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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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

Fo	r cal	endar year 2013 or tax year beginning		09	/11 , 2013,	and ending			12/31, 2013
N	lame o	of foundation					Α	Employer identifi	
	HE	MAGNOLIA CHARITABLE FOUNDATION	NC			_		46-363807	
٨	lumbe	r and street (or P O box number if mail is not delivered	to street	t address)		Room/suite	В	Telephone numb	er (see instructions)
							(800) 839-1754		
		DATION SOURCE 501 SILVERSIDE				123			
C	ity or	town, state or province, country, and ZIP or foreign pos	tal code						
							16	If exemption application pending, check here	ation is X
_		INGTON, DE 19809-1377					_		
G	Chec	ck all that apply X Initial return	-	Initial return o	•	oublic charity	/ D	1 Foreign organiza	tions, check here . 🕨 🔲
		Final return	<u> </u>	Amended ret				2 Foreign organiza 85% test, check h	
_		Address change		Name change		· · · · · · · · · · · · · · · · · · ·	-	computation .	
ሖ	_	ck type of organization X Section 501(A.a.a	E	•	n status was terminated
<u>.</u>		ection 4947(a)(1) nonexempt charitable trust		Other taxable promethod X Ca		crual	\dashv	under section 507(b)(1)(A), check here . P
						Jiuai	F		in a 60-month termination
	16) !	of year (from Part II, col (c), line	columi	pecify) n (d) must be on	cash hasis		-	ander section 507(b)(1)(b), crieck fiele .
В		Analysis of Revenue and Expenses (The			casii basis)				(d) Disbursements
	aiti	total of amounts in columns (b), (c), and (d)		Revenue and xpenses per	(b) Net inv			Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions))	-	books	ıncome			income	purposes (cash basis only)
\neg	1	, , , , , , , , , , , , , , , , , , ,		3,005,602.					(Cacit basis offi)
		Contributions, gifts, grants, etc., received (attach schedule). If the foundation is not required to extend Sch. R.					-		
		Interest on savings and temporary cash investments		21.		21.			
	4	Dividends and interest from securities		16,769.	1	6,769.			
1		Gross rents							
İ		Net rental income or (loss)							
<u>0</u>	6a	Net gain or (loss) from sale of assets not on line 10		53,169.					
킯	b	Gross sales price for all assets on line 6a 1,193,516.			<u></u>				
Revenue	7	Capital gain net income (from Part IV, line 2).				66,452.			
~	8	Net short-term capital gain							
	9	Income modifications · · · · · · · · · · · ·							ļ
	10 a	Gross sales less returns and allowances · · · ·							
ļ		Less Cost of goods sold .							
		Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)		3,075,561.		73,242.			
_	12	Total Add lines 1 through 11		3,073,301.		13,242.			
	13	Compensation of officers, directors, trustees, etc							<u> </u>
ses	14	Other employee salaries and wages	ļ						-
ens	15	Pension plans, employee benefits							
Ϋ́	ioa L	Accounting fees (attach schedule)			D	ECEIVE	D		-
Ve.	,	Other professional fees (attach schedule)			1			181	<u> </u>
āţ	17	Interest			100	D 0 0	014	18	
ist	18	Taxes (attach schedule) (see instructions)		-	AF AF	R 2 2 2	U 14	S	
ü	19	Depreciation (attach schedule) and depletion						<u>}≅ </u>	
Agn d	20	Occupancy			0	GDEN, L	JT		
Þ	21	Travel, conferences, and meetings						`	
ā	22	Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) ATCH .1. Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid							
ting	23	Other expenses (attach schedule) ATCH .1 .		5,850.					5,850
era)	24	Total operating and administrative expenses.							
ö	1	Add lines 13 through 23		5,850.					5,850
_		Contributions, gifts, grants paid		42,500.					42,500
	26	Total expenses and disbursements Add lines 24 and 25		48,350.					48,350
	27	Subtract line 26 from line 12		0.000					
	i .	Excess of revenue over expenses and disbursements	<u> </u>	3,027,211.	 	72 040			
		Net investment income (if negative, enter -0-)	<u> </u>	-	 	73,242.			<u> </u>
_	C	Adjusted net income (if negative, enter -0-)							1

JSA For Paperwork Reduction Act Notice, see instructions 3E1410 1 000

Form 990-PF (2013)

