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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

SCANNED	
MAY	
2	
201	

		idar year 2014 or tax year beginning	Translate separate	, and ending		Open to Public Inspection
Naı	ne o	foundation			A Employer identification	n number
G	ET	ZEN FAMILY CHARITIES, I				
		WILLIAM E. GETZEN			82-054062	3
Nur	nber a	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
1	42	1 WESTBROOK DRIVE			941-922-8	581
City	or t	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	
S	AR	ASOTA, FL 34231				. •
G (	Check	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations makes the check here and attach contacts.	neeting the 85% test, computation
H (	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation st	
	] Se		Other taxable private founda	tion	under section 507(b)(1	
I Fa	ur ma	arket value of all assets at end of year   J Accounti		Accrual	F If the foundation is in a	
(fr	om i	Part II, col. (c), line 16)	ther (specify)		under section 507(b)(	
	\$	1 , 428 , 428 . (Part I, colu	mn (d) must be on cash b	pasis.)		, , , , , , , , , , , , , , , , , , ,
Pa	ırt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	100,000.		N/A	
	2	Check If the foundation is not required to attach Sch B				1
	3	Interest on savings and temporary		·		
	4	Dividends and interest from securities	31,699.	31,699		STATEMENT 1
	5a	Gross rents	02,000	927933		DITTI MILL I
		Net rental income or (loss)				
	_	Net gain or (loss) from sale of assets not on line 10	7,179.			
ΙE	h	Gross sales price for all assets on line 6a 110,025.	7,2,34			
Revenue	7	Capital gain net income (from Part IV, line 2)		7,179		
æ	8	Net short-term capital gain		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	9	Income modifications				
	10a	Gross sales less returns				
		Less Cost of goods sold				<del></del>
		Gross profit or (loss)				
	11	Other income	4,398.	4,398		STATEMENT 2
	12	Total. Add lines 1 through 11	143,276.	43,276		DIRIEMENI Z
	13	Compensation of officers, directors, trustees, etc	0.	0		0.
	14	Other employee salaries and wages	7			
	15					
es		Pension plans employee benefits IVED				
ens		Accounting fees STMT 3	රි <u>910.</u>	0		910.
Ä		Accounting fees STMT 3 Other professional fees MAY 2 1 2015	910. %			710.
e E	17	Interest S	Ľ			
and Administrative Expense	18	Taxes Depreciation and depletion GUENT, UT	1,711.	1,211		0.
istr	19	Depreciation and depletion GUEIN, GI	- / / /			·
πi	20	Occupancy				
Adr	21	Travel, conferences, and meetings				
2	22	Printing and publications				
ā a	23	Other expenses STMT 5	10,704.	10,643		61.
Operating	24	Total operating and administrative		= - /		<u> </u>
oer:		expenses. Add lines 13 through 23	13,325.	11,854		971.
ō	25	Contributions, gifts, grants paid	55,530.			55,530.
	26	Total expenses and disbursements.				1 22,233,
		Add lines 24 and 25	68,855.	11,854	.	56,501.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	74,421.			
	ı	Net investment income (if negative, enter -0-)		31,422		
	C	Adjusted net income (if negative, enter -0-)			N/A	
4235 11-2	01 1-14	LHA For Paperwork Reduction Act Notice, see	instructions.			Form <b>990-PF</b> (2014)

