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Department of the Treasury Internal Revenue Service

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)

Open to Public

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

Inspection

OMB No 1545-0047

AI	For the	e 2012 calendar year, or tax year beginning JUL 1, 2012 and ending	JUN 30, 2013									
В	Check if	C Name of organization	D Employer identifi	cation number								
ŧ	applicab											
Γ.												
	chang Name chang		64-0	321523								
7	<u>521525</u>											
늗)442-6858											
\ <u></u>												
⊢	ireturn ∏Applio		G Gross receipts \$	902,116.								
_	Lition NATCHEZ, MS 39120 H(a) is this a group return											
	F Name and address of principal officer NANCY HUNGERFORD for affiliates?											
_	Same as C above I Tax-exempt status. X 501(c)(3)											
			 	•								
		te: www.natchezchildrenshome.org	H(c) Group exemption									
			ear of formation: 1819] I	M State of legal domicile: MS								
	art I	Summary										
9	1	Briefly describe the organization's mission or most significant activities: PROVIDIN	G CARE FOR NE	EDY								
ā		CHILDREN										
Governance	2	Check this box If the organization discontinued its operations or disposed of m	ore than 25% of its net a	1								
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	12								
•ర	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11								
ies	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	12								
Activities	6	Total number of volunteers (estimate if necessary)	6	3								
Ş Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	<u>7a</u>	0.								
r	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.								
enne			Prior Year	Current Year								
₹ 5 9	8	Contributions and grants (Part VIII, line 1h)	500,562.	209,189.								
evenue	9	Program service revenue (Part VIII, line 2g)	<u> </u>	30 <u>,455</u> .								
. 8	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	= <u>U 283,431.</u>	41,056.								
Ž	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	222,288.	264,046.								
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1 2 7	114 1 , CO 56, 792.	544,746.								
.s	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	$ \mathfrak{L} $ 0.	0.								
Š	14	Benefits paid to or for members (Part IX, column (A), line 4)	··· - 0 •	0.								
<u>`</u>	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.								
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.								
نارز Expenses	Ь	Total fundraising expenses (Part IX, column (D), line 25) 85, 272.										
Û	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	767,914.	787,174.								
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	767,914.	787,174.								
	19	Revenue less expenses Subtract line 18 from line 12	288,878.									
or			Beginning of Current Year	End of Year								
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	898,510.	658,165.								
ASS	21	Total liabilities (Part X, line 26)	3,112.	5,194.								
E SE	22	Net assets or fund balances. Subtract line 21 from line 20	895,398.	652,971.								
Pi	art II	Signature Block	0,0,0,0,0	002/3/20								
		alties of perjury, I declare that + have examined this return, including accompanying schedules and sta	tements, and to the best of n	ny knowledge and belief, it is								
		ct, and complete. Declaration of preparer (other than officer) is based on all information of which prep										
	,	1 Care Land	///-	7.14								
Sig	n	Signature of officer	Date									
Her		NANCY HUNGERFORD, EXECUTIVE DIRECTOR		•								
1101	•	Type or print name and title	 	-								
			Date Check	PTIN								
Trimbrype preparer 3 name												
	parer	Charles W Caldwell, Jr, CCharles W Caldwell, Firm's name SILAS SIMMONS, LLP		P00038684 64-0319291								
	Only	Firm's address P.O. Box 1027	Firm's EIN	04-0313431								
Jac	only	Natchez, MS 39121-1027	Db /	601\442_7411								
		RS discuss this return with the preparer shown above? (see instructions)		X Yes No								
2320	01 12-1	10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2012)								

	990 (2012) NATCHEZ CHILDREN'S HOME SERVICES	64-0321523	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	` Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission:		
	THE OBJECTIVE ACCOMPLISHED BY THE ORGANIZATION IS THE PI		
	CARE & EDUCATION FOR ABUSED, ABANDONED, OR NEGLECTED CH	LLDREN FROM	
	MISSISSIPPI AND NEIGHBORING PARISHES OF LOUISIANA.		
2	Did the organization undertake any significant program services during the year which were not listed on		
_	the prior Form 990 or 990-EZ?	□vo	x X No
	If "Yes," describe these new services on Schedule O.		S LZZ NU
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Ve	X No
•	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expense	es
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported	, , , , , , , , , , , , , , , , , , ,	,
4a	(Code) (Expenses \$	ue \$)
4b	(Code) (Expenses \$,455.)
	PROVISION OF TEMPORARY AND FOSTER CARE AND TO PROVIDE CARE		
	EDUCATION FOR NEGLECTED, NEEDY, ABUSED, OR ABANDONED CH.	LLDREN	
		-	
4c	(Code) (Expenses \$ including grants of \$) (Reveni	10 ¢	
	(Neveni	je \$	
		-	
			
			~
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
46	Total program service expenses 505 574		

Form 990 (2012) NATCHEZ CHILDREN'S HOME SERVICES
Part IV Checklist of Required Schedules

			Yes	No
4	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	Х	
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			
	during 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			
	sımılar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	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		<u> </u>
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	X	
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	Х	
D	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	446	x	
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b	^	
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	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	1.0		
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial 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	х	
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_
14a	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			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
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		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		. ,	
40	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,"	4.0		v
20-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
Ü	in 163 to line 20a, did the diganization attach a copy of its addited financial statements to this feturit?	_ZUD	000	

	·		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		<u> </u>
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			77
	Schedule K. If "No", go to line 25	24a		<u> </u>
b		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			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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			
	Schedule L, Part I	25b		X
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	26	_	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	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		X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С				,,
	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			٠,,
	contributions? If "Yes," complete Schedule M	30		Х
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			٠,,
	Schedule N, Part II	32_		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			3,5
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_33_		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			٠,,
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," 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?	_		
	If "Yes," complete Schedule R, Part V, line 2	36_	 	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	ļ	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2012) NATCHEZ CHILDREN'S HOME SERVICES Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
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	_X	
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 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	1		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u>X</u>
b	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			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u> _
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			İ
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			l
	were not tax deductible?	6b		-
7	Organizations that may receive deductible contributions under section 170(c).	_		l
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	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	- -		Х
_	to file Form 8282?	7c		
d		70		X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
f	If the organization, during the year, pay premiums, directly of indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u> 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	711		
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		ĺ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	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:			
а	Gross income from members or shareholders			ĺ
b	Gross income from other sources (Do not net amounts due or paid to other sources against			ĺ
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	ļ i		ļ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			1
b	Enter the amount of reserves the organization is required to maintain by the states in which the			1
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	
		Earm	990	12012

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						\mathbf{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	1a		12					
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
b	Enter the number of voting members included in line 1a, above, who are independent	1b		11					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh								
	officer, director, trustee, or key employee?								
3	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		X		
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	is filed?		4		X		
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?			5		X		
6	Did the organization have members or stockholders?			Ī	6		X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or	Ī					
	more members of the governing body?	• •			7a		X		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or						
	persons other than the governing body?		,		7ь		Х		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:	ſ					
а	The governing body?	,	- · - · · - · · · · · · · · · · · · · ·		8a	X			
	Each committee with authority to act on behalf of the governing body?			Ī	8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached :	at the						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			- 1	9		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	evenu	e Code.)						
			,			Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?				10a		X		
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,						
	and branches to ensure their operations are consistent with the organization's exempt purposes?	-			10b				
11a	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	Х			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to con	flicts?		12b		Х		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y								
	ın Schedule O how this was done				12c		X		
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 approv	al by ır	dependent						
	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		X		
	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 arrange	ment v	/ith a						
	taxable entity during the year?				16a		X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ite its p	articipation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organical statements are safeguard to safeguard the organical statements.	nızatıo	n's	ļ					
	exempt status with respect to such arrangements?				16b				
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed None								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s on	ly) av	/ailab	le			
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain	ın Sci	nedule O)						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, continuous con	onflict	of interest policy,	and	fınan	cıal			
	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 a	nd rec	ords of the orgar	nzatı	on 🕨	·			
	NATCHEZ CHILDREN'S HOME SERVICES - 601/442-6858								
	806 NORTH UNION ST. NATCHEZ. MS 39120								

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.

(A)	(B)	Destina						(D)	(E)	(F)		
Name and Title	Average		(do not check more than one box, unless person is both an officer and a director/trustee)			than		Reportable	Reportable	Estimated		
	hours per	box				ıs bot or/trus	h an tee)	compensation	compensation	amount of		
	week (list any					Τ	Ė	. from the	from related organizations	other compensation		
	hours for	direct	}			l e		organization	(W-2/1099-MISC)	from the		
	related	tee or	ste			nsate		(W-2/1099-MISC)	(,	organization		
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				and related		
	below	vidua	를	ļ jā	empi	lest c	퍨			organizations		
	line)	틸	Inst	Officer	Key	₹ E	Former					
(1) WALTON JONES	0.00											
DIRECTOR		X	L.			<u> </u>		0.	0.	0.		
(2) BRADLEY HARRISON	0.00											
PRESIDENT		X		X		<u> </u>		0.	0.	0.		
(3) KATHIE BLANKENSTEIN	0.00											
SECRETARY		X		X		<u> </u>		0.	0.	0.		
(4) CONRAD ANDERSON	0.00											
TREASURER		X		X				0.	0.	0.		
(5) NANCY HUNGERFORD	40.00											
EXECUTIVE DIRECTOR		X		X				74,678.	0.	7,063.		
(6) JEAN LECKIE	0.00											
PAST PRESIDENT		X						0.	0.	0.		
(7) BETTY CADE	0.00											
DIRECTOR		X						0.	0.	0.		
(8) JANET SULLIVAN	0.00					l						
VICE PRESIDENT		X		X				0.	0.	0.		
(9) FORREST JOHNSON	0.00									-		
DIRECTOR		X						0.	0.	0.		
(10) BARBARA PERSONS	0.00]										
DIRECTOR		X						0.	0.	0.		
(11) JOHN KRAMER	0.00											
DIRECTOR		X	<u> </u>					0.	0.	0.		
(12) DOROTHY S SYLVESTER	0.00						ĺ					
DIRECTOR		X	L					0.	0.	0.		
-												
				L			<u></u>					
		L			<u>_</u> _	L	L					
					L							
		1										