For	m 990	-PF (2013) THE MAGNOLIA CHARITAB	LE FOUNDATION	4	6-3638072 Page 2
Ð	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		of year
	er t II	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		_	
	2	Savings and temporary cash investments		107,191	107,191
	3	Accounts receivable			
1		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable	-		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	-	Less allowance for doubtful accounts ▶			
Ś	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	_	Investments - U S and state government obligations (attach schedule)	-		
	IV a	Investments - corporate stock (attach schedule) ATCH 2		2,920,020	2,905,514
				2,320,020	2,303,314
	11 6	Investments - corporate bonds (attach schedule)			
		and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13 14	Investments - other (attach schedule)			
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
	<u> </u>	instructions Also, see page 1, item I)		3,027,211	3,012,705
	17	Accounts payable and accrued expenses			4
	18	Grants payable			4
ęs	19	Deferred revenue			_
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	<u>.</u> . <u>.</u>		
ā	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0		<u>d</u>
		Foundations that follow SFAS 117, check here . ▶			
ý	Ì	and complete lines 24 through 26 and lines 30 and 31.			
ည	24	Unrestricted			
ă	25	Temporarily restricted			
ä	26	Permanently restricted			1
pur		Foundations that do not follow SFAS 117, ▶ 🗓			
Ē		check here and complete lines 27 through 31.			
0	27	Capital stock, trust principal, or current funds			
Net Assets or Fund Bala	28	Paid-in or capital surplus, or land, bldg , and equipment fund			i
1SS	29	Retained earnings, accumulated income, endowment, or other funds	-	3,027,211	
7	30	Total net assets or fund balances (see instructions)	0	3,027,211	
ž	31	Total liabilities and net assets/fund balances (see		-,,	-
	` '	instructions)	0	3,027,211	
	art	Analysis of Changes in Net Assets or Fund E		0,02,,211	·1
		al net assets or fund balances at beginning of year - Part II		must agree with	T
•		I-of-year figure reported on prior year's return).			
•	CIIC	or amount from Part Line 27s			3,027,211
~	. 511	er amount from Part I, line 27a			3,021,211
					2 027 211
4	· Ado	d lines 1, 2, and 3			3,027,211
		creases not included in line 2 (itemize)	line E) Death orthogr	5 b) les 20	2 007 011
_6	10	al net assets or fund balances at end of year (line 4 minus	ше 5) - Рап II, column (b), line 30 6	3,027,211

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	s and Losses for Tax on in		(b) How	(a) Data	
	nd describe the kind(s) of property sold prick warehouse, or common stock, 20	· - ·	acquired P - Purchase	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)
la SEE PART IV SCHE	<u> </u>		D - Donation	(o , day, yi)	
b	· ·				
c					
d					
е				L	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (k (e) plus (f) min	
a			ļ		
b					
<u>c</u>					
<u>d</u>	-		<u> </u>		_
e	<u> </u>		 		
Complete only for assets	s showing gain in column (h) and own			Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less Losses (from co	
a					
b			<u> </u>		
<u>c</u>	-		1		
<u>d</u>					
<u>e </u>	l	If now also ontonia Dark Live 7	 	_	
Capital gain net income o		If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2		56,452.
Net short-term canital dai	n or (loss) as defined in sections	,	 		30,432.
		structions) If (loss), enter -0- in $oldsymbol{1}$			
•			3		0
		educed Tax on Net Investment	<u> </u>		
	r the section 4942 tax on the distr s not qualify under section 4940(e	ributable amount of any year in the bed Do not complete this part	ase perio	d?	Yes N
1 Enter the appropriate an	nount in each column for each yea	ar, see the instructions before makin	g any entr	ies	
(a)	(b)	(c)	<u> </u>	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution i (col (b) divided b	
2012					-
2011					
2010			<u> </u>		
2009			ļ		
2008	<u> </u>				
2 Total of line 1, column (c	¹⁾	, , , , , , , , , , , , , , , , , , ,	2		
	•	de the total on line 2 by 5, or by the ess than 5 years	3		
4 Enter the net value of no	encharitable-use assets for 2013 f	from Part X, line 5	4		
			5	_	
					. <u>-</u>
				<u> </u>	
7 Add lines 5 and 6			7		
8 Enter qualifying distribut If line 8 is equal to or q	reater than line 7, check the box	x in Part VI, line 1b, and complete	8 that part	using a 1% ta	ix rate. See ti
Part VI instructions					
E1430 1 000				F0	m 990-PF (20