For	m 99	0-PF (2014) C/O WILLIAM E. GETZEN		82-0	)540623 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<del></del>
$\doteq$		Column should be for each of reactions only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	7,868.	16,716.	16,716.
	1	Savings and temporary cash investments	51,210.	106,266.	106,266.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	l _	disqualified persons			<del> </del>
	7	Other notes and loans receivable			
	_	Less: allowance for doubtful accounts			
ets	1	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges	040 500	050 156	1 120 760
_	1	Investments - U.S. and state government obligations <b>STMT</b> 6	942,522.	952,156.	1,120,769.
	1	Investments - corporate stock			
	١	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	40	Less accumulated depreciation			
		Investments - mortgage loans Investments - other STMT 7	193,889.	194,772.	184,677.
	13		193,009.	134,114.	104,0//.
	14	Land, buildings, and equipment basis			
	15	Other assets (describe			· · · · · · · · · · · · · · · · · · ·
	1	Total assets (to be completed by all filers - see the			<del></del>
	'0	Instructions. Also, see page 1, item I)	1,195,489.	1,269,910.	1,428,428.
	17	Accounts payable and accrued expenses	1,100,400.	1,200,010.	1,420,420.
	18	Grants payable			
m	19	Deferred revenue			
ij	20	Loans from officers, directors, trustees, and other disqualified persons	-		
Liabilities	21	Mortgages and other notes payable			
Ξ.	1	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
au	25	Temporarily restricted			
Ba	26	Permanently restricted			
<b>Fund Balances</b>		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
S of	27	Capital stock, trust principal, or current funds	0.	0.	
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
t As	29	Retained earnings, accumulated income, endowment, or other funds	1,195,489.	1,269,910.	
Net	30	Total net assets or fund balances	1,195,489.	1,269,910.	
	31	Total liabilities and net assets/fund balances	1,195,489.	1,269,910.	
F	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
_	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line			
'		st agree with end-of-year figure reported on prior year's return)		1	1,195,489.
2		r amount from Part I, line 27a		2	74,421.
3		r increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	1,269,910.
5		eases not included in line 2 (itemize)	•	5	0.
6		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	1,269,910.

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		osses for Tax on in		Income	[/h\	low acquired	7-3	Data age	(d) Determine
	<ul><li>(a) List and describe the kind(s) of property sold (e.g., real estate,</li><li>2-story brick warehouse; or common stock, 200 shs. MLC Co.)</li></ul>				] P	- Purchase - Donation		Date acquired 10., day, yr.)	(d) Date sold (mo., day, yr.)
18 SEE ATTACHED						P	VA	RIOUS	12/31/14
b SEE ATTACHED						P	VA	RIOUS	12/31/14
c CAPITAL GAINS	DIVI	DENDS			<u> </u>		<u> </u>	··	
<u>d</u>					<u> </u>		<del></del>	<del></del>	
e			Ι		<u> </u>		<u> </u>		<u> </u>
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss ) plus (f) minus	(g)
a 56,863.		·		56,25					608.
<u>ь 45,970.</u>				46,59	11.				-621
c 7,192.									7,192.
<u>d</u>									
e Complete only for assets showing	a asin un	notume (h) and owned by	the foundation	on 12/21/60			(I) C=	(O-I (b):	
Complete only for assets shown								ns (Col. (h) gair but not less tha	
(i) F.M.V. as of 12/31/69			sses (from col.	(h))					
				()///				<del></del>	608.
<u>a</u> b									-621.
C			-						7,192.
d									,, , , , , , , ,
e									
		C If anim also enter	run Dort I lunn	·- · · · · · · · · · · · · · · · · · ·	7				
2 Capital gain net income or (net ca	nortal loss	If gain, also enter ) If (loss), enter -0	- in Part I line	7	- Þ l	2			7,179.
, ,	•	•		•					
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,			iu (0).		٦				
If (loss), enter -0- in Part I, line 8	(				<b>]</b>	3		N/A	1
Part V   Qualification U	nder S	Section 4940(e) for	Reduced	Tax on Net	t Inv	estment l	ncom	10	
If section 4940(d)(2) applies, leave to  Was the foundation liable for the sec  If "Yes," the foundation does not qua  Tenter the appropriate amount in	tion 4942 lify under	tax on the distributable an section 4940(e). Do not co	omplete this pa	ırt.		<b>5.</b>			Yes X No
(a) Base period years		(b)			(c)			Dietri	(d) bution ratio
Calendar year (or tax year beginni	ng in)	Adjusted qualifying dis	tributions	Net value of no	oncha	rıtable-use ass	ets	(col. (b) di	vided by col. (c))
2013		5	0,518.		1	,194,5	35.		.042291
2012			3,657.		1	<u>,020,0</u>			.042800
2011			<u>5,855.</u>			956,99			.047915
2010			3,039.	=		808,4			.040867
2009		2	4,936.			705,5	06.	ī	.035345
2 Total of line 1, column (d)								2	.209218
3 Average distribution ratio for the the foundation has been in existe		•	on line 2 by 5,	or by the number	r of ye	ears		3	.041844
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5			4	1,379,715.					
5 Multiply line 4 by line 3				5	57,733				
6 Enter 1% of net investment income (1% of Part I, line 27b)				6	314.				
7 Add lines 5 and 6	( 1 /0 0	artijimo Eroj					T	7	58,047
	<b>D</b> • \$400	Libraria.							
8 Enter qualifying distributions from If line 8 is equal to or greater that			e 1b, and com	plete that part usi	ng a 1	% tax rate.	L	8	56,501
See the Part VI instructions.		<u>,                                      </u>							- 000 DE

