Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0052

**2012**

Open to public Inspection

**For calendar year 2012 or tax year beginning , and ending**

Name of foundation
GETZEN FAMILY CHARITIES, INC.
C/O WILLIAM E. GETZEN

**A Employer identification number**
82-0540623

Number and street (or P O box number if mail is not delivered to street address) | Room/suite
1421 WESTBROOK DRIVE

B Telephone number
941-922-8581

City or town, state, and ZIP code
SARASOTA, FL 34231

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization: ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col. (c), line 16)* ▶$ 1,134,227.

J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) *(Part I, column (d) must be on cash basis )*

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

**Part I Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))

| | | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---|---|---|---|---|---|
| Revenue | 1 Contributions, gifts, grants, etc., received | 100,000. | | N/A | |
| | 2 Check ▶ ☐ if the foundation is not required to attach Sch B | | | | |
| | 3 Interest on savings and temporary cash investments | | | | |
| | 4 Dividends and interest from securities | 18,626. | 18,626. | | STATEMENT 1 |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) | | | | |
| | 6a Net gain or (loss) from sale of assets not on line 10 | 45,328. | | | |
| | b Gross sales price for all assets on line 6a 446,144. | | | | |
| | 7 Capital gain net income (from Part IV, line 2) | | 45,328. | | |
| | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | | | | |
| | 10a Gross sales less returns and allowances | | | | |
| | b Less Cost of goods sold | | | | |
| | c Gross profit or (loss) | | | | |
| | 11 Other income | 2,167. | 2,167. | | STATEMENT 2 |
| | 12 **Total** Add lines 1 through 11 | 166,121. | 66,121. | | |
| Operating and Administrative Expenses | 13 Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | 14 Other employee salaries and wages | | | | |
| | 15 Pension plans, employee benefits | | | | |
| | 16a Legal fees | | | | |
| | b Accounting fees STMT 3 | 900. | 0. | | 900. |
| | c Other professional fees | | | | |
| | 17 Interest | | | | |
| | 18 Taxes STMT 4 | 945. | 785. | | 0. |
| | 19 Depreciation and depletion | | | | |
| | 20 Occupancy | | | | |
| | 21 Travel, conferences, and meetings | | | | |
| | 22 Printing and publications | | | | |
| | 23 Other expenses STMT 5 | 7,458. | 7,397. | | 61. |
| | 24 **Total operating and administrative expenses.** Add lines 13 through 23 | 9,303. | 8,182. | | 961. |
| | 25 Contributions, gifts, grants paid | 43,275. | | | 43,275. |
| | 26 **Total expenses and disbursements.** Add lines 24 and 25 | 52,578. | 8,182. | | 44,236. |
| | 27 Subtract line 26 from line 12: | | | | |
| | a Excess of revenue over expenses and disbursements | 113,543. | | | |
| | b **Net investment income** (if negative, enter -0-) | | 57,939. | | |
| | c **Adjusted net income** (if negative, enter -0-) | | | N/A | |

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12-05-12 LHA **For Paperwork Reduction Act Notice, see instructions.**

**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only

| | | Beginning of year | End of year | |
|---|---|---|---|---|
| | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 Cash - non-interest-bearing | 5,400. | 3,718. | 3,718. |
| | 2 Savings and temporary cash investments | 72,484. | 77,901. | 77,901. |
| | 3 Accounts receivable ▶ | | | |
| | Less: allowance for doubtful accounts ▶ | | | |
| | 4 Pledges receivable ▶ | | | |
| | Less: allowance for doubtful accounts ▶ | | | |
| | 5 Grants receivable | | | |
| | 6 Receivables due from officers, directors, trustees, and other disqualified persons | | | |
| | 7 Other notes and loans receivable ▶ | | | |
| | Less: allowance for doubtful accounts ▶ | | | |
| | 8 Inventories for sale or use | | | |
| | 9 Prepaid expenses and deferred charges | | | |
| | 10a Investments - U.S. and state government obligations STMT 6 | 762,082. | 837,684. | 878,223. |
| | b Investments - corporate stock | | | |
| | c Investments - corporate bonds | | | |
| | 11 Investments - land, buildings, and equipment basis ▶ | | | |
| | Less accumulated depreciation ▶ | | | |
| | 12 Investments - mortgage loans | | | |
| | 13 Investments - other STMT 7 | 142,690. | 176,896. | 174,385. |
| | 14 Land, buildings, and equipment: basis ▶ | | | |
| | Less accumulated depreciation ▶ | | | |
| | 15 Other assets (describe ▶ ) | | | |
| | 16 **Total assets** (to be completed by all filers) | 982,656. | 1,096,199. | 1,134,227. |
| Liabilities | 17 Accounts payable and accrued expenses | | | |
| | 18 Grants payable | | | |
| | 19 Deferred revenue | | | |
| | 20 Loans from officers, directors, trustees, and other disqualified persons | | | |
| | 21 Mortgages and other notes payable | | | |
| | 22 Other liabilities (describe ▶ ) | | | |
| | 23 **Total liabilities** (add lines 17 through 22) | 0. | 0. | |
| Net Assets or Fund Balances | **Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.** | | | |
| | 24 Unrestricted | | | |
| | 25 Temporarily restricted | | | |
| | 26 Permanently restricted | | | |
| | **Foundations that do not follow SFAS 117, check here ▶ [X] and complete lines 27 through 31.** | | | |
| | 27 Capital stock, trust principal, or current funds | 0. | 0. | |
| | 28 Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| | 29 Retained earnings, accumulated income, endowment, or other funds | 982,656. | 1,096,199. | |
| | 30 **Total net assets or fund balances** | 982,656. | 1,096,199. | |
| | 31 **Total liabilities and net assets/fund balances** | 982,656. | 1,096,199. | |