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ction	<u>s)</u>
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,4	165.
	here ▶ ☐ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2 3		1,4	165.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		1,4	165.
6	Credits/Payments			
	2013 estimated tax payments and 2012 overpayment credited to 2013 6a			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		1 .	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,4	165.
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.			
_	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11 t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		V	
10	or intervene in any political campaign?	10	Yes	No X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the	1a		
U	definition)?	1b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	10		- ^
	distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	-,-		<u> </u>
_	(1) On the foundation \$\ \\$ \(\) \(
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	.5		X
	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 remain in the governing instrument?	6	<u> </u>	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	_8b	Χ	
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	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and		.,	
	addresses ATCH 3	10	Х	L
				(2012)

b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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Χ

Par	t VII-B	Statements Regarding Activities for	r Which Form 4	720 May Be Requi	ired (continued)		
5 a	During t	he year did the foundation pay or incur any amou	nt to				
	(1) Car	ry on propaganda, or otherwise attempt to influen	ce legislation (section	4945(e))?	. Yes X No	,	
	(2) Influ	uence the outcome of any specific public elec	ction (see section 4	955), or to carry or	٦,		
		ctly or indirectly, any voter registration drive?				,	
		vide a grant to an individual for travel, study, or oth				,	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in						
		tion 509(a)(1), (2), or (3), or section 4940(d)(2)? (s				,	
		vide for any purpose other than religious, ch					
		poses, or for the prevention of cruelty to children o					1
b		answer is "Yes" to 5a(1)-(5), did any of the			. — —	1	
	-	ions section 53 4945 or in a current notice regard		•	•		
	-	-	=			· <u>5b</u>	
_		ations relying on a current notice regarding disast				니	
С		answer is "Yes" to question 5a(4), does the f		•			
		e it maintained expenditure responsibility for the gr		• • • • • • • • • • • • •	Yes No	'	
	-	attach the statement required by Regulations sect	, ,				
6 a		foundation, during the year, receive any fund	•	• • • • •			
		sonal benefit contract?				P	
b		foundation, during the year, pay premiums, direc	tly or indirectly, on a	personal benefit contrac	xt?	. <u>6b</u>	X
		to 6b, file Form 8870					
		ime during the tax year, was the foundation a pai				o	
		did the foundation receive any proceeds or have				. 7b	
Par	t VIII	Information About Officers, Directors and Contractors	, Trustees, Foun	uation Managers,	Highly Paid Empi	oyees,	
1	List all	officers, directors, trustees, foundation n				_	
		(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans		se account, llowances
			devoted to position	enter -0-)	and deferred compensation	Other an	ilowances
7 000	H 4			0			,
AIC	л 4			0	<u> </u>		
							
					_	_	
	Compo	ensation of five highest-paid employees	Inthor than the	o included on line	. 1	iono) If n	
2	"NONE		(other than thos	se iliciuueu on illi	e i - see ilistructi	ions). Ii n	ione, ente
			(b) Title, and average		(d) Contributions to employee benefit	(a) Eynen	se account,
(a) Name ar	nd address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other al	llowances
			•	· · · · · · · · · · · · · · · · · · ·	compensation		
	NONE						
	NOND						
						_	_
		· -		·			
_	 				<u> </u>	_	
Tota	I numbe	er of other employees paid over \$50,000 .	 	 	<u> ▶</u>		A DE
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	highest-paid independent contractors for professional services (see instructions). If none, enter "NONE.	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ONE		
tal numt	er of others receiving over \$50,000 for professional services	
art IX-A		
ait in-A	Summary of Direct Chartable Activities	
	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of s and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
	s and other beneficialies served, conferences converied, research papers produced, etc	
<u> N/A</u>		
2		
3		
art IX-B	Summary of Program-Related Investments (see instructions)	<u> </u>
	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
rescribe th		
NONE		
_NONE		
NONE		
1 _ <u>NONE</u> 2		
2	ogram-related investments. See instructions	
2		
2		