GETZEN FAMILY CHARITIES, INC.

	990-PF (2014) C/O WILLIAM E. GETZEN rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	82-	-0540	623	otio	Page 4
		1 4940	- 566 1	istru	Cuoi	15)
	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)				_	00
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1_1_	<del> </del>		6	28.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					0
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	+			<u>0.</u>
_	Add lines 1 and 2	3	<b></b>		0	28.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	+			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	<del> </del>		0	28.
	Credits/Payments:	<b>,</b>				
	2014 estimated tax payments and 2013 overpayment credited to 2014	<del></del>				
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868)  6c	_				
	Backup withholding erroneously withheld  Table and a supports Add base Sa through Sd				_	87.
	Total credits and payments. Add lines 6a through 6d	7	+	_		0/•
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8_	<del></del>			41.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	+			<u>41.</u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.	10	+			
	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded art VII-A Statements Regarding Activities	<b>▶</b> 11				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inter	(000 ID			Yes	No
18		vene m		1a		
	any political campaign?  Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the defin	ition\2		1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pub			- "		
	distributed by the foundation in connection with the activities.	iisried Or				1
	Did the foundation file Form 1120-POL for this year?			1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			-10		
u	(1) On the foundation. > \$ \$ \$	0.				l
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	<u> </u>				
-	managers. > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
2	If "Yes," attach a detailed description of the activities.					<u> </u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporat	on. or				
ŭ	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	o, o.		3		x
<b>4</b> a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	1	A\r	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-•	5		Х
,	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:					1
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the	state law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Pa.	t 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)					1
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) fo	calendar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			For	m <b>990</b>	-PF	(2014)

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X

3b

4a

N/A

Form 4720, to determine if the foundation had excess business holdings in 2014.)

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

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

NONE \_\_\_\_\_\_

Form **990-PF** (2014)

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

GETZEN FAMILY CHARITIES, INC.  Form 990-PF (2014) C/O WILLIAM E. GETZEN		0 <b>54</b> 0623 Page 7
Part VIII Information About Officers, Directors, Trustees, Fo Paid Employees, and Contractors (continued)	undation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none	, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<b>&gt;</b> (
List the foundation's four largest direct charitable activities during the tax year. Include relevan number of organizations and other beneficiaries served, conferences convened, research paper		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax y	year on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		

Form **990-PF** (2014)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

82-0540623 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; 1,238,515. a Average monthly fair market value of securities 1a 71,964. b Average of monthly cash balances 1b 90,247. 1c c Fair market value of all other assets 400,726. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 400 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) ,011 4 1,379,715. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 68,986. Minimum investment return. Enter 5% of line 5 Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here | and do not complete this part.) 68,986. Minimum investment return from Part X, line 6 628. Tax on investment income for 2014 from Part VI, line 5 Income tax for 2014. (This does not include the tax from Part VI.) 2c c Add lines 2a and 2b 358. 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 68,358. Add lines 3 and 4 5 6 0. Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 358. Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 56,501. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a 3Ь b Cash distribution test (attach the required schedule) 56,501. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 5 501. Adjusted qualifying distributions. Subtract line 5 from line 4 6

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

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	<b>(d)</b> 2014
1 Distributable amount for 2014 from Part XI, line 7				68,358.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			57,814.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2014:		0.		
a From 2009				
b From 2010			İ	
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 56,501.				
a Applied to 2013, but not more than line 2a			56,501.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	·	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line		.,		
4a from line 2a. Taxable amount - see instr.			1,313.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				68,358.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	_			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.	•			
Subtract lines 7 and 8 from line 6a	0.			<del></del>
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013 e Excess from 2014				
423581				Form <b>QQO-DF</b> (2014)

