

## 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



Page	10
raye	

Fart	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A question 9	\			
	If the foundation has received a ruling	<u> </u>			<i>!</i>			
	foundation, and the ruling is effective for							
_	Check box to indicate whether the four				ction [] 4042(i)	(3) or 4942(j)(5)		
b 2a	Enter the lesser of the adjusted net	Tax year	Toperating tourida	Prior 3 years	-cilon 43-42(j)	1 43 12 (J)(0)		
28	income from Part I or the minimum	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) Total		
	investment return from Part X for	(4) 2012	(0) 2011	(6) 2010	(4) 2009			
	each year listed							
D	85% of line 2a					· · · · · · · · · · · · · · · · · · ·		
С	Qualifying distributions from Part XII, line 4 for each year listed	:	1					
đ	Amounts included in line 2c not used directly for active conduct of exempt activities							
e	Qualifying distributions made directly							
	for active conduct of exempt activities.		1					
	Subtract line 2d from line 2c			}		<u> </u>		
3	Complete 3a, b, or c for the alternative test relied upon:							
а	"Assets" alternative test-enter:							
_	(1) Value of all assets							
	(2) Value of assets qualifying under		<del></del>					
	section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test-enter 2/3							
	of minimum investment return shown in Part X, line 6 for each year listed							
С	"Support" alternative test—enter:							
	(1) Total support other than gross							
	investment income (interest,					1		
	dividends, rents, payments on securities loans (section	•				1		
	512(a)(5)), or royalties)			İ				
	(2) Support from general public							
	and 5 or more exempt		ŧ		ļ			
	organizations as provided in section 4942(j)(3)(B)(iii)							
	(3) Largest amount of support from							
	an exempt organization							
	(4) Gross investment income							
Part	XV Supplementary Information	on (Complete ti	his part only if	the foundation h	ad \$5,000 or m	ore in assets at		
	any time during the year-	-see instructio	ns.)					
1	Information Regarding Foundation							
а	List any managers of the foundation	who have contrib	uted more than 2	% of the total cont	ributions received	by the foundation		
	before the close of any tax year (but o	only if they have c	ontributed more t	nan \$5,000). (See s	ection 507(a)(2).)			
Harrel	l Spears				<del></del>	<del></del>		
b	List any managers of the foundation					arge portion of the		
	ownership of a partnership or other e	ntity) of which the	toungation has a	t 10% or greater int	erest.			
	NONE							
2	information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:							
	Check here ▶ 🖪 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under							
	•		gins, grains, etc	. (See manacheris)	to marviadais or c	ngariizationo andoi		
	other conditions, complete items 2a, b, c, and d.							
а								
	トゥッピ The form in which applications should be submitted and information and materials they should include:							
b	ine form in which applications should	o de sudmitted ar	io information and	u materiais they sho	oura irrolude:			
	Move of Any submission deadlines:							
С	None							
d	Any restrictions or limitations on a	wards, such as t	oy geographical	areas, charitable fi	elds, kinds of in	stitutions, or other		
	factors:		_					
	10000							

Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Employer identification number Name of organization Trust 75-2445912 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (c)
Total contributions (a) (d) Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (b) (d) (a) (c) Νo. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (c) (d) (a) (b) Total contributions No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (c) (d) (a) (b) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 Person Payrol! Noncash (Complete Part II if there is a noncash contribution.) (d) (b) (c) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (d) (b) (c) (a) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person **Payroll** Noncash (Complete Part II if there is JUN 1 7 2013 a noncash contribution.)