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A CA

Form **990-PF**Department of the Treasury
Internal Revenue Service

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.

2013

For c	alen	dar year 2013 or tax year beginning		, and en	ding		
		foundation				A Employer identification	n number
		DEL CHARITABLE TRUST	CMPPC			33-6355054	•
		AND WINNIE SANDEL, TRU and street (or PO box number if mail is not delivered to street			Room/suite	· · · · · · · · · · · · · · · · · · ·	<u> </u>
		BOX 1917	audressy		noonvadte	B Telephone number (936)291-1	002
		wn, state or province, country, and ZIP or foreign p	ostal code	I		C If exemption application is	
_		TSVILLE, TX 77342-1917				o in anomphon apphoalacti to	Soriality, Gricon Hold
G C	heck	all that apply Initial return	Initial return of a fo	rmer public cl	harity	D 1 Foreign organization	s, check here
		Final return	Amended return			2 5	
		Address change	Name change			Foreign organizations m check here and attach c	eeting the 85% test, omputation
H C	_	type of organization X Section 501(c)(3) ex				E If private foundation sta	
			Other taxable private founda			under section 507(b)(1)(A), check here
		rket value of all assets at end of year J Accounti	=	Accru	ıaı	F If the foundation is in a	
(<i>tr</i>		Part II, col. (c), line 16) 314 , 397 . (Part I, colu	her (specify) mn (d) must be on cash t	nasis)		under section 507(b)(1)(B), check here
	rt I		(a) Revenue and	(b) Net inv	/actment	(c) Adjusted net	(d) Disbursements
FA	1 ([(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 chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		1 1111		N/A	
		Check ► X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	21.		21.		STATEMENT 1
l	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)				[
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a					
eve	7	Capital gain net income (from Part IV, line 2)			0.		
Œ	8	Net short-term capital gain	<u> </u>	 			<u> </u>
	9	Income modifications Gross sales less returns					-
	10a	and allowances		******************			<u> </u>
		Less Cost of goods sold					-
		Gross profit or (loss)	62,698.	6	2,698.		STATEMENT 2
	11 12	Other income Total Add lines 1 through 11	62,719.		2,719.		D 1111 1111111
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages		_			
		Pension plans, employee benefits					
ses	16a	Legal fees					
ben	b	Accounting fees RECEIVED Other professional fees					_
찣	C	Other professional fees					
tive	17	Interest O OCT 14 STIME S	F 100		- 100		
itra	18	17.	5,198.		5,198.		0.
ij	19	Depreciation and depletion		-	<u> </u>		
₩ p	20 21	Occupancy OGDEN UT					
ρ	22	Printing and publications			-		
Operating and Administrative Expenses	23	Other expenses STMT 4	35,377.	3	5,377.		0.
aţin		Total operating and administrative			_ _		
per		expenses. Add lines 13 through 23	40,575.	4	0,575.	<u> </u>	0.
ō	25	Contributions, gifts, grants paid	43,523.				43,523.
	26	Total expenses and disbursements.					
		Add lines 24 and 25	84,098.	4	0,575.	ļ	43,523.
	27	Subtract line 26 from line 12	421 272				
		Excess of revenue over expenses and disbursements	<21,379.		2 144	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·
		Net investment income (if negative, enter -0-)			2,144.	N/A	-
	<u> </u>	Adjusted net income (if negative, enter -0-)	<u> </u>	L,] N/A	<u> </u>

323511 10-10-13

Add lines 1, 2, and 3

4

314,423.