Form 990-PF (2014)

C/O WILLIAM E. GETZEN

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year NONE ЬC GENERAL FOOD ALL FAITHS FOOD BANK 8171 BLAIKIE CT 2,000. SARASOTA, FL 34240 AMERICAN CANCER SOCIETY NONE ÞС RELAY FOR LIFE 2970 UNIVERSITY PKY #104 1,000. SARASOTA, FL 34243 GENERAL FUND AMERICAN RED CROSS NONE PC 2001 CANTU COURT SARASOTA, FL 34232 2,000. BLUE RIDGE FREE DENTAL CLINIC NONE ÞC GENERAL FUND 130 US HIGHWAY 64E, #12 CASHIERS, NC 28717 1,000. BOY SCOUT TROOP #895 NONE ЪC GENERAL FUND 1801 BOY SCOUT DR FORT MYERS FL 33907 2 500 SEE CONTINUATION SHEET(S) **▶** 3a 55,530. Total b Approved for future payment NONE Total **▶** 3b

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ter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt
Program service revenue:	code		eboo	Amount	14110410111111001110
<b>a</b>	_				
b	_				
G	_	<del></del>			<del></del>
d	_				
e	_		<del></del>		
g Fees and contracts from government agencies	-				
•					
Membership dues and assessments		•			
Interest on savings and temporary cash					
Investments Dividends and interest from securities			14	31,699.	
			14	31,099.	
Net rental income or (loss) from real estate:	-			<del></del>	
a Debt-financed property b Not debt-financed property			+ + -		<del>, _</del>
Not debt-illianced property  Net rental income or (loss) from personal	<del></del>	<del></del>			
property					
Other investment income			14	4,398.	
Gain or (loss) from sales of assets other			- <del> </del>	1,5500	
than inventory			18	7,179.	
Net income or (loss) from special events		<del></del>		7,2,30	
Gross profit or (loss) from sales of inventory					
Other revenue:					
ab	_				
С	_				
d					
e					
Subtotal. Add columns (b), (d), and (e)		(	0.	43,276.	
Total. Add line 12, columns (b), (d), and (e)				13	43,27
ee worksheet in line 13 instructions to verify calculations	.)				
Part XVI-B Relationship of Activitie	s to the Accon	plishment of	Exempt P	urposes	
ine No.   Explain below how each activity for which					ulshment of
the foundation's exempt purposes (other t	•	, ,		importantly to the decomp	monimont of

Part XVI-B	Relationshi	p of Activities 1	to the Accomplishmer	nt of Exempt Purposes
------------	-------------	-------------------	----------------------	-----------------------

LINE NO.	the foundation's exempt purposes (other than by providing funds for such purposes).
<u> </u>	
23821 1-24-14	Form <b>990-PF</b> (20:

Form 990-PF (2014) C/O WILLIAM E. GETZEN 82-0540623 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash X (2) Other assets X 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization X 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements X 1b(4) X (5) Loans or loan guarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship 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 correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign return with the preparer shown below (see instr.)? Here DIRECTOR X Yes Signature of officer or trustee Title Date Print/Type preparer's name Check PTIN Preparer's signature Date self- employed Paid JULIE L. BYNUM P00106704 Preparer Firm's name ► KERKERING, Firm's EIN ► 59-1753337 co. **Use Only** Firm's address ▶ P.O. BOX 49348

Form **990-PF** (2014)

Phone no. 941-365-4617

SARASOTA, FL 34230-6348

## Schedule B

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

2014

Name of the organization

GETZEN FAMILY CHARITIES, INC.

C/O WILLIAM E. GETZEN

Employer identification number

82-0540623

Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

lame of organ	ization	, ,	
GETZEN	<b>FAMILY</b>	CHARITIES,	INC
マノヘ なてて	T.TAM T	CEMPEN	

Employer identification number

82-0540623

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

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional and additional additional and additional	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	WILLIAM E. AND RUTH E. GETZEN  1421 WESTBROOK DRIVE  SARASOTA, FL 34231	\$100,000.	Person X 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 Onncash 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.)

