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

Form **990-EZ**

Department of the Treasury
Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)
All other organizations with gross receipts less than $200,000 and total assets less than $500,000 at the end of the year may use this form

▶ *The organization may have to use a copy of this return to satisfy state reporting requirements.*

OMB No 1545-1150

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning , and ending

B Check if applicable
- [X] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization
FELIX H & MADGE B WATSON TRUST FBO HOPE CEMETERY FOUNDATION

Number and street (or P O box, if mail is not delivered to street address) | Room/suite
101N Independence Mall E MACY1372-062

City or town | state or country | ZIP + 4
Philadelphia | PA | 19106-2112

D Employer identification number
74-6503470

E Telephone number
888-730-4933

F Group Exemption Number ▶

G Accounting Method [X] Cash [ ] Accrual Other (specify) ▶

I **Website:** ▶ N/A

J **Tax-exempt status** (check only one) — [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

H Check ▶ [X] if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check ▶ [ ] if the organization is not a section 509(a)(3) supporting organization or a section 527 organization **and** its gross receipts are normally **not** more than $50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions) But if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts If gross receipts are $200,000 or more, or if total assets (Part II, line 25, column (B) below) are $500,000 or more, file Form 990 instead of Form 990-EZ ▶ $ 144,244

Part I **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I . . . . . [X]

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	
	2	Program service revenue including government fees and contracts		2	
	3	Membership dues and assessments		3	
	4	Investment income		4	3,953
	5a	Gross amount from sale of assets other than inventory	5a 140,291		
	b	Less cost or other basis and sales expenses	5b 130,893		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	9,398
	6	Gaming and fundraising events			
	a	Gross income from gaming (attach Schedule G if greater than $15,000)	6a		
	b	Gross income from fundraising events (not including $ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000)	6b		
	c	Less direct expenses from gaming and fundraising events	6c		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		6d	0
	7a	Gross sales of inventory, less returns and allowances	7a		
	b	Less cost of goods sold	7b		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	0
	8	Other revenue (describe in Schedule O)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶		9	13,351
Expenses	10	Grants and similar amounts paid (list in Schedule O)		10	2,594
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	
	13	Professional fees and other payments to independent contractors		13	
	14	Occupancy, rent, utilities, and maintenance		14	
	15	Printing, publications, postage, and shipping		15	
	16	Other expenses (describe in Schedule O)		16	3,210
	17	**Total expenses.** Add lines 10 through 16 ▶		17	5,804
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	7,547
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)		19	127,734
	20	Other changes in net assets or fund balances (explain in Schedule O)		20	-430
	21	Net assets or fund balances at end of year Combine lines 18 through 20 ▶		21	134,851

For Paperwork Reduction Act Notice, see the separate instructions. Form **990-EZ** (2012)

HTA

Part II Balance Sheets. (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II [X]

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	127,734	22	6,061
23	Land and buildings		23	
24	Other assets (describe in Schedule O)		24	128,790
25	**Total assets**	127,734	25	134,851
26	**Total liabilities** (describe in Schedule O)		26	
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	127,734	27	134,851

Part III Statement of Program Service Accomplishments (see the instructions for Part III)
Check if the organization used Schedule O to respond to any question in this Part III [X]

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

What is the organization's primary exempt purpose? SEE SCHEDULE O

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 FINANCIAL SUPPORT OF (DISTRIBUTIONS TO) HOPE CEMETERY FOUNDATION OF HENRIETTA, HENRIETTA, TEXAS

(Grants $ 2,594) If this amount includes foreign grants, check here ▶ [ ] **28a** 2,594

29

(Grants $) If this amount includes foreign grants, check here ▶ [ ] **29a**

30

(Grants $) If this amount includes foreign grants, check here ▶ [ ] **30a**

31 Other program services (describe in Schedule O)
(Grants $) If this amount includes foreign grants, check here ▶ [ ] **31a**

32 **Total program service expenses.** (add lines 28a through 31a) ▶ **32** 2,594

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)
Check if the organization used Schedule O to respond to any question in this Part IV [ ]

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
WELLS FARGO BANK, N A TRUSTEE	Hr/WK 4 00	1,685		
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			
	Hr/WK			

