

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



Department of the Treasury

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)

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

OMB No 1545-0047

A	For the	e 2012 calendar year, or tax year beginning and e	ending										
В	Check if applicab	C Name of organization		D Employer identification number									
Г	Addre	NINA JEAN OBEL CHARITABLE TRUST											
	Name chang			75-6478331									
	lnıtıal retum	, , , , , , , , , , , , , , , , , , , ,	Room/suite	E Telephone number									
	Termi	3317 DAKIMOOTII DRIVE		(972)960-7606									
Ļ	Amen	City, town, or post office, state, and ZIP code		G Gross receipts \$ 291,33	<u>6.</u>								
L	Application pendi	[FLANO, IX /30/3		H(a) Is this a group return									
		F Name and address of principal officer: HAL HABECKER		for affiliates?	No								
		SAME AS C ABOVE	1 1		No								
		empt status: X 501(c)(3)	or 527	,									
		te: N/A forganization: Corporation X Trust Association Other	L. Voor	H(c) Group exemption number ► of formation: 1998 M State of legal domicile:	ᅲᇴ								
	art i	organization: Corporation X Trust Association Other Summary	L Year	or formation, 1990 M State of legal domicile.	<u> </u>								
ш.			TPPORT	THE EFFORTS OF	—								
ဥ	Briefly describe the organization's mission or most significant activities: TO SUPPORT THE EFFORTS CHARITABLE CHRISTIAN ORGANIZATIONS THAT QUALIFY AS PUBLIC (Check this box In the organization discontinued its operations or disposed of more than 25% of its net assess Number of voting members of the governing body (Part VI, line 1a)												
'n	2	Check this box If the organization discontinued its operations or dispos		· · · · · · · · · · · · · · · · · · ·									
š		Number of voting members of the governing body (Part VI, line 1a)	,00 01 111010	3	3								
		Number of independent voting members of the governing body (Part VI, line 1b)		4	0								
es de		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	0								
<u> </u>	6	Total number of volunteers (estimate if necessary)		6	0								
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.								
_	b	Net unrelated business taxable income from Form 990 Toline 34		7b	0.								
		LAEULIVED	.1 🗀	Prior Year Current Year									
e		Contributions and grants (Part VIII, line 1h)		0.									
Revenue		Program service revenue (Part VIII, line 2g) IMAY 1 7 2013	5 ! _		$\frac{0}{2}$								
Ř		Investment income (Part VIII, column (A), lines 3,4, and 7d)	bl	62,557. 53,10									
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 11e	<u>:</u>	562. 1,34 63,119. 54,44									
		Total revenue - add lines 8 through 11 (must equal-Part VIII, column (A), line 12)	 	63,119. 54,44 68,350. 74,00									
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	"		$\frac{0}{0}$								
	14 15	Benefits paid to or for members (Part IX, column (A), line 4) Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	16,932. 17,19									
Expenses	162	Professional fundraising fees (Part IX, column (A), line 11e)			0.								
per	Г.б	Total fundraising expenses (Part IX, column (D), line 25)	o.		<u> </u>								
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		19,471. 19,62	9.								
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	104,753. 110,82									
		Revenue less expenses. Subtract line 18 from line 12		<41,634.> <56,38	<u>1.</u> ;								
50	3		Be	ginning of Current Year End of Year	_								
sets	20	Total assets (Part X, line 16)		1,469,332. 1,412,95	<u>1.</u>								
Net Assets or	21	Total liabilities (Part X, line 26)		0.	0.								
		Net assets or fund balances Subtract line 21 from line 20		1,469,332. 1,412,95	<u>1.</u>								
1	art II	Signature Block											
		ilties of perjury, I declare that I have examined this return, including accompanying schedules			IS								
true	e, correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of whi	ich preparer	nas any knowledge.									
~ :-		Signature of officer	_	Date	—								
Siç	_	HAL HABECKER, TRUSTEE 5	-ol	- 5-14-13									
He	re	Type or print name and title											
_		Print/Type preparer's name JON M. BRADLEY Figure 1 and 1 a		Date Check PTIN	_								
Pai	id	JON M. BRADLEY In My Mad	les	5/8/13 self-employed P01246313									
	parer	Firm's name WEAVER AND TIDWELL, LLP		Firm's EIN > 75-0786316	_								
Us	Only	Firm's address 12221 MERIT DRIVE, SUITE 1400	/		_								
_		DALLAS, TX 75251		Phone no. 972-490-1970									
Ma	y the I	RS discuss this return with the preparer shown above? (see instructions)	-	X Yes	No								
232	001 12-	0-12 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.	Form 990 (20	112)								