Name of organization

GETZEN FAMILY CHARITIES, INC.

C/O WILLIAM E. GETZEN

Employer identification number 82-0540623

- 1	Noncash Property (see instructions). Use duplicate copies of F		·
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
(a) No. rom art 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
-			
-			<del></del>
(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
-			
-			
453 11-05-14		Schodule B (Form)	990, 990-EZ, or 990-PF) (

Part XV Supplementary Information

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)	-		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
CASHIERS-HIGHLANDS HUMANE SOCIETY	NONE	PC	GENERAL FUND	
P.O. BOX 638				
CASHIERS, NC 28717				500,
CHURCH OF THE PALMS	NONE	PC	FOOD PANTRY,	
3224 BEE RIDGE RD			FOUNDATION, GENERAL	
SARASOTA, FL 34239			FUND	3,000.
FORTY CARROTS FAMILY CENTER	NONE	PC	GENERAL FUND	
1500 SOUTH TUTTLE AVE				
SARASOTA, FL 34239				2,000.
GIRL SCOUT OF GULFCOAST FLORIDA, INC.	NONE	PC	GENERAL FUND	
4780 CATTLEMEN RD				
SARASOTA, FL 34233				3,000.
		ļ		
HIGHLANDS BOLIVIAN MISSION	NONE	PC	GENERAL FUND	
171 HOSPITAL DRIVE, SUITE 700	HOND			
HIGHLANDS, NC 28741				250.
HIGHLANDS CASHIERS LAND TRUST	NONE	PC	GENERAL FUND	
348 S 5TH ST, #211	NONE.			
HIGHLANDS NC 28741				1,000.
HIGHLANDS UNITED METHODIST CHURCH	NONE	PC	FOOD PANTRY, GENERAL	
P.O. BOX 1959			FUND	
HIGHLANDS, NC 28741				3,000.
HIGHLANDS-CASHIERS HOSPITAL FOUNDATION	NONE	SO I	GENERAL FUND	
PO BOX 190				
HIGHLANDS NC 28741				5,000.
HUMANE SOCIETY OF SARASOTA COUNTY	NONE	PC	GENERAL FUND	
2331 15TH ST E		[ -		
SARASOTA, FL 34237				500.
110V 110 1111 1011111111	NO.YE	:		
JACK AND JILL FOUNDATION 1930 17TH STREET NW	NONE	PC	GENERAL FUND	
WASHINGTON, DC 20009				
		<u></u>	GENERAL FUND	4,000.
Total from continuation sheets	· · · · · · · · · · · · · · · · · ·	<del></del>		47,030.

3 Grants and Contributions Paid During th		<del></del>	··- <b>-</b>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
IRRARY HOVERNAMENTON HOR GARAGOMA				
IBRARY FOUNDATION FOR SARASOTA	NONE	PC	GENERAL FUND	
.3801 TAMIAMI TR, S-D				
ORTH PORT, FL 34287				3,00
PINES OF SARASOTA FOUNDATION	NONE	PC	GENERAL FUND	
L501 N ORANGE AVE	NONE		GENERAL FUND	
SARASOTA FL 34236				1,18
•	-			
RESURRECTION HOUSE	NONE	PC	GENERAL FUND	
507 KUMQUAT COURT	NONE		GENERAL FUND	
SARASOTA FL 34236				2,00
TALLYAMION ADMV	NONE			
FALVATION ARMY	NONE	PC	GENERAL FUND	
SARASOTA FL 34230				2,00
SAMARITAN COUNSELING CENTER	NONE	PC	GENERAL FUND	
3224 BEE RIDGE RD	MONE	FC	GENERAL FUND	
SARASOTA FL 34239				1,00
SARASOTA MEMORIAL HEALTHCARE	NONE	PC	GENERAL FUND	
FOUNDATION				
1700 S TAMIAMI TRAIL SARASOTA, FL 34239				2,10
MMOOTA, 11 34237				2,10
SARASOTA MIDDLE SCHOOL 1826 ASHTON RD	NONE	PC	GENERAL FUND	
SARASOTA, FL 34233				3,00
				3,00
	L			
SARASOTA POLYTECHNICAL HIGH 1650 S BENEVA RD	NONE	PC	GENERAL FUND	
SARASOTA, FL 34231				2,00
				2,00
MITMED WAY	NONE	l a	OBNEDAT BIOTO	
JNITED WAY 1445 2ND ST	NONE	PC	GENERAL FUND	
SARASOTA, FL 34236				1,00
				1,50
MINDER THE LAW SONOOL BIND	NONE	ng.	CENTED AT DEPART	
JNIVERSITY OF IL LAW SCHOOL FUND 504 E PENNSYLVANIA AVE	NONE	PC	GENERAL FUND	
CHAMPAIGN, IL 61801				1,00
Total from continuation sheets		•	·	

