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## Form 990-PF

### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

For	ale	ndar year 2013 or tax year beginning		, and ei	raing		
Nar	ne o	f foundation				A Employer identificatio	n number
T	HE	CALEDONIAN FOUNDATION				26-1557125	5
		and street (or P O box number if mail is not delivered to stree	t address)		Room/sulte	B Telephone number	
		85 DALLAS PARKWAY			1150	972-980-27	
		own, state or province, country, and ZIP or foreign p	oostal code			C If exemption application is a	pending, check here
	_	LAS, TX 75254		<del></del>			
G C	hecl	k all that apply: Initial return	initial return of a f	ormer public c	harity	D 1. Foreign organization	s, check here
		Final return	Amended return			Foreign organizations m check here and attach c	eeting the 85% test,
		Address change	Name change			check here and attach c	omputation
HC	_	type of organization: X Section 501(c)(3) e	xempt private touncation Other taxable private found	-4		E If private foundation sta	
<u> </u>		1777	ing method: Cash	X Accri	ıal	under section 507(b)(1	
		· 1	ther (specify)	LAN MUCH	Jai	F If the foundation is in a under section 507(b)(1	
("		290388 (Part I, colu	· · · · · · · · · · · · · · · · · · ·	basis.)		under Section 307(D)(1	)(b), check here
	rt		(a) Revenue and	(b) Net inv	estment	(c) Adjusted net	(d) Disbursements
		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	inco		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	100000.	100 ( See )	4	N/A	8-34-3 E. 3º
	2	Check I if the foundation is not required to attach Sch. B	14.24	[ \$ . · · · ·	, k , 4,	3, 4	4 84 6 17 12
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					<b>建</b> 1000 000 000 000 000 000 000 000 000 0
	58	Gross rents .				·	(整盤子) 美国工业
	t	Net rental income or (loss)	NAME OF THE PARTY.			State of the state	7.88 82.30
Ð	68	Net gain or (loss) from sale of assets not on line 10		TO A ST		- C. C.	
nu <sub>e</sub>	t	Gross sales price for all assets on line 6a	1401171				
Revenue	7	Capital gain net Income (from Part IV, line 2)	Marie Land		0.	The same of the same of	
-	8	Net short-term capital gain	ter Links		16 A		
,	9	Income modifications Gross seles less returns	12 St. 10 CO. 12	7		******	
	10a					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		Less Cost of goods sold		1		<b>试达</b> 万 %	72 - 12 A
		Gross profit or (loss)			(r. 4. 1864)		
	11	Other income	100000.		0.		5 78 9 <b>8</b> 3 3
-	12 13	Total. Add lines 1 through 11  Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages	-				
	15	Pension plans, employee benefits	-			<del></del>	
es	-	Legal fees					
Expenses		Accounting fees. Stmt 1	1500.	<del> </del>	1500.		0.
옶		Other professional fees ECEIVED		· · · · · · · · · · · · · · · · · · ·		<del> </del>	
ě		Interest	<u> </u>			****	
	18	Taxes (O)					
ist	19	Depreciation and depletion V 1 7 2014					· Was in the same
澶	20	Occupancy	\$				
ĕ	21	Travel, conferences, and meanings					
a la	22	Printing and publications					
Operating and Administrati	23	Other expenses				<u> </u>	
rati	24	Total operating and administrative					
흵		expenses. Add lines 13 through 23	1500.		1500.		0.
୍ଧ		Contributions, gifts, grants paid	50000.	all to		x	50000.
	26	Total expenses and disbursements.	51500		1500		50000
		Add lines 24 and 25	51500.		1500.		50000.
	27	Subtract line 26 from line 12:	40500	, ,		* .* / .	
		Excess of revenue over expenses and disbursements	48500.	* ** * · * · /	0.	· · · · · · · · · · · · · · · · · · ·	
		Net investment income (if negative, enter -0-)			<u> </u>	N/A	*
32350 10-10		Adjusted net income (if negative, enter -0-)	instructions	!		I II/A	Form <b>990-PF</b> (2013
10-10	- 13	LHA For Paperwork Reduction Act Notice, see	msuucuons.				rum <b>əəU-FF</b> (2013)