**Part III Analysis of Changes in Net Assets or Fund Balances**

| | | | |
|---|---|---|---|
| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 1 | 982,656. |
| 2 | Enter amount from Part I, line 27a | 2 | 113,543. |
| 3 | Other increases not included in line 2 (itemize) ▶ | 3 | 0. |
| 4 | Add lines 1, 2, and 3 | 4 | 1,096,199. |
| 5 | Decreases not included in line 2 (itemize) ▶ | 5 | 0. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 1,096,199. |

## Part IV Capital Gains and Losses for Tax on Investment Income

| | (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|---|---|---|---|---|
| 1a | SEE ATTACHED | P | VARIOUS | 07/01/12 |
| b | SEE ATTACHED | P | VARIOUS | 07/01/12 |
| c | SEE ATTACHED | P | VARIOUS | 07/01/12 |
| d | CAPITAL GAINS DIVIDENDS | | | |
| e | | | | |

| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) (e) plus (f) minus (g) |
|---|---|---|---|---|
| a | 113,586. | | 101,621. | 11,965. |
| b | 267,539. | | 258,340. | 9,199. |
| c | 60,124. | | 40,855. | 19,269. |
| d | 4,895. | | | 4,895. |
| e | | | | |

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

| | (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | (l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) |
|---|---|---|---|---|
| a | | | | 11,965. |
| b | | | | 9,199. |
| c | | | | 19,269. |
| d | | | | 4,895. |
| e | | | | |

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 } 2 45,328.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):
If gain, also enter in Part I, line 8, column (c).
If (loss), enter -0- in Part I, line 8 } 3 N/A

## Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio (col. (b) divided by col. (c)) |
|---|---|---|---|
| 2011 | 45,855. | 956,998. | .047915 |
| 2010 | 33,039. | 808,449. | .040867 |
| 2009 | 24,936. | 705,506. | .035345 |
| 2008 | 6,350. | 709,532. | .008950 |
| 2007 | 310. | 562,660. | .000551 |

| | | | |
|---|---|---|---|
| 2 | Total of line 1, column (d) | 2 | .133628 |
| 3 | Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | 3 | .026726 |
| 4 | Enter the net value of noncharitable-use assets for 2012 from Part X, line 5 | 4 | 1,020,016. |
| 5 | Multiply line 4 by line 3 | 5 | 27,261. |
| 6 | Enter 1% of net investment income (1% of Part I, line 27b) | 6 | 579. |
| 7 | Add lines 5 and 6 | 7 | 27,840. |
| 8 | Enter qualifying distributions from Part XII, line 4 | 8 | 44,236. |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

| | | | |
|---|---|---|---|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: ________ (attach copy of letter if necessary-see instructions) | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ [X] and enter 1% of Part I, line 27b | 1 | 579. |
| c | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | 0. |
| 3 | Add lines 1 and 2 | 3 | 579. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | 0. |
| 5 | **Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0- | 5 | 579. |
| 6 | Credits/Payments: | | |
| a | 2012 estimated tax payments and 2011 overpayment credited to 2012 — 6a — 160. | | |
| b | Exempt foreign organizations - tax withheld at source — 6b | | |
| c | Tax paid with application for extension of time to file (Form 8868) — 6c | | |
| d | Backup withholding erroneously withheld — 6d | | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | 160. |
| 8 | Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached | 8 | |
| 9 | **Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶ | 9 | 419. |
| 10 | **Overpayment** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶ | 10 | |
| 11 | Enter the amount of line 10 to be: **Credited to 2013 estimated tax** ▶ \| **Refunded** ▶ | 11 | |

**Part VII-A Statements Regarding Activities**

| | | | Yes | No |
|---|---|---|---|---|
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | | X |
| b | Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | 1b | | X |
| | *If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities* | | | |
| c | Did the foundation file **Form 1120-POL** for this year? | 1c | | X |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: **(1)** On the foundation. ▶ $ 0. **(2)** On foundation managers. ▶ $ 0. | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0. | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.* | 2 | | X |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes* | 3 | | X |
| 4a | Did the foundation have unrelated business gross income of $1,000 or more during the year? | 4a | | X |
| b | If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.* | 5 | | X |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 6 | X | |
| 7 | Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV.* | 7 | X | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ FL | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G? If "No," attach explanation* | 8b | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? *If "Yes," complete Part XIV* | 9 | | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | 10 | | X |