Part V **Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V . X

			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name Otherwise, explain the change on Schedule O (see instructions)	34		X
35 a	Did the organization have unrelated business gross income of $1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		X
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file **Form 1120-POL** for this year?	37b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations Enter			
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b			
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ , section 4912 ▶ _____ , section 4955 ▶ _____			
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		X
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ _____			
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed ▶ TX			
42 a	The organization's books are in care of ▶ WELLS FARGO BANK, N A Telephone no. ▶ (888) 730-4933 Located at ▶ 101N Independence Mall E MA City PHILADELPHIA ST PA ZIP + 4 ▶ 19106-2112			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**	42b		X
c	At any time during the calendar year, did the organization maintain an office outside the U S ? If "Yes," enter the name of the foreign country ▶ _____	42c		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		X
c	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	44d		
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
45 b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI . . . . . ☐

		Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
49 a	Did the organization make any transfers to an exempt non-charitable related organization?		X
b	If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than $100,000 of compensation from the organization If there is none, enter "None "

(a) Name and title of each employee paid more than $100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Name None Title	Hr/WK 00			
Name Title	Hr/WK 00			
Name Title	Hr/WK 00			
Name Title	Hr/WK 00			
Name Title	Hr/WK 00			

f Total number of other employees paid over $100,000 . . ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than $100,000 of compensation from the organization If there is none, enter "None "

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
Name None Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		
Name Str City ST ZIP		

d Total number of other independent contractors each receiving over $100,000 . ▶

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A . . ▶ ☒ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

▶ SVP Wells Fargo Bank N A Signature of officer	5/6/2013 Date
▶ JOHN SULENTIC Type or print name and title	SVP Wells Fargo Bank N A

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
		5/6/2013		
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no	

May the IRS discuss this return with the preparer shown above? See instructions . . . ▶ ☒ Yes ☐ No

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► **Attach to Form 990 or Form 990-EZ.** ► **See separate instructions.**

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
FELIX H & MADGE B. WATSON TRUST FBO HOPE CEMETERY FOUNDATION

Employer identification number
74-6503470

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III–Functionally integrated d ☒ Type III–Non-functionally integrated

e ☒ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	X
(ii)	A family member of a person described in (i) above?	11g(ii)	X
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	X

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A) HOPE CEMETERY FO	75-1679589	7	X		X		X		2,594
(B)									
(C)									
(D)									
(E)									
Total 1									2,594

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						0
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 **Total.** Add lines 1 through 3	0	0	0	0	0	0
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4.						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	0	0	0	0	0	0
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
11 **Total support.** Add lines 7 through 10						0

12 Gross receipts from related activities, etc (see instructions) . . 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . ▶ ☐

Section C. Computation of Public Support Percentage

14	Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	0.00%
15	Public support percentage from 2011 Schedule A, Part II, line 14	15	0 00%

16a **33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . ▶ ☐

b **33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . ▶ ☐

17a **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . ▶ ☐

b **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 **Total.** Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 **Public support** (Subtract line 7c from line 6)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
13 **Total support.** (Add lines 9, 10c, 11, and 12)	0	0	0	0	0	0

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	0 00%
16	Public support percentage from 2011 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	0 00%
18	Investment income percentage from **2011** Schedule A, Part III, line 17	18	0 00%

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additional information (See instructions).

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization	Employer identification number
FELIX H & MADGE B WATSON TRUST FBO HOPE CEMETERY FOUNDATION	74-6503470

Form 990-EZ, Part I, Line 10, Grants Paid Activity , Grantee HOPE CEMETERY FOUNDATION OF HENRIETTA PO BOX 37 HENRIETTA TX 76365, Cash Grant 2,594, Relationship NONE

Form 990-EZ, Part I, Line 16, Other Expenses: FOREIGN TAXES PAID 25

Form 990-EZ, Part I, Line 16, Other Expenses TRUSTEE FEES 1,685

Form 990-EZ, Part I, Line 16, Other Expenses TAX PREP FEES 1,500

Form 990-EZ, Part I, Line 20, Net Assets MUTUAL FUND & CTF INCOME ADDITIONS: 220

Form 990-EZ, Part I, Line 20, Net Assets COST BASIS ADJUSTMENT -191

Form 990-EZ, Part I, Line 20, Net Assets MUTUAL FUND & CTF INCOME SUBTRACTIONS -445