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Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundation	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	726,378.
b	Average of monthly cash balances	1b	22,332.
С	hair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	748,710.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets] 2	
3		3	748,710.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	<u> </u>	· · · · · · · · · · · · · · · · · · ·
		4	11,231.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	737,479.
6	Minimum investment return. Enter 5% of line 5	6	11,315.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ ☐ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1 1	11,315.
2 a	Tax on investment income for 2013 from Part VI, line 5 2a 1,465.		
ь	Income tax for 2013 (This does not include the tax from Part VI) 2b	1	
	Add lines 2a and 2b	2 _C	1,465.
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	9,850.
4	Recoveries of amounts treated as qualifying distributions		3,000.
5	Add 1 0 d 4	5	9,850.
6		6	3,030.
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
-	line 1	7	9,850.
Par		<u> </u>	9,030.
			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1 1	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	48,350.
b	Program-related investments - total from Part IX-B	1b	
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		
а	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	48,350.
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 (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	48,350.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when a		ether the foundation

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Form 990-PF (2013) Page 9 Part XIII Undistributed Income (see instructions) **(b)** (d) (a) (c) Years prior to 2012 Corpus 2012 2013 Distributable amount for 2013 from Part XI, 9,850. Undistributed income, if any, as of the end of 2013 a Enter amount for 2012 only Total for pnor years 20 11 ,20 10 ,20 09 Excess distributions carryover, if any, to 2013 From 2008 From 2009 c From 2010 d From 2011 e From 2012 Total of lines 3a through e Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ _____ 48,350. a Applied to 2012, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election required - see instructions) 9,850. d Applied to 2013 distributable amount 38,500. e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 38,500. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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 d Subtract line 6c from line 6b Taxable Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2014. 38,500. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2009 . . . b Excess from 2010 . . . c Excess from 2011 . . . d Excess from 2012 . . . 38,500

e Excess from 2013 . . .

Pa	rt XIV Private Op		(see instructions a	nd Part VII-A, question	n 9)	10	NOT	APPLICABLE
	If the foundation has		•					
	foundation, and the ruling				g			
b	Check box to indicate wh					4942(J)	(3) or	4942(J)(5)
		Tax year	private operating realis	Prior 3 years		1012(1)	(0) 0.	10.12()(0)
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 20	10	1	(e) Total
	I or the minimum investment		(5/2512	(6) 2011	(4) 20			
	return from Part X for each year listed							
		-						- :
	85% of line 2a							
С	Qualifying distributions from Part XII, line 4 for each year listed .							
d	Amounts included in line 2c not				·			
	used directly for active conduct							
۵	of exempt activities Qualifying distributions made							
·	directly for active conduct of							
	exempt activities Subtract line							
3	2d from line 2c Complete 3a, b, or c for the							- · - · · · · · · · · · · · · · · · · ·
	alternative test relied upon					,		
а	"Assets" alternative test - enter							
	(1) Value of all assets (2) Value of assets qualifying					_		
	under section							
ь.	4942(j)(3)(B)(i) "Endowment" alternative test-							
U	enter 2/3 of minimum invest-							
	ment return shown in Part X,							
	line 6 for each year listed							
С	"Support" alternative test - enter							
	(1) Total support other than gross investment income							
	(interest, dividends, rents,							
	payments on secunties loans (section 512(a)(5)),							
	or royalties)							
	(2) Support from general public and 5 or more						İ	
	exempt organizations as							
	provided in section 4942 (j)(3)(B)(III)							
	(3) Largest amount of sup-							
	port from an exempt organization,				_			
	(4) Gross investment income .						<u> </u>	
Pa				t only if the found	ation had	\$5,000	or mo	re in assets
		e during the year - s	· · · · · · · · · · · · · · · · · · ·					
	Information Regardin							
а	List any managers of before the close of any			e than 2% of the tota nore than \$5,000) (Se			ed by t	he foundation
	NONE							
b	List any managers of					an equally	/ large	portion of the
	ownership of a partner	rship or other entity) o	which the foundation	n has a 10% or greater	interest			
_	NONE							
2		g Contribution, Grant						
	Check here ► X If t	the foundation only	makes contributions	to preselected charm	table organ	izations a	and doe	s not accept
		or funds if the found plete items 2a, b, c, an		ants, etc (see instruct	ions) to ind	ividuals o	r organ	izations under
_								
	The name, address, a	ind telephone number	or e-mail address or	tne person to wnom app	olications sno	ould be ad	aressea	
b	The form in which app	olications should be su	bmitted and information	on and materials they	should includ	le		
	: Any submission deadl	lines						
	Any restrictions or li	imitations on awards	, such as by geogra	aphical areas, charital	ole fields, k	ands of i	nstitutio	ns, or other