NATCHEZ CHILDREN'S HOME SERVICES

Form 990 (2012)

64-0321523

Page 8

		Check if Schedule O cont	ains a response	to any question in	this Part VIII		_	
•			•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	_	a Federated campaigns	1a			Tevenue	70701120	513, 07 514
တီ ဋိ		Membership dues	1b					
L'Ait		•	1c					
<u> </u>	(Related organizations Government grants (contribut 	ions) 1e					
Sig	f		· -					
돌힐	•	similar amounts not included abo		209,189.				
풀히	ç			205,105.				
일일	•	Total. Add lines 1a-1f	· 14-17 4		209,189.			
_				Business Code				
ا بو	2 a	FOOD REIMBURSEM	1ENT	624100	30,455.	30,455.		
اہ ػ	t							
Program Service Revenue	(
eve Teve								
9E	•	•						
ا ته	f	All other program service reve	enue		<u>-</u>			
		Total. Add lines 2a-2f		•	30,455.			
	3	Investment income (including	dividends, interes	est, and				
		other similar amounts)		▶	15,286.			15,286.
	4	Income from investment of ta	x-exempt bond p	proceeds				1
	5	Royalties		<u> </u>	46,627.			46,627.
	_		(i) Real	(ıı) Personal				
	6 a		22,522.					
		Less rental expenses Rental income or (loss)	22,522.					
		d Net rental income or (loss)	44,344.		22,522.			22,522.
	7 :	Gross amount from sales of	(ı) Securities	(II) Other	22,322.			22,322.
	, ,	assets other than inventory	328,119.	(ii) Other				
	ŀ	Less cost or other basis	320,113					
	•	and sales expenses	302,349.		,			
		Gain or (loss)	25,770.					
		d Net gain or (loss)		•	25,770.			25,770.
ne	8 a	a Gross income from fundraisin	g events (not					
		including \$	of					
ev.		contributions reported on line	•	1				
Other Reven		Part IV, line 18		239,592.				İ
동		Less direct expenses	b	55,021.				
		Net income or (loss) from fund	_	•	<u> 184,571.</u>			184,571.
	9 a	a Gross income from gaming ad	ctivities. See					
	_	Part IV, line 19	a					
		Less direct expenses	b					
		Net income or (loss) from gam		P		-		_
	1Ų a	 Gross sales of inventory, less and allowances 						
		Less. cost of goods sold	a					
		Net income or (loss) from sale	b os of inventory					
		Miscellaneous Revenu		Business Code				†
	11 :	Miscellaneous	·•.	900099	10,326.			10,326.
	_)						
		•	<u></u>					
		d All other revenue						
	•	Total. Add lines 11a-11d			10,326.			
	12	Total revenue. See instructions.		>	544,746.	30,455.	0	. 305,102.

Form 990 (2012) NATCHEZ CHILD
Part IX Statement of Functional Expenses

,	Check if Schedule O contains a respons			simple te column (1 y)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
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,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	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) Other employee benefits				
9 10	Payroll taxes				
10 11	Fees for services (non-employees)				
''	Management				
a b	T				
C	Accounting				
q	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
•	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel			_	
18	Payments of travel or entertainment expenses	-			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
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) amount, list line 24e expenses on Schedule O.)				
а	See attached schedule	842,195.	505,574.	196,328.	140,293.
b	Direct special events e	<55,021.		130/320.	<55,021.>
c		100,000	.		
d			···		
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	787,174.	505,574.	196,328.	85,272.
26	Joint costs. Complete this line only if the organization		<u> </u>		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2012)
Part X Balance Sheet

art)	~	Check if Schedule O contains a response to an	/ quantum in this Dort V			
		Check if Schedule O contains a response to any	y question in this Part X	(A)		(B)
		0		Beginning of year		End of year
	1	Cash - non-interest-bearing	<11,427.		5,253	
	2	Savings and temporary cash investments	72,832.	2	158	
	3	Pledges and grants receivable, net	ł		3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and fo				
		trustees, key employees, and highest compensa	ated employees. Complete			
	_	Part II of Schedule L		5		
'	6	Loans and other receivables from other disquali				
		section 4958(f)(1)), persons described in section				
		employers and sponsoring organizations of sect		_		
: .	_	employees' beneficiary organizations (see instr).	Complete Part II of Sch L		6	-
2	7	Notes and loans receivable, net	i		7	· · · · · · · · · · · · · · · · · · ·
	8	Inventories for sale or use	}		8	•
- 1	9	Prepaid expenses and deferred charges		•	9	
יין	υa	Land, buildings, and equipment cost or other	772 140			
		basis Complete Part VI of Schedule D	10a 772,149. 10b 549,019.	222 562		222 120
. م		Less: accumulated depreciation	$\lfloor 10b \rfloor 549,019.$	222,563.		223,130
11		Investments - publicly traded securities	E 0.7 01 A	11	200 045	
12		Investments - other securities See Part IV, line 1		587,914.	12	399,847
13		Investments - program-related See Part IV, line		13		
14		Intangible assets	26 620	14	20 777	
15		Other assets. See Part IV, line 11		26,628.	15	29,777 658,165
16		Total assets. Add lines 1 through 15 (must equ.	al line 34)	898,510.	16	030,103
17		Accounts payable and accrued expenses		···	17	
18		Grants payable Deferred revenue		18		
19				19		
١.		Tax-exempt bond liabilities	Post IV of Cob adula D		20	
22		Escrow or custodial account liability Complete I			21	
22	2	Loans and other payables to current and former				
i		key employees, highest compensated employee	es, and disqualified persons		00	
0.		Complete Part II of Schedule L			22	
23		Secured mortgages and notes payable to unrela	'		23	
25		Unsecured notes and loans payable to unrelated	· · · · · · · · · · · · · · · · · · ·		24	,
25	5	Other liabilities (including federal income tax, pa				
		parties, and other liabilities not included on lines Schedule D	17-24). Complete Part X of	3,112.	05	5 10 <i>1</i>
26	6	Total liabilities. Add lines 17 through 25		3,112.	25 26	5,194 5,194
	<u> </u>	Organizations that follow SFAS 117 (ASC 958	N shook have N V and	2,114.	26	
,		complete lines 27 through 29, and lines 33 an				
27 28 29 30 31 32	7	Unrestricted net assets	d 34.	700,941.	0.7	446,871
28		Temporarily restricted net assets		44,778.	27	56,421
29		Permanently restricted net assets		149,679.	28	149,679
28		Organizations that do not follow SFAS 117 (A	SC 958) check hore	<u> </u>	29	143,073
		and complete lines 30 through 34.	30 936), Clieck nere			
30	^	Capital stock or trust principal, or current funds			00	
30		• • •	uupment fund		30	
31		Paterned carriers and owners accumulated in	· ·		31	
32		Retained earnings, endowment, accumulated in Total net assets or fund balances	come, or other tunas	895,398.	32	652,971
33	2					

Form **990** (2012)

orm	n 990 (2012) NATCHEZ CHILDREN'S HOME SERVICES 64-0	321523	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets			<u> </u>
	' Check if Schedule O contains a response to any question in this Part XI			X
•				
1	Total revenue (must equal Part VIII, column (A), line 12)	54	<u>4,7</u>	46.
2	Total expenses (must equal Part IX, column (A), line 25)			74.
3	Revenue less expenses Subtract line 2 from line 1			28.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	89	<u>5,3</u>	98.
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities 6			
7	Investment expenses 7			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)			<u> 1.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	65	2,9	<u>71.</u>
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
	<u> </u>		Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a			
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,			
	consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	За		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	26		1

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Employer identification number

				CHILDREN'S						6	<u>4-0321</u>	<u> 523</u>	
Pa	rt I	Reason	for Public Char	ity Status (All organiz	ations mus	st complet	e this part	:.) See inst	ructions.				
The 1	organi		•	because it is: (For lines 1 s, or association of churc	•	-	•	•	_				
2	一			s, or association of chart (0(b)(1)(A)(ii). (Attach Sci		iibed iii se	Clion 170	(0)(1)(1)(1)	·•				
3	Ħ			tal service organization o	•	n section	170(b)(1)	AVIIII					
٠ ۵	H	•	•	operated in conjunction					/6\/4\/ 6 \/ii	i) Enter	the hospital	l'e nam	10
4		_	-	operated in conjunction	WILLI & HOS	pitai desci	ibed iii Se	Ction 170	יואלאוי אלטי	ı, cittoi	tile flospital	i S man	16,
_		organizati		benefit of a college or ur	an contra or	wood or or	orated by		montal uni	t dooonb	and in		
5	ш	_		=	iiversity ov	wiled of of	erated by	a governi	nemai um	i describ	Jeu III		
_			(b)(1)(A)(iv). (Compl	•									
6			-	ent or governmental unit									
7	LX			eives a substantial part	of its supp	ort from a	governme	ental unit o	r from the	general	public desc	ribed i	n
		-	b)(1)(A)(vi). (Comple										
8	\vdash			section 170(b)(1)(A)(vi). (
9		-	-	eives. (1) more than 33 1						•	_	•	
			•	nctions - subject to certa	-	-					_		
		income and u	inrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nızatıon	after June 3	30, 197	′ 5.
			509(a)(2). (Complete	•									
10		An organizati	on organized and o	perated exclusively to te	st for publi	c safety. S	See sectio	n 509(a)(4	I).				
11		An organizati	on organized and o	perated exclusively for th	ne benefit o	of, to perfo	rm the fur	nctions of,	or to carr	y out the	purposes o	of one	or
		more publicly	supported organiza	ations described in section	on 509(a)(1	1) or section	n 509(a)(2	2). See se c	ction 509(a)(3) . Ch	eck the box	that	
		describes the	type of supporting	organization and comple	ete lines 1°	1e through	11h.						
		a Type i	ь 🗀 Т	ype II c L Ty	ype III - Fui	nctionally i	ntegrated	C	∎	e III - No	n-functional	ly inte	grated
е		By checking to	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified	persons oth	ner tha	n
		foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	tions des	cribed in s	ection 509	9(a)(1) or	section 509	9(a)(2)	
f		If the organization	ation received a writ	tten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		supporting or	rganization, check tl	nis box									
g		Since August	17, 2006, has the d	organization accepted an	ny gift or co	ontribution	from any	of the follo	owing per	sons?			
		(i) A persor	n who directly or inc	lirectly controls, either al	one or tog	ether with	persons o	lescribed i	ın (ıı) and (ու) below	',	Yes	No
		the gove	eming body of the s	upported organization?							11g(i)		
		(ii) A family	member of a person	n described in (i) above?							11g(ii)		
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	e?					11g(iii)		
h				about the supported org									
			.		,	. - ,							
(i)		rganization (described on l		(iii) Type of organization (described on lines 1-9 above or IRC section	în col. (i) lis	rganization sted in your document?	organizat	u notify the ion in col. r support?	organization (i) organiz	(vi) Is the anization in col. irganized in the U.S.?			netary
				(see instructions))	Yes	No	Yes	No	Yes	No			
												-	
		-											
										-			_
_		-											_
Γota	al												