Form 990-EZ, Part I, Line 20, Net Assets PY RETURN OF CAPITAL ADJUSTMENT -14

Form 990-EZ, Part II, Line 24, Other Assets OTHER INVESTMENTS Beginning of year 0, End of year 128,790

Form 990-EZ Part III PRIMARY EXEMPT PURPOSE - TO PROVIDE FINANCIAL SUPPORT AND BENEFITS TO HOPE CEMETERY FOUNDATION OF HENRIETTA, TEXAS, A TAX-EXEMPT CHARITY

Form 990-EZ Part V INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS: THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY, OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT. THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY, OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.

Name of the organization	Employer identification number
FELIX H. & MADGE B WATSON TRUST FBO HOPE CEMETERY FOUNDATION	74-6503470

					Cost	FMV
Cash	11376200	74-6503470			324 75	324.75
Invest - Other	11376200	74-6503470	04314H204	ARTISAN INTERNATIONAL FUND #661	3,698 85	3,973 55
Invest - Other	11376200	74-6503470	256210105	DODGE & COX INCOME FD COM #147	11,884 62	11,927 65
Invest - Other	11376200	74-6503470	411511504	HARBOR CAPITAL APRCTION-INST #2012	6,619 44	6,699.45
Invest - Other	11376200	74-6503470	589509108	MERGER FD SH BEN INT #260	2,658 37	2,675 27
Invest - Other	11376200	74-6503470	693390700	PIMCO TOTAL RET FD-INST #35	22,115.20	21,468 85
Invest - Other	11376200	74-6503470	693390882	PIMCO FOREIGN BD FD USD H-INST #103	5,664 40	5,754.91
Invest - Other	11376200	74-6503470	77957P105	T ROWE PRICE SHORT TERM BD FD #55	2,929 70	2,929 70
Invest - Other	11376200	74-6503470	04314H600	ARTISAN MID CAP FUND-INS #1333	3,489 56	3,353 77
Invest - Other	11376200	74-6503470	464287648	ISHARES RUSSELL 2000 GROWTH	2,957 63	3,049 92
Invest - Other	11376200	74-6503470	464287200	ISHARES CORE S & P 500 ETF	3,810 30	3,721.64
Invest - Other	11376200	74-6503470	51855Q655	LAUDUS MONDRIAN INTL FI-INST #2940	6,055 35	5,957.60
Invest - Other	11376200	74-6503470	256206103	DODGE & COX INT'L STOCK FD #1048	3,727 20	4,009 65
Invest - Other	11376200	74-6503470	552983694	MFS VALUE FUND-CLASS I #893	5,000 00	5,045 59
Invest - Other	11376200	74-6503470	261980494	DREYFUS EMG MKT DEBT LOC C-I #6083	6,656 76	6,854 85
Invest - Other	11376200	74-6503470	262028855	DRIEHAUS ACTIVE INCOME FUND	2,887 93	2,767 77
Invest - Other	11376200	74-6503470	339128100	JP MORGAN MID CAP VALUE-I #758	2,445 36	2,824.41
Invest - Other	11376200	74-6503470	448108100	HUSSMAN STRATEGIC GROWTH FUND #601	3,772 20	3,146 71
Invest - Other	11376200	74-6503470	922908553	VANGUARD REIT VIPER	3,068 68	4,211 20
Invest - Other	11376200	74-6503470	922042858	VANGUARD MSCI EMERGING MARKETS ETF	2,949 84	3,206 16
Invest - Other	11376200	74-6503470	683974505	OPPENHEIMER DEVELOPING MKT-Y #788	2,960 60	3,113 88
Invest - Other	11376200	74-6503470	78463X863	SPDR DJ WILSHIRE INTERNATIONAL REAL	3,261 12	4,135.00
Invest - Other	11376200	74-6503470	76628T645	RIDGEWORTH SEIX HY BD-I #5855	8,000 00	8,260 16
Invest - Other	11376200	74-6503470	367829884	GATEWAY FUND - Y #1986	3,400 00	3,339 63
Invest - Other	11376200	74-6503470	22544R305	CREDIT SUISSE COMM RET ST-I #2156	5,777 10	5,279 11
Invest - Other	11376200	74-6503470	487300808	KEELEY SMALL CAP VAL FD CL I #2251	3,000.00	3,308 97
Savings & Temp Inv	11376200	74-6503470	VP0528308	FEDERATED TREAS OBL FD 68	4,535.10	4,535 10
Savings & Temp Inv	11376200	74-6503470	VP0528308	FEDERATED TREAS OBL FD 68	1,201 63	1,201 63
				Total Cash & Equivalents	6,061 48	6,061.48
				Total Other Investments	128,790.21	131,015 40
				Total	134,851 69	137,076 88