Page 11

3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual,	Foundation status of	l	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	100,410,11		
a valo calling and your				
ATCH 5				
			'	
		:		
			i	
Total	<u> </u>	<u>. </u>	D 22	42,500.
Total	 			42,300.
b Approved for future payment				
		}		
			<u> </u>	
Total		<u> </u>	▶ 3b	

	ysis of Income-Produ			T=		(2)
er gross amounts un	less otherwise indicated	(a)	ated business income (b)	(c)	/ section 512, 513, or 514 (d)	(e) Related or exemp function income
Program service reve	enue	Business code	Amount	Exclusion code	Amount	(See instructions
a						
b			<u> </u>			
			<u> </u>			
	-					
						<u> </u>
	from government agencies and assessments					
	temporary cash investments			14	21.	
	est from securities			14	16,769.	· · · ·
	(loss) from real estate					
	operty					. .
	d property					
	oss) from personal property					
	come					
	es of assets other than inventory			18	53,169.	
let income or (loss)	from special events					
Gross profit or (loss)	from sales of inventory					
Other revenue a	<u> </u>					
:						
d						
d e Subtotal Add colum Total. Add line 12, c e worksheet in line 1	ns (b), (d), and (e)	ulations)				69,9
Subtotal Add colum Total. Add line 12, ce worksheet in line 1 Int XVI-B Rela	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Tt XVI-B Relate No. Explain	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, ce worksheet in line 1 rt XVI-B Rela le No. Explain	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, ce worksheet in line 1 rt XVI-B Rela le No. Explain	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Tt XVI-B Relate No. Explain	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Tt XVI-B Relate No. Explain	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Total XVI-B Related	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Total XVI-B Related	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, c worksheet in line 1 Tt XVI-B Rela e No. Explain	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Total XVI-B Related	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, c worksheet in line 1 Tt XVI-B Rela e No. Explain	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Total XVI-B Related	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Total XVI-B Related	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribu	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Total XVI-B Related	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Total XVI-B Related	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Tt XVI-B Relate No. Explain	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, ce worksheet in line 1 rt XVI-B Rela le No. Explain	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Tt XVI-B Relate No. Explain	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Tt XVI-B Relate No. Explain	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, color worksheet in line 1 Tt XVI-B Relate No. Explain	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, ce worksheet in line 1 rt XVI-B Rela le No. Explain	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, ce worksheet in line 1 rt XVI-B Rela	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, ce worksheet in line 1 rt XVI-B Rela ne No. Explain	ns (b), (d), and (e)	ulations) s to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to
Subtotal Add colum Total. Add line 12, ce worksheet in line 1 Int XVI-B Rela	ns (b), (d), and (e)	ulations) to the Ac	ccomplishment of E	xempt Purp	ooses e) of Part XVI-A contribution	uted importantly to

Form 9	90-PF	(2013)	THE MAGNO	LIA CHARITABLE FOUN	DATION		46-3638	3072	Pa	ge 13
Part	XVI	Information R Exempt Organ		sfers To and Transac	tions and	d Relationships	With Non	chari	table)
	ın se	he organization direct	ly or indirectly e	ngage in any of the following action 501(c)(3) organization	-	•			Yes	No
	-		g foundation to a	nonchantable exempt orga	ınızation of					
		-	_					1a(1)		Х
								1a(2)		Х
		r transactions								
	(1) S	ales of assets to a no	ncharitable exem	pt organization			. .	16(1)		Х
				le exempt organization				16(2)		Х
	(3) R	ental of facilities, equi	ipment, or other a	ssets				16(3)		Х
								1b(4)		Х
								1b(5)		Х
				or fundraising solicitations				1b(6)		Х
				, other assets, or paid emplo				1c		X
				" complete the following s						
				es given by the reporting forment, show in column (d)						
		(b) Amount involved	· · · · · · · · · · · · · · · · · · ·			cription of transfers, trans				
(a) Lir	16 110	N/A	(c) Name of nor	nchantable exempt organization	N/A	cription of transfers, trans	acuons, and snar	ing ana	ingeme	ils
		N/A	 		N/A		···········			
										