C/O WILLIAM E

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
WOUNDED WARRIORS PROJECT P.O. BOX 758517	NONE	PC	GENERAL FUND	
TOPEKA, KS 66675	1		GENERAL FUND	1,000.
LABRADOR RETRIEVER RESCUE OF FLORIDA	NONE	PC	GENERAL FUND	
481 E HILLSBORO BLVD DEERFIELD BCH FL 33441				500.
DDDKI IBBO BCII, FII 33441				300.
COMMUNITY FOUNDATION OF SARASOTA	NONE	PC	SEASON SHARING	
COUNTY				
2635 FRUITVILLE RD				
SARASOTA, FL 34237				5,000.
		+		
				<u> </u>
				1
Total from continuation sheets				

## Account Statement

December 1, 2014 - December 31, 2014

GETZEN FAMILY CHARITHES INC.

## Portfolio Summary

	Market Value	Change from Prior Period	Cost	Unrealized Gain/Loss	Estimated Annual Income	Yield	% où Assets
Fourty Securities							
Lorde Cab	\$ 484,050.60	(\$ 3,820.59)	\$ 342,174.21	\$ 141,876.39	\$ 8,532.90	1.8%	36.6%
X Cop	79,125.06	(\$ 267.61)	61,633.89	17,491.17	958.00	12%	80.9
Small Cap	55,316.79	1,045.04	39,613.39	15,703.40	475.92	0.9%	4.28
International Developed	357,768.78	(\$ 23,000.21)	366,502.00	(8,733.22)	13,973.07	3.9%	27.1%
International Emerging	144,507.45	(\$ 9,389.13)	142,233.08	2.274.37	3,442.66	2.4%	10.9%
Total Equity Securities	\$ 1,120,768.68	(\$ 35,432.50)	\$ 952,154.57	\$ 148,612.11	\$ 27,382.55	2.4%	84.8%
Commodiffes							
Commodities	94,429.77	(\$ 3,400.23)	104,525.30	(12,665.30)	2,571.00	2.8%	7.1%
Total Commodifies	\$ 94,429.77	(\$ 3,400.23)	\$ 104,525.30	(\$ 12,465.30)	\$ 2.571.00	2.8%	7.1%
Cash and Shorl Term Investments							{
Cash	106,266.02	13,533,36	106.265.09	000	10.63	0.0%	8.0%
Total Cash and Short Term investments	\$ 106,266.02	\$ 13,533.34	\$ 106,265.09	\$ 0.00	\$ 10.43	0.0%	8.0%
Total Partfolio	\$ 1,321,464.47	(\$ 25.299.37)	\$ 1,162,946.96	\$ 155,946.81	\$ 29,964.18	2.3%	100.0%

Page 3 of 10

2014 Tax Information Statement

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

XX-XXX0623 36-7158276 Recipient's Tax ID Number: Payer's Federal ID Number:

**GETZEN FAMILY CHARITIES INC** Recipient's Name and Address: **ATTN: WILLIAM GETZEN** 1421 WESTBROOK DR.

Page 8 of 19 Řef: EMR

SARASOTA, FL 34231-3548

2nd TIN notice NC (847)295-3693 Payer's State ID Number: Corrected Questions? State:

# 2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is proceeds less commissions and option premiums. Covered (Box 5 is not checked)