Form 990 (2012) NINA JEAN OB
Part IV Checklist of Required Schedules

		,	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	dunng the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			Х
_	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1 IE		
•	the organization's separate of consolidated infancial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	45		х
46	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
_		Form	990 (2012

Form 990 (2012) NINA JEAN OBEL CHA
Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			-
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			7.7
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			Х
~~	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	~		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			 -
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	!	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			7.7
	Part V, line 1	34		$\frac{x}{x}$
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
20	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b_	-	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	20		X
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	\dashv	
37	, , , , , , , , , , , , , , , , , , ,	27		X
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		
50	Note. All Form 990 filers are required to complete Schedule O	38	x	
	150-017 st. 1 o.m. 500 filoris are required to complete derication of		990 (2012\
		. 01111		

Form 990 (2012) NINA JEAN OBEL CHARITABLE TRUST
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			لـــا
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 1			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			'
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 2a 2			ĺ '
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	_		v
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
þ	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			x
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		┢┸
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		$\vdash \vdash$
оа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	oa		
	were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	- 0.0		\vdash
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		一
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	i	Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			l
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			1
a	Initiation fees and capital contributions included on Part VIII, line 12	•		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1
11	Section 501(c)(12) organizations. Enter:			1
a	Gross income from members or shareholders 11a			1
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them.) Section 4047(a)(4) and account about table trusted to the exaculation filing Form 900 in liquid Form 10412		-	-
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
13	• • • • • • • • • • • • • • • • • • • •			
	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		\vdash
a	Note. See the instructions for additional information the organization must report on Schedule O.	.oa		\vdash
ь	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			1
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			000	(2012)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

	Check if Schedule O contains a response to any question in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year										
	If there are material differences in voting rights among members of the governing body, or if the governing	1									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
ь	Enter the number of voting members included in line 1a, above, who are independent										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1									
	officer, director, trustee, or key employee?	2		x							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	┢▔									
	of officers, directors, or trustees, or key employees to a management company or other person?	3		х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
5 Did the organization become aware during the year of a significant diversion of the organization's assets?											
6	Did the organization have members or stockholders?	5 6		X							
7a		H									
	more members of the governing body?	7a		х							
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	۳									
-	persons other than the governing body?	 7Ь		x							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
	The governing body?	8a	х								
	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	<u> </u>									
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a		X							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	I 1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?										
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b									
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	ın Schedule O how this was done	12c									
13	Did the organization have a written whistleblower policy?	13		X							
14	Did the organization have a written document retention and destruction policy?	14		X							
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?										
а	The organization's CEO, Executive Director, or top management official	15a		X							
b	Other officers or key employees of the organization	15b		Х							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	_									
	taxable entity during the year?	16a		<u> </u>							
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►TX										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le								
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	icial								
	statements available to the public during the tax year.	_									
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion.									
	HAL HABECKER, TRUSTEE - (972)960-7606										
232008	3517 DARTMOUTH, PLANO, TX 75075										

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organiz										· · · · · · · · · · · · · · · · · · ·	
(A)	(B)			((Pos	C)			(D)	(E)	(F)	
Name and Title	Average	(do	Positio do not check mo			than	one	Reportable	Reportable	Estimated	
	hours per	box, unless person is both an officer and a director/trustee)				s bot	h an	compensation	compensation	amount of	
	week	_				rector/trustee)		from	from related	other	
	(list any	ecto.					İ	the	organizations	compensation	
	hours for	=	_ a.			ë		organization	(W·2/1099·MISC)	from the	
	related	Stee	l se		as	i i	1	(W-2/1099-MISC)		organization	
	organizations	1 =	ag t		loye	S 9				and related	
	below Inne)	Individual frustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ige.			organizations	
(1) HAL HABECKER	3.00	트	=	0	Ť	王富	<u></u>			· · · · · · · · · · · · · · · · · · ·	
TRUSTEE	3.55	X					ļ	17,196.	0.	0.	
			\vdash	_	-	_	-				
		1									
		-									
		-	\vdash				-				
					_						
								1			
	-	-	-		-	-					
					L						
		┨									
					┢						
		<u> </u>			<u> </u>	_					
		1									
		├	┞	-	├	-	_				
		$\lceil \rceil$									
		╁	_		 	-			<u> </u>		
					L						
		┨									
		厂									
		<u> </u>	_	ldash	_	_	_				
	-	1						}			
232007 12-10-12		٠							·	Form 990 (2012	