**Part VII-A Statements Regarding Activities** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |

Website address ▶ N/A

14 The books are in care of ▶ WILLIAM E. GETZEN Telephone no. ▶ 941-922-8581

Located at ▶ 1421 WESTBROOK DRIVE, SARASOTA, FL ZIP+4 ▶ 34231

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** - Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A

| | | | Yes | No |
|---|---|---|---|---|
| 16 | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶ | | | |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

| | | | Yes | No |
|---|---|---|---|---|
| 1a | During the year did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No | | | |
| | (6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here ▶ ☐ | | | |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| a | At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? ☐ Yes ☒ No | | | |
| | If "Yes," list the years ▶ ____, ____, ____, ____ | | | |
| b | Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions.) N/A | 2b | | |
| c | If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here. ▶ ____, ____, ____, ____ | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No | | | |
| b | If "Yes," did it have excess business holdings in 2012 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969; **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.)* N/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012? | 4b | | X |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** *(continued)*

| | | | Yes | No |
|---|---|---|---|---|
| **5a** During the year did the foundation pay or incur any amount to: | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? | ☐ Yes ☒ No | | | |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? | ☐ Yes ☒ No | | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | ☐ Yes ☒ No | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? | ☐ Yes ☒ No | | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? | ☐ Yes ☒ No | | | |
| **b** If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? | N/A | 5b | | |
| Organizations relying on a current notice regarding disaster assistance check here | ▶ ☐ | | | |
| **c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A | ☐ Yes ☐ No | | | |
| *If "Yes," attach the statement required by Regulations section 53 4945-5(d).* | | | | |
| **6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | ☐ Yes ☒ No | | | |
| **b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | 6b | | X |
| *If "Yes" to 6b, file Form 8870* | | | | |
| **7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? | ☐ Yes ☒ No | | | |
| **b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? | N/A | 7b | | |

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation.**

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|---|---|---|
| SEE STATEMENT 8 | | 0. | 0. | 0. |

**2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."**

| (a) Name and address of each employee paid more than $50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|---|---|---|
| NONE | | | | |

**Total** number of other employees paid over $50,000 ▶ 0

**Part VIII** **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

**3 Five highest-paid independent contractors for professional services. If none, enter "NONE."**

| (a) Name and address of each person paid more than $50,000 | (b) Type of service | (c) Compensation |
|---|---|---|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| **Total** number of others receiving over $50,000 for professional services ▶ | | 0 |

**Part IX-A** **Summary of Direct Charitable Activities**

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|---|---|
| 1 N/A | |
| 2 | |
| 3 | |
| 4 | |

**Part IX-B** **Summary of Program-Related Investments**

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
|---|---|
| 1 N/A | |
| 2 | |
| All other program-related investments. See instructions. 3 | |
| **Total.** Add lines 1 through 3 ▶ | 0. |

Form **990-PF** (2012)

## Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions.)

| | | | | |
|---|---|---|---|---|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | | |
| a | Average monthly fair market value of securities | | 1a | 870,135. |
| b | Average of monthly cash balances | | 1b | 81,448. |
| c | Fair market value of all other assets | | 1c | 83,966. |
| d | **Total** (add lines 1a, b, and c) | | 1d | 1,035,549. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) | 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | 2 | 0. |
| 3 | Subtract line 2 from line 1d | | 3 | 1,035,549. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | | 4 | 15,533. |
| 5 | **Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4 | | 5 | 1,020,016. |
| 6 | **Minimum investment return** Enter 5% of line 5 | | 6 | 51,001. |

## Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)

| | | | | |
|---|---|---|---|---|
| 1 | Minimum investment return from Part X, line 6 | | 1 | 51,001. |
| 2a | Tax on investment income for 2012 from Part VI, line 5 | 2a 579. | | |
| b | Income tax for 2012. (This does not include the tax from Part VI.) | 2b | | |
| c | Add lines 2a and 2b | | 2c | 579. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | | 3 | 50,422. |
| 4 | Recoveries of amounts treated as qualifying distributions | | 4 | 0. |
| 5 | Add lines 3 and 4 | | 5 | 50,422. |
| 6 | Deduction from distributable amount (see instructions) | | 6 | 0. |
| 7 | **Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | | 7 | 50,422. |

## Part XII Qualifying Distributions (see instructions)

| | | | |
|---|---|---|---|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 | 1a | 44,236. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | **Qualifying distributions.** Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 44,236. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b | 5 | 579. |
| 6 | **Adjusted qualifying distributions.** Subtract line 5 from line 4 | 6 | 43,657. |