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Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

JOE AND WINNIE SANDEL, TRUSTEES

Part IV Capital Gains a	nd Losses for Tax on Ir	nvestment	Income						
	e the kind(s) of property sold (e g house, or common stock, 200 sho			(b) Ho P - D -	ow acquired Purchase Donation		acquired day, yr)	(d) Date s (mo , day,	
1a									
b NON	E								
С				ļ					
d		·		<u> </u>				· · ·	
<u>e</u>	·			<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	, ,,,,	t or other basis xpense of sale				Sain or (loss) s (f) minus (
a	·····								
b		-				 .			
<u>C</u>	 .			_					
_d		 				• •		·	
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/60			(I) Caine //	Col (b) com		
Complete only for assets snowing		T					Col (h) gain not less thai		
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any				(from col (_
<u>a</u>									
<u>b</u>									
C				-					
d								- .	
<u>e</u>		_		$\overline{}$					
2 Capital gain net income or (net capi	tal loss) { If gain, also ente If (loss), enter -0	r in Part I, line î)- in Part I, line î	7 7	}	2				
3 Net short-term capital gain or (loss	as defined in sections 1222(5) ar	nd (6)							
If gain, also enter in Part I, line 8, co	olumn (c)			 					
If (loss), enter -0- in Part I, line 8	1. 0. 4: 4040(-) 5	. D = d d	Tour on NoA	1	3				
Part V Qualification Un						come			
(For optional use by domestic private f	oundations subject to the section	4940(a) tax on	net investment ir	icome ;)				
If section 4940(d)(2) applies, leave this	part blank								
								Yes D	ਯਾ
Was the foundation liable for the section				ll00,				Yes L	V INO
If "Yes," the foundation does not qualify 1 Enter the appropriate amount in ea	/ under section 4940(e) Do not co	omplete this pa	n making any e	ntries					
1 Enter the appropriate amount in ea		iistiuctions bei	ore making any e			-		(d)	
Base period years	(b) Adjusted qualifying dis	stributions	Net value of no	(C) oncharif	able-use asse	ts	Distrit	oùtion ratio rided by col. (c	•11
Calendar year (or tax year beginning	,	39,216.	100, 14,00		15,73		(cor (b) div	2.49	
2012		37,103.			34,07			2.55	
2011		3,276.			65,72			1.41	
2010		31,753.			89,42				4228
2009		6,469.	·		92,84			1.03	
2008		70,403.			<u> </u>	<u> </u>	1	100	,,,,
C. Tatal of line 4. column (d)						2		8.42	1121
2 Total of line 1, column (d)3 Average distribution ratio for the 5-	was been paried - divide the total	on line 2 by 5	or by the number	r of yes	rc	-	+		
the foundation has been in existent		On line 2 by 5,	or by the number	i vi yea	13	3		1.68	4224
the loundation has been in existent	e ii iess tiiaii 5 years						 		
4 Enter the net value of noncharitable	-use assets for 2013 from Part X,	line 5				4			
5 Multiply line 4 by line 3						5			0.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					- 6	<u> </u>		221.
7 Add lines 5 and 6						7	ļ	<u> </u>	221.
								4.5	E 2 2
8 Enter qualifying distributions from		. 46	، ، خـــ فمطة مقمار	40	tou rote	8		43,	523.
If line 8 is equal to or greater than l See the Part VI instructions	ine /, check the box in Part VI, line	e ib, and comp	nete that part usin	ng a 1%	ax rate				

SANDEL CHARITABLE TRUST JOE AND WINNIE SANDEL, TRUSTEES 33-6355054 Form 990-PF (2013) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary-see instructions) 221. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 1 c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4 5 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-6 Credits/Payments 247. a 2013 estimated tax payments and 2012 overpayment credited to 2013 6a 6b b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 60 6d d Backup withholding erroneously withheld 247. 7 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 26. 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 26 - Refunded ▶ 0. 11 Enter the amount of line 10 to be Credited to 2014 estimated tax 11 Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Х 10 c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year 0 . (2) On foundation managers ► \$ _ (1) On the foundation ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers > \$ Х 2 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes." attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or 3 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A 4h b If "Yes." has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X 6 remain in the governing instrument? X 7 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) $\mathbf{X}\mathbf{T}$ b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) X 8b of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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X

4h

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had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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