Description of property (Box 1s)

	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	rederal income Tax Withheld	Tax Tax Withheld
	(Box 1c)	(Box 1b)		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
Long Term Sale 331.87	Long Term Sales Reported on 1099-B 331.87 MFQ DFA INVT DIME!	9-8 Mensions Grol	Reported on 1099-B MFO DFA INVT DIMENSIONS GROUP INC EMERGING	MKTS CORE EQUITY	<b></b>					
233203421	PURI 07/21/2014	12/07/2012	۵	7,029.00	6,537.84		PURI 07/21/2014 12/07/2012 D 7,029.00 6,537,84 0.00	491.18	0.00	0.00
100.0	MFC FLEXSHARE	S TR MORNINGST	'AR GLOBAL UPST	MFC FLEXSHARES TR MORNINGSTAR GLOBAL UPSTREAM NAT RES INDEX	DEX					
33939L407	10/16/2014	11/05/2012	۵	FU 10/16/2014 11/05/2012 D 3,163.93 3,515.91			00:0	.351.98	0.00	0.00
380.96	MEO DFA INVT DI	MENSIONS GROU	IP INC EMERGING	MEO DFA INVT DIMENSIONS GROUP INC EMERGING MKTS CORE EQUITY						
233203421	233203421 7011 10/24/2014 12/07/2012 D	12/07/2012	O	7,463.00 7,504.91	7,504.91		00.0	-41.91	00.0	0.00
800.0	MFC VANGUARD	INTL EQUITY INDI	EX FDS VANGUAF	RD FTSE ALL WORLD	۵					
922042775	922042775 EA USEIF 922042775 T1/19/2014 06/06/2013 D	05/06/2013	٥	39,207.13	38,696,00		0.00	511.13	0.00	0.00
<b>Total Long Term</b>	Total Long Term Sales Reported on 1099-B	1099-B		56,863.06	56,254.66		0.00	608.40	0.00	0.00

Report on Form 8949, Part II, with Box D checked



## 2014 Tax Information Statement

XX-XXX0623 GETZEN FAMILY CHARITIES INC 36-7158276 ATTN: WILLIAM GETZEN 1421 WESTBROOK DR. SARASOTA, FL 34231-3548

Recipient's Tax ID Number: Payer's Federal ID Number:

Page 9 of 19 Ref: EMR

Payer's State ID Number:
State:
Cuestions?
Cuestions?
Corrected
2nd TIN notice

Payer's Name and Address: THE NORTHERN TRUST COMPANY

P.O. BOX 803878 CHICAGO, IL 60680

# 2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated. Reported to the IRS is proceeds less commissions and option premiums.

Description of property (Box 1s)

Description of	Description of property (Box 1a)	(a)								
CUSIP Number	Data Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Besis	Code if any	Adjustments	Net Gain or Loss	Federal Income Tax Withheld	State Tex Withheld
	(Box 1c)	(Box 1b)		(Box 1d)	(Box 1e)	(Box 1f)	(Box 18)		(Box 4)	(Box 16)
ong Term Sales 3152.4	ong Term Sales Reported on 1099-B 3152.4 MFB NORTHN FUNDS	99-8 JNDS EMERGING I	: Reported on 1099-B MFB NORTHN FUNDS EMERGING MKTS EQTY EQTY II	INDEX FD	- <del></del> •					
665162582	07/21/2014	Various	07/21/2014 Various E	38,143.99	38,765.20		00.0	-621.21	-621.21 0.00 0.00	00'0
896.88	MFB NORTHN FU	INDS EMERGING	MFB NORTHN FUNDS EMERGING MKTS EQTY EQTY II	INDEX FD						
665162582	10/23/2014	11/03/2011	62582 10/23/2014 11/03/2011 E	7,826.00	7,825.96		7,825.96 0.00	0.04	00.0	0.00
otal Long Term	otal Long Term Sales Reported on 1099-B	n 1099-B		45,969.99	46,591.16		0.00	-621.17	0.00	00'0