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

## Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
|---|---|---|---|---|
| 1 Distributable amount for 2012 from Part XI, line 7 | | | | 50,422. |
| 2 Undistributed income, if any, as of the end of 2012 | | | | |
| a Enter amount for 2011 only | | | 43,445. | |
| b Total for prior years: ____, ____, ____ | | 0. | | |
| 3 Excess distributions carryover, if any, to 2012: | | | | |
| a From 2007 | | | | |
| b From 2008 | | | | |
| c From 2009 | | | | |
| d From 2010 | | | | |
| e From 2011 | | | | |
| f **Total** of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2012 from Part XII, line 4: ▶ $ 44,236. | | | | |
| a Applied to 2011, but not more than line 2a | | | 43,445. | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus (Election required - see instructions) | 0. | | | |
| d Applied to 2012 distributable amount | | | | 791. |
| e Remaining amount distributed out of corpus | 0. | | | |
| 5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).) | 0. | | | 0. |
| 6 **Enter the net total of each column as indicated below:** | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | | | |
| b Prior years' undistributed income. Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable amount - see instructions | | 0. | | |
| e Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 | | | | 49,631. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2007 not applied on line 5 or line 7 | 0. | | | |
| 9 **Excess distributions carryover to 2013.** Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2008 | | | | |
| b Excess from 2009 | | | | |
| c Excess from 2010 | | | | |
| d Excess from 2011 | | | | |
| e Excess from 2012 | | | | |

## Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

| | Tax year | Prior 3 years | | | |
|---|---|---|---|---|---|
| | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | (e) Total |
| 2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under 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 | | | | | |
| c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |

## Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year-see instructions.)

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ▶ [X] 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 other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

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

**Part XV Supplementary Information** (continued)

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

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| *a Paid during the year* | | | | |
| AMERICAN CANCER SOCIETY<br>2970 UNIVERSITY PKY #104<br>SARASOTA, FL 34243 | NONE | 509(A)(1) | GENERAL FUND | 1,000. |
| AMERICAN RED CROSS<br>2001 CANTU COURT<br>SARASOTA, FL 34232 | NONE | 509(A)(1) | GENERAL FUND | 2,000. |
| BLUE RIDGE FREE DENTAL CLINIC<br>130 US HIGHWAY 64E, #12<br>CASHIERS, NC 28717 | NONE | 509(A)(1) | GENERAL FUND | 500. |
| CHURCH OF THE PALMS<br>3224 BEE RIDGE RD<br>SARASOTA, FL 34239 | NONE | CHURCH | FOOD PANTRY | 1,000. |
| FORTY CARROTS FAMILY CENTER<br>1500 SOUTH TUTTLE AVE<br>SARASOTA, FL 34239 | NONE | SCHOOL | GENERAL FUND | 1,000. |
| **Total** SEE CONTINUATION SHEET(S) | | | ▶ 3a | 43,275. |
| *b Approved for future payment* | | | | |
| NONE | | | | |
| **Total** | | | ▶ 3b | 0. |

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| GIRL SCOUT OF GULFCOAST FLORIDA, INC.<br>4780 CATTLEMEN RD<br>SARASOTA, FL 34233 | NONE | 509(A)(1) | GENERAL FUND | 3,000. |
| GOODWILL FOUNDATION<br>7501 15TH ST EAST<br>SARASOTA, FL 34243 | NONE | 509(A)(1) | GENERAL FUND | 1,000. |
| HIGHLANDS BOLIVIAN MISSION<br>171 HOSPITAL DRIVE, SUITE 700<br>HIGHLANDS, NC 28741 | NONE | 509(A)(1) | GENERAL FUND | 500. |
| HIGHLANDS UNITED METHODIST CHURCH<br>P.O. BOX 1959<br>HIGHLANDS, NC 28741 | NONE | 509(A)(1) | FOOD PANTRY, GENERAL FUND | 2,500. |
| HIGHLANDS-CASHIERS HOSPITAL FOUNDATION<br>PO BOX 190<br>HIGHLANDS, NC 28741 | NONE | 509(A)(3) | GENERAL FUND | 5,000. |
| HUMANE SOCIETY OF SARASOTA COUNTY<br>2331 15TH ST E<br>SARASOTA, FL 34237 | NONE | 509(A)(1) | GENERAL FUND | 500. |
| LIBRARY FOUNDATION FOR SARASOTA COUNTY, INC.<br>13801 TAMIAMI TR, S-D<br>NORTH PORT, FL 34287 | NONE | 509(A)(1) | GENERAL FUND | 2,000. |
| RESURRECTION HOUSE<br>507 KUMQUAT COURT<br>SARASOTA, FL 34236 | NONE | 509(A)(1) | GENERAL FUND | 2,000. |
| SALVATION ARMY<br>P.O. BOX 2792<br>SARASOTA, FL 34230 | NONE | 509(A)(1) | GENERAL FUND | 2,000. |
| SARASOTA MEMORIAL HEALTHCARE FOUNDATION<br>1700 S TAMIAMI TRAIL<br>SARASOTA, FL 34239 | NONE | 509(A)(1) | GENERAL FUND | 2,000. |
| **Total from continuation sheets** | | | | 37,775. |