All other program-related investments. See instructions

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations	must complete this part	. Foreign four	ndations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitat	ole, etc., purposes	_	. ,	
а	Average monthly fair market value of securities			1a	0.
b	Average of monthly cash balances			1b	
C	Fair market value of all other assets			10	
d	Total (add lines 1a, b, and c)			1d	0.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d		:	3	0.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amoun	t, see instructions)		4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o			5	0.
6	Minimum investment return Enter 5% of line 5	•		6	0.
P	Distributable Amount (see instructions) (Section 4942(j)(3) a foreign organizations check here and do not complete this part		foundations an	id certain	
1	Minimum investment return from Part X, line 6		-	1	0.
2a	Tax on investment income for 2013 from Part VI, line 5	2a	221.		
	Income tax for 2013 (This does not include the tax from Part VI)	2b			
C	Add lines 2a and 2b			20	221.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	0.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	0.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Par	t XIII, line 1		7	0.
P	art XII Qualifying Distributions (see instructions)		· <u>-</u>	· · · · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes			
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26			1a	43,523.
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 charite	able, etc , purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the				
a	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, a	and Part XIII, line 4		4	43,523.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	restment			
	income Enter 1% of Part I, line 27b			5	221.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	43,302.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years 4040(a) reduction of tay in those years	when calculating whether t	he foundation	qualifies for the	section

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				0.
2 Undistributed income, if any, as of the end of 2013				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Enter amount for 2012 only			0.	H
b Total for prior years		_		
		0.	<u>' - - - - - - - - - - - - -</u>	·· ············· · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2013				
a From 2008				
b From 2009				
c From 2010				
d From 2011 86,023.				
e From 2012 38,575.	124 500			
f Total of lines 3a through e	124,598.	······································		
4 Qualifying distributions for 2013 from				-
Part XII, line 4 ► \$ 43,523.			0.	
a Applied to 2012, but not more than line 2a		W. 1 W. 1		, , , , , , , , , , , , , , , , , , ,
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			11844	
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	_ 	The control of the co	·	0.
d Applied to 2013 distributable amount e Remaining amount distributed out of corpus	43,523.	······································		
5 Excess distributions carryover applied to 2013	0.	14244444 - 4212222444 - 41224	',1*##**	0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	168,121.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2012 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2013 Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2014		4224444		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)		······		
8 Excess distributions carryover from 2008	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	168,121.			
· · · · · · · · · · · · · · · · · · ·	100,121.			
10 Analysis of line 9 a Excess from 2009				
b Excess from 2010				
© Excess from 2010 86,023.				
d Excess from 2012 38,575.				
e Excess from 2013 43,523.				
O EXCUSS HOLLES TO				Form 990-PF (2013)

3	3-	-6	3	5	5	0	5	4

Page	10	

		DEL, TRUSTE			55054 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	r 2013, enter the date of	the ruling	▶ ∟_		
b Check box to indicate whether the found	ation is a private operati	ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	411.0040	ļ .
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					-
each year listed					
b 85% of line 2a					-
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					<u></u>
 Qualifying distributions made directly 					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	l				<u> </u>
Part XV Supplementary Info			if the foundation	on had \$5,000 or m	ore in assets
at any time during t		ructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation wh year (but only if they have contributed r	o have contributed more	than 2% of the total con	tributions received by t	he foundation before the cit	ose of any tax
	nore than \$5,000) (See	Section 507(d)(2))			
NONE					
b List any managers of the foundation who other entity) of which the foundation ha	o own 10% or more of t	he stock of a corporation	(or an equally large po	rtion of the ownership of a p	partnership or
	s a 10 % of greater intere	331			
NONE					
2 Information Regarding Contribut					weeks for friends. If
Check here X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and doe	s not accept unsolicited req	d d
			·		
a The name, address, and telephone num	iber or e-mail address of	the person to whom app	iications should be add	uessen	
b The form in which applications should	be submitted and inform	ation and materials they s	hould include		
		· · · · · · · · · · · · · · · · · · ·			
c Any submission deadlines					
d Any restrictions or limitations on award	s, such as by geographic	cal areas, charitable fields	, kinds of institutions,	or other factors	
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JOE AND WINNIE SANDEL, TRUSTEES