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 NATCHEZ CHILDREN'S HOME SERVICES 64-0321!

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.")	421,723.	357,012.	295,376.	500,561.	209,189.	1783861.
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						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	421,723.	357,012.	295,376.	500,561.	209,189.	<u>1783861.</u>
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						169,356.
	Public support. Subtract line 5 from line 4						1614505.
Sec	ction B. Total Support	ı					
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	421,723.	357,012.	295,376.	500,561.	209,189.	1783861.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties					0.4 40-	0.4.4 4.50
	and income from similar sources	63,662.	52,444.	62,641.	78,296.	84,435.	341,478.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital	112 000	00 600	106 700	150 000	105 410	667 030
	assets (Explain in Part IV.)	113,992.	93,620.	106,700.	158,208.	195,419.	667,939.
	Total support. Add lines 7 through 10						2793278. 657,553.
	Gross receipts from related activities,	•	•	ما المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية المارية الم		12	657,555.
13	First five years. If the Form 990 is for organization, check this box and stor	•	s tirst, second, thir	a, rourth, or fifth ta	ax year as a sectio	11 50 1 (0)(3)	
Sec	ction C. Computation of Publ		rcentage				
	Public support percentage for 2012 (column (f))		14	57.80 %
	Public support percentage from 2011		-			15	62.65 %
	33 1/3% support test - 2012. If the o	•	•	n line 13, and line	14 is 33 1/3% or n		
	stop here. The organization qualifies	•				,	$\triangleright X$
b	33 1/3% support test - 2011. If the		-		line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual						ightharpoons
17a	10% -facts-and-circumstances tes	•			e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	~					
	meets the "facts-and-circumstances"					J	▶□
b	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explair	in Part IV how the	e
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	ınd see instruction	s 🕨
					Sche	dule A (Form 990	or 990-EZ) 2012

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.)

<u> </u>	tion 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	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that								
	are not an unrelated trade or bus-								
	iness under section 513								
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								
6	Total. Add lines 1 through 5								
	Amounts included on lines 1, 2, and								
	3 received from disqualified persons	1							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year								
С	Add lines 7a and 7b								
8	Public support (Subtract line 7c from line 6)	·							
Sec	tion B. Total Support								
Cale	ndar 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	L							
b	Unrelated business taxable income	1							
	(less section 511 taxes) from businesses	1							
	acquired after June 30, 1975								
11	Add lines 10a and 10b 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 assets (Explain in Part IV)				<u> </u>	1			
13	Total support. (Add lines 9, 10c, 11, and 12)	-							
	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,		
	check this box and stop here	J			•	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Sec	tion C. Computation of Publ	ic Support Pe	rcentage			<u>.</u>			
	Public support percentage for 2012 (I			column (f))		15	%		
	Public support percentage from 2011		•	(1)		16	%		
	tion D. Computation of Inves			· · · · · · · · · · · · · · · · · · ·		1.01	<u></u>		
				ne 13. column (fl)		17	<u> </u>		
	7 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) 8 Investment income percentage from 2011 Schedule A, Part III, line 17 18 %								
	9a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not								
ıya							17 13 HOL		
	more than 33 1/3%, check this box at	-	•	•			and		
D	b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
00			-						
20	Private foundation, If the organization	n did not check a	Dox on line 14, 19	a, or 19b, check t	nis box and see in	istructions			

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

NATCHEZ CHILDREN'S HOME SERVICES

Employer identification number

64-0321523 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts (a) Donor advised funds 1 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 24 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, 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
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a Revenues included in Form 990, Part VIII, line 1
- Assets included in Form 990, Part X

232051 12-10-12

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ightharpoons	\$				

	\$	 	
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HA	For Paperwork	Reduction	Act Notice,	see the	Instructions	for Form	990.

		CHILDREN'S					<u>64-03</u>			age 2
Pa	rt III Organizations Maintaining C	collections of Ar	t, Historical T	reasures, c	or Oth	er Simil	<u>ar Asse</u>	ts(contil	nued)	
3	Using the organization's acquisition, accessi	on, and other record:	s, check any of the	e following tha	it are a s	ignificant	use of its	collectio	n ıtem	s
•	(check all that apply)									
а	Public exhibition	d	Loan or ex	change progra	ams					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explain	how they further	the organizati	on's exe	mpt purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit of	r receive donations o	f art, historical tre	asures, or oth	er sımıla	r assets		_		_
	to be sold to raise funds rather than to be m							Yes		No
Pa	rt IV Escrow and Custodial Arran		te if the organizati	on answered	"Yes" to	Form 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	an or other intermed	ary for contributio	ns or other as	sets not	included		_		_
	on Form 990, Part X?	<u>.</u>						Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table.							
								Amoun	t	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e			·	
f	Ending balance					1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has bee	n provided in	Part XIII]
Pa	rt V Endowment Funds. Complete	f the organization ans	swered "Yes" to F	orm 990, Part	IV, line 1	10				
		(a) Current year	(b) Prior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance	204,641.	198,397	. 19	4,457.	1	93.291.		193.	079.
b										
С	Net investment earnings, gains, and losses	<3,539.	6.244		3,940.		1,166.			212.
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs			1				ļ		
f	Administrative expenses									
g	End of year balance	201,102.	204,641	. 19	8,397,	1	94,457.		193,	291.
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1g, column				-		•	
а	Board designated or quasi-endowment	•	%							
b	Permanent endowment	%	_							
С	Temporarily restricted endowment ▶	 %								
	The percentages in lines 2a, 2b, and 2c show	ıld equal 100%.								
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held	and administe	ered for t	he organiz	zation			
	by·	_				_			Yes	No
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii)		X
b	If "Yes" to 3a(ii), are the related organization	s listed as required or	n Schedule R?					3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds							
Pa	rt VI Land, Buildings, and Equipn	nent. See Form 990,	Part X, line 10	· -						
	Description of property	(a) Cost or ot		st or other	(c) A	ccumulate	ed	(d) Boo	k valu	e
		basis (investm	ient) basis	s (other)		preciation				
1a	Land		500.					•	5	00.
b	Buildings			07,884.		227,8	75.	18	0,0	
С	Leasehold improvements			•						
d	Equipment		3	63,765.		321,1	44.	4	2,6	21.
е	Other									
Tota	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line	10(c).)			•	22	3,1	30.

NATCHEZ CHILDREN'S HOME SERVICES

64-0321523 Page 3

							· 		201505	_
	<u>dule D</u> rt XI	(Form 990) 2012		CHILDREN'S					321523	Page 4
		·				nts w	ith Revenue per R	í I	<u> </u>	5.65
1		revenue, gains, and other			ments			1 +	599	767.
2		ints included on line 1 b		90, Part VIII, line 12.		1 - 1				
а		nrealized gains on inves				2a				
b		ted services and use of				_2b_				
С		veries of prior year grant	s			2c				
d		(Describe in Part XIII)				2d	<u>55,021.</u>	li		
е	Add I	nes 2a through 2d						2e		<u>,021.</u>
3	Subtr	act line 2e from line 1						3	544	<u>,746.</u>
4	Amou	ints included on Form 99	90, Part VIII, line	12, but not on line 1.						
а	Inves	tment expenses not incl	uded on Form 99	0, Part VIII, line 7b		_4a				
b	Other	(Describe in Part XIII.)				4b]		
C	Add I	nes 4a and 4b					-	4c		0.
5	Total	revenue Add lines 3 and	d 4c . (This must e	equal Form 990, Part	: I, line 12)			5	544	746.
Par	rt XII	Reconciliation of	Expenses p	er Audited Finai	ncial Stateme	ents W	/ith Expenses per	Retur	'n	
1	Total	expenses and losses pe	er audited financi	al statements	·			1	842	,195.
2	Amou	ints included on line 1 b	ut not on Form 9	90, Part IX, line 25						
а	Dona	ted services and use of	facilities			2a				
b	Prior	year adjustments				2b		1		
C		losses				2c		1		
d		(Describe in Part XIII)				2d	55,021.	1		
		nes 2a through 2d						2e	55	021.
3		act line 2e from line 1						3		174.
4		ints included on Form 9	On Part IX line 2	5 but not on line 1:					, , , ,	1 + 1 = 0
a		tment expenses not incl		·		4a				
b		(Describe in Part XIII)	uded on i onli sa	oo, Fait viii, iiile 70		4b		1 1		
-		nes 4a and 4b				40				٥
			and A. Other more	+				4c	707	174.
Dar		expenses Add lines 3 a Supplemental Inf		t equal Form 990, Pa	iπ i, iine i 8)			5	767	1/4.
		· · · · · · · · · · · · · · · · · · ·			5 10 D+ III	1	1 4 D+ N/ I 4	LI O	- D-4W I	4 Doub
	-	nis part to provide the de							b; Part V, line	4, Part
		rt XI, lines 2d and 4b; ar					any additional informat	ion.		
Par	ct v	', line 4: CF	ITLDKEN S	EDUCATION.	AL PURPOS	ES				
	-	_								
_		' - 3								
Par	rt X	I, Line 2d -	Other A	<u>djustments</u>	:					
Dir	cect	special eve	<u>ents expe</u>	<u>nses nette</u>	<u>d against</u>	re	venue on			
	_									
For	<u>cm 9</u>	90								
							,			
		_								
Par	rt X	II, Line 2d	- Other	<u>Adjustment</u>	s:		<u> </u>			
<u>Dir</u>	cect	special eve	ents expe	nses nette	<u>d against</u>	re	venue on			
								Sched	ule D (Form 9	90) 2012