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**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| SARASOTA SCHOOL OF ARTS & SCIENCES<br>645 CENTRAL AVE<br>SARASOTA, FL 34236 | NONE | 509(A)(1) | GENERAL FUND | 1,700. |
| SHRINERS HOSPITAL FOR CHILDREN<br>2900 ROCKY POINT DR<br>TAMPA, FL 33607 | NONE | 509(A)(1) | GENERAL FUND | 1,000. |
| SOUTHSIDE ELEMENTARY SCHOOL<br>1901 WEBBER ST<br>SARASOTA, FL 34239 | NONE | SCHOOL | GENERAL FUND | 1,700. |
| SUNCOAST CHARITIES FOR CHILDREN<br>5317 FRUITVILLE RD, S-43<br>SARASOTA, FL 34232 | NONE | 509(A)(1) | GENERAL FUND | 1,000. |
| UNIVERSITY OF IL LAW SCHOOL FUND<br>504 E PENNSYLVANIA AVE<br>CHAMPAIGN, IL 61801 | NONE | SCHOOL | GENERAL FUND | 1,000. |
| ALL FAITHS FOOD BANK<br>8171 BLAIKIE CT<br>SARASOTA, FL 34240 | NONE | 509(A)(1) | GENERAL FOOD | 2,000. |
| BASCOM ART CENTER<br>323 FRANKLIN RD<br>HIGHLANDS, NC 28741 | NONE | 509(A)(1) | GENERAL FUND | 250. |
| BOY SCOUT TROOP #895<br>1801 BOY SCOUT DR<br>FORT MYERS, FL 33907 | NONE | 509(A)(1) | GENERAL FUND | 1,000. |
| CHRIST CHURCH OF LONGBOAT KEY<br>6400 GULF OF MEXICO DR<br>LONGBOAT KEY, FL 34228 | NONE | CHURCH | GENERAL FUND | 2,000. |
| GULFCOAST HERITAGE ASSOCIATION<br>P.O. BOX 846<br>OSPREY, FL 34229 | NONE | 509(A)(1) | GENERAL FUND | 125. |
| **Total from continuation sheets** | | | | |

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GETZEN FAMILY CHARITIES, INC.
C/O WILLIAM E. GETZEN 82-0540623

**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient: Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|---|---|---|
| CASHIERS-HIGHLANDS HUMANE SOCIETY<br>P.O. BOX 638<br>CASHIERS, NC 28717 | NONE | 509(A)(1) | GENERAL FUND | 500. |
| HIGHLANDS CASHIERS LAND TRUST<br>348 S 5TH ST, #211<br>HIGHLANDS, NC 28741 | NONE | 509(A)(1) | GENERAL FUND | 1,000. |
| PRINCETON SEMINARY<br>64 MERCER ST.<br>PRINCETON, NJ 08540 | NONE | SCHOOL | GENERAL FUND | 2,000. |
| MOFFITT CANCER CENTER<br>12902 USF MAGNOLIA DR<br>TAMPA, FL 33620 | NONE | HOSPITAL | GENERAL FUND | 1,000. |
| UNITED WAY<br>1445 2ND ST<br>SARASOTA, FL 34236 | NONE | 509(A)(1) | GENERAL FUND | 1,000. |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| **Total from continuation sheets** | | | | |

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08580430 759428 14674 2012.03040 GETZEN FAMILY CHARITIES, IN 14674__1

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

| Enter gross amounts unless otherwise indicated. | Unrelated business income (a) Business code | Unrelated business income (b) Amount | Excluded by section 512, 513, or 514 (c) Exclusion code | Excluded by section 512, 513, or 514 (d) Amount | (e) Related or exempt function income |
|---|---|---|---|---|---|
| 1 Program service revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| 4 Dividends and interest from securities | | | 14 | 18,626. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | 14 | 2,167. | |
| 8 Gain or (loss) from sales of assets other than inventory | | | 18 | 45,328. | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a FEDERAL TAX REFUND | | | 01 | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0. | | 66,121. | 0. |

13 **Total.** Add line 12, columns (b), (d), and (e) 13 66,121.

(See worksheet in line 13 instructions to verify calculations.)