SCANNED NOV 2 6 2014

1 Cash - non-interest-bearing   241888   29038	Б	مُخَّد	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
2 Sanngs and temporary cash investments 3 Accounts receivable b Less divinace for doubtful accounts b Less d	L	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
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18   Grants payable   19   Deferred revenue   20   Loans from officers, directors, trustees, and other disqualified persons   21   Mortgages and other notes payable   22   Other liabilities (describe	_	17		· · · · · · · · · · · · · · · · · · ·		THE LOW TO
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20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe ▶  23 Total liabilities (add lines 17 through 22)  24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Temporarily restricted 28 Permanently restricted 29 Permanently restricted 29 Permanently restricted 29 Permanently restricted 29 Pand-in or capital surplus, or land, bidg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances 31 Total leases or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 30 Other increases not included in line 2 (itemize) ▶ 31 Decreases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Decreases not included in line 2 (itemize) ▶ 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	v		• • • • • • • • • • • • • • • • • • • •			Product 12 to 12
Total liabilities (add lines 17 through 22)    Total liabilities (add lines 17 through 22)   Toundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.   24 Unrestricted   25 Temporarily restricted   26 Permanently restricted   27 Temporarily restricted   28 Pard-in or capital stock, trust principal, or current funds   29 Retained earnings, accumulated income, endowment, or other funds   241888.   2903	iŧie		•			
Total liabilities (add lines 17 through 22)    Total liabilities (add lines 17 through 22)   Toundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.   24 Unrestricted   25 Temporarily restricted   26 Permanently restricted   27 Temporarily restricted   28 Pard-in or capital stock, trust principal, or current funds   29 Retained earnings, accumulated income, endowment, or other funds   241888.   2903	ig E					
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Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted 25 Temporantly restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances 241888.  290388.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize)  3 0.  4 Add lines 1, 2, and 3 4 290388.  5 Decreases not included in line 2 (itemize)  5 0.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 290388.						
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.  24 Unrestricted  25 Temporarily restricted  26 Permanently restricted  27 Capital stock, trust principal, or current funds  28 Pard-in or capital surplus, or land, bldg., and equipment fund  29 Retained earnings, accumulated income, endowment, or other funds  30 Total net assets or fund balances  1 Total liabilities and net assets/fund balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  20 Enter amount from Part I, line 27a  30 Other increases not included in line 2 (itemize)   4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize)   5 0.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  6 290388.		23	Total liabilities (add lines 17 through 22)	0.	0.	14 FY
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24 Unrestricted   25 Temporarily restricted   26 Permanently restricted   27 Temporarily restricted   28 Permanently restricted   29 Perman						A Marine
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Total liabilities and net assets/fund balances  241888. 290388.  Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  1 241888. 2 Enter amount from Part I, line 27a 2 48500. 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 290388.	set	28	Paid-in or capital surplus, or land, bldg., and equipment fund		1	
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(must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) ▶  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) ▶  5 Oc.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	_		<u></u>		·····	T
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3 0ther increases not included in line 2 (itemize) ► 3 0.  4 Add lines 1, 2, and 3 4 290388.  5 Decreases not included in line 2 (itemize) ► 5 0.  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 290388.		•	•		1	
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 290388.			- · · · · · · · · · · · · · · · · · · ·		· · -	<del></del>
5 Decreases not included in line 2 (itemize) ►  6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30  5 0.  6 290388.				··· <del>-</del> ··· · · · · · · · · · · · · · · · · ·		
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30					<del> </del>	
V 1042 1012 1012 1012 1012 1012 1012 1012				aluma (h) lina 00		
	6	rota	i net assets of tund datances at end of year (line 4 minus line 5) - Part II, c	ownin (b), line 30 .		