							······································			
					1					• • • • • • • • • • • • • • • • • • • •
			 	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	 					
			 							
							··········			
				·						
					<u> </u>	·				
	descr		of the Code (oth	ated with, or related to, o er than section 501(c)(3)) o				Y	es X] No
		(a) Name of organization	n	(b) Type of organization		(c) Descr	ption of relations	hip		
				·				-		
				***************************************			· · · · · · · · · · · · · · · · · · ·			
		, the total control of the tot		······································	 	 				
	Und	ler penathes of perjury. I declared on perjury.	are that I have examined foreparer (other than taxon	this return, including accompanying payer) is based on all information of which	schedules and h preparer has a	statements, and to the bei	st of my knowledg	e and b	ellef, it	ıs true
Sign		KINNE	140	111.2.14	170	Adent	May the IRS			retum
Here	╮╽┖╴	anatura of officer or tractic	m -	Date	Title	DIRWY.	with the pr		ч г	below
	81	gnature of officer or trustee		Date	Title		(see instruction	s)? <u>X</u>	Yes	No
		Print/Type preparer's na	ime	Preparer's signature		Date	Check If F	MIL		
Paid		JEFFREY D HAS	KELL	JEFFREY D HASKELL				P013	4577	0

8008391754 Form 990-PF (2013)

Firm's EIN ▶ 510398347

11042

Preparer

Firm's name FOUNDATION SOURCE

LAKE SUCCESS,

NY

Use Only Firm's address ▶ ONE HOLLOW LN, STE 212

Schedule B

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

Name of the organization

Schedule of Contributors

OMB No 1545-0047

► 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

Employer identification number

THE MAGNOLIA CHARITAE	BLE FOUNDATION	46.262222
Organization type (check one)		46-3638072
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
	527 political organization	
5 000 55		
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II	or more (in money or
Special Rules		
under sections 509((3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support tal(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the ,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form III	e year, a contribution of
during the year, tota	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from a local contributions of more than \$1,000 for use <i>exclusively</i> for religious, charita uses, or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary,
during the year, con not total to more tha year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from a tributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the in \$1,000. If this box is checked, enter here the total contributions that were ly religious, charitable, etc., purpose. Do not complete any of the parts unless it received <i>nonexclusively</i> religious, charitable, etc., contribute.	ese contributions did e received during the es the General Rule utions of \$5,000 or
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file S at answer "No" on Part IV, line 2, of its Form 990, or check the box on line I be certify that it does not meet the filing requirements of Schedule B (Form 99	H of its Form 990-EZ or on its

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)

Employer identification number 46-3638072

Part I	Contributors (see instructions) Use duplicate copies of Par	rt I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ROBERT N BARNES TRUST 720 NW 50TH, SUITE 200 B OKLAHOMA CITY, OK 73118	\$3,005,602.	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
		\$	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)

Employer identification number

46-3638072

(d)

Date received

Date received

12/09/2013

FMV (or estimate)

(see instructions)

FMV (or estimate)

(see instructions)

__330,282.

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed Part II (a) No. (c) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) T. ROWE PRICE TAX FREE INCOME ADVISOR C _ _1_ _ PATAX, 13356.451 SH. 131,160. 12/09/2013 (a) No. (c) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) MERGER FUND-SBI MERFX, 1753.481 SH. _ _1_ _ 28,582. 12/09/2013 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) FIDELITY PAS INTL FUND OF FUNDS FILFX, 52846.049 SH. _ _1_ _ 558,054. 12/09/2013 (a) No. (c)

		\$145,161.	_12/09/2013
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	FIDELITY PAS US OPP FUND OF FUNDS FUSOX, 11959.053 SH.		-
		\$154,391.	12/09/2013
(a) No.	(b)	(c)	(d)

(b)

Description of noncash property given

Description of noncash property given

FIDELITY STRATEGIC ADVISERS VALUE FUND

FVSAX, 17989.223 SH.