Part XIII Suppl	emental Informa	tion (con	Z CHILDE	KEN'S HOI	ME SERV.	ICES	<u> </u>	3/215/2/3 Page 5
Form 990				_				
PART XII &	XIII, LINE	2d:	DIRECT	SPECIAL	EVENTS	EXPENSES	NETTED	AGAINST
REVENUE ON	FORM 990						·	
		_						
,								
		 	*					
-			-					
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.=								
<u> </u>	<u></u>							
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<u> </u>	<u>.</u>					<u>.</u>		
					. <u>-</u>			

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open To Public Inspection

Name of the organization **Employer identification number** NATCHEZ CHILDREN'S HOME SERVICES 64-0321523 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants ь Phone solicitations С Special fundraising events In person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or _ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? _ Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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

Pa	Fundraising Events. Complete if the offundraising event contributions and g	_			
1	or fairfulating event contributions and g	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
		PECAN SALES (event type)	ABCS PROGRAM (event type)	(total number)	col (c))
en.		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	34,086.	93,027.	112,479.	239,592.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	34,086.	93,027.	112,479.	239,592.
	4 Cash prizes				
Se	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs				
Orrect E	7 Food and beverages				
ш	8 Entertainment				
	9 Other direct expenses	24,797.	8,433.	21,791.	55,021.
	10 Direct expense summary Add lines 4 through	jh 9 in column (d)		•	(55,021)
D	11 Net income summary Combine line 3, column		000 5 . 11/1 . 40	_	184,571.
Pa	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" to Form	1 990, Part IV, line 19, or re	eported more than	
			(b) Pull tabs/instant		(d) Total gaming (add
Revenue		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))
eve					
<u> </u>	1 Gross revenue				
es	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				_
		Yes %	Yes %	Yes %	
	6 Volunteer labor	No No	□ No	No	
	7 Direct expense summary Add lines 2 through	gh 5 ın column (d)			()
	9 Not gaming income summer. Combine has	1 column d and line 7			
	8 Net gaming income summary Combine line	1, column a, and line /	•	<u></u>	
	Enter the state(s) in which the organization opera				Yes No
b	b If "No," explain.				
				· · · · · · · · · · · · · · · · · · ·	
10a	Were any of the organization's gaming licenses i	revoked, suspended or te	erminated during the tax y	ear?	Yes No
b	f "Yes," explain:				

Schedule G (Form 990 or 990-EZ) 2012 NATCHEZ CHILDREN'S HOME SERVICES

64-0321523 Page 2

Schedule G (Form 990 or 990-EZ) 2012

232082 01-07-13

Sch	nedule G (Form 990 or 990-EZ) 2012 NATCHEZ CHILDREN'S HOME SERVICES 64	<u>-0321523</u>	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	□ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
٠	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity operated in	 	
а	a The organization's facility	13a	%
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address >		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
C	If "Yes," enter name and address of the third party		
	Name		
	Address ▶		
16	Gaming manager information:		
	Name		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the)	
	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns	(III) and (v), and	Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	ion (see instruc	tions).
	· · · · · · · · · · · · · · · · · · ·		
			
_			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to 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

NATCHEZ CHILDREN'S HOME SERVICES

Employer identification number 64-0321523

Form 990, Part VI, Section B, line 11: THE FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR, THE DIRECTOR OF DEVELOPMENT, AND THE BOOKKEEPER. Form 990, Part VI, Section C, Line 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC IN THE OFFICE UPON REOUEST. Form 990, Part VII Contact Addresses for Officers, Directors, Etc: WALTON JONES - 308 S COMMERCE ST, NATCHEZ, MS 39120 BRADLEY HARRISON - 708 ORLEANS STREET, NATCHEZ, MS 39120 KATHIE BLANKENSTEIN - 311 SOUTH UNION STREET, NATCHEZ, MS 39120 CONRAD ANDERSON - 16 PECAN WAY, NATCHEZ, MS 39120 NANCY HUNGERFORD - 806 NORTH UNION STREET, NATCHEZ, MS 39120 JEAN LECKIE - 103 SOUTH MEADOW ROAD, NATCHEZ, MS 39120 BETTY CADE - 326 SOUTHMOOR DRIVE, NATCHEZ, MS 39120 JANET SULLIVAN - P O BOX 1758, NATCHEZ, MS 39121 FORREST JOHNSON - P O BOX 70, NATCHEZ, MS 39121 BARBARA PERSONS - 101 TRACESIDE DRIVE, NATCHEZ, MS 39120 JOHN KRAMER - 511 JEFFERSON ST, NATCHEZ, MS 39120 DOROTHY S SYLVESTER - 51 CLOVERDALE ROAD, NATCHEZ, MS 39120 Form 990, Part XI, line 9, Changes in Net Assets: ROUNDING PAGE 12 PART XII LINE 2C

Name of the organization NATCHEZ CHILDREN'S HOME SERVICES	Employer identification number 64-0321523
· · · · · · · · · · · · · · · · · · ·	
ELECTION TO USE STRAIGHT LINE DEPRECIATION	
FOR MACRS PROPERTY PURSUANT TO IRC SEC 168(b)(3)(D)	
FOR THE YEAR ENDING JUNE 30, 2011	·
NATCHEZ CHILDREN'S HOME SERVICES HEREBY ELECTS, PURSUANT	TO IRC SEC
168(b)(3)(D), TO DEPRECIATE THE FOLLOWING PROPERTY PLACED	IN SERVICE
DURING THE TAX YEAR ENDING JUNE 30, 2011, BY WAY OF THE S	TRAIGHT LINE
METHOD:	
ALL PROPERTY IN THE 5 YEAR CLASS	
ALL PROPERTY IN THE 7 YEAR CLASS	
ALL PROPERTY IN THE 15 YEAR CLASS	
ELECTION NOT TO CLAIM ADDITIONAL FIRST YEAR DEPRECIATION	
ALLOWABLE UNDER IRC SEC 168(k)	
FOR THE YEAR ENDING JUNE 30, 2011	
NATCHEZ CHILDREN'S HOME SERVICES HEREBY ELECTS, PURSUANT	TO IRC SEC
168(k)(2)(D)(iii), NOT TO CLAIM THE ADDITIONAL 50% DEPREC	CIATION
ALLOWABLE UNDER IRC SEC 168(k) FOR THE FOLLOWING QUALIFYI	NG PROPERTY
PLACED IN SERVICE DURING THE TAX YEAR ENDING JUNE 30, 201	.1:
ALL PROPERTY IN THE 7 YEAR CLASS	
ALL PROPERTY IN THE 15 YEAR CLASS	

NATCHEZ CHILDREN'S HOME SERVICES, INC. STATEMENTS OF FUNCTIONAL EXPENSES - MODIFIED CASH BASIS FOR THE YEAR ENDED JUNE 30, 2013

	_		General				m . !
	Program		and		dagadada a		Total
	 Services	_A	<u>dministrative</u>	<u>_</u>	undraising		Expenses
Salaries and wages	\$ 165,900	\$	114,880	\$	49,236	\$	330,016
ABC's program - contract labor	107,650		-		-		107,650
Administrative - contract labor	31,870		-		-		31,870
Food	27,474		-		-		27,474
Utilities	29,683		-		4 <i>,</i> 775		34,458
Office supplies and expense	10,542		7,379		3,162		21,083
Payroll taxes	16,831		11,783		5,049		33,663
General insurance	15,725		12,865		-		28,590
Insurance – group medical	9,918		6,944		2,975		19,837
Insurance – life	-		908		-		908
Insurance - workers' compensation	4,811		3,368		1,443		9,622
Miscellaneous labor	2,260		-		-		2,260
Transportation and vehicle expense	8,992		7,358		-		16,350
Supplies	4,092		-		-		4,092
Bank charges and trustee fees	-		7,493		-		7,493
Repairs and maintenance - building	6,809		- ,		965		7,774
Repairs and maintenance - vehicle	2,174		1,778				3,952
Repairs and maintenance - equipment	3,728		3,051		-		6,779
Legal and accounting	-		12,555		-		12,555
Travel expense	1,600		1,310		-		2,910
Postage	-		-		10,15 0		10,150
Retirement plan cost	2,652		1,857		796		5,305
Public relations	-		-		21,593		21,593
Golf tournament	-		-		4,365		4,365
Christmas appeal	-		-		4,962		4,962
Pecan expense	-		-		24,070		24,070
Miscellaneous fundraising expense	-		331		198		529
Dues and memberships	-		1,739		-		1,739
Yard sale expenses	-		-		2,843		2,843
ABC's program	8,712		-		-		8,712
Children's Advocacy Center	18,067		-		-		18,067
Taxes and licenses	891		<i>7</i> 29		3,711		. 5,331
Depreciation	 25,193		<u> </u>		<u> </u>		25,193
Total expenses	\$ 505,574	<u>\$</u>	196,328	\$	140,293	<u>\$</u>	_842,195

