and assessments					
	on savings and temporary cash investments  nds and interest from securities					1,988
	ntal income or (loss) from real estate					2,550
<b>a</b> Debt	-financed property					
	debt-financed property					
	tal income or (loss) from personal property Investment income					
	(loss) from sales of assets other than inventory					182
	come or (loss) from special events					
	profit or (loss) from sales of inventory. revenue aCONTRIBUTIONS RECEIVED	•				113,250
						·
e	al Add columns (b), (d), and (e).					115,424
	Add line 12, columns (b), (d), and (e)			:	13	115,424
	worksheet in line 13 instructions to verify		1: 1			
	Explain below how each activity for wh					tantly to
Line No. ▼	the accomplishment of the foundation instructions )	's exempt purpos	ses (other than by	providing funds for	r such purposes)	
11	CONTRIBUTIONS RECEIVED FROM R					
3 4	THE ENTITY RECEIVED DIVIDENDS					THE EVEMBT
	PURPOSE OF MAKIN CONTRIBUTION FUNDS TEMPORARILY AND EARN A R	IS TO 501(C)(3	) CHARITIES IS	FACILITATED BY	HAVING A PLAC	ETO INVEST
8	THE ENTITY MAINTAINS A BROKERA PURPOSE OF MAKING CONTRIBUTIC FUNDS TEMPORARILY AND EARN A R FOUNDATION INCURRS GAIN AND O	NS TO 501(C)( RETRUN FOR FU	3) CHARITIES IS TURE DONATIO	S FACILITATED BY	Y HAVING A PLA IANCE OF THE F	ACE TO INVEST FOUNDATION THE
·						
-						
						_

Form 990-PF	(2012)									Pa	ge <b>13</b>
Part XVI	Information Re Noncharitable					actions	and Rela	ntionships With			
1 Did the org	anization directly or indirectly	engage in a	any of th	he following	with any other orga	anızatıon de	escribed in secti	on		Yes	No
501(c) of t	he Code (other than section 5	501(c)(3) or	ganızatı	ons) or in se	ection 527, relating	to political	organizations?				
<b>a</b> Transfers	from the reporting foun	dation to a	a nonc	harıtable	exempt organiza	ation of					
<b>(1)</b> Cas	h								1a(1)		No
<b>(2)</b> Othe	erassets								1a(2)		No
<b>b</b> Other tra	nsactions										
<b>(1)</b> Sale	s of assets to a nonchar	ıtable exe	mpt o	rganızatıo	n				1b(1)		No
<b>(2)</b> Purc	hases of assets from a r	noncharita	able ex	empt orga	anızatıon				. 1b(2)		No
<b>(3)</b> Rent	al of facilities, equipmer	nt, or othe	rasse	ts					1b(3)		No
<b>(4)</b> Rein	nbursement arrangemen	ts							1b(4)		No
	ns or loan guarantees.								1b(5)		No
(6) Perfo	rmance of services or m	embershij	p or fui	ndraising	solicitations.				1b(6)		No
<b>c</b> Sharing o	of facilities, equipment, n	naılıng lıst	ts, oth	er assets,	, or paid employ	ees			1c		No
of the go	swer to any of the above ods, other assets, or ser insaction or sharing arra  (b) Amount involved	vices give ingement,	en by t show	he reporti in column	ng foundation I	f the foun f the good	dation recei ls, other ass	ved less than fair mark	et value ed	9	nts
(a) Line no	(D) ranount involved	(c) manne	01 1101101	idillable ext	Simple organization	(4)	cochpaint of the	morero, cranoaccieno, ana or	aring arra	geer	
											•
20 In the for	Indation directly or indir		- <b>-</b>					n:==#:==			
describe	d in section 501(c) of the complete the following s  (a) Name of organization	e Code (o chedule		nan sectio		ın sectioi				es F	, No
the	der penalties of perjury, best of my knowledge a ed on all information of v	nd belief, i which prep	ıt ıs trı	ue, correc	t, and complete	Declarat		rer (other than taxpaye		s this reti	IS urn
			Π			<del></del>	ate		TIN	<u> </u>	_
	Print/Type preparer's maurinemcoxpccon	/Type preparer's name Preparer's S		arer's Sıg aurınemco	gnature			Check if self- employed ▶			
Paid	aariiiciiicoxpecon	· 									
Preparer			MAUR	RINE COX	PC			Firm's EIN ►			
Use Only			124 W CASTELLANO SUITE 202				_				
	Firm's address ▶		ELPA	SO,TX 7	79912			Phone no (915)7	72-366	0	

### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual,	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient		
a Paid during the year				
EL PASO FOR JESUS PO BOX 221212 EL PASO,TX 79913	CONDUIT FOR 501 (C) (3) CHARITIES	501(C)(3) CHARITY	PROMOTION OF THE CHRISTIAN RELIGION	28,500
LUIS PALAU EVANGELIST PO BOX 1173 PORTLAND,OR 97207	CONDUIT FOR 501 (C) (3) CHARITIES	501(C)(3) CHARITY	PROMOTION OF THE CHRISTIAN RELIGION	10,500
CORONADO BAPTIST CHURCH 501 THUNDERBIRD DRIVE EL PASO,TX 79912	CONDUIT FOR 501 (C) (3) CHARITIES	501(C)(3) CHARITY	CONTRIBUTE TO CHRISTIAN CHURCH	16,250
CHURCH OF ST CLEMENT 810 N CAMPBELL EL PASO,TX 79902	CONBDUIT FOR 501 (c) (3) CHARITIES	501 (C) (3) CHARITY	CHURCH FOR PROMOTING CHRISTIAN VALUES	32,311
USC PARENTS FUND 1150 S OLIVE ST 25TH FLOOR LOS ANGELES, CA 900890000	CONDUIT FOR 501 (C) (3) CHARITY	501 (C) (3) CHARITY	UNIVERSITY EDUCATION SUPPORT	375
JUNIOR LEAGUE OF EL PASO 520 THUNDERBIRD DR EL PASO,TX 79912	CONDUIT FOR 501 (C) (3) CHARITY	501 (C)(3)	DEVELOPING THE POTENTIAL OF WOMEN	84
YWCA OF EL PASO 201 E MAIN SUITE 400 EL PASO,TX 79901	CONDUIT FOR 501 (C) (3) CHARITY	501 (C)(3)	EMPOWERING WOMEN, ELIMINATING RACISM	100
CAMPUS CRUSADE FOR CHRIST PO BOX 628222 ORLANDO,FL 328628222	CONDUIT FOR 501 (C) (3) CHARITY	501 (C) (3) CHARITY	PROMOTE CHRISTIAN VALUES	500
REALITY LA 940 N ORAGNE DR SUITE 150 HOLLYWOOD,CA 90038	CONDUIT FOR 501 (C) (3) CHARITY	501 (C) (3) CHARITY	CHURCH PROMOTION	3,000
CORONADO HIGH SCHOOL 100 CHAMPIONS PLACE EL PASO,TX 79912	CONDUIT FOR 501(C) (3) CHARITY	501(C)(3)	SUPPORT HIGH SCHOOL EDUCATION	50
KAPPA ALPHA THETA FOUNDATION 8740 FOUNDERS ROAD INDIANAPOLIS,IN 46268	CONDUIT FOR 501(C) (63) CHARITE	501(C)(3)	ADVOCATE FOR CHILDREN IN NEED	229
ST CLEMENT SCHOOL 801 N CAMPBELL EL PASO,TX 79902	CONDUIT DOE 501(C) (3) CHARITY	501(C)(3)	PROMOTE CHRISTIAN EDUCATION	100
KINGS KIDS 936 W SUNSET RD EL PASO,TX 79922	CONDUIT FOR 501(C) (3) CHARITY	501(C)(3)	CHRISTIAN MISSIONS	75
INTERNATIONAL HOUSE OF PRAYER 3535 E RED BRIDGE RD KANSAS CITY,MO 64137	CONDUIT FOR 501(C) (3) CHAIRTY	501(C)(3)	MISSION-BASEDE SCHOOL AND MINISTRY	75
HUMANE SOCIETY OF EL PASO INC 4991 FRED WILSON AVE EL PASO,TX 79906	CONDUIT FOR 501(C) (3) CHARITY	501(C)(3)	PROMOTE HUMANE TREATMENT OF ANIMALS	100

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
SUN BOWL ASSOCIATION 4150 PINNACLE STE 100 EL PASO,TX 79902	CONDUIT FOR 501(C)(3) CHARITY	501(C)(3)	PROMIOTE UNIVERSITY SPORTS	1,000
ROTARY CLUB OF EL PASO PO BOX 13164 EL PASO,TX 79913	CONDUIT FOR 501(C)(3) CHARITY	501(C)(3)	SUPPORT CIVIC PROJECTS IN COMMUNITY	450
NATIONAL RIGHT TO WORK 8001 BRADDOCK ROAD SPRINGFIELD, VA 22160	CONDUIT FOR 501(C)(3) CHARITY	501(C)(3)	PROMOTE INDIVIDUAL LIBERTY OF AMERICA'S WORKERS	100
CIUDAD NUEVA 810 N CAMPBELL EL PASO,TX 79902	CONDUIT FOR 501(C0(3) CHARITY	501 (C) (3) CHARITY	ADVANCING THE RENEWAL AND DEVELOPMENT OF THE INNER CITY OF EL PASO	13,524
Total				107,323