232007 12-10-12

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ghe	st (Compensated Employe	es (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	Average	(do		Pos heck		than	one	Reportable	Reportable	,	Es	stimate	ed
	hours per	box	, unle	ss pe	rson	ıs bot x/trus	h an		compensation		ar	nount	of
	week (list any	<u> </u>	T		1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	from	from related			other	
	hours for	Irecto		l	ĺ			the	organization			ipensa	
	related	D io	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	3C)		rom the janizat	
	organizations	truste	l trus		<u>a</u>	mpen	İ	(11-2/1005-14/100)			_	d relat	
	below	Individual trustee or director	Institutional trustee	ا ا	Key employee	est co oyee	늅					anızatı	
	line)	ş	Instit	Officer	Keye	Highest compensated employee	Form						
-													
						П							
		1.	ļ							1			
									-				
		1											
										-			
										\neg			
										\neg			
	-												
1b Sub-total						┢		17,196.		0.			0.
c Total from continuation sheets to Part VI	l, Section A					•		0.		0.			0.
d Total (add lines 1b and 1c)						•		17,196.		0.			0.
2 Total number of individuals (including but no	ot limited to th	ose	liste	d at	oove	e) wh	o re	eceived more than \$100	,000 of reportable	le		_	
compensation from the organization									•				0
												Yes	No
3 Did the organization list any former officer,	director, or tru	stee	e, ke	y en	nplo	yee,	orl	highest compensated ei	mployee on	[
line 1a? If "Yes," complete Schedule J for so	ıch ındıvıdual										3		X
4 For any individual listed on line 1a, is the su	m of reportabl	e cc	mpe	ensa	tion	and	oth	her compensation from t	the organization	ĺ			,
and related organizations greater than \$150	,000? If "Yes,	" co	mple	ete S	Sche	dule	Jf	for such individual			4		X
5 Did any person listed on line 1a receive or a	ccrue comper	nsati	on f	rom	any	unre	eiat	ed organization or indivi	dual for services		ĺ		
rendered to the organization? If "Yes," comp										.	5	·	X
Section B. Independent Contractors													
1 Complete this table for your five highest cor	npensated inc	lepe	ende	nt c	ontr	acto	rs t	hat received more than	\$100,000 of com	ipens:	ation f	rom	
the organization. Report compensation for t	he calendar ye	ear e	endır	ng w	/ith d	or wi	thir	n the organization's tax y	ear.				
(A)							Ī	(B)			(C	;)	
Name and business	address	NC	ONE	<u> </u>				Description of s	ervices	C	ompe	nsatior	1
									1				
							T						
· 							T	-					
							T						
2 Total number of independent contractors (in	ncluding but no	ot lır	nıted	d to	thos	se lis	ted	above) who received m	ore than				,
\$100,000 of compensation from the organiz	ation 🕨				0)							
											Form 9	990 (2	n12\

232008 12-10-12

			ـــ Check if Schedule O con	ntains a response	to any question i	n this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a					
P a		b	Membership dues	1b					
A, (С	Fundraising events	1c					
불리		d	Related organizations	1d					
i.E		е	Government grants (contribu	ıtıons) 1e					
isis		f	All other contributions, gifts, grain	nts, and					
F			similar amounts not included abo	ove 1f					
돌임		g	Noncash contributions included in line	es 1a-1f \$					
<u>8</u> 8		h	Total. Add lines 1a-1f						
					Business Code			_	
e e	2	а					<u> </u>	_	
ه ڲٙ		b							
SE		С							
e a		d							
Program Service Revenue		e							
<u> </u>		f	All other program service rev	renue				<u>-</u>	
\Box		g	Total. Add lines 2a-2f	<u> </u>	▶		·		
- 1	3		Investment income (including	g dividends, intere	est, and				
			other similar amounts)		▶	46,888.			46,888.
	4		Income from investment of ta	ax-exempt bond p	oroceeds >	1 244			
	5		Royalties		<u> </u>	1,344.			1,344.
				(i) Real	(II) Personal			,	
	6	а	Gross rents		<u> </u>				
- 1			Less ⁻ rental expenses		ļ				
- 1			Rental income or (loss)	<u> </u>	<u> </u>	-		-	
- 1			Net rental income or (loss)		.			<u> </u>	<u> </u>
1	7	а	Gross amount from sales of	(i) Securities	(ii) Other				
- {			assets other than inventory	243,104.					
		b	Less cost or other basis	226 002					*
- 1			and sales expenses	236,892.					
			Gain or (loss)	0,212.	L	6,212.	-		6,212.
			Net gain or (loss)		<u> </u>	0,212.			0,212.
e l	8	а	Gross income from fundraising	,					
Other Revenue			including \$	of					
æ			contributions reported on line	•					
þe		.	Part IV, line 18	a					
ŏ			Less: direct expenses Net income or (loss) from fun	b drawing events		• •		-	*
			Gross income from gaming a						
	3	a	Part IV, line 19						
		h	Less: direct expenses	a b					
			Net income or (loss) from gar	•			• •	70 7 7	* * * * * * *
			Gross sales of inventory, less	-					
		_	and allowances	a					
		h	Less: cost of goods sold	b					
			Net income or (loss) from sale	_					1
		<u> </u>	Miscellaneous Reveni		Business Code				
ľ	11	 а					~	THE CONTROL OF THE PARTY OF THE	
		b							
		c							
		d	All other revenue						
- 1		е	Total. Add lines 11a-11d						
	12		Total revenue. See instructions.			54,444.	0.	0.	54,444.
23200 12-10-	9 · 12								Form 990 (2012)