Part I, Line 5 (990-EZ) - Gain/Loss From Sale Of Assets Other Than Inventory

	Gross sales	Cost, other basis and expenses
Total Public Securities	0	0
Total Non-Public Securities	0	0
Total Other sales	140,291	130,893

	Description	Check if gain/loss is from sale of public securities	Check if gain/loss is from sale of non public securities	Check if purchaser is a business	Purchaser	Date acquired	Acquisition method	Date sold	Gross sales price	Cost or other basis (Enter one field only) Cost	Donated value	Expense of sale and cost of improvements	Depreciation	Description of Basis Method
1	PIMCO FOREIGN BD FD USD H-					8/11/2011		11/19/2012	4,533	4,237				
2	T ROWE PRICE BLUE CHIP GRV					2/13/2012		8/24/2012	3,633	3,478				
3	T ROWE PRICE SHORT TERM B					5/1/2012		11/19/2012	13,570	13,570				
4	SPDR DJ WILSHIRE INTERNATI					4/27/2011		11/19/2012	121	122				
5	SPDR DJ WILSHIRE INTERNATI					4/28/2011		11/19/2012	80	82				
6	SPDR DJ WILSHIRE INTERNATI					4/26/2011		11/19/2012	80	81				
7	TCW SMALL CAP GROWTH FUN					5/1/2012		11/19/2012	1,099	1,269				
8	TCW SMALL CAP GROWTH FUN					5/1/2012		12/19/2012	1,574	1,731				
9	TEMPLETON FOREIGN FD - AD					2/13/2012		5/1/2012	2,702	2,767				
10	VANGUARD REIT VIPER					2/4/2009		2/9/2012	375	180				
11	WF ADV INDEX FUND-ADMIN 8					7/23/2010		2/9/2012	183	162				
12	WF ADV INDEX FUND-ADMIN 8					2/6/2009		10/4/2012	2,347	1,478				
13	WF ADV INDEX FUND-ADMIN 8					7/23/2010		10/4/2012	50	41				
14	WF ADV C & B LARGE CAP VAL					2/4/2011		2/9/2012	186	186				
15	WF ADV C & B LARGE CAP VAL					2/6/2009		8/24/2012	3,460	2,177				
16	WF ADV C & B LARGE CAP VAL					2/4/2011		8/24/2012	118	114				
17	WELLS FARGO ADV TOT RT BD					5/3/2010		5/1/2012	1,029	1,018				
18	WELLS FARGO ADV TOT RT BD					7/23/2010		5/1/2012	117	115				
19	WELLS FARGO ADV TOT RT BD					2/13/2012		5/1/2012	2,082	2,069				
20	WELLS FARGO ADV TOT RT BD					2/4/2011		5/1/2012	1,772	1,678				
21	WELLS FARGO ADV TOT RT BD					12/22/2008		8/24/2012	5,296	4,769				
22	WELLS FARGO ADV TOT RT BD					2/4/2011		8/24/2012	6,158	5,722				
23	WELLS FARGO ADV INTL BOND					11/23/2010		5/1/2012	1,983	2,021				
24	WELLS FARGO ADV INTL BOND					2/4/2011		5/1/2012	504	500				
25	WELLS FARGO ADV INTL BOND					2/13/2012		5/1/2012	372	372				
26	WELLS FARGO ADV INTL BOND					7/23/2010		5/1/2012	141	137				
27	WELLS FARGO ADV INTL BOND					7/23/2010		8/24/2012	6,864	6,691				
28	WF ADV CAPITAL GROWTH FUI					2/6/2009		2/9/2012	3,616	2,223				
29	WF ADV CAPITAL GROWTH FUI					8/11/2011		2/9/2012	320	278				
30	WELLS FARGO ADV DIV INTL F					2/6/2009		2/9/2012	4,151	2,913				
31	WELLS FARGO ADV DIV INTL F					5/3/2010		2/9/2012	716	680				
32	WELLS FARGO ADV DIV INTL F					7/23/2009		2/9/2012	387	326				
33	WELLS FARGO ADV DIV INTL F					11/23/2010		2/9/2012	30	30				
34	WELLS FARGO ADV DIV INTL F					8/11/2011		2/9/2012	406	387				
35	WELLS FARGO ADV HI INC-INS					2/21/2008		2/9/2012	218	210				
36	WELLS FARGO ADV HI INC-INS					2/21/2008		8/24/2012	5,801	5,460				
37	WELLS FARGO ADV HI INC-INS					8/1/2008		8/24/2012	557	510				
38	WELLS FARGO ADV HI INC-INS					10/14/2008		8/24/2012	2,132	1,674				
39	WELLS FARGO ADV HI INC-INS					8/11/2011		8/24/2012	535	496				
40	WELLS FARGO ADV HI INC-INS					10/21/2011		8/24/2012	877	827				
41	WF ADV GOVT SECURITIES- I					2/13/2012		5/1/2012	1,985	1,976				
42	WF ADV GOVT SECURITIES- I					2/4/2011		5/1/2012	3,015	2,871				
43	WF ADV GOVT SECURITIES- I					6/13/2007		10/4/2012	142	127				
44	WF ADV GOVT SECURITIES- I					4/11/2007		10/4/2012	1,342	1,218				
45	WF ADV GOVT SECURITIES- I					10/20/2006		10/4/2012	5,263	4,773				
46	WF ADV GOVT SECURITIES- I					2/4/2011		10/4/2012	4,611	4,329				
47	WF ADV SHORT-TERM BOND F					8/11/2011		2/9/2012	833	836				
48	WF ADV SHORT-TERM BOND F					4/28/2011		2/9/2012	2,606	2,615				
49	WF ADV SHORT-TERM BOND F					5/3/2010		5/1/2012	25,172	24,886				
50	WF ADV SHORT-TERM BOND F					4/28/2011		5/1/2012	2,323	2,323				