	Schedule of Contributors		OMB No 1545-00
r 990-PF) epartment of the Treasury ernal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF.		2012
I <b>ame of the organizatio</b> ARRY & NORMA PRICE FAMI		Employer id	dentification number
HARITABLE FOUNDATION		74-28198	31
rganization type (che	eck one)		
ilers of:	Section:		
orm 990 or 990-EZ	501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private for	oundation	
	527 political organization		
orm 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private found	dation	
	501(c)(3) taxable private foundation		
heck if your organization	on is covered by the <b>General Rule</b> or a <b>Special Rule</b>		
	on is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  1(c)(7), (8), or (10) organization can check boxes for both the General Rule	and a Special Rule S	See instructions
ote. Only a section 50° eneral Rule  For an organizati			
ote. Only a section 50° eneral Rule  For an organizati	1(c)(7), (8), or (10) organization can check boxes for both the General Rule		
eneral Rule  For an organizati property) from all pecial Rules  For a section 50 under sections 5	1(c)(7), (8), or (10) organization can check boxes for both the General Rule	or more (in money or est of the regulations g the year, a contribut	tion of the
ote. Only a section 50° eneral Rule  For an organization property) from all pecial Rules  For a section 50° under sections 50° greater of (1) \$5°  For a section 50° during the year, for	1(c)(7), (8), or (10) organization can check boxes for both the General Rule ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 ny one contributor. Complete Parts I and II.  1(c)(3) organization filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% support to 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during	o or more (in money or est of the regulations g the year, a contribut 90-EZ, line 1 Complet m any one contributor aritable,	tion of the e Parts I and II

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)

Name of organization LARRY & NORMA PRICE FAMILY CHARITABLE FOUNDATION

Employer identification number

74-2819831

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_	LARRY NORMA PRICE  124 W CASTELLANO - SUITE 202  EL PASO,TX 79912	\$51,000	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
_2	PRICE CHARTER LIMITED PARTNERSHIP  124 W CASTELLANO - SUITE 202  EL PASO,TX 79912	\$54,000	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
_3_	REDD ROAD COMPOUND LTD  124 W CASTELLANO - SUITE 202  EL PASO,TX 79912	\$8,250	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 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 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 Noncash  (Complete Part II if there is a noncash contribution)

Name of organization LARRY & NORMA PRICE FAMILY CHARITABLE FOUNDATION

**Employer identification number** 

74-2819831

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization LARRY & NORMA PRICE FAMILY CHARITABLE FOUNDATION

Part III

Employer identification number

74-2819831

(a) No. from Part I	(b) Purpose of gift	(c	) Use of gift	(d) Description of how gift is held
		(e)	Transfer of gift	
	Transferee's name, address, a			hip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c	Use of gift	(d) Description of how gift is held
		(e)	Transfer of gift	
	Transferee's name, address, a			hip of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c	l ) Use of gift	(d) Description of how gift is held
		(0)	Transfer of gift	
	Transferee's name, address, a			hip of transferor to transferee
				-
(a) No. from Part I	(b) Purpose of gift	(c	) Use of gift	(d) Description of how gift is held
<u> </u>				
	Transferee's name, address, a		Transfer of gift Relations	hip of transferor to transferee

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491134020783
TV 2042 All Ouls - December		

# TY 2012 All Other Program Related Investments Schedule

Name: LARRY & NORMA PRICE FAMILY

CHARITABLE FOUNDATION

Category	Amount
NONE	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93491134020783

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

# **TY 2012 Depreciation Schedule**

Name: LARRY & NORMA PRICE FAMILY

CHARITABLE FOUNDATION

# **TY 2012 Investments Corporate Stock Schedule**

Name: LARRY & NORMA PRICE FAMILY

CHARITABLE FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
NUVEEN DIVERSIFIED	20,327	16,820
SENTINEL SHORT MATURITY GOVT		
ALPINE ULTRA SHORT TAX OPT	66,967	66,909

# TY 2012 Land, Etc. Schedule

Name: LARRY & NORMA PRICE FAMILY

CHARITABLE FOUNDATION

# **TY 2012 Other Expenses Schedule**

Name: LARRY & NORMA PRICE FAMILY

CHARITABLE FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REQUIRED NEWSPAPER DISCLOSURE	45	45		
OTHER	100	100		

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491134020783

### **TY 2012 Substantial Contributors Schedule**

Name: LARRY & NORMA PRICE FAMILY

CHARITABLE FOUNDATION

Name	Address
PRICE CHARTER LIMITED PARTNERSHIP	124 W CASTELLANO - SUITE 202 EL PASO,TX 79912
REDD ROAD COMPOUND LTD	124 W CASTELLANO - SUITE 202 EL PASO,TX 79912

### **TY 2012 Taxes Schedule**

Name: LARRY & NORMA PRICE FAMILY

CHARITABLE FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX ON INVESTMENT INCO	150	150		