Part IX Statement of Functional Expenses

0001	Check if Schodulo O contains a respec			omplete column (A).	
	Check if Schedule O contains a respon	(A)		(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	74 000	74 000		
	organizations in the United States. See Part IV, line 21	74,000.	74,000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	17 106		17 106	
_	trustees, and key employees	17,196.	· ·	17,196.	
6	Compensation not included above, to disqualified	i			
	persons (as defined under section 4958(f)(1)) and	İ			
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management				
	Legal	1,950.		1,950.	
	Accounting	1,350.		1,930.	
ď	Lobbying				
e	Professional fundraising services. See Part IV, line 17	16,788.		16,788.	
Ţ	Investment management fees	10,700.		10,700.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
40	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16 17	Occupancy Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				<u> </u>
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				····
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)	•		ļ	
	amount, list line 24e expenses on Schedule 0.)				
а	OTHER EXPENSE	624.		624.	
b	FOREIGN TAXES ON DIVIDE	143.		143.	
С	BANK CHARGES	82.		82.	
d	ROYALTY ADMINISTRATIVE	42.		42.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	110,825.	74,000.	36,825.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined		l	l	
	educational campaign and fundraising solicitation.		l		
	Check here fit following SOP 98-2 (ASC 958-720)				

	t X	Check if Schedule O contains a response to any question in this Part X			
		Chicarin Coniccula Contains a response to any question in this rate of	(A) Beginning of year		(B) End of year
\Box	1	Cash - non-interest-bearing	15,885.	1	11,167.
	2	Savings and temporary cash investments	19,072.	2	36,884
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,484.	4	1,096
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
ı		Part II of Schedule L		5	
- 1	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary	,		
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	89 8
3	7	Notes and loans receivable, net		7	
23365	8	Inventories for sale or use		8	
`	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis. Complete Part VI of Schedule D 10a			
	ь	Less: accumulated depreciation 10b		10c	•
	11	Investments - publicly traded securities	1,117,729.	11	993,534.
	12	Investments - other securities. See Part IV, line 11	315,162.	12	370,270.
	13	Investments - program-related. See Part IV, line 11		13	•
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	<u></u>
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,469,332.	16	1,412,951
ヿ	17	Accounts payable and accrued expenses		17	· · · · · · · · · · · · · · · · · · ·
	18	Grants payable		18	
- 1	19	Deferred revenue		19	· · · · · · · · · · · · · · · · · · ·
	20	Tax-exempt bond liabilities		20	
,	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees,			
		key employees, highest compensated employees, and disqualified persons.			
i		Complete Part II of Schedule L	• -	22	- -
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
ı	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
Ť		Organizations that follow SFAS 117 (ASC 958), check here ▶ and			*···
۱ و		complete lines 27 through 29, and lines 33 and 34.			
<u> </u>	27	Unrestricted net assets	, -	27	*
3	28	Temporanly restricted net assets		28	
3	29	Permanently restricted net assets		29	
•		Organizations that do not follow SFAS 117 (ASC 958), check here			
5		and complete lines 30 through 34.			
:	30	Capital stock or trust principal, or current funds	1,469,332.	30	1,412,951.
	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
i		and the same and the same of t			0.
2005		Retained earnings, endowment, accumulated income, or other funds	0.	32	U .
Net Assets of Fund Balances	32 33	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	1,469,332.	32 33	1,412,951.

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2012)

SCHÈDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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

Open to Public Inspection

Name of the organization

NINA JEAN OBEL CHARITABLE TRUST

Employer identification number 75-6478331

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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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: 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). 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.) 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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. **b** Type II c X 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). 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No 11g(i) X the governing body of the supported organization? $\overline{\mathbf{x}}$ (ii) A family member of a person described in (i) above? 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 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		organization sted in your document?	organizat	notify the ion in col. support?	organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
		(see instructions))	Yes	No	Yes	No	Yes	No	
CRISWELL									
COLLEGE	75-6114836	501(C)(3)		X	Х		Х		10,000.
TAYLOR									
UNIVERSITY	35-0868181	501(C)(3)		X	X		X	ļ	12,500.
BURNHAM									
MINISTRIES I	34-6562555	501(C)(3)		X	Х		X		20,000.
DALLAS									
THEOLOGICAL	75-0827421	501(C)(3)		X	Х		X		10,000.
CHRISTIAN									
ASSOCIATES I	93-0571928	501(C)(3)		Х	Х	l	X		1,000.
Total 11									74,000.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12 SEE PART IV FOR LINE 11 CONTINUATION

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.)