Report on Form 8949, Part II, with Box E checked



FORM 990-PF DI	VIDENDS	AND INTER	EST FROM SEC	URITIES S	TATEMENT
	ross Mount	CAPITAL GAINS DIVIDEND	REVENUE		
NORTHERN TRUST	38,891.	7,19	31,69	9. 31,699.	
TO PART I, LINE 4	38,891.	7,19	31,69	9. 31,699.	
FORM 990-PF		OTHER I	NCOME	S	TATEMENT
DESCRIPTION			(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
INCREASE IN CSV OF LIFE	E INSURA	NCE	4,398.	4,398.	
TOTAL TO FORM 990-PF, I	PART I,	LINE 11 =	4,398.	4,398.	
FORM 990-PF		ACCOUNTI	NG FEES	S	TATEMENT
FORM 990-PF  DESCRIPTION		ACCOUNTI  (A)  EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABL PURPOSES
		(A) EXPENSES	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
DESCRIPTION ACCOUNTANT FEES		(A) EXPENSES PER BOOKS 910.	(B) NET INVEST- MENT INCOME  0	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES 910
DESCRIPTION  ACCOUNTANT FEES  TO FORM 990-PF, PG 1, I		(A) EXPENSES PER BOOKS 910.	(B) NET INVEST- MENT INCOME  0	(C) ADJUSTED NET INCOME  . (C) ADJUSTED	(D) CHARITABL PURPOSES 910
DESCRIPTION  ACCOUNTANT FEES  TO FORM 990-PF, PG 1, I		(A) EXPENSES PER BOOKS 910. 910. TAX	(B) NET INVEST- MENT INCOME  0  0  (B) NET INVEST- MENT INCOME  1,211	(C) ADJUSTED NET INCOME  (C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES  910  910  TATEMENT  (D) CHARITABL

FORM 990-PF	OTHER E	XPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
CORPORATE ORGANIZATION FEE INVESTMENT FEES PREMIUM ON LIFE INSURANCE	61. 7,643.	-	0. 643.			51.
HELD BY CHARITY  TO FORM 990-PF, PG 1, LN 23	3,000.		643.			0.
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBL	IGATIONS	STATEMENT	6
DESCRIPTION	U.S GOV'		вос	OK VALUE	FAIR MARKET	r
MFB NORTHERN FDS LARGE CAP VANORTHERN MID CAP NORTHERN SMALL CAP NORTHERN INTL DEVELOPED NORTHERN INTL EMERGING	ALUE FD X X X X X X			342,174. 61,634. 39,613. 366,502. 142,233.	484,05 79,12 55,31 357,76	25. L7. 59.
TOTAL U.S. GOVERNMENT OBLIGA	TIONS			952,156.	1,120,76	59.
TOTAL STATE AND MUNICIPAL GOT TOTAL TO FORM 990-PF, PART I		IGATIONS		952,156.	1,120,76	59.
FORM 990-PF	OTHER INV	ESTMENTS		, , , , , , , , , , , , , , , , , , , ,	STATEMENT	7
DESCRIPTION		LUATION ETHOD	во	OK VALUE	FAIR MARKE	r
MFO CREDIT SUISSE COMMODITY LIFE INSURANCE POLICIES (CSV		COST		104,525. 90,247.	94,43	
TOTAL TO FORM 990-PF, PART I	I, LINE 13			194,772.	184,6	77.

FORM 990-PF		LIST OF OFFICERS, AND FOUNDATION MAN		STAT	EMENT 8
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
WILLIAM E. GETZEN 1421 WESTBROOK DRI SARASOTA, FL 34231		DIRECTOR 2.00	0.	0.	0.
RUTH E. GETZEN 1421 WESTBROOK DRI SARASOTA, FL 34231	· <del>-</del>	DIRECTOR 1.00	0.	0.	0.
LINDA R. GETZEN 1421 WESTBROOK DRI SARASOTA, FL 34231	-	DIRECTOR 1.00	0.	0.	0.
SANDRA L. ALGER 1421 WESTBROOK DRI SARASOTA, FL 34231		DIRECTOR 1.00	0.	0.	0.
JAMES W. GETZEN 1421 WESTBROOK DRI SARASOTA, FL 34231		DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON	990-PF, PA	GE 6, PART VIII	0.	0.	0.