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	Account Number: 101965
Taxpayer I D : 64-0321523	Account Name : Natchez Children's Home Services

Shares/FV Asset Sold	Bow	Date Acquired Date Sold	Rolding Period	Sales Proceeds	Original Cost	Realized Gain/Loss
1,781.321 Dodge & Cox Income Fund	Buy		Short	24,671.30	23, 905.33	765.97
135.149 Harbor Capital Appreciation Instl	Buy	01/23/2012 08/24/2012	Short	5, 681.66	5,260.00	421.66
720.720 PIMCO Investment Grade Corp Bond Instl	Buy	03/06/2012 02/22/2013	Short	8,000.00	7,690.08	309.92
5.220 T Rowe Price Equity Income #71	Buy	03/06/2012 02/22/2013	Short	147.67	128.00	19.67
166.058 T Rowe Price Equity Income #71	Buy	03/26/2013 06/12/2013	Short	5,000.00	4,845.57	154.43
337.940 Vanguard Growth Index Signal Fd# 1347	Buy	01/23/2012 09/13/2012	Short	11,861.70	10,466.00	1,395.70
179.752 Vanguard Growth Index Signal Fd# 1347	Buy	03/06/2012 09/13/2012	Short	6,309.30	5,797.00	512.30
335.771 Vanguard Growth Index Signal Fd# 1347	Buy	03/26/2013 05/13/2013	Short	12,990.98	12,353.00	637.98
247.875 Vanguard Inflation-Protected Secs Adm #5119	Buy	03/06/2012 02/22/2013	Short	7,000.00	6,965.28	34.72
807.175 Vanguard Total Bond Market Index Signal #1351	Buy	03/06/2012 08/24/2012	Short	9,000.00	8,919.28	80.72
1,364.877 Vanguard Total Bond Market Index Signal #1351	Buy	03/06/2012 02/22/2013	Short	15,000.00	15,081.89	-81.89
60.388 Dodge & Cox Stock Fund	Buy	03/06/2012 03/26/2013	Long	8, 147.00	6,603.42	1,543.58
4,430 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 08/15/2012	Long	4.43	4.43	0.00
1.970 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 06/15/2013	Long	1.97	1.97	0.00
4.420 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 07/15/2012	Long	4.42	4.42	0.00
4.540 Federal Home Loan Ntg Corp 5.000% 03/01/29	Free	05/13/2004 10/15/2012	Long	4.54	4.54	0.00
4.530 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 12/15/2012	Long	4.53	4.53	0.00
536.080 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 03/15/2013	Long	536.08	536.08	00.00
4.570 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 02/15/2013	Long	4.57	4.57	0.00
247.760 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 05/15/2013	Long	247.76	247.76	00.00
4.510 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 11/15/2012	Long	4.51	4.51	0.00
3.020 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 04/15/2013	Long	3.02	3.02	0.00
6.100 Federal Home Loan Mtg Corp 5.000% 03/01/29	Free	05/13/2004 01/15/2013	1,000	9	01.9	0

A Schedule Worksheet Tax

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1.13 0.0 0.00 0.0 0.00 0.00 0.00 268.56 172.23 112.17 64.75 123.06 93.33 0.00 0.00 0.00 0.00 0.00 0.00 95.45 0.00 327.62 413.42 Realized Gain/Loss 101965 9.41 12.79 10.69 10.65 11.20 12.27 12.50 26.87 8,514.00 9.62 10.90 8.81 10.20 751.33 12.97 1,203.00 4,172.38 L, 443.36 1,882.00 5,907.82 4,935.25 3,520.61 Original Cost Account Number Sales Proceeds 9.62 10.69 10.90 9.41 10.65 11.20 12.79 28.00 8.81 10.20 12.21 12.50 12.97 1,298.45 6, 321.24 5,000.00 8,637.06 3,613.94 1,019.89 5,000.00 1,615.59 1,994.17 Holding Period Long 01/23/2012 03/26/2013 05/13/2004 09/15/2012 04/15/2004 01/15/2013 04/15/2004 08/15/2012 04/15/2004 06/15/2013 04/15/2004 10/15/2012 04/15/2004 02/15/2013 02/10/2011 03/26/2013 03/06/2012, 03/26/2013 04/15/2004 05/15/2013 04/15/2004 04/15/2013 04/15/2004 03/15/2013 04/15/2004 07/15/2012 04/15/2004 09/15/2012 07/20/2010 08/24/2012 02/10/2011 08/24/2012 01/23/2012 06/12/2013 01/12/2010 03/26/2013 01/23/2012 03/26/2013 03/06/2012 06/12/2013 08/12/2011 03/26/2013 04/15/2004 12/15/2012 04/15/2004 11/15/2012 Date Sold Acquired Date Free Free HOW Free Free Free Free Free Free Free Free Free Free Buy Buy Buy Buy Buy Buy Buy Buy Buy Buy Account Name : Natchez Children's Home Services 5.000% 03/01/29 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 2.518 PIMCO Investment Grade Corp Bond Instl 462.535 PIMCO Investment Grade Corp Bond Instl 130.423 Loomis Sayles Bond Instl FD# 1162 413.423 Loomis Sayles Bond Instl FD# 1162 24,260 Harbor Capital Appreciation Instl 30.886 Harbor Capital Appreciation Instl 107.204 Harbor Capital Appreciation Instl 105.663 Loomis Sayles Bond Instl FD# 1162 321.811 PIMCO Total Return Fund #35 769.106 PIMCO Total Return Fund #35 Shares/PV Asset Sold 6.480 Federal Home Loan Mtg Corp 9.620 Federal Home Loan Mtg Corp 10.690 Federal Home Loan Mtg Corp 10.900 Federal Home Loan Mtg Corp 9.410 Federal Home Loan Mtg Corp 10.650 Federal Home Loan Mtg Corp 11.200 Federal Home Loan Mtg Corp Corp 10.200 Federal Home Loan Mtg Corp 12.270 Federal Home Loan Mtg Corp 12.500 Federal Home Loan Mtg Corp 8.810 Federal Home Loan Mtg Corp 12.790 Federal Home Loan Mtg Corp 12.970 Federal Home Loan Mtg Taxpayer I D : 64-0321523

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Taxpayer I D : 64-0321523 Account Name : Natchez Children's Home Services				Account Number :		101965
Shares/PV Asset Sold	How	Date Acquired Date Sold	Holding Period	Sales Proceeds	Original Cost	Realized Gain/Loss
E	Buy	03/06/2012 03/26/2013	Long	12,610.00	10,741.84	1,868.16
39.066 T Rowe Price Equity Income #71	Buy	07/20/2010 02/22/2013	Long	1,105.18	803.99	301.19
69.616 I Rowe Price Equity Income #71	Buy	02/10/2011 02/22/2013	Long	1,969.44	1,739.00	230.44
107.050 T Rowe Price Equity Income #71	Buy	08/12/2011 02/22/2013	Long	3,028.44	2,308.00	720.44
513.242 T Rowe Price Equity Income #71	Buy	01/23/2012 02/22/2013	Long	14,519.62	12,441.00	2,078.62
113.637 Thornburg International Value I	Buy	11/19/2008 03/26/2013	Long	3,259.10	1,962.50	1,296.60
45.917 Thornburg International Value I	Buy	01/23/2012 03/26/2013	Long	1,316.90	1,193.84	123.06
143.522 Vanguard Extended Market Idx Signal Fd# 1342	Buy	03/06/2012 03/26/2013	Long	6,348.00	5,284.48	1,063.52
137.821 Vanguard Growth Index Signal Ed# 1347	Buy	08/12/2011 09/13/2012	Long	4,837.52	3,870.00	967.52
435.641 Vanguard Inflation-Protected Secs Adm #5119	Buy	03/06/2012 05/13/2013	Long	12,237.16	12,241.51	-4.35
76.947 Vanguard Inflation-Protected Secs Adm #5119	Buy	03/06/2012 03/26/2013	Long	2,183.00	2,162.21	20.79
463.392 Vanguard Total Bond Market Index Signal #1351	Buy	03/06/2012 06/12/2013	Long	5,000.00	5,120.48	-120.48

Gain/Loss Summary

217,712.73 201,200.74 16,511.99

Long Term GL	12,385.64	-124.83	0.00	12,385.64	-124.83	12,260.81	1,069.29
Long	••	••		••	••	••	
	Gains From Sales	Losses From Sales	Common Funds	Long Term Gains	Long Term Losses	Net Long Term G/L	Capital Gain Dist
Short Term GL	4,333.07	-81.89	0.00	4,333.07	-81,89	4,251.18	893.82
Shor	Gains From Sales :	Losses From Sales:	Common Funds :	Short Term Gains :	Short Term Losses :	Net Short Term G/L:	Capital Gain Dist :

ဖ Account's Fiscal Year Ends Month

Last Updated Long Term Short Term

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Account Name : Natchez Children's Home Services Taxpayer I D : 64-0321523

Loss Carry Forward

None

101965

NITC

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101965 Account Number : Account Name : Natchez Children's Home Services Taxpayer I D : 64-0321523

Date	Transaction		Income Cash	Principal Cash
12/14/2012	Capital Gains - Short Term	PIMCO Investment Grade Corp Bond Instl		278.96
		2,574.883 Shares		
12/14/2012	Capital Gains - Long Term	PIMCO Investment Grade Corp Bond Instl		309.09
		2,574.883 Shares		
12/14/2012	Capital Gains - Short Term	PIMCO Total Return Fund #35		509.58
		3,291.042 Shares		
12/14/2012	Capital Gains - Long Term	PIMCO Total Return Fund #35		374.03
		3,291.042 Shares		
12/21/2012	Capital Gains - Long Term	PIF Temp Dollar Fd #20		0.07
		6,340.77 Shares		
12/21/2012	Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		38.80
		760.463 Shares		
12/21/2012	Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		210.73
		760.463 Shares		
12/24/2012	Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351		61.25
		2,784.228 Shares		
12/24/2012	Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351		94.66
		2,784.228 Shares		
03/28/2013	Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		2.61
		435.641 Shares		
03/28/2013	Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		36.16
		435,641 Shares		
04/02/2013	Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351		2.62
		2, 620.442 Shares		
04/02/2013	Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351		44.55
		SATER STATES		•