<del></del>	and Losses for Tax on ribe the kind(s) of property sold (		Income	(b) How acquired	(c) Date acq	ured	(d) Date sold
	arehouse; or common stock, 200			(b) How acquired P - Purchase D - Donation	(mo., day,	yr.)	(mo., day, yr.)
<u> </u>							
b NO	NE						
<u>c</u>							
e e						$\rightarrow$	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis xpense of sale	'	(h) Gain (e) plus (f)		)
a							
b							
d							
e							
	ng gain in column (h) and owned	by the foundation	on 12/31/69		(I) Gains (Col. (		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any	Co	ol. (k), but not l Losses (fro		
8	•						
<u>b</u>			<u></u>				
d							
e							
<u> </u>	( If gain, also er	nter in Part I, line	7				
! Capital gain net income or (net ca	ipital loss) { If (loss), enter	-0- ın Part İ, lıne	7 .	] 2			
Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		) and (6):		}			
Part Va Qualification U	nder Section 4940(e) f	or Reduced	Tax on Net	Investment In	come		· · · · · · · · · · · · · · · · · · ·
For optional use by domestic private							
section 4940(d)(2) applies, leave t	his nart hlank.						
	•			40		Г	Yes X No
Vas the foundation liable for the sec i "Yes," the foundation does not qua			-	1007		L	ריי אפן אין ויי
Enter the appropriate amount in				ntries.		`	
(a) Base period years	(b)		· · · · · · · · · · · · · · · · · · ·	(c)		Dıstribu	d) tion ratio
Calendar year (or tax year beginni	ng in) Adjusted qualifying		Net value of no	ncharitable-use asset		l. (b) divid	led by col. (c))
2012		25000. 25000.		17299 9773			.144510
2011		25000.		410			.00000
2009							
2008							
							4000
? Total of line 1, column (d)					. 2		.400298
Average distribution ratio for the the foundation has been in existe		tal on line 2 by 5,	or by the number	of years	3		.13343
the foundation has been in existe	nce it less than 5 years			•	-		• 13343.
Enter the net value of nonchantat	ole-use assets for 2013 from Part	X, line 5			4		232042
		·					
Multiply line 4 by line 3				-	5	<u> </u>	30962
Enter 1% of net investment incon	ne (1% of Part I, line 27b)				. 6		0
Add lines 5 and 6	•	·			7		30962
	· · ·	•					50000
Enter qualifying distributions from	•	  madb.amm  =====	data that are to co-		8		50000
If line 8 is equal to or greater than See the Part VI instructions.	THILE 7, CHECK THE DOX IN PART VI, I	ille 10, and comp	nete mat part usin	y a 1% tax rate.			