FIDELITY PAS SMALL CAP FUND OF FUNDS

FSCFX, 9976.704 SH.

from

Part I

_ _1_ _

from

Part I

_ _1_ _

Employer identification number

46-3638072

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	STRATEGIC ADVISERS GROWTH FUND FSGFX, 19596.485 SH.		
		\$314,720.	_12/09/2013
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	FIDELITY STRATEGIC ADVISERS CORE FUND FCSAX, 23140.594 SH.		
		\$348,266.	_12/09/2013
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	FIDELITY LIMITED TERM MUNI INCOME FD FSTFX, 11383.795 SH.	s 121,579.	12/09/2013
		\$121,579.	12/09/2013
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	FIDELITY LIMITED TERM MUNI INCOME FD FSTFX, 5.088 SH.		
		\$54.	12/09/2013
		,	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
from		(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given FIDELITY MUNICIPAL INCOME	(c) FMV (or estimate) (see instructions)	(d) Date received
from Part I - 1 (a) No. from	PESCRIPTION OF NONCASH PROPERTY GIVEN FIDELITY MUNICIPAL INCOME FHIGX, 48839.59 SH. (b)	(c) FMV (or estimate) (see instructions) \$619,774. (c) FMV (or estimate)	(d) Date received 12/09/2013 (d)

Employer identification number

46-3638072

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	DWS STRATEGIC HIGH YIELD TAX FREE FD CL SHYTX, 10893.071 SH.		
		\$ <u>128,647</u> .	_12/09/2013_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	ARDEN ALTERNATIVE STRATEGIES FUND CLASS ARDNX, 2707.3 SH.		
		\$\$8,616.	_12/09/2013_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- 		 	
		\$ -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

	(Form 990, 990-EZ, or 990-PF) (2013)			Page
ame or or	ganization THE MAGNOLIA CHARITABLE	FOUNDATION		Employer identification number
2 4 III	Final minutes and a line and a li			46-3638072
Part III	Exclusively religious, charitable, etc., in that total more than \$1,000 for the year	ar. Complete colu	mns (a) through (e	e) and the following line entry.
	For organizations completing Part III, entropy contributions of \$1,000 or less for the y	ter the total of exc rear (Enter this in	clusively religious, of formation once Se	charitable, etc , ee instructions) ▶ \$
	Use duplicate copies of Part III if addition			,
(a) No	(h) Dumana of aife	(a) Uaa	af aif4	(d) Decouption of how sife is held
from Part I	(b) Purpose of gift	(c) Use	or gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, and a	ZIP + 4	Relation	nship of transferor to transferee
				- -
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
Part I	(b) Furpose of gift	(c) use	or girt	(d) Description of now girt is field
	-			
		(e) Transf	er of gift	<u> </u>
			-	
	Transferee's name, address, and a	ZIP + 4	Relatio	nship of transferor to transferee
(a) No.	1		<u> </u>	
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		-		
· – -				
		(a) T-a-a-	for of gift	
		(e) Transf	er or gint	
	Transferee's name, address, and	7ID ± 4	Palatio	nship of transferor to transferee

(c) Use of gift

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

(d) Description of how gift is held

(a) No. from Part I

(b) Purpose of gift

46-3638072

ATTACHMENT 1

FORM 990PF, PART I - OTHER EXPENSES

AND EXPENSES

DESCRIPTION PER BOOKS

ADMINISTRATIVE SET-UP FEE 4,500.

DELAWARE INCORPORATION FEES 500.

IRS APPLICATION FEES 850.

TOTALS

REVENUE

5,850.

CHARITABLE PURPOSES 4,500.

5,850.

850.

ATTACHMENT 2

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
ARDEN ALTERNATIVE STRATEGIES F BLACKSTONE ALTERNATIVE MULTI M FIDELITY PAS CORE INCOME FUND FIDELITY PAS INTL FUND OF FUND FIDELITY PAS SMALL CAP FUND OF FIDELITY PAS US OPP FUND OF FU FIDELITY STRATEGIC ADVISERS CO FIDELITY STRATEGIC ADVISERS VA FIDELITY TOTAL BOND MERGER FUND-SBI PAS INCOME OPPORT FOF PIMCO FDS SHORT TERM FD ADMINI PIMCO FUNDS TOTAL RETURN FUND STRATEGIC ADVISERS EMERGING MA STRATEGIC ADVISERS GROWTH FUND STRATEGIC ADVISERS SHORT DURAT TEMPLETON GLOBAL BOND FUND - C	29,117. 28,681. 325,287. 557,224. 139,607. 157,355. 344,220. 310,616. 179,241. 28,526. 121,204. 25,552. 122,121. 42,589. 303,548. 162,143. 42,989.	28,562. 29,042. 323,738. 565,641. 134,035. 149,007. 341,615. 308,858. 178,558. 28,031. 120,739. 25,526. 121,440. 42,506. 303,047. 161,982. 43,187.
TOTALS	2,920,020.	2,905,514.

