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## INTERNAL REVENUE SERVICE

OMB No 1545-0052

2014

Open to Public Inspection

Form 990-PF

## Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury  
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf)

For calendar year 2014 or tax year beginning

10/01, 2014, and ending

09/30, 2015

Name of foundation ROY AND CHRISTINE STURGIS CHARITABLE AND  
EDUCATIONAL TRUST

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

P.O. BOX 831041

City or town, state or province, country, and ZIP or foreign postal code

DALLAS, TX 75283-1041

G Check all that apply:

Initial return

Initial return of a former public charity

Final return

Amended return

Address change

Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundationI Fair market value of all assets at  
end of year (from Part II, col. (c), line  
16) \$ 41,213,835.J Accounting method: ☒ Cash ☐ Accrual☐ Other (specify) \_\_\_\_\_

(Part I, column (d) must be on cash basis.)

A Employer identification number

75-6331832

B Telephone number (see instructions)

800-357-7094

C If exemption application is  
pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the  
85% test, check here and attach  
computation ☐E If private foundation status was terminated  
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here ☐**Part I Analysis of Revenue and Expenses** (The  
total of amounts in columns (b), (c), and (d)  
may not necessarily equal the amounts in  
column (a) (see instructions))

|                                                                                                  | (a) Revenue and<br>expenses per<br>books | (b