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). |
|---|---|
| | |

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

| | | | Yes | No |
|---|---|---|---|---|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | | |
| | (1) Cash | 1a(1) | | X |
| | (2) Other assets | 1a(2) | | X |
| b | Other transactions: | | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | | X |
| | (4) Reimbursement arrangements | 1b(4) | | X |
| | (5) Loans or loan guarantees | 1b(5) | | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | X |

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

| (a) Line no | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sharing arrangements |
|---|---|---|---|
| | | N/A | |

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|---|---|---|
| N/A | | |

**Sign Here**

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 taxpayer) is based on all information of which preparer has any knowledge

William E. Getzen — 5/3/13 — DIRECTOR

Signature of officer or trustee — Date — Title

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

**Paid Preparer Use Only**

| Print/Type preparer's name | Preparer's signature | Date | Check ☐ if self-employed | PTIN |
|---|---|---|---|---|
| JULIE L. BYNUM | [signature] CPA | 4-30-2013 | | P00106704 |

Firm's name ▶ KERKERING, BARBERIO & CO. — Firm's EIN ▶ 59-1753337

Firm's address ▶ P.O. BOX 49348, SARASOTA, FL 34230-6348 — Phone no. 941-365-4617

**Schedule B**
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

# Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

**2012**

**Name of the organization**
GETZEN FAMILY CHARITIES, INC.
C/O WILLIAM E. GETZEN

**Employer identification number**
82-0540623

**Organization type** (check one)

| **Filers of:** | **Section:** |
|---|---|
| Form 990 or 990-EZ | ☐ 501(c)( ) (enter number) organization |
| | ☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation |
| | ☐ 527 political organization |
| Form 990-PF | ☒ 501(c)(3) exempt private foundation |
| | ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | ☐ 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule.**
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

**General Rule**

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor Complete Parts I and II

**Special Rules**

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc , contributions of $5,000 or more during the year ▶ $ ____________

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

| Name of organization | Employer identification number |
|---|---|
| GETZEN FAMILY CHARITIES, INC.<br>C/O WILLIAM E. GETZEN | 82-0540623 |

**Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---|---|---|---|
| 1 | WILLIAM E. AND RUTH E. GETZEN<br>1421 WESTBROOK DRIVE<br>SARASOTA, FL 34231 | $ 100,000. | Person [X]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution ) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution ) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution ) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution ) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution.) |
| | | $ | Person [ ]<br>Payroll [ ]<br>Noncash [ ]<br>(Complete Part II if there is a noncash contribution ) |

| Name of organization | Employer identification number |
|---|---|
| GETZEN FAMILY CHARITIES, INC.<br>C/O WILLIAM E. GETZEN | 82-0540623 |

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---|---|---|---|
| | | $ | |

| Name of organization | Employer identification number |
|---|---|
| GETZEN FAMILY CHARITIES, INC.<br>C/O WILLIAM E. GETZEN | 82-0540623 |

**Part III** *Exclusively* religious, charitable, etc , individual contributions to section 501(c)(7), (8), or (10) organizations that total more than $1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information once ) ▶ $________

Use duplicate copies of Part III if additional space is needed

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---|---|---|
| | | | |

(e) Transfer of gift

| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
|---|---|
| | |

| FORM 990-PF | DIVIDENDS AND INTEREST FROM SECURITIES | STATEMENT 1 |
|---|---|---|

| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDENDS | COLUMN (A) AMOUNT |
|---|---|---|---|
| NORTHERN TRUST | 23,521. | 4,895. | 18,626. |
| TOTAL TO FM 990-PF, PART I, LN 4 | 23,521. | 4,895. | 18,626. |

| FORM 990-PF | OTHER INCOME | STATEMENT 2 |
|---|---|---|

| DESCRIPTION | (A) REVENUE PER BOOKS | (B) NET INVEST-MENT INCOME | (C) ADJUSTED NET INCOME |
|---|---|---|---|
| INCREASE IN CSV OF LIFE INSURANCE | 2,167. | 2,167. | |
| TOTAL TO FORM 990-PF, PART I, LINE 11 | 2,167. | 2,167. | |

| FORM 990-PF | ACCOUNTING FEES | STATEMENT 3 |
|---|---|---|

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST-MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|---|---|---|---|---|
| ACCOUNTANT FEES | 900. | 0. | | 900. |
| TO FORM 990-PF, PG 1, LN 16B | 900. | 0. | | 900. |

| FORM 990-PF | TAXES | STATEMENT 4 |
|---|---|---|

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST-MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|---|---|---|---|---|
| FOREIGN TAX | 785. | 785. | | 0. |
| EXCISE | 160. | 0. | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 945. | 785. | | 0. |

FORM 990-PF OTHER EXPENSES STATEMENT 5

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST-MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|---|---|---|---|---|
| CORPORATE ORGANIZATION FEE | 61. | 0. | | 61. |
| INVESTMENT FEES | 5,172. | 5,172. | | 0. |
| PREMIUM ON LIFE INSURANCE HELD BY CHARITY | 2,225. | 2,225. | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 7,458. | 7,397. | | 61. |

FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT 6

| DESCRIPTION | U.S. GOV'T | OTHER GOV'T | BOOK VALUE | FAIR MARKET VALUE |
|---|---|---|---|---|
| MFB NORTHERN FDS LARGE CAP VALUE FD | X | | 333,261. | 351,670. |
| NORTHERN MID CAP | X | | 69,630. | 68,664. |
| NORTHERN SMALL CAP | X | | 67,621. | 69,203. |
| NORTHERN INTL DEVELOPED | X | | 195,157. | 201,829. |
| NORTHERN INTL EMERGING | X | | 172,015. | 186,857. |
| TOTAL U.S. GOVERNMENT OBLIGATIONS | | | 837,684. | 878,223. |
| TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS | | | | |
| TOTAL TO FORM 990-PF, PART II, LINE 10A | | | 837,684. | 878,223. |

FORM 990-PF OTHER INVESTMENTS STATEMENT 7

| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
|---|---|---|---|
| MFO CREDIT SUISSE COMMODITY FD | COST | 92,930. | 90,419. |
| LIFE INSURANCE POLICIES (CSV) | COST | 83,966. | 83,966. |
| TOTAL TO FORM 990-PF, PART II, LINE 13 | | 176,896. | 174,385. |

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 8

| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN-SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
|---|---|---|---|---|
| WILLIAM E. GETZEN<br>1421 WESTBROOK DRIVE<br>SARASOTA, FL 34231 | DIRECTOR<br>2.00 | 0. | 0. | 0. |
| RUTH E. GETZEN<br>1421 WESTBROOK DRIVE<br>SARASOTA, FL 34231 | DIRECTOR<br>1.00 | 0. | 0. | 0. |
| LINDA R. GETZEN<br>1421 WESTBROOK DRIVE<br>SARASOTA, FL 34231 | DIRECTOR<br>1.00 | 0. | 0. | 0. |
| SANDRA L. ALGER<br>1421 WESTBROOK DRIVE<br>SARASOTA, FL 34231 | DIRECTOR<br>1.00 | 0. | 0. | 0. |
| JAMES W. GETZEN<br>1421 WESTBROOK DRIVE<br>SARASOTA, FL 34231 | DIRECTOR<br>1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII | | 0. | 0. | 0. |

82-0540623

# 2012 Tax Information Statement



**Recipient's Name and Address:**
GETZEN FAMILY CHARITIES INC
ATTN: WILLIAM GETZEN
1421 WESTBROOK DR.
SARASOTA, FL 34231-3548

**Payer's Name and Address:**
THE NORTHERN TRUST COMPANY
P.O. BOX 803878
CHICAGO, IL 60680

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## 2012 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is Sales Price of stocks, bonds, etc., less commissions and option premiums.
**For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.**

| Cusip / Quantity Sold (Box 1e) | Description (Box 8) / Date of Sale or Exchange (Box 1a) | Date of Acquisition | Stock or Other Symbol (Box 1d) / Stocks Bonds, etc. (Box 2a) | Cost or Other Basis | Wash Sale Loss Disallowed | Net Gain or Loss | Federal Income Tax Withheld (Box 4) | State Tax Withheld (Box 15) |
|---|---|---|---|---|---|---|---|---|
| **Short Term Sales Reported on 1099-B** | | | | | | | | |
| 665162566 | MFB NORTHN MULTIMGR SMALL CAP FD | | NMMSX | | | | | |
| 490.1800 | 07/23/2012 | Various | 4,490.06 | 4,112.63 | 0.00 | 377.43 | 0.00 | 0.00 |
| 464287465 | MFC ISHARES TR MSCI EAFE INDEX FD | | EFA | | | | | |
| 50.0000 | 07/24/2012 | 12/23/2011 | 2,402.44 | 2,469.50 | 0.00 | -67.06 | 0.00 | 0.00 |
| 464287465 | MFC ISHARES TR MSCI EAFE INDEX FD | | EFA | | | | | |
| 1800.0000 | 12/07/2012 | 12/23/2011 | 99,557.20 | 88,902.00 | 0.00 | 10,655.20 | 0.00 | 0.00 |
| 665162517 | MFB NORTHERN FUNDS MULTI MANAGER LARGE CAP FD | | NMMLX | | | | | |
| 580.8600 | 12/07/2012 | 12/19/2011 | 5,628.53 | 4,855.96 | 0.00 | 772.57 | 0.00 | 0.00 |
| 665162574 | MFB NORTHN MULTIMGR MID CAP FD | | NMMCX | | | | | |
| 122.3600 | 12/07/2012 | 12/19/2011 | 1,507.47 | 1,281.08 | 0.00 | 226.39 | 0.00 | 0.00 |
| **Total Short Term Sales Reported on 1099-B** Report on Form 8949, Part I, with Box B checked | | | 113,585.70 | 101,621.17 | 0.00 | 11,964.53 | 0.00 | 0.00 |
| **Long Term 15% Sales Reported on 1099-B** | | | | | | | | |
| 665162566 | MFB NORTHN MULTIMGR SMALL CAP FD | | NMMSX | | | | | |
| 4259.2800 | 07/23/2012 | Various | 39,015.10 | 47,232.00 | 0.00 | -8,216.90 | 0.00 | 0.00 |