THE MAGNOLIA CHARITABLE FOUNDATION 46-3638072
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of F	Property	Description			P	Date	Date sold	
Gross sale	Depreciation	Cost or	FMV		Excess of	P	acquired Gain	
price less expenses of sale	allowed/	other	as of	Adj basis as of	FMV over		or	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basıs	Ш	or (loss)	
1,193,516.		PUBLICLY-TRA	ADED SECURIT	PIES			56,452.	
TOTAL GAIN(L	oss)						56,452.	
						:		
JSA								

46-3638072

FORM 990PF, PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 3

NAME AND ADDRESS

ROBERT N BARNES TRUST 720 NW 50TH, SUITE 200 B OKLAHOMA CITY, OK 73118

ATTACHMENT 3

46-3638072

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 4

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

ALLISON BARNES

FOUNDATION SOURCE 501 SILVERSIDE RD

ASSOCIATE DIR 1.00

123

WILMINGTON, DE 19809-1377

CARA BARNES

DIR

FOUNDATION SOURCE 501 SILVERSIDE RD

1.00

123 WILMINGTON, DE 19809-1377

MEGAN BARNES

DIR

FOUNDATION SOURCE 501 SILVERSIDE RD

1.00

123 WILMINGTON, DE 19809-1377

ROBERT N BARNES

PRES / DIR / SEC / TREAS

FOUNDATION SOURCE 501 SILVERSIDE RD

123

1.00

WILMINGTON, DE 19809-1377

CENTENNIAL, CO 80121

46-3638072

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 5 RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND RECIPIENT NAME AND ADDRESS FOUNDATION STATUS OF RECIPIENT PURPOSE OF GRANT OR CONTRIBUTION AMOUNT AMERICAN HEART ASSOCIATION INC N/A CHARITABLE EVENT 500 7272 GREENVILLE AVE PC DALLAS, TX 75231 BLAZES TRIBUTE EQUINE RESCUE N/A GENERAL & UNRESTRICTED 500 17667 MARKITA DR PC JONES, OK 73049 HEROES PROJECT N/A GENERAL & UNRESTRICTED 500 7304 BEVERLY BLVD STE #151 PC LOS ANGELES, CA 90036 OKLAHOMA CITY GEOLOGICAL FOUNDATION N/A RICK BLACK SUMMER FIELD CAMP 10,000 PO BOX 7565 PC EDMOND, OK 73083 PAMBE GHANA INC N/A GENERAL & UNRESTRICTED 2,500 PO BOX 18813 PC OKLAHOMA CITY, OK 73154 SUPPORT A SOLDIER CLEARINGHOUSE N/A GENERAL & UNRESTRICTED 500 6559 S JACKSON ST PC

ATTACHMENT 5

YOUNG WOMENS CHRISTIAN ASSOCIATION OF OKLAHOMA CTY

2460 NW 39TH ST

OKLAHOMA CITY, OK 73112

46-3638072

WOMEN WHO CARE LUNCHEON PROGRAM

FORM 990PF	PART YV -	GRANTS AND	CONTRIBUTIONS	PAID DURING	THE YEAD

ATTACHMENT 5 (CONT'D)

500

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE ASPEN INSTITUTE INC	N/A	ASPEN WRITERS FOUNDATION NATIONAL COUNCIL	2,500
1000 N 3RD ST	PC		
ASPEN, CO 81611			
WICHITA CHILDRENS HOME	N/A	VESS & FRIENDS CHALLENGE PROJECT	25,000
810 N HOLYOKE ST	PC		
WICHITA, KS 67208			

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

N/A

PC

TOTAL CONTRIBUTIONS PAID ____42,500.