Part I, Line 5 (990-EZ) - Gain/Loss From Sale Of Assets Other Than Inventory

	Gross sales	Cost, other basis and expenses
Total Public Securities	0	0
Total Non-Public Securities	0	0
Total Other sales	140,291	130,893

	Description	Check if gain/loss is from sale of public securities	Check if gain/loss is from sale of non public securities	Check if purchaser is a business	Purchaser	Date acquired	Acquisition method	Date sold	Gross sales price	Cost or other basis (Enter one field only) Cost	Donated value	Expense of sale and cost of improvements	Depreciation	Description of Basis Method
51	INVESCO INTL GROWTH-Y 851					2/13/2012		5/1/2012	2,853	2,780				
52	ARTISAN INTERNATIONAL FUN					5/1/2012		11/19/2012	817	801				
53	DODGE & COX INT'L STOCK FD					5/1/2012		11/19/2012	786	773				
54	DODGE & COX INCOME FD CO					8/24/2012		11/19/2012	4,151	4,115				
55	DRIEHAUS ACTIVE INCOME FU					4/28/2011		5/1/2012	1,400	1,494				
56	JP MORGAN MID CAP VALUE-I					5/3/2010		2/9/2012	229	199				
57	GOLDMAN SACHS GRTH OPP F					5/3/2010		2/9/2012	173	157				
58	GOLDMAN SACHS GRTH OPP F					5/3/2010		4/10/2012	792	719				
59	GOLDMAN SACHS GRTH OPP F					8/11/2011		4/10/2012	604	533				
60	HUSSMAN STRATEGIC GROWT					7/23/2009		11/19/2012	491	587				
61	LT CAPITAL GAIN DIVIDENDS								528					