Sec	ction A. Public Support						
Cale	ndar 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.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	fumished by a governmental unit to						
	the organization without charge			•			
4	Total. Add lines 1 through 3			T			
	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			 		1	
	ction B. Total Support			<u></u>	J	<u> </u>	
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	(5) 2000	(-,		(-)	(-)	1.7
-	Gross income from interest,		··				
•	dividends, payments received on						
	securities loans, rents, royalties	1					
	and income from similar sources						
9	Net income from unrelated business						
J	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain				•		
.0	or loss from the sale of capital					1	
	assets (Explain in Part IV.)						
11			· · · · · · · · · · · · · · · · · · ·		-	` `	
12	Gross receipts from related activities,	etc. (see instructi	ons)	·	 	12	<u>.</u>
13	First five years. If the Form 990 is for	•	•	rd fourth or fifth t	ax vear as a section		·
	organization, check this box and stop	-	oot, 0000. ia, t		and your do a cook	s ee . (e)(e)	
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2012 (column (fl)		14	%
	Public support percentage from 2011		•	("		15	%
	33 1/3% support test - 2012. If the			on line 13, and line	14 is 33 1/3% or	more, check this be	
	stop here. The organization qualifies					,	▶□
Ŀ	33 1/3% support test - 2011. If the		-		d line 15 is 33 1/39	% or more, check to	his box
_	and stop here. The organization qual					,	
17:	10% -facts-and-circumstances tes	• •			e 13. 16a. or 16b.	and line 14 is 10%	or more.
•••	and if the organization meets the "fac	~					
	meets the "facts-and-circumstances"					art iv mon the organ	▶ □
	10% -facts-and-circumstances tes	•	•		_	17a and line 15 is	10% or
	more, and if the organization meets the	-	-				
	organization meets the "facts-and-cire						▶ □
1Ω	Private foundation. If the organization						
18	Fire organization.	an did not crieck a	DOX OIT III IE 10, 10	<i>σ</i> α, 100, 17α, 01 17		edule A (Form 990	

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									
Cale	endar 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")								
2	Gross receipts from admissions,								
	merchandise sold or services per-								
	formed, or facilities furnished in								
	any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that								
_	are not an unrelated trade or bus-								
	iness under section 513				1				
4	Tax revenues levied for the organ-								
•	ization's benefit and either paid to								
	or expended on its behalf								
_	•					 			
5	The value of services or facilities								
	furnished by a governmental unit to								
_	the organization without charge								
	Total. Add lines 1 through 5								
7	Amounts included on lines 1, 2, and								
	3 received from disqualified persons				ļ				
ľ	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			<u></u>					
	Add lines 7a and 7b								
_8	Public support (Subtract line 7c from line 6)	L	<u> </u>	<u> </u>	<u> </u>				
	ction B. Total Support		,		·				
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
9	Amounts from line 6								
10a	Gross income from interest,								
	dividends, payments received on securities loans, rents, royalties								
	and income from similar sources								
t	Unrelated business taxable income	İ							
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975					ļ.,			
	Add lines 10a and 10b						•		
11	Net income from unrelated business								
	activities not included in line 10b, whether or not the business is								
	regularly carried on					{			
12	Other income. Do not include gain								
	or loss from the sale of capital								
13	assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12)								
	First five years. If the Form 990 is for	the organization'	s first, second, thu	d. fourth, or fifth t	ax vear as a section	on 501(c)(3) organiz	zation.		
	check this box and stop here	g	,	-,,	,	(-)(-)	▶ □		
Se	ction C. Computation of Publ	ic Support Pe	rcentage						
	Public support percentage for 2012 (cotumn (fl)		15	%		
			· ·	(.,,		16	<u>%</u>		
	ction D. Computation of Inve								
							<u>%</u> %		
	a 33 1/3% support tests - 2012. If the			on line 14, and line	e 15 is more than :				
.50	more than 33 1/3%, check this box a	_					▶		
	33 1/3% support tests - 2011. If the						and		
•		-							
20	line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								
20	r rivate roundation, it the organization	an alla not check a		a, or 150, crieck to	IIS DUX AND SEE III	31140110113			