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Taxpayer I D : 64-0321523

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Account Name : Natchez Children's Home Svc.- Restr

0.00 21.16 0.00 0.00 34.14 250.81 0.00 0.00 0.00 0.0 9.0 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 Gain/Loss Realized 111965 667.25 1.48 1.47 9.10 9.94 409.86 2.16 1.50 1.52 178.77 82.62 0.66 2.03 11.00 9.72 259.84 1,130.19 1.51 1.51 1.01 13.21 11.57 11.26 Original Cost Account Number Sales Proceeds 745.00 444.00 281,00 2.16 1.50 1.52 178.77 82.62 99.0 1.47 1.01 2.03 13.21 9.10 11.57 11.26 11.00 9.94 9.72 1,381.00 1.51 1.51 Holding Period Short Short Short Long 03/06/2012 09/17/2012 03/06/2012 09/17/2012 03/06/2012 09/17/2012 11/19/2008 03/26/2013 Date Sold 05/13/2004 08/15/2012 05/13/2004 10/15/2012 05/13/2004 09/15/2012 05/13/2004 11/15/2012 05/13/2004 02/15/2013 05/13/2004 03/15/2013 05/13/2004 05/15/2013 05/13/2004 06/15/2013 05/13/2004 07/15/2012 05/13/2004 12/15/2012 05/13/2004 04/15/2013 05/13/2004 01/15/2013 04/15/2004 12/15/2012 04/15/2004 06/15/2013 04/15/2004 07/15/2012 04/15/2004 04/15/2013 04/15/2004 03/15/2013 Free 04/15/2004 01/15/2013 04/15/2004 08/15/2012 Acquired Date How Acq Free Free Free Free Free Free Free Free Free Free Free Free Free Free Buy Buy Buy 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 03/01/29 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 5.000% 04/01/24 7.057 Vanguard Extended Market Idx Signal Fd# 1342 16.654 T Rowe Price Dividend Growth Fund Corp Corp Corp 1.480 Federal Home Loan Mtg Corp 1.510 Federal Home Loan Mtg Corp 1.500 Federal Home Loan Mtg Corp 1.520 Federal Home Loan Mtg Corp 1.010 Federal Home Loan Mtg Corp 2.030 Federal Home Loan Mtg Corp Corp Corp Corp Corp 0.660 Federal Home Loan Mtg Corp 1.470 Federal Home Loan Mtg Corp 1.510 Federal Home Loan Mtg Corp Corp 11 Federal Home Loan Mtg Corp 9.940 Federal Home Loan Mtg Corp 99.928 Dodge & Cox Income Fund 6.102 Dodge & Cox Stock Fund 2.160 Federal Home Loan Mtg 178.770 Federal Home Loan Mtg 9.720 Federal Home Loan Mtg Loan Mtg Loan Mtg Home Loan Mtg 9.100 Federal Home Loan Mtg Loan Mtg Asset Sold Ноте 11.570 Federal Home 11.250 Federal Home 13.210 Federal 82.620 Federal Shares/PV

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Taxpayer I D : 64-0321523 Account Name : Natchez Children's Home	s Home Svc Restr			:	Account Number	• ••	111965
Shares/PV Asset Sold	allegation and and a standard and a standard of the standard and a standard and a standard and a standard and a	Bow D	Date Acquired Date Sold	Holding Period	Sales Proceeds	Original Cost	Realized Gain/Loss
12.680 Federal Home Loan Mtg Corp	5.0008 04/01/24	Free 04/1	04/15/2004 09/15/2012	Long	12.68	12.68	00.0
12.910 Federal Home Loan Mtg Corp	5.000% 04/01/24	Free 04/1	04/15/2004 02/15/2013	Long	12.91	12.91	0.00
11.040 Federal Home Loan Mtg Corp	5.000% 04/01/24	Free 04/1	04/15/2004 05/15/2013	Long	11.04	11.04	00.0
13,390 Federal Home Loan Mtg Corp	5.000% 04/01/24	Free 04/1	04/15/2004 11/15/2012	Long	13.39	13.39	00.00
10.540 Federal Home Loan Mtg Corp	5.000% 04/01/24	Free 04/1	04/15/2004 10/15/2012	Long	10.54	10.54	0.00
1.220 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 04/20/2013	Long	1.22	1.22	00.00
0.030 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 01/20/2013	Long	0.03	0.03	0.00
6.630 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 01/20/2013	Long	6.63	6.63	00.00
GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 04/20/2013	Long	00.0	00.0	00.00
GNMA II Poo1# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 05/20/2013	Long	00.00	0.00	00.00
1.190 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 05/20/2013	Long	1.19	1.19	00.00
1.320 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 09/20/2012	Long	1.32	1.32	0.00
1.200 GNMA II Pool# 2118	7,500% 11/20/25	Free 05/1	05/14/1997 11/20/2012	Long	1.20	1.20	00.00
0.020 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 02/20/2013	Long	0.02	0.02	00.00
5.480 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 12/20/2012	Long	5.48	5.48	0.00
0.020 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 12/20/2012	Long	0.02	0.02	0.00
GNMA II Pool# 2118	7,500% 11/20/25	Free 05/1	05/14/1997 11/20/2012	Long	0.00	00.0	0.00
3,590 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/3	05/14/1997 10/20/2012	Long	3.59	3.59	00.0
0.010 GNMA II Pool# 2118	7,500% 11/20/25	Free 05/1	05/14/1997 10/20/2012	Long	0.01	0.01	0.00
0.010 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 06/20/2013	Long	0.01	0.01	00.00
GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 08/20/2012	Long	00.00	00.0	0.00
1.180 GNMA II Pool# 2118	7.500% 11/20/25	Free 05/1	05/14/1997 03/20/2013	Long	1.18	1.18	0.00
3.980 GNMA II Pool# 2118	7,500% 11/20/25	Free 05/1	05/14/1997 02/20/2013	Long	3.98	3.98	0.00

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Shares/PV Asset Sold	The second designation and the second	How Acq	Date Acquired		Holding Period	Sales Proceeds	Original Cost	Realized Gain/Loss
0.010 GNMA II Pool# 2118	7.5008 11/20/25	Free	05/14/1997	ļ	Long	0.01	0.01	0.00
3.100 GNMA II Pool# 2118	8 7.500% 11/20/25	Free	05/14/1997 06/20/2013		Long	3.10	3.10	0.00
0.010 GNMA II Pool# 2118	7.500% 11/20/25	Free	05/14/1997 07/20/2012		Long	0.01	0.01	00.0
2.450 GNMA II Pool# 2118	8 7.500% 11/20/25	Free	05/14/1997 07/20/2012		Long	2.45	2.45	0.00
GNMA II Pool# 2118	8 7.500% 11/20/25	Free	05/14/1997 03/20/2013		Fong	00.00	0.00	0.00
1.250 GNMA II Pool# 2118	7.500% 11/20/25	Free	05/14/1997 08/20/2012		Long	1.25	1.25	00.00
103.924 Loomis Sayles Bond Instl FD# 1162	d Instl FD# 1162	Buy	03/12/2008 03/26/2013	//2013	Long	1,589.00	1,476.76	112.24
80.374 T Rowe Price Dividend Growth Fund	dend Growth Fund	Buy	03/06/2012 03/26/2013		Long	2,322.00	1,978.01	343.99
8.3899 T Rowe Price Equity Income #71	ty Income #71	Buy	03/12/2008 09/17/2012		Long	223.00	214.86	8.14
1.011 Thornburg International Value I	tional Value I	Buy	11/28/2007 03/26/2013		Long	29.00	34.27	-5.27
9.044 Vanguard Extended Market Idx Signal	Market Idx Signal Fd# 1342	Buy	03/06/2012 03/26/2013		Long	400.00	333.00	67.00
48.954 Vanguard Growth Index Signal Fd# 1347	ndex Signal Ed# 1347	Buy	02/10/2011 03/26/2013		Long	1,801.00	1,500.66	300.34
11.256 Vanguard Growth Index Signal Fd# 1347	ndex Signal Ed# 1347	Buy	02/10/2011 09/17/2012		Long	397.00	345.05	51.95
33.768 Vanguard Inflation	33.768 Vanguard Inflation-Protected Secs Adm #5119	Buy	03/06/2012 03/26/2013		Long	958.00	948.88	9.12
					brav angel	11,015.30	9,743.93	1,271.37

Gain/Loss Summary

Short Term GL

Long Term GL

Gains From Sales :	133.05	Gains From Sales		1,143.59
Losses From Sales :	00.00	Losses From Sales		-5.27
Common Funds :	00.0	Common Funds		00.00
Short Term Gains :	133.05	Long Term Gains	••	1,143.59
Short Term Losses :	0.00	Long Term Losses	••	-5.27
Net Short Term G/L:	133.05	Net Long Term G/L	••	1,138.32
Capital Gain Dist :	521.34	Capital Gain Dist	••	652.38

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111965

Account Number :

Taxpayer I D : 64-0321523

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Account Name : Natchez Children's Home Svc.- Restr

9 Account's Fiscal Year Ends Month

Short Term

Loss Carry Forward

Long Term

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Tax Worksheet Schedule D (07/01/2012 To 06/30/2013)

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111965 Account Number: Account Name : Natchez Children's Home Svc.- Restr Taxpayer I D : 64-0321523