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Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year BLARE SANDEL FOUNDATION N/A CHARITABLE SUPPORT OF GENERAL 408 FM 1791 N ORGANIZATION OPERATIONS HUNTSVILLE, TX 77320 3,200. BOYS & GIRLS CLUB OF WALKER COUNTY N/A NONPROFIT SUPPORT OF GENERAL CORPORATION OPERATIONS P.O. BOX 8600 HUNTSVILLE, TX 77340 501(C)(3 6,000. CELEBRATION MINISTRY NONPROFIT WOMENS RELIGIOUS N/A CORPORATION DRGANIZATION OF 1016 SAM HOUSTON AVE METHODIST CHURCH 1,430. HUNTSVILLE, TX 77340 NONPROFIT SUPPORT OF GENERAL FELLOWSHIP OF CHRISTIAN ATHLETES N/A CORPORATION OPERATIONS P.O. BOX 10802 5,600. COLLEGE STATION, TX 77842 NONPROFIT SUPPORT OF GENERAL FIRST UNITED METHODIST CHURCH N/A CORPORATION OPERATIONS OF 1016 SAM HOUSTON AVE METHODIST CHURCH 6,404. HUNTSVILLE, TX 77340 SEE CONTINUATION SHEET(S) ▶ 3a 43,523. Total b Approved for future payment NONE **≥** 3b ٥. Total

art XVI-A	XVI-A Ana	lysis of Income	-Producina	Activities
art Avi-A	AVI-A Ana	lysis of income	-Producing	Activiti

Enter gross amounts unless otherwise indicated	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b)	Exclu- sion	(d)	Related or exempt
1 Program service revenue	code	Amount	code	Amount	function income
a					
b				_	
C					
d		<u> </u>			
e		. <u> </u>			
f					
g Fees and contracts from government agencies	ļ	<u>-</u>			
2 Membership dues and assessments			\rightarrow		
3 Interest on savings and temporary cash investments			14	21.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate		, , , , , , , , , , , , , , , , , , , ,			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a OIL/GAS ROYALTY INTEREST	<u> </u>		15	62,698.	
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)	<u> </u>		0.	62,719.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	62,719.
(See worksheet in line 13 instructions to verify calculations.)					

											
Line No.									rt XVI-A contributed impo	tantly to the accom	plishment of
							roviding funds for				
11A	GROS	SS O	IL/G	AS RO	DYALTIE	S	RECEIVED	FROM	CONTRIBUTED	MINERAL	INTERESTS
3	NET	INC	OME	FROM	INTERE	ST	<u> </u>		-		
	 										