Part IV Supplen	nental Informati	On (Schedule A, Part I,	Line 11h	Information					ontinuation)	
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	I in your o	organiza- I. (i) listed poverning ment?	erning 1 organization in con.		inization in col. organization in col.		(vii) Amount of support	
		(see instructions))	Yes	No	Yes	No	Yes	No		
CAMPUS			<u> </u>							
CRUSADE FOR	33-0863088	501(C)(3)		Х	Х		Х		1,000	
CMF	0.5.0445004	504 (5) (0)							4 000	
INTERNATIONA	26-3415221	501(C)(3)		X	X	ļ	Х	\sqcup	1,000	
DALLAS BIBLE CHURCH	75-2260198	E01/0\/2\							12 000	
SIM USA	73-2260196	501(C)(3)		Х	Х		X		13,000	
INCORPORATED	22-1936391	501(C)(3)		x	x		x	1	500	
TWIN OAKS	22 1330331	501(0)(3)	 					 	300	
CHURCH	74-6066209	501(C)(3)		х	х		х		1,000	
ENTRUST	54-1256309	501(C)(3)		Х	Х		Х		4,000	
	1									
					<u> </u>			1		
								1		
				<u> </u>				 - 	<u> </u>	
•			· · · · · · · · · · · · · · · · · · ·	<u> </u>				 		
							Ì			
· · · · · · · · · · · · · · · · · · ·	ļ				ļ					
			i							
			<u> </u>				· · · · · · · ·			
							·			
			l		<u> </u>				 ·· ·	
							[
		· · · · · · · · · · · · · · · · · · ·					<u> </u>			
	·									
							ļ			
			 	 	ļ		 -	-		
			-	 				 		
				 	 					
					<u> </u>					
· 			<u> </u>		ļi			 		
Continuation Total				İ		•			20,500	
Sommulation Total	I	<u> </u>			L			L	20,500	

232401 05-01-12

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	NINA JEAN OBEL CHA		/5-64/8331			
Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Accounts.Complete if the			
	organization answered "Yes" to Form 990, Part IV, line	e 6.	_			
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	nds			
_	are the organization's property, subject to the organization's	-	Yes No			
6	Did the organization inform all grantees, donors, and donor a	•				
•	for charitable purposes and not for the benefit of the donor of	· ·				
	impermissible private benefit?	was as the second of the second of the	Yes No			
Pa		panization answered "Yes" to Form 990. Part IV				
1	Purpose(s) of conservation easements held by the organizati					
•	Preservation of land for public use (e.g., recreation or e	. — —	ally important land area			
	Protection of natural habitat	Preservation of a certified h	•			
	Preservation of open space	Treservation of a certified t	iistorio structure			
2	Complete lines 2a through 2d if the organization held a qualif	find conconviction contribution in the form of a	ennonyation agreement on the last			
2		ned conservation contribution in the form of a c	onservation easement on the last			
	day of the tax year.		Held at the End of the Tax Year			
_	Total number of conceniation concenints		····			
a	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements	2b				
C	Number of conservation easements on a certified historic str	2c				
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structure				
_	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the orga	inization during the tax			
	year -					
4	Number of states where property subject to conservation ear					
5	Does the organization have a written policy regarding the per		Yes No			
_	violations, and enforcement of the conservation easements if					
6	Staff and volunteer hours devoted to monitoring, inspecting,	-				
7	Amount of expenses incurred in monitoring, inspecting, and					
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170(n)(4)(
_	and section 170(h)(4)(B)(ii)?		Yes L No			
9	In Part XIII, describe how the organization reports conservati	· ·	·			
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the of	rganization's accounting for			
Da	t III Organizations Maintaining Collections or	f Art Historical Treasures or Other	Similar Assets			
_ a	Complete if the organization answered "Yes" to Form		Omiliai Assets.			
			and belongs about wades of aid			
ıa	If the organization elected, as permitted under SFAS 116 (AS	•	•			
	historical treasures, or other similar assets held for public ext	· ·	public service, provide, in Part XIII,			
	the text of the footnote to its financial statements that descri					
b	If the organization elected, as permitted under SFAS 116 (AS					
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of public se	ervice, provide the following amounts			
	relating to these items:		. .			
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$			
	(ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, historical tre	·				
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:				
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$			
b	Assets included in Form 990, Part X		▶ \$			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