Date	Transaction		Income Cash	Principal Cas
12/14/2012	Capital Gains - Short Term	nt Grade Corp Bond Instl	THE RESERVENCE OF THE PARTY OF	77.73
		1,456,228 Shares		
12/14/2012	Capital Gains - Long Term	PIMCO Investment Grade Corp Bond Instl		174.81
		1,456.228 Shares		
12/14/2012	Capital Gains - Short Term	PIMCO Total Return Fund #35		290.47
		1,875.945 Shares		
12/14/2012	Capital Gains - Long Term	PINCO Total Return Fund #35		213.20
		1,875.945 Shares		
12/21/2012	Capital Gains - Long Term	PIF Temp Dollar Fd #20		0.09
		8,918.13 Shares		
12/21/2012	Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		21.94
		430.039 Shares		
12/21/2012	Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		119.17
		430.039 Shares		
12/24/2012	Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351		46.40
		2,108.946 Shares		
12/24/2012	Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351		71.70
		2,108.946 Shares		
03/28/2013	Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		2.38
		396.271 Shares		
03/28/2013	Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		32.89
		396,271 Shares		
04/02/2013	Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351		2.38
		2,383.582 Shares		
04/02/2013	Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351		40.52

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151965 Account Number : Account Name : NCHS-Chamberlain, Hodge, Menetre Ed Taxpayer I D : 64-0321523

	HON	Date	Holding	Sales	Original	Realized
Shares/FV Asset Sold	1	Acquired Date Sold	rettoa	FIVERINGS	2802	GOTTI/ TOSS
0,876 Doage & Cox Stock Fund	Buy	03/06/2012 09/17/2012	Short	107.00	95.79	11.21
2.401 T Rowe Price Dividend Growth Fund	Buy	03/06/2012 09/17/2012	Short	64.00	59.09	4.91
1.005 Vanguard Extended Market Idx Signal Fd# 1342	Buy	03/06/2012 09/17/2012	Short	40.00	37.00	3.00
14.327 Dodge & Cox Income Fund	Buy	11/19/2008 03/26/2013	Long	198.00	162.04	38.96
14.912 Loomis Sayles Bond Instl FD# 1162	Buy	03/12/2008 03/26/2013	Long	228.00	211.90	16.10
11.526 T Rowe Price Dividend Growth Fund	Buy	03/06/2012 03/26/2013	Long	333.00	283.65	49.35
1.2415 T Rowe Price Equity Income #71	Buy	03/12/2008 09/17/2012	Long	33.00	31.79	1.21
0.174 Thornburg International Value I	Buy	11/28/2007 03/26/2013	Long	8.00	5.90	06.0-
1.334 Vanguard Extended Market Idx Signal Ed# 1342	Buy	03/06/2012 03/26/2013	Long	59.00	49.12	88.6
7.040 Vanguard Growth Index Signal Ed# 1347	Buy	02/10/2011 03/26/2013	Long	259.00	215.81	43.19
1.616 Vanguard Growth Index Signal Fd# 1347	Buy	02/10/2011 09/17/2012	Long	57.00	49.54	7.46
4.864 Vanguard Inflation-Protected Secs Adm #5119	Buy	03/06/2012 03/26/2013	Long	138.00	136.68	1.32
			1	1,521.00	1, 338.31	182.69

Gain/Loss Summary

Short Term GL

Long Term GL

164.47	00.0	164.47	06.0-	163.57	92.56
	••	·-		••	••
Gains From Sales Losses From Sales	Common Funds	Long Term Gains	Long Term Losses	Net Long Term G/L	Capital Gain Dist
19.12 0.00	0.00	19.12	00.0		73.98
Gains From Sales : Losses From Sales :	Common Funds :	Short Term Gains :	Short Term Losses:	Net Short Term G/L:	Capital Gain Dist :

Account's Fiscal Year Ends Month 6

Short Term Long Term Last Updated

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Account Name : NCHS-Chamberlain, Hodge, Menetre Ed Taxpayer I D : 64-0321523

Loss Carry Forward

Account Number : None

151965

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Q I	64-0321523			'
Account Name	: NCHS-Chamberlain, Hodge, Me	enetre Ed	Account Number	: 151965
Date	Transaction	Description	Income Cash	Principal Cash
12/14/2012	012 Capital Gains - Short Term	PIMCO Investment Grade Corp Bond Instl		22.38
		206.613 Shares		
. 12/14/2012	012 Capital Gains - Long Term	PIMCO Investment Grade Corp Bond Instl		24.80
		206.613 Shares		
12/14/2012	012 Capital Gains - Short Term	PIMCO Total Return Fund #35		41,23
		266.251 Shares		
12/14/2012	012 Capital Gains - Long Term	PIMCO Total Return Fund #35		30.26
		266.251 Shares		
12/21/2012	012 Capital Gains - Long Term	PIF Temp Dollar Fd #20		0.01
		1,256.07 Shares		
12/21/2012	012 Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		3.11
		61.02 Shares		
12/21/2012	012 Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		16.91
		61.02 Shares		
12/24/2012	012 Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351		6.58
		299.277 Shares		
12/24/2012	012 Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351	-	10.18
		299.277 Shares		
03/28/2013	013 Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		0.34
		56.156 Shares		
03/28/2013	313 Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		4.66
		56,156 Shares		
04/02/2013)13 Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351	-1	0.34
		337,641 Shares		
04/02/2013)13 Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351		5.74
		337.641 Shares		

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Account Name : NCHS-Dixon Education	. Fund		Acc	Account Number	••	161965
Shares/PV Asset Sold	Bow	f Date q Acquired Date Sold	Rolding Period	Sales Proceeds	Original Cost	Realized Gain/Loss
1.081 Dodge & Cox Stock Fund	Buy	03/06/2012	Short	132.00	118.20	13.80
121.958 PIMCO Investment Grade Corp Bond Instl	d Instl Buy	03/06/2012 10/15/2012	Short	1,383.00	1,301.29	81.71
2.888 T Rowe Price Dividend Growth Fund	nd Buy	03/06/2012 09/17/2012	Short	77.00	71.07	5.93
1.205 Vanguard Extended Market Idx Signal Fd#	mal Fd# 1342 Buy	03/06/2012 09/17/2012	Short	48.00	44.37	3.63
22.738 Vanguard Inflation-Protected Secs Adm	2s Adm #5119 Buy	03/06/2012 10/15/2012	Short	666.00	638.94	27.06
122.589 Vanguard Total Bond Market Index	c Signal #1351 Buy	03/06/2012 10/15/2012	Short	1,373.00	1,354.61	18.39
64.828 Dodge & Cox Income Fund	Buy	06/24/2009 10/15/2012	Long	901.76	806.46	95.30
10.936 Dodge & Cox Income Fund	Buy	01/12/2010 03/26/2013	Long	151.13	143.04	8.09
7.566 Dodge & Cox Income Fund	Buy	01/12/2010 10/15/2012	Long	105.24	96.96	6.28
3.536 Dodge & Cox Income Fund	Buy	08/12/2011 03/26/2013	Long	48.87	47.70	1.17
254.080 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 12/25/2012	Long	254.08	254.08	00.00
264.110 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 05/25/2013	Long	264.11	264.11	00.00
375.910 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 04/25/2013	Long	375.91	375.91	0.00
288.480 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 01/25/2013	Long	288.48	288.48	0.00
33.170 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 03/25/2013	Long	33,17	33.17	0.00
138.620 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 11/25/2012	Long	138.62	138.62	00.0
2.750 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 12/25/2012	Long	2.75	2.75	00.0
215.510 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 02/25/2013	Long	215.51	215.51	0.00
2.330 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 02/25/2013	Long	2.33	2.33	0.00
266.290 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 03/25/2013	Long	266.29	266.29	0.00
3.120 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 01/25/2013	Long	3.12	3.12	00.00
308.880 Federal National Mtg Assoc 5.2	5.250% 09/25/35 Free	e 10/21/2005 06/25/2013	Long	308.88	308.88	00.0
10.208 Loomis Sayles Bond Instl FD# 1162	.2 Buy	11/19/2008 10/15/2012	Long	154.04	101.37	52.67

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161965

Account Number :

Account Name : NCHS-Dixon Education Fund Taxpayer I D : 64-0321523

	HOW	Date	Holding	Sales	Original	Realized
Shares/FV Asset Sold	Acq	Acquired Date Sold	Period	Proceeds	Cost	Gain/Loss
14.716 Loomis Sayles Bond Instl FD# 1162	Buy	Buy 06/24/2009 03/26/2013	Pong	225.00	171.00	54.00
34.060 Loomis Sayles Bond Instl FD# 1162	Buy	06/24/2009 10/15/2012	Long	513.96	395.78	118.18
117.084 PIMCO Total Return Fund #35	Buy	06/24/2009 10/15/2012	Long	1,357.00	1,217.67	139.33
0.521 T Rowe Price Equity Income #71	Buy	06/17/2008 09/17/2012	Long	13.85	12.98	0.87
0.9086 T Rowe Price Equity Income #71	Buy	11/19/2008 09/17/2012	Long	24.15	13.67	10.48
1.3708 T Rowe Price Equity Income #71	Buy	11/19/2008 03/26/2013	Long	40.00	20.62	19.38
11.239 Thornburg International Value I	Buy	06/24/2009 10/15/2012	Long	302.00	236.47	65.53
1.583 Vanguard Extended Market Idx Signal Fd# 1342	Buy	03/06/2012 03/26/2013	Long	70.00	58.29	11.71
6.904 Vanguard Growth Index Signal Fd# 1347	Buy	02/10/2011 03/26/2013	Long	254.00	211.64	42.36
1.928 Vanguard Growth Index Signal Fd# 1347	Buy	02/10/2011 09/17/2012	Long	68.00	59.10	8.90
				10,061.25	9,276,48	784.77