Form 990-PF (2013) THE CALEDONIAN FOUNDATION   RaiftVI   Excise Tax Based on Investment Income (Section 49)	040(a) 4040(b) 4040(a) or		1557125 see instruct	Page 4
		<del>4340</del> -	See matruct	TK W G
1a Exempt operating foundations described in section 4940(d)(2), check here and				
Date of ruling or determination letter: (attach copy of letter if	necessary-see instructions)			E LANGE
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%			<u> </u>
of Part I, line 27b		W. 4		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	. Others enter -0-)	2		0.
3 Add lines 1 and 2		3		0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	v. Others enter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		0.
6 Credits/Payments:		18.3	· · · · · · · · · · · · · · · · · · ·	
a 2013 estimated tax payments and 2012 overpayment credited to 2013	6a			
b Exempt foreign organizations - tax withheld at source	6b			
c Tax paid with application for extension of time to file (Form 8868)	6c			
d Backup withholding erroneously withheld	6d			الم المعالمة
7 Total credits and payments. Add lines 6a through 6d		7	Andrewski and the second of	Ö.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	attached .	8	<del></del>	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	······	9		0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	· •	10		
11 Enter the amount of line 10 to be; Credited to 2014 estimated tax	Refunded ▶	11		
PartVII-A Statements Regarding Activities				
1a During the tax year, did the foundation attempt to influence any national, state, or local le	gislation or did it participate or interver	ie in	¥¥¥ Y	es No
any political campaign?	, ,		1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political pur	poses (see instructions for the definition	n)?	1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities			7 7	
distributed by the foundation in connection with the activities	,			
c Did the foundation file Form 1120-POL for this year?			1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	the year:	• •	1647	DA FEET
(1) On the foundation. > \$ 0 • (2) On foundation manag				
e Enter the reimbursement (if any) paid by the foundation during the year for political expe				
managers. ► \$ 0.				
2 Has the foundation engaged in any activities that have not previously been reported to th	e IRS?		2	X
If "Yes," attach a detailed description of the activities			0.00	1 24
3 Has the foundation made any changes, not previously reported to the IRS, in its governir	no instrument, articles of incorporation	or	36	1
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chair	=		3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the		•	4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	,	Ň	/A 4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the ye	ar?	•	` <u>5</u>	X
If "Yes," attach the statement required by General Instruction T.			<b>*</b> 85 <b>*</b>	8 80
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	d either:			
By language in the governing instrument, or			1   1   2   2   2   2	**************************************
By state legislation that effectively amends the governing instrument so that no manda	tory directions that conflict with the sta	te law		2
remain in the governing instrument?	,		6	X X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," o	complete Part II col (c) and Part )	av .		x —
, but all foundation have acted to prove in access at any sine seeing the year.				W a 3
8a Enter the states to which the foundation reports or with which it is registered (see instruc	ctions) >		李   黄	<b>4</b>
TX				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	e Attorney General (or designate)			
of each state as required by General Instruction G? If "No," attach explanation			8b 3	X X
9 Is the foundation claiming status as a private operating foundation within the meaning of	section 4942(1)(3) or 4942(1)(5) for ea	lendar	1857 L	1 ts 3
year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,			-   -   -   -   -   -   -   -   -   -	~~   X
10 Did any persons become substantial contributors during the tax year? # *Yes,* attach a sch	· -	Stmt	•	x
any persons second essential contributors during are any journ in 165, didn't a sur	The state of the state of the same same same same same same same sam		Form <b>990-F</b>	

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Total number of other employees paid over \$50,000

_	m 990-PF (2013) THE CALEDONIAN FOUNDATION	20-135/125	Page 8
2 <b>P</b>	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	<del>,</del>	
-	Average monthly fair market value of securities	12.5 1a	0.
			5576.
	Average of monthly cash balances	<del></del>	3370.
	Fair market value of all other assets	10	5576.
	Total (add lines 1a, b, and c)		1570.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 1e 0.	- *· *· *·'	^
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d		5576.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		3534.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	1 - 1	2042.
6	Minimum investment return. Enter 5% of line 5		1602.
P	art XII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
_	foreign organizations check here   and do not complete this part.)		1600
1	Minimum investment return from Part X, line 6	1 . 13	1602.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI.)		_
C	Add lines 2a and 2b	_2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 11	1602.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 11	1602.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 13	1602.
P	artyXIII Qualifying Distributions (see instructions)		
	addinyrig Distributions (see instructions)		_
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	70	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 50	0000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	22	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 50	0000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 50	0000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for the section	
	4940(e) reduction of tax in those years.		