**This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For noncovered securities shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the Internal Revenue Service. The taxpayer is ultimately responsible for the accuracy of their own tax return.**

82-0540623

# 2012 Tax Information Statement



**Recipient's Name and Address:**
GETZEN FAMILY CHARITIES INC
ATTN: WILLIAM GETZEN
1421 WESTBROOK DR.
SARASOTA, FL 34231-3548

**Payer's Name and Address:**
THE NORTHERN TRUST COMPANY
P.O. BOX 803878
CHICAGO, IL 60680

☐ Corrected ☐ 2nd TIN notice

**For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.**

| Cusip / Quantity Sold | Description (Box 8) / Date of Sale or Exchange | Date of Acquisition | Stock or Other Symbol (Box 1d) / Stocks Bonds, etc. | Cost or Other Basis | Wash Sale Loss Disallowed | Net Gain or Loss | Federal Income Tax Withheld | State Tax Withheld |
|---|---|---|---|---|---|---|---|---|
| (Box 1e) | (Box 1a) | | (Box 2a) | | | | (Box 4) | (Box 15) |
| 665162558 | MFB NORTHN MULTI-MANAGER INTL EQTY FD FD | | NMIEX | | | | | |
| 530.7100 | 07/24/2012 | 11/05/2010 | 4,389.00 | 5,301.79 | 0.00 | -912.79 | 0.00 | 0.00 |
| 665162582 | MFB NORTHN FUNDS EMERGING MKTS EQTY EQTY INDEX FD | | NOEMX | | | | | |
| 397.5700 | 07/24/2012 | 11/05/2010 | 4,091.00 | 5,224.08 | 0.00 | -1,133.08 | 0.00 | 0.00 |
| 665162517 | MFB NORTHERN FUNDS MULTI MANAGER LARGE CAP FD | | NMMLX | | | | | |
| 5484.3400 | 11/05/2012 | Various | 52,869.00 | 49,446.03 | 0.00 | 3,422.97 | 0.00 | 0.00 |
| 665162517 | MFB NORTHERN FUNDS MULTI MANAGER LARGE CAP FD | | NMMLX | | | | | |
| 12612.9100 | 12/07/2012 | Various | 122,219.09 | 107,900.59 | 0.00 | 14,318.50 | 0.00 | 0.00 |
| 665162574 | MFB NORTHN MULTIMGR MID CAP FD | | NMMCX | | | | | |
| 3649.0100 | 12/07/2012 | Various | 44,955.51 | 43,235.65 | 0.00 | 1,719.86 | 0.00 | 0.00 |
| **Total Long Term 15% Sales Reported on 1099-B Report on Form 8949, Part II, with Box B checked** | | | **267,538.70** | **258,340.14** | **0.00** | **9,198.56** | **0.00** | **0.00** |
| **Long Term 28% Sales Reported on 1099-B** | | | | | | | | |
| 78463V107 | MFC SPDR GOLD TR GOLD SHS | | GLD | | | | | |
| 140.0000 | 11/05/2012 | 05/07/2010 | 22,841.93 | 16,467.73 | 0.00 | 6,374.20 | 0.00 | 0.00 |
| 78463V107 | MFC SPDR GOLD TR GOLD SHS | | GLD | | | | | |
| 225.0000 | 12/07/2012 | Various | 37,074.67 | 24,243.75 | 0.00 | 12,830.92 | 0.00 | 0.00 |
| 78463V107 | MFC SPDR GOLD TR GOLD SHS | | GLD | | | | | |
| .0000 | 12/31/2012 | 03/03/2009 | 44.14 | 24.78 | 0.00 | 19.36 | 0.00 | 0.00 |

82-0540623

# 2012 Tax Information Statement



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SARASOTA, FL 34231-3548

**Payer's Name and Address:**
THE NORTHERN TRUST COMPANY
P.O. BOX 803878
CHICAGO, IL 60680

☐ Corrected ☐ 2nd TIN notice

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|---|---|---|---|---|---|---|---|---|
| 78463V107 | MFC SPDR GOLD TR GOLD SHS | | GLD | | | | | |
| .0000 | 12/31/2012 | 05/07/2010 | 104.29 | 76.48 | 0.00 | 27.81 | 0.00 | 0.00 |
| 78463V107 | MFC SPDR GOLD TR GOLD SHS | | GLD | | | | | |
| .0000 | 12/31/2012 | 08/05/2010 | 58.87 | 42.45 | 0.00 | 16.42 | 0.00 | 0.00 |
| | | | 60,123.90 | 40,855.19 | 0.00 | 19,268.71 | 0.00 | 0.00 |

**Report on Form 8949, Part II, with Box B checked**

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