Sche	edule D (Form 990) 2012 NINA JE							<u>75-64</u>	<u> 178331</u>	Page 2
Pa	rt III Organizations Maintaining C	ollections of	of Art, H	istorical T	reasures,	or Othe	r Simil	ar Asse	e ts (continu	ied)
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items									
	(check all that apply):		_	_						
а	Public exhibition		d L	Loan or exc	change progi	rams				
þ	Scholarly research		e L	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	illections and e	xplain hov	v they further	the organizat	tion's exem	npt purpo	se in Pa	rt XIII.	
5	During the year, did the organization solicit or	r receive donat	ions of art	, historical trea	asures, or oth	ner sımılar	assets	_	_	
_	to be sold to raise funds rather than to be ma								Yes	<u> </u>
Pa	rt IV Escrow and Custodial Arrang		omplete if	the organization	on answered	"Yes" to F	orm 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodia	an or other inte	ermediary 1	for contributio	ns or other a	ssets not i	ncluded	r	_	
	on Form 990, Part X?								_ Yes	LJ No
b	If "Yes," explain the arrangement in Part XIII a	and complete t	he followir	ng table:			r			
									Amount	
C	Beginning balance						1c			
đ	Additions during the year						_1d			
e	Distributions during the year						1e			
f	Ending balance						1f		1	1 1
	Did the organization include an amount on Fo							L.	Yes	⊢ No
Pai	If "Yes," explain the arrangement in Part XIII.									<u></u>
rai	rt V Endowment Funds. Complete if								T 4 3 Common	
4-	Parameter of very holonor	(a) Current ye	ear (b	Prior year	(c) Two yea	ITS DACK 1	1) Tiree y	ears back	(e) Four y	ears dack
1a	Beginning of year balance				 				 	
b	Contributions		_		┿				 	
ب C	Net investment earnings, gains, and losses				 	<u> </u>			┼──	
đ	Grants or scholarships		_		 				 -	
e	Other expenditures for facilities		1			ļ				
	and programs Administrative expenses								 	
'	End of year balance				 				+	
9 2	Provide the estimated percentage of the curre	ent year and b	alance (line	a 1g. column (all bold as:				<u> </u>	
a	Board designated or quasi-endowment	ent year end ba	ااا الدون %	a rg, column (ajj rieju as.					
	Permanent endowment	%								
	Temporarily restricted endowment		%							
•	The percentages in lines 2a, 2b, and 2c should	ld equal 100%	-							
За	Are there endowment funds not in the posses			that are held a	and administr	ered for the	organiz	ration		
	py.		,				. o. ga	4.0	Γv	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations		-						3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations	listed as requi	red on Sch	nedule R?					3b	
4	Describe in Part XIII the intended uses of the	-								
Pai	t VI Land, Buildings, and Equipme									
	Description of property	(a) Cost	or other	(b) Cost	t or other	(c) Acc	umulate	d	(d) Book v	/alue
			vestment)	basis	(other)	depr	eciation		•	
1a	Land									
ь	Buildings									
¢	Leasehold improvements									
d	Equipment									
е	Other									
Total	. Add lines 1a through 1e. (Column (d) must ed	ual Form 990.	Part X. co	lumn (B), line	10(c))					0.

Schedule D (Form 990) 2012

232053 12-10-12

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

% ⊠ **Employer identification number** EDUCATION AND MISSIONARY 75-6478331 O SUPPORT EVANGELISM (h) Purpose of grant or assistance TO SUPPORT CHRISTIAN TO SUPPORT CHRISTIAN TO SUPPORT MINISTRY TO SUPPORT MINISTRY RAINING CENTERS, PRAINING CENTERS, Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any ACTIVITIES. EDUCATION. EDUCATION. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance N/A N/A N/A N/A N/A (f) Method of valuation (book, FMV, appraisal, other) N/A A/A N/A O.N/A 0.N/A Ö (e) Amount of assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000 Part II can be duplicated if additional space is needed Ö ö ٥. ٥. ö (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table TRUST (c) IRC section if applicable CHARITABLE 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) Enter total number of other organizations listed in the line 1 table 75-6114836 34-6562555 35-0868181 75-2260198 75-0827421 General Information on Grants and Assistance (p) EIN NINA JEAN OBEL criteria used to award the grants or assistance? 1 (a) Name and address of organization BURNHAM MINISTRIES INTERNATIONAL DALLAS THEOLOGICAL SEMINARY or government 15765 HILLCREST ROAD BOCA RATON, FL 33481 4010 GASTON AVEENUE DALLAS BIBLE CHURCH Name of the organization 236 W READE AVENUE 3909 SWISS AVENUE TAYLOR UNIVERSITY UPLAND, IN 46989 DALLAS, TX 75248 DALLAS, TX 75246 DALLAS, TX 75204 CRISWELL COLLEGE P.O. BOX 811625 Part Part II

232101 12-18-12

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2012)

Page 2 Schedule I (Form 990) (2012) (f) Description of non-cash assistance Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance (c) Amount of cash grant 23 (b) Number of recipients (a) Type of grant or assistance 232102 12-18-12 Part III

75-6478331

NINA JEAN OBEL CHARITABLE TRUST

Schedule I (Form 990) (2012)