Part XIII: Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				11602.
2 Undistributed income, if any, as of the end of 2013	7			y
a Enter amount for 2012 only	Section 1	<u> </u>	0.	
b Total for prior years:	, *** ***		į į	
		0.		
3 Excess distributions carryover, if any, to 2013			·	
a From 2008		, ,		, '
b From 2009		high a	, , , , , , , , , , , , , , , , , , ,	
c From 2010		4 . · ·	, , , , , , , , , , , , , , , , , , , ,	,
dFrom 2011 19908				
eFrom 2012 16350	1			, \$\ \\\\\\\\\
f Total of lines 3a through e	36258.	AND AND ASSESSMENT		* * * * * * * * * * * * * * * * * * * *
4 Qualifying distributions for 2013 from	100 a 44 4		- • •	
Part XII, line 4: ►\$ 50000			· · · · · · · · · · · · · · · · · ·	
a Applied to 2012, but not more than line 2a			<b>U</b> •	* 1
b Applied to undistributed income of prior		0.	*	* ; * ; *
years (Election required - see instructions)	4 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	U •	*	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
c Treated as distributions out of corpus	0.			· ` ` ,
(Election required - see instructions)		2. No. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	2 1 82 2 4 3 2	11602
d Applied to 2013 distributable amount	38398.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11602.
e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2013	36336.	Marin and the contraction of the	176 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>
(If an amount appears in column (d), the same amount	3.7 × 61 / 45.5026 400. 1 3.4			75 124.1
must be shown in column (a).)			Service Control of the	
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	74656.			Substantia S
b Prior years' undistributed income. Subtract	The second second	EMMISSION AFT L. A. PUNT 1 - 4000 VA.	E-1765 SEV 3-	
line 4b from line 2b		0.		
c Enter the amount of prior years'	7.7.2.2			7 7 77
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	A KATA SATIS		3 4	Y ( 15 )
amount - see instructions .		0.	,	1. " \$ / k
e Undistributed income for 2012. Subtract line		3		Y 99 30
4a from line 2a. Taxable amount - see instr.			0.	* *** * *
f Undistributed income for 2013. Subtract		3 7 8 1	٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠ ٠	
lines 4d and 5 from line 1. This amount must		** <sub>*</sub>	***	
be distributed in 2014	*	2 " " 3 " "	/ * .	0.
7 Amounts treated as distributions out of			3	
corpus to satisfy requirements imposed by		*		1
section 170(b)(1)(F) or 4942(g)(3)	0.	, ,		
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	0.	*		
9 Excess distributions carryover to 2014.	74656			
Subtract lines 7 and 8 from line 6a	74656.	<u> </u>		
10 Analysis of line 9:				٠
a Excess from 2009	-} ``.	) · · · ·		
b Excess from 2010	4			. 1
c Excess from 2011 19908				,
d Excess from 2012 16350 e Excess from 2013 . 38398				
e Excess from 2013. 38398	•1	<u> </u>	<u></u>	Form <b>QQ0_DF</b> (2013)

323581 10-10-13

	EDONIAN FOU			26-15	57125 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VI	-A, question 9)	N/A	
1 a 'if the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2013, enter the date of t	he ruling _	▶		
b Check box to indicate whether the found	dation is a private operatir	g foundation described	n section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for	<u> </u>				
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	l				
e Qualifying distributions made directly			<del></del>		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the	<del></del>			1	
alternative test relied upon:			•		
a "Assets" alternative test - enter: (1) Value of all assets					
` '				<del></del>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return		:			
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	·				
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization			1		•
(4) Gross investment income					
Part-XV Supplementary Info			if the foundatior	n had \$5,000 or me	ore in assets
at any time during t	he year-see instr	uctions.)		<del>-</del>	
1 Information Regarding Foundation					
a List any managers of the foundation wh			ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			
JUNE BENNETT					
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large porti	on of the ownership of a pa	artnership or
None	<b>3</b> .00.00				
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here 🕨 🗶 if the foundation o					
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations u	nder other conditions, c	omplete items 2a, b, c, and	l d.
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appl	cations should be addre	ssed:	
b The form in which applications should b	e submitted and informati	on and materials they s	nould include:		
c Any submission deadlines:					
			<del> </del>	<del></del>	
d Any restrictions or limitations on awards	s, such as by geographica	u areas, charitable fields,	KINGS OF INStitutions, or	otner factors:	
	<u></u>				

Total

Form **990-PF** (2013)

0.

**▶** 3b

Part XVI-A Analysis of Income-Producing Activities

···· · - · · · · · · · · · · · · · · ·	1000 0111-1-		-		· · · · · · · · · · · · · · · · · · ·
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Anount	code	Aniount	Tancaon Income
a					
b					
c			1		-
ď	-		1		
	·		<del> </del>		
4	-	•			
·	-	<del></del>	├		<u> </u>
g Fees and contracts from government agencies	·		├—		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities	Ll.				
5 Net rental income or (loss) from real estate:	, ;	J. W		, , ,	12.15
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	<del></del>		t		
anamath.			1		
7 Other investment income	+		$\vdash$		
8 Gain or (loss) from sales of assets other	<del>                                     </del>		$\vdash$		-
than inventory	<del>   </del>		$\vdash$		
9 Net income or (loss) from special events	<del></del>		├		
10 Gross profit or (loss) from sales of inventory			-		
11 Other revenue:					
a	_		<u> </u>		
b					
c					ļ
d					
A					
·			1	0.	0.
12 Subtotal. Add columns (b), (d), and (e)		0.	L		
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.	L	13_	0.
13 Total. Add line 12, columns (b), (d), and (e)		0.		13_	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)	to the Asso		(omn		
13 Total. Add line 12, columns (b), (d), and (e)	to the Acco		cemp		
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B  Relationship of Activities		mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
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13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which income	ome is reported in	mplishment of Ex		t Purposes	0.