			_								
	1										
											<u> </u>
							· -				
		_									
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Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations or in section 527 a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash (2) Other assets 3 Dide Transactions (3) Sales of assets to an oncharitable exempt organization (3) Sales of assets to an oncharitable exempt organization (3) Renation facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guaranties (5) Loans or loan guaranties (5) Performance of services or membership or fundraising solicitations (5) Performance of services or membership or fundraising solicitations (5) Performance of services or services given by the reporting foundation if the foundation received lies than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services given by the reporting foundation if the foundation received lies than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services given by the reporting foundation if the foundation received lies than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services given by the reporting foundation if the foundation received lies than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services given by the reporting foundation if the foundation received lies than fair market value in any transaction or sharing arrangement, show in section 501(c) of the Code (other than section 501(c)(3) or in section 527?	Form 990	0-PF (2013)	JOE A	ND WIN	NIE	SANDE	L, :	TRUST	EES		33-	6355054	Pa	ige 13
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In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule (a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (when than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (when than taxpayer) is based on all information of which preparer has any knowledge series instrum with the preparer return with the preparer current in the preparer of the preparer of the preparer in the preparer				 						+		· -	-	
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule (a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (when than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (when than taxpayer) is based on all information of which preparer has any knowledge series instrum with the preparer return with the preparer current in the preparer of the preparer of the preparer in the preparer				 						-				
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Sign Here Signature of officer or trustee Date Title									pt viganiza	ations described		☐ Yes	X	J No
(a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of prepaler (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and belief, it is true, corr					501(0)(5	,,, or in soci	1011 321	•						
N/A Sign Here Signature of officer or trustee Print/Type preparer's name Peparer's signature JOE BRYAN BICKLEY N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge may the IRS discuss this return with the preparer has any knowledge shown below (see instr.)? Yes No Political Print/Type preparer's name Preparer's signature Date Check If self- employed PO0318981							(b) Ty	pe of orga	nization		(c) Description of r	elationship		
Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of prepare (bither than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (bither than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (bither than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (bither than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (bither than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (bither than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (bither than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (bither than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and correct has a supplied to the preparer (bither than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and correct has a supplied to the best of my knowledge and belief, it is true, correct, and correct has a supplied to the best of my knowledge and belief, it is true, correct has a supplied to the best of my knowledge and belief, it is true, correct has a supplied to the best of my knowledge and belief, it is true, correct has a supplied to the best of my knowledge and belief, it is true, correct has a supplied to the b		- <u></u> -					, , ,	·					_	
Sign Here And belief, it is true, correct, and complete. Declaration of preparer other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr.)? 10/7/2014 Trus.fee X Yes No No No No No No No N														
Sign Here And belief, it is true, correct, and complete. Declaration of preparer other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr.)? 10/7/2014 Trus.fee X Yes No No No No No No No N		-	-		_									
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Paid JOE BRYAN BICKLEY 10/7/2014 Trustee Shown below (see instr)? X Yes No No No No No No No N		Under penalties of pe	erjury, I declare	that I have exam	ined this r	eturn, includin	ng accom	panying sche	dules and s	tatements, and to the	ne best of my knowledge	May the ins	discuss	this
Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Date Check if PTIN self- employed PO0318981	Sign		Correct, and co	mpiete Deciaratio	on of prep	aver (other that	п шахрауе	en) is based o	n all intorma			return with the shown below	e prepar (see ins	er tr)?
Print/Type preparer's name Paid Date Check if PTIN self- employed Poid Po	Here		2/1	Jon.				10/7/	2014	Tru	stee	X Yes		∐ No
Paid JOE BRYAN BICKLEY Ryan Silly, CAN 10-1-19 self-employed P00318981											1 05	D.T.D.		
Paid JOE BRYAN BICKLEY P00318981		Print/Type	preparer's n	ame		pparer's s	ignature		İ	Date		PTIN		
	ъ			D T A	1	In Br	·-	Buil	en ch	A 10-1-15	sell- employed	D00310	001	
						COMM	5 0	<u> </u>	<u></u>		Firm's CIN > 7			

Phone no 936-295-9193

Use Only

Firm's address ► 901 NORMAL PARK, SUITE 206 HUNTSVILLE, TX 77320-3770

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient HUNTSVILLE EDUCATION FOUNDATION NONPROFIT SUPPORT OF GENERAL N/A 441 FM 2821 EAST 501(C)(3) **OPERATIONS** HUNTSVILLE, TX 77320 GROUPS 500. PREGNANCY CARE CENTER N/A NONPROFIT CARE FOR YOUNG CORPORATION501 (WOMEN/PREGNANCY 1522 SAM HOUSTON AVE HUNTSVILLE, TX 77340 TESTING/TRAINING 11,600. SAM HOUSTON STATE UNIVERSITY N/A STATE SCHOLARSHIP P. O. BOX 2537 COLLEGE/UNIVERS HUNTSVILLE, TX 77341 1,875. NONPROFIT SUPPORT OF VARIOUS MISCELLANEOUS N/A SUPPORT OF VARIOUS LOCAL ORGANIZATIONS 501(C)(3) LOCAL NONPROFIT GROUPS CHARITABLE P.O. BOX 1917 HUNTSVILLE, TX 77340 ORGANIZATIONS 4,914. NONPROFIT SUPPORT OF GENERAL THE VAIL CHURCH N/A CORPORATION501 (OPERATIONS P.O. BOX 955 1,500. AVON, CO 81620 WALKER COUNTY FAIR SCHOLARSHIP NONPROFIT SUPPORT OF GENERAL N/A CORPORATION501 (OPERATIONS P.O. BOX 1817 500. HUNTSVILLE, TX 77342 20,889. Total from continuation sheets