SCHEDULE O

Supplemental Information to Form 990 or 990-EZ

`(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

2012
Open to Public Inspection

Name of the organization **Employer identification number** NINA JEAN OBEL CHARITABLE TRUST 75-6478331 FORM 990, PART VI, SECTION B, LINE 11: THE TRUSTEE REVIEWS THE FORM 990 TO THE BOOKS AND RECORDS OF THE ORGANIZATION FOR ACCURACY AND COMPLETENESS. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, TAX RETURNS, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Form 990, 12-31-2012 Nina Jean Obel Trust Investment 75-6478331

Attachment to Form 990, Part VIII, Line 7 Net gain (loss) from sales of assets other than inventory

		Line 7a	Line 7b	Line 7c
Number of Shs	<u>Security</u>	Gross amount from sales of assets other than inventory	Less: cost or other basis and sales expenses	Gain or (loss)
250 00	Eagle Materials Inc	\$ 8,106 91	\$ 4,852 88	\$ 3,254 03
500 00	Exelon Corporation	15,922 39	20,025 95	(4,103 56)
500 00	Trinity Industries Inc	16,613 05	11,751 04	4,862 01
1,000 00	International Paper Co	35,956 24	28,376 45	7,579 79
500 00	Chesapeake Energy Corp	11,995 58	33,080 95	(21,085 37)
750 00	Eagle Materials Inc	24,320 72	24,953 88	(633 16)
450 00	Schlumberger Ltd	30,785 02	24,434 40	6,350 62
100 00	Suncor Energy Inc New	3,336 06	4,357 98	(1,021 92)
400.00	Texas Industries Inc	20,330 91	14,872 67	5,458 24
20 00	SPDR S&P Dividend ETF	1,155 47	979 39	176 08
35,000 00	FHLMC Notes 5 000%	35,000 00	34,737 50	262 50
527 00	Ishares Russell 1000 Value Index	37,930 02	34,468 44	3,461 58
	Capital Gains Dividends	1,651 29	-	1,651 29
	Total	\$ 243,103.66	\$ 236,891.53	\$ 6,212.13

Form 990, 12-31-2012 Nina Jean Obel Trust Investment 75-6478331

Attachment to Form 990, Part X, Line 11 Secuntes Held As Investments (Listed at Cost on 12/31/2012)

Security	Cost
35000 FNMA Notes 3 625% 2/12/13	35,038 12
698 MSCI EAFE Index Fund ETF	29,027 01
377 MSCI Emerging Markets Fund	8,845 00
407 Russell Midcap Index ETF	37,535 86
215 Russell 2000 Growth Index	11,156 17
260 Russell 2000 Value Index Fund	10,273 84
722 SPDR S&P Dividend ETF	35,356 13
6072 73 Vanguard Intrm Bd Idx-SI #1350	69,287 23
4357 02 Wells Fargo Adv Hi Inc - Ins	33,069 79
Subtotal Compass Bank	269,589 15
3000 Atmos Energy Corp	69,699 30
500 Boeing Co	32,184 21
3000 Capstead Mtg Corp	31,785 40
500 Chevron Corporation	20,836 72
100 Disney Walt Company	4,806 37
1300 Exxon Mobil	63,275 69
1000 General Electric Company	12,655 95
1000 Halliburton Company	32,133 95
1000 Home Depot	40,001 38
5000 Intrusion Inc	26,276 85
500 Johnson & Johnson	32,862 30
900 Kinberly-Clark Corp	57,643 49
8000 Luby's Inc	67,351 65
500 Mesabi Trust CF Ben Int	14,267 63
1000 Microsoft	26,173 15
29 Ocean Rig UDW Inc	427 02
1470 Rocky Mountain Chocolate Factory	13,025 95
500 Tex Pac Land Trust	28,039 98
1000 Trinity Industries Inc	23,502 07
400 Union Pacific Corp	38,104 50
100 Visa Inc	12,617 94
600 Wal-mart Stores Inc	33,627 89
2000 Xcel Energy	42,645 95
Subtotal First Dallas Securities	723,945.34
Total	\$ 993,534 49
1000	₩ 333,334 4 3

Form 990, 12-31-2012 Nina Jean Obel Trust Investment 75-6478331

Attachment to Form 990, Part X, Line 12 Secunties Held As Investments* (Listed at Cost on 12/31/2012)

Security	Cost			
6938 04 Vanguard S/T Bond Index Fd #1349	\$	73,176 64		
2488 Russell 1000 Growth Index		124,157 79		
1535 Russell 1000 Value Fund		90,620 75		
Subtotal Compass Bank	\$	287,955.18		
1000 Transocean Inc	\$	82,314 40		
Subtotal First Dallas Securities	\$	82,314.40		
Total	\$	370,269.58		

 $^{^{\}star}$ Securities held as investments exceeding 5% of the organization's total net assets at 12/31/12