Form 99			ALEDONIAN				20-15		Page 13
Part	XVII.)	Information Re Exempt Organ		sfers To a	and Transactions a	and Relations	hips With Nonch	aritable	
1 Did	the org	janization directly or indi	rectly engage in any	of the followin	g with any other organization	on described in secti	on 501(c) of	Υ.	es No
the	Code (	other than section 501(c)	)(3) organizations) o	r ın section 52	7, relating to political organ	iizations?		- 134 B	
		from the reporting found							
(1)	Cash							1a(1)	X
(2)	Other	assets						1a(2)	X
		sactions:		•				123	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		of assets to a noncharita	ble exempt organizat	non				1b(1)	X
		ases of assets from a no			•			1b(2)	X
		of facilities, equipment,			•	• •		1b(3)	X
٠.		oursement arrangements			•		•	1b(4)	X
		or loan guarantees						1b(5)	X
		mance of services or me	mbership or fundrais	sino solicitatio	ns	•		1b(6)	Х
٠,		facilities, equipment, ma	·	-	· ·	• •		1c	X
					dule. Column (b) should al	wavs show the fair n	narket value of the good		
					ed less than fair market vali				•
		) the value of the goods,					,	•	
(a)Line n	_ <u> </u>	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, a	nd sharing arran	gements
<del></del>	+		· · · · · · · · · · · · · · · · · · ·	N/A				<del></del>	·
	+	11 142 15 1515	<del></del>						
	+			-	· · · · · · · · · · · · · · · · · · ·				
	+	<del></del>							
	+					<del></del> -		_	
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	+	<del></del>	<del>                                     </del>			+			
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	+				<del></del>	<del> </del>	<del>.</del>		
	+	<u></u>				<del></del>			
		·	-					<del></del>	
On los	ha faus	dation discottly or indicas	the officered wath or a	rolated to ano	or more tax-exempt organ	rations described			
		501(c) of the Code (othe	•	=	· -	izations described		Yes	X No
<u>b lf</u>	res, co	mplete the following sch			T (1) +	·	(a) Danamatan of miletin		
		(a) Name of org	anization		(b) Type of organization	ļ	(c) Description of relation	nsnip	
		N/A							
							· <del>_</del>		
Sign Here	and be	lief is true correct, and cor	mplete Declaration of pro	s return, includir eparer (other tha	ng accompanying schedules and naxpayer) is based on all information of the second of t	nation of which prepare	r has any knowledge	May the IHS disk return with the p shown below (se X Yes	reparer
	Sugif	ature of officer or trustee				Title	<u> </u>		
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check if PTI	N	
Paid		DOUG VIGGA	.TO		40	11/3/14		002339	
Preparent		Firm's name ► BAR	KER VIGGA	TO, LL	P	· · · · · · · · · · · · · · · · · · ·	Firm's EIN ► 20 -	151434	9
		Firm's address > 1 7	300 DAT.T.A	S PARK	WAY, SUITE 3	3035	<del> </del>		
			LLAS, TX				Phone no. 972-	789-13	13

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990 ·

OMB No 1545-0047

Name of the organization

Employer identification number

	THE CALEDONIAN FOUNDATION	26-1557125
Organization type (che	ck one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	•
Form 990-PF	X 501(c)(3) exempt private foundation	
	· 4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	cial Rule. See instructions.
General Rule		
·	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more omplete Parts I and II.	(in money or property) from any one
Special Rules		
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II	
total contributi	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one ons of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, of cruelty to children or animals. Complete Parts I, II, and III.	
contributions for this box is character purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one or use exclusively for religious, charitable, etc., purposes, but these contributions did received, enter here the total contributions that were received during the year for an except complete any of the parts unless the <b>General Rule</b> applies to this organization becatable, etc., contributions of \$5,000 or more during the year	not total to more than \$1,000. Clusively religious, chantable, etc.,
but it must answer *No	on that is not covered by the General Rule and/or the Special Rules does not file Sche on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or or neet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

THE C	ALEDONIAN FOUNDATION	2	86-1557125
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ARCHIE AND JUNE BENNETT  14185 DALLAS PARKWAY, STE 1150  DALLAS, TX 75254	\$100000.	Person X Payroll (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$Schodula B (For	Person Payroll Noncash (Complete Part II for noncash contributions.)
323452 10-2	4-13	Scheaule & (Foi	m 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

### THE CALEDONIAN FOUNDATION

26-1557125

art II	Noncash Property (see instructions) Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
_		<b>\$</b>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		**************************************	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_  _	
3453 10-24	.12	Schedule B (Form	990, 990-EZ, or 990-PF) (

Form ·990-PF	Accounti	ng Fees	Statement 1			
Description		(b) Net Invest- ment Income		(d) Charital Purpose		
ACCOUNTING FEES	1500.	1500.		-	0.	
To Form 990-PF, Pg 1, ln 16b	1500.	1500.			0.	
	Substantia Part VII-A,	l Contributor: Line 10	s S	tatement	2	
Name of Contributor	Addr	ess				
JUNE BENNETT		5 DALLAS PARKI AS, TX 75254	WAY STE 1150			
ARCHIE BENNETT, JR.	1418	5 DALLAS PARK	WAY STE 1150			

Form **8868** (Rev. January 2014)

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.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

					l	
-	re filing for an Automatic 3-Month Extension, comple					X
	re filing for an Additional (Not Automatic) 3-Month Ex					
	implete Part II unless you have already been granted a					
	c filing (e-file). You can electronically file Form 8868 if y					
	o file Form 990-T), or an additional (not automatic) 3-mol					
	file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details (	on the elec	tronic tiling of this	torm,
Part I	lrs govlefile and click on e-file for Charities & Nonprofits  Automatic 3-Month Extension of Time		submit original (no copies	needed	),	
A corpora	tion required to file Form 990·T and requesting an autor					
Part I only	,				<b>&gt;</b>	<b>-</b> 🗆
	orporations (including 1120-C filers), partnerships, REM ome tax returns.	ICs, and t	rusts must use Form 7004 to reques		<i>sion of time</i> er's identifying nu	mber
Type or	Name of exempt organization or other filer, see instru	ctions.		Employer identification number (EIN) or		
print						
	THE CALEDONIAN FOUNDATION			26-1557125		
File by the due date for	Number, street, and room or sulte no. If a P.O. box, s	ee Instruc	tions.	Social security number (SSN)		
filing your return, See	14185 DALLAS PARKWAY, No. 3					·
Instructions.	City, town or post office, state, and ZIP code. For a for $\mathtt{DALLAS}$ , $\mathtt{TX}$ $75254$	oreign add	ress, see instructions.			
Enter the I	Return code for the return that this application is for (file	a separa	te application for each return)	***************************************		04
Application	on	Return	Application			Return
Is For		Code	<b>▶</b> . 1±			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-		02	Form 1041-A			08
Form 4720	) (Individual)	03	Form 4720 (other than individual)			09
Form 990-	<del></del>	04	Form 5227			10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06				12
	BETTY REARDON,	CPA				
• The boo	oks are in the care of > 14185 DALLAS PA	ARKWA:	Y, SUITE 1150 - DA	LLAS,	TX 75254	
	one No. ► 972-980-2700		Fax No. ▶ 972-980-27			
•	rganization does not have an office or place of business	in the Un			<b>&gt;</b>	<b>-</b> 🗆
	s for a Group Return, enter the organization's four digit					check this
	. If it is for part of the group, check this box 🕨 🔲					
1 I req	uest an automatic 3-month (6 months for a corporation	required t	to file Form 990-T) extension of time	until		
	August 15, 2014 , to file the exemp				The extension	
	r the organization's return for:	•	•			
	X calendar year 2013 or					
▶□	tax year beginning	, an	đ ending		•	
	-		-		_	
2 If the	e tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on: Initial return	Final retur	n	
3a If thi		or 6060	enter the tentative tay less ony	<u> </u>	·····	
	refundable credits. See instructions.	BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				0.
		enter en	v refundable credits and	3a	\$	<u> </u>
	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.					0
				3b	_\$	0.
	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,					^
	sing EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
Caution.	f you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	453·EO ar	nd Form 8879-EO f	or payment

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Form 88	868 (Rev. 1-2014)					Page 2	
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II and check this	s box		<b>X</b>	
Note. O	nly complete Part II if you have already been granted an a	automatic	3-month extension on a previously f	iled Form	8868.		
	are filing for an Automatic 3-Month Extension, comple			<del> </del>	<del></del> _		
Part I	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	pies neede	:d).	
			Enter filer's	Identifyin	g number, se	e instructions	
Type or	Name of exempt organization or other filer, see Instru	ctions.		Employer	imployer identification number (EIN) or		
print	1				26-1557125		
File by the due date for							
filing your return. See	Number, street, and room or state no. if a P.O. box, see instructions.			Social se	curity number	(SSN)	
Instruction	City, town or post office, state, and ZIP code. For a for DALLAS, TX 75254	oreign add	dress, see instructions.				
Enter th	e Return code for the return that this application is for (file	e a separa	ate application for each return)			04	
Applica	tion	Return	Application			Return	
Is For		Code	is For			Code	
Form 99	0 or Form 990-EZ	01	The state of the state of	1,000	at the second	1 1 1 1 1 1 1 1	
Form 99	0-BL	02	Form 1041-A			08	
Form 47	20 (individual)	03	Form 4720 (other than individual)			09	
Form 99	0-PF	04	Form 5227			10	
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
	0-T (trust other than above)	06				12	
STOPLE	On not complete Part II if you were not already granted		matic 3-month extension on a prev	iously file	<u>d Form 8868.</u>		
	BETTY REARDON,		ע מוודשי 1150 די	T.T 78 C	my 759	E /1	
• The b	pooks are in the care of ► 14185 DALLAS Proposes No. ► 972-980-2700	AWANA	Fax No. >	nnas,	IA /34	34	
		- l- 4b- 11:					
	organization does not have an office or place of business is for a Group Return, enter the organization's four digit					up check this	
box >							
			ber 15, 2014.	r dil momo	CIS the Oxteria	1011 13 1011	
	or calendar year 2013, or other tax year beginning		, and endin	a			
	the tax year entered in line 5 is for less than 12 months, or	heck reas		Final r	eturn		
Ţ	Change in accounting period						
7 St	ate in detail why you need the extension						
A	DDITIONAL TIME IS NEEDED TO	GATHE	R THE INFORMATION	NECES	SARY TO	FILE A	
<u>C</u>	OMPLETE AND ACCURATE RETURN.						
8a If	this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			_	
no	nrefundable credits. See instructions,			8a	\$	0.	
	this application is for Forms 990-PF, 990-T, 4720, or 6069			10 mg 11 mg 12 mg			
ta	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			1, 10,10		•	
	reviously with Form 8868.			8b	\$	0.	
	alance due. Subtract line 8b from line 8a. Include your pa		th this form, if required, by using			0	
EF	TPS (Electronic Federal Tax Payment System). See instr		at he completed for Dont II	8c	\$	0.	
Hadas -			st be completed for Part II		E amus lama coda al e-c	of the line	
it is true.	nalties of perjury, I declare that I have examined this form, includ correct, and complete, and that are authorized to prepare this to	ing accomp orm.	panying schedules and statements, and t	o tue dest o	my knowleage ז נ	and belief,	
Signature		000	4		7//	4/N	
GIGHARAK	TIME >	<u> </u>		Date		68 (Rev. 1-2014)	
	/				Form 886	30 (MeV. 1-2014)	

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