FORM 990-PF INTEREST ON SAVI	INGS AND TEN	MPORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE			(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	3
FIRST NATIONAL BANK		21.	21.		
TOTAL TO PART I, LINE 3		21.	21.		
FORM 990-PF	OTHER I	INCOME		STATEMENT	2
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
OIL/GAS ROYALTY INTEREST	_	62,698.	62,698	•	
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	62,698.	62,698	•	
FORM 990-PF	TA	KES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAE E PURPOSE	
ROYALTY PRODUCTION SEVERENCE TAXES PROPERTY TAXES TAXES ON INVESTMENT INCOME	3,626 1,351				0.
- 2013	221	. 221	l. 		0.
TO FORM 990-PF, PG 1, LN 18	5,198	5,198	3.		0.

FORM 990-PF	OTHER E	XPENSES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM	(D) CHARITABLE PURPOSES	
ROYALTY PRODUCTION MARKETING FEES AMORTIZATION	9,892. 25,485.	9,892. 25,485.				0.
TO FORM 990-PF, PG 1, LN 23	35,377.	35,	377.			0.
FORM 990-PF DEPRECIATION OF	ASSETS NOT	HELD FOR	INVE	ESTMENT	STATEMENT	5
DESCRIPTION		T OR BASIS		MULATED RECIATION	BOOK VALU	E
ROYALTY INTEREST ROYALTY INTEREST		467,000. 42,700.		194,583. 17,792.	272,4 24,9	
TOTAL TO FM 990-PF, PART II,	LN 14	509,700.		212,375.	297,3	25.
FORM 990-PF	OTHER	ASSETS			STATEMENT	6
DESCRIPTION		NING OF K VALUE		OF YEAR OK VALUE	FAIR MARKE VALUE	Т
FEDERAL INCOME TAX DEPOSIT		247.		26.		0.
TO FORM 990-PF, PART II, LINE	15	247.		26.		0.

2013 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

	•	
• .	Current Year Deduction	23,350.
	Current Sec 179	•
990-PF	Accumulated Depreciation	171,233. 15,657. 186,890.
6	Basis For Depreciation	467,000. 42,700. 509,700.
:	Reduction In Basis	0
	Bus % Excl	
	Unadjusted Cost Or Basis	42,700. 509,700.
ਸ਼ -	No	4 4 መ
F PAGE	Life	240M 240M
990-PF	Method	
Σ	Date Acquired	082305 082305
2013 DEPRECIATION AND AMORTIZATION REPORT	Description	1ROYALTY INTEREST * TOTAL 990-PF PG 1 DEPR & AMORT
2013 DEF	Asset No	

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization 990-PF

(Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No 179

Name(s) shown on return

► See separate instructions.