Gain/Loss Summary

Short	Short Term GL		LOI	Long Term GL	
Gains From Sales :	150.52	Gains From Sales	••	634.25	
Losses From Sales ;	00.0	Losses From Sales		0.00	
Common Funds :	0.00	Common Funds		0.00	
Short Term Gains :	150.52	Long Term Gains	l 	634.25	
Short Term Losses:		Long Term Losses	••	0.00	
Net Short Term G/L:		Net Long Term G/L	••	634.25	
Capital Gain Dist :	60.26	Capital Gain Dist	••	17.72	

9 Account's Fiscal Year Ends Month Last Updated Long Term Short Term

Loss Carry Forward

None

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Taxpayer I D : 64-0321523			
Account Name : NCHS-Dixon Education Fund		Account Number :	161965
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unt Name : NC	NCHS-Dixon Education Fund		Account Number :	161965	
Andrews of the state of the sta		ene examine, a mar mer a proper a manifest, sononia, comine annota, e camine al manifestation properties que en examine para		1	:
Date	Transaction	Description	Income Cash	Principal Cash	
12/14/2012	Capital Gains - Short Term	PIMCO Investment Grade Corp Bond Instl		15.63	
		144.31 Shares			
12/14/2012	Capital Gains - Long Term	PIMCO Investment Grade Corp Bond Instl		17.32	
		144.31 Shares			
12/14/2012	Capital Gains - Short Term	PIMCO Total Return Fund #35		34.99	
		225.951 Shares			
12/14/2012	Capital Gains - Long Term	PIMCO Total Return Fund #35		25.68	
		225.951 Shares			
12/21/2012	Capital Gains - Long Term	PIF Temp Dollar Fd #20		0.01	
		1,347.91 Shares			
12/21/2012	Capital Gains - Short Term	I Rowe Price Instl Emerging Markets Equity	£d	0.33	
		33.019 Shares			
12/21/2012	Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		2.85	
		55.886 Shares			
12/21/2012	Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		15.49	
		55.886 Shares			
12/24/2012	Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351	51	5.79	
		262.99 Shares			
12/24/2012	Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351	51	8.94	
		262.99 Shares			
03/28/2013	Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		0.38	
		63,464 Shares			
03/28/2013	Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		5.27	
		63,464 Shares			
04/02/2013	Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351	51	0.29	
		294.626 Shares			
04/02/2013	Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351	51	5.01	
		294.626 Shares			

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Taxpayer I D : 64-0321523 Account Name : NCHS Restricted-Bates Ed Mem Fund				Account Number :	er :	171965
Shares/FV Asset Sold	Bow	Date Acquired Date Sold	Holding Period	Bales Proceeds	Original Cost	Resliced Gain/Loss
0.074 Dodge & Cox Stock Fund	Buy	03/06/2012 09/17/2012	Short	00.6	8.09	0.91
0.188 T Rowe Price Dividend Growth Fund	Buy	03/06/2012 09/17/2012	Short	2.00	4.63	0.37
0.075 Vanguard Extended Market Idx Signal Fd# 1342	Buy	03/06/2012 09/17/2012	Short	3.00	2.76	0.24
1.230 Dodge & Cox Income Fund	Buy	11/19/2008 03/26/2013	Long	17.00	13.91	3.09
1.308 Loomis Sayles Bond Instl FD# 1162	Buy	03/12/2008 03/26/2013	Tong	20.00	18.59	1.41
1.038 T Rowe Price Dividend Growth Fund	Buy	03/06/2012 03/26/2013	Long	30.00	25.55	4.45
0.1129 T Rowe Price Equity Income #71	Buy	03/12/2008 09/17/2012	Long	3.00	2.89	0.11
0.113 Vanguard Extended Market Idx Signal Fd# 1342	Buy	03/06/2012 03/26/2013	Long	5.00	4.16	0.84
0.652 Vanguard Growth Index Signal Fd# 1347	Buy	02/10/2011 03/26/2013	Long	24.00	19,99	4.01
0.114 Vanguard Growth Index Signal Fd# 1347	Виу	02/10/2011 09/17/2012	Long	4.00	3.49	0.51
0.388 Vanguard Inflation-Protected Secs Adm #5119	Buy	03/06/2012 03/26/2013	Long	11.00	10.90	0.10

Gain/Loss Summary

Short Term GL

Long Term GL

16.04

114.96

131.00

14.52	0.00	0.00	14.52	00.0	14.52	8.39
••	••			••	••	
Gains From Sales	Losses From Sales	Common Funds	Long Term Gains	Long Term Losses	Net Long Term G/L	Capital Gain Dist
1,52	0.00	0.00	1.52		1.52	6.70
Gains From Sales :	Losses From Sales :	Common Funds :	Short Term Gains :	Short Term Losses :	Net Short Term G/L:	Capital Gaın Dist :

ဖ Account's Fiscal Year Ends Month Last Updated N o n e Long Term Short Term

Loss Carry Forward

Processing Date : 09/25/2013

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Taxpayer I D : 64-0321523

Date Run : 09/25/2013

Account Name : NCHS Restricted-Bates Ed Mem Fund

Account Number :

171965

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Date Run : 09/25/2013 Taxpayer I D : 64-0321523

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Date T. 12/14/2012 Ca 12/14/2012 Ca			1	
1		Description	Income Cash	Principal Cash
	Capital Gains - Short Term	PIMCO Investment Grade Corp Bond Instl	WAY COMMENT AND I MAN THAN THAT THE PARTY HAVE BEEN MAN THE PARTY THAT THE PARTY	2.03
		18.74 Shares		
	Capital Gains - Long Term	PIMCO Investment Grade Corp Bond Instl		2.25
		18.74 Shares		
12/14/2012 Ca	Capital Gains - Short Term	PIMCO Total Return Fund #35		3.73
		24.119 Shares		
12/14/2012 Ca	Capital Gains - Long Term	PIMCO Total Return Fund #35		2.74
		24.119 Shares		
12/21/2012 Ca	Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		0.28
		5.516 Shares		
12/21/2012 Ca	Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		1.53
		5.516 Shares		
12/24/2012 Ce	Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351		09.0
		27,142 Shares		
12/24/2012 Ca	Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351		0.92
		27.142 Shares		
03/28/2013 Ca	Capital Gains - Short Term	Vanguard Inflation-Protected Secs Adm #5119		0.03
		5.128 Shares		
03/28/2013 Ca	Capital Gains - Long Term	Vanguard Inflation-Protected Secs Adm #5119		0.43
		5.128 Shares		
04/02/2013 Ca	Capital Gains - Short Term	Vanguard Total Bond Market Index Signal #1351		0.03
		30.687 Shares		
04/02/2013 Ca	Capital Gains - Long Term	Vanguard Total Bond Market Index Signal #1351	1	0.52
		30.687 Shares		

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2013)

• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			ightharpoons
If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).		
Do not d	complete Part II unless you have already been granted	an automa	itic 3-month extension on a previous	sly filed Fo	rm 8868.	
	i c filing (e-file) . You can electronically file Form 8868 if y			-		•
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 88	368 to request an	extension
of time t	o file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers /	Associated With (Certain
Persona	Benefit Contracts, which must be sent to the IRS in page	er format	(see instructions). For more details of	on the elec	tronic filing of thi	s form,
	v irs.gov/efile and click on e-file for Charities & Nonprofits					
Part I						
	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		
Part I on	•		•			▶ ∟
	corporations (including 1120-C filers), partnerships, REM come tax returns	IICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time	
	T			Ι		
Type or	Name of exempt organization or other filer, see instru	ictions.		Employe	dentification nu	mber (EIN) or
print	NAMOURE CULT DEEN G HOVE OF	DIII	a		C4 0221	
File by the	NATCHEZ CHILDREN'S HOME SEI				64-03215	
due date for filing your		ee instruc	tions.	Social se	curity number (S	5N)
return See	806 NORTH UNION STREET			1		
msuuctions	only, town or poor onloo, state, and 211 occorr or a re	oreign add	ress, see instructions.			
	NATCHEZ, MS 39120					
Enter the	Datum and a for the ratum that this application is far (file		to application for each return)			0 1
criter tri	e Return code for the return that this application is for (file	e a separa	te application for each return)			UI
Applies	ion	Return	Application			Return
Applicat	ion	l .	Application			1
Is For	0 or Form 990-EZ	Code 01	Is For			07
Form 99		01	Form 990-T (corporation) Form 1041-A			08
	20 (individual)	03	Form 4720			09
Form 99		03	Form 5227			10
	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	0-T (trust other than above)	06	Form 8870		<u> </u>	12
1 01111 03	NATCHEZ CHILDR	1	<u></u>			
• The h	ooks are in the care of 806 NORTH UNIO			n		
	hone No ► 601/442-6858	u Di	FAX No ►		-	
	organization does not have an office or place of busines	s in the Lir				
	is for a Group Return, enter the organization's four digit			lf this is fo	r the whole aroun	check this
box 🕨	If it is for part of the group, check this box	-			· ·	
	equest an automatic 3-month (6 months for a corporation				ord the extension	10 101
• • • • • • • • • • • • • • • • • • • •	February 15, 2014 , to file the exemp	•	-		The extension	
ıs	for the organization's return for:	g		04 45010.		
•	calendar year or					
•	X tax year beginning JUL 1, 2012	. an	d ending <u>JUN 30, 201</u> 3			
•			<u> </u>		_	
2 if t	he tax year entered in line 1 is for less than 12 months, c	heck reas	on. Initial return	Final retur	n	
Ε	Change in accounting period					
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	nter the tentative tax, less any			
	nrefundable credits. See instructions		,	3a	\$	0.
_	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and	_	 	_
	timated tax payments made Include any prior year overp	-		3b	\$	0.
	lance due. Subtract line 3b from line 3a. Include your pa			_		
	using EFTPS (Electronic Federal Tax Payment System).	•	·	3c	\$	0.
	If you are going to make an electronic fund withdrawal					

For Privacy Act and Paperwork Reduction Act Notice, see instructions.