Business or activity to which this form relates

Identifying number

SANDEL	CHARITABLE	TRIIST
חחתאטחים	CHWITTUDE	INUSI

TOF AND WINNIE GANDET MDIICMERC FORM 990-DE DACE 1

33-6355054

OOE AND WINNIE SANDED			FOR			r PAGE	<u> </u>	33-0333034
Part Election To Expense Certain Prope	erty Under Section 1	79 Note: If yo	ou have any lis	ted pro	perty, c	omplete Part	V before y	
1 Maximum amount (see instructions)							1	500,000.
Total cost of section 179 property placed in service (see instructions)						2		
Threshold cost of section 179 property before reduction in limitation						3	2,000,000.	
4 Reduction in limitation. Subtract line 3	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-						4	
5 Dollar limitation for tax year Subtract line 4 from lin	ne 1 lf zero or less, enter	-0- If married fit	ing separately, see	nstruct	ions		5	
6 (a) Description of p	property		(b) Cost (busin	ess use	only)	(c) Elected	cost	
	· · · · · · · · · · · · · · · · · · ·		-					
7 Listed property. Enter the amount from	m line 29				7			
8 Total elected cost of section 179 prop		ın column (c), lines 6 and	7			8	
9 Tentative deduction. Enter the smalle	•	· · · · · · · · · · · · · · · · · · ·	-,,				9	
10 Carryover of disallowed deduction from		012 Form 45	62				10	
11 Business income limitation. Enter the				ro) or li	ne 5		11	-
12 Section 179 expense deduction Add		•		•			12	
13 Carryover of disallowed deduction to				>	13			
Note: Do not use Part II or Part III below for								<u> </u>
Part II Special Depreciation Allow				de liste	ed prope	erty.)		
14 Special depreciation allowance for qui								
the tax year	united property (on	101 111011 11010	.с р.оро. с, , , р.			g	14	
15 Property subject to section 168(f)(1) e	lection						15	
16 Other depreciation (including ACRS)							16	
Part III MACRS Depreciation (Do n	ot include listed pi	operty.) (Se	e instructions.	.)				
, 11, 11, 11, 11, 11, 11, 11, 11, 11, 1			ection A	,				· - . ·
17 MACRS deductions for assets placed	Lin control in tax ve	ore beginning	na before 201	3		·· ·	17	
	•	•	_				٦ ا	······································
18 If you are electing to group any assets placed in se	s Placed in Service					eral Deprecia	tion Syst	em
000.00.00	(b) Month and	(c) Basis fo	or depreciation		Recovery			
(a) Classification of property	year placed in service		nvestment use instructions)		period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property	_			├ ─				
b 5-year property	_			├ —				
c 7-year property				ļ		 		
d 10-year property	_			<u> </u>				
e 15-year property	_							 -
f 20-year property				<u> </u>				
g 25-year property					5 yrs.		S/L	
h Posidontial roatal proporty	/			27	'.5 yrs.	MM	S/L	
h Residential rental property	/		_	27	.5 yrs.	MM	S/L	
i Nonresidential real property	/			3	9 <u>yr</u> s.	MM	S/L	
				<u> </u>	_	MM_	S/L	<u> </u>
Section C - Assets	Placed in Service	During 201	3 Tax Year U	sing th	ne Alter	native Depre	iation Sys	stem
20a Class life							S/L	
b 12-year				1	2 yrs.		S/L	
c 40-year	/			4	0 yrs.	MM	S/L	
Part IV Summary (See Instructions.))							<u> </u>
21 Listed property. Enter amount from lir	ne 28		· · · · · · · · · · · · · · · · · · ·				21	
22 Total. Add amounts from line 12, lines		es 19 and 2	0 ın column (g	g), and	line 21.			
Enter here and on the appropriate line	-					<u>r</u>	_ 22	0.
23 For assets shown above and placed I								
portion of the basis attributable to see					23_			
316251 12-19-13 LHA For Paperwork Reduction		senarate in	structions					Form 4562 (2013)

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	No
	employees?		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your		
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about		
	the use of the vehicles, and retain the information received?	<u> </u>	ļ <u> </u>
41	Do you meet the requirements concerning qualified automobile demonstration use?		
	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.		
_			

P	art VI Amortization					
	(a) Description of costs	(b) Date amortization begins	(C) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42	Amortization of costs that begins during	your 2013 tax year:		-		
_				 		
43	Amortization of costs that began before	your 2013 tax year			43	25,485.
	Total. Add amounts in column (f). See t		ere to report		44	25,485.

316252 12-19-13

Form 4562 (2013)

PUBLISHER'S AFFIDAVIT OF PUBLICATION

THE STATE OF TEXAS, County of Walker

I, Bill Hamilton, of the aforesaid County and State, do solemnly swear that I am the Publisher of The Huntsville Item, a daily newspaper of general circulation which has been continuously and regularly published at Huntsville, Walker County, Texas, and is a legal newspaper and the attached notice was published in said newspaper.

Brickley,	Prescott & Co.	1 consecutive/subsquent dates previous					
		ूto the retu	rn day therof to	wit:			
On	Sept 27	2014.On		2014			
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On		2014 On		2014			
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On		2014 On		2014			
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Subscrib	ed and sworn to this 29th	day of	Sept	2014			
			1				
		Disa	Danse	<u> </u>			
		,Notary Pul	olic, Walker Cou	nty, Texas			
		7 234 117 1					
		7.					

NINA HANSEN
My Commission Expires

January 27, 2017

(Seal)

NOTICE S HEREBY GIVEN IN ACCORDANCE WITH THE TERMS AND PROVISIONS OF

THETEXASTALCOHOLIC BEVERAGE CODE THAT SPEC'S FAMILY PARTNERS. LTD DBASPECS'S WINES AND SPIRITS SPECISHOUOR #444 # SFP DISTRIBUTION, SPEC'S LIQUOR & BEER HAS FILED APPLICATION FOR BEER

RETAIL DEALERS OFF PREMISES LICENSE, LOCAL DISTRIBUTORS PERMIT EOCAL CARTAGE PERMIT, AND PACKAGE STORE TASTING PERMIT SAID BUSINESS TO BE

CONDUCTED AT 207 INTERSTATE HWY 45 SOUTH HUNTSVILLE, WALKER COUNTY TEXAS 77340

SPEC'S FAMILY PARTNERS LTD DBASPEC'S WINES & SPIRITS SPEC'S LIQUOR #44 SFP DISTRIBUTION, SPEC'S LIQUOR & BEER 2410 SMITH LLC GENERAL PARTNER CLR LLC GENERAL PARTNER

9-26, 9-26

LEGALS 10 Fig. 2 LEGALS 1

NOTICE IS HEREBY GIVEN IN ACCORDANCE WITHETHE TERMS AND PROVISIONS OF THE TEXAS ALCOHOLICS OF THE THE TEXAS ALCOHOLICS BEVERAGE CODE THAT CAROLYN DIANE PERDUE T(NO TRADE NAME) HAS FILED APPLICATION FOR PACKAGE STORE PERMIT. SAID BUSINESS TO BE CONDUCTED AT 207

INTERSTATE HWY 45 SOUTH, HUNTSVILLE WALKER COUNTY TEXAS 77340

(NO TRADE NAME) CAROLYN DIANE PERDUE OWNER

STORT OF THE VIEW OF THE VIEW

9-26, 9-27

The annual report of the S Trust for the fiscal year January 12013 December 31, 2013 will be available to the public for a period of 180 days after.

October 1, 2014. The report may be examined at 1300 11th Street, Suite 600 Huntsville, Texas 77340 between the hours of

9:00 a.m. and 4:00 p.m. Monday: Friday each week. Call for an appointment 986-291-10023 \$\$ 10 · 15 · 150

Joe Sandel, Trustee

GENERAL HELP WANTED

GENERAL HELP WANTED

Levinge -Freight Lines is currently seeking experienced : flatbed drivers for local and OTR ositions out of our Willis, TX Terminal

Full benefits package available Requires 2 years flatbed, hazmat and good driving record. Call 1-877,538-4643 Extension 224 or apply online www.levinge freightlines.com

License Plumber Needed ::

Transportation " and tools a must

Call (936) 668-9308 Monday - Friday Noon and 5 p.m.

> Line Cooks & Servers

Elkins Lake is now hiring line cooks and servers. Must have experience, a passion for food & good people skills. Apply in person at 632 Cherry Hills. fax resume to 295-6975 or email to denner@elkinslake ne

MUST PASS BACKGROUND CHECK!

NOW HIRING

Attendants for I-45 Rest Area Go to the northbound rest area for application from

OWNER **OPERATORS** 18'; and 24' Box Trucks ASAP For local P & D 0 Sign On Bonus Must bring in this ad

Pleasant Grove United Methodist ? Church

Contact Huss @

281-869-5695

is in need of a fulltime muşician to play every first and third. Sunday and some aftemodniservice

at (9361-2

RN and LVN - Needed all shifts TRN Treatmen Nurse Need

Apply within Huntsville Health Care Center 2628 Muan Call 936-29 EOE

Welders Needed Immediately Experienced Only High production manufacturing 🛶

environment Home every nigh . and high pay .Call Travis at Texas Pride Trallers

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Call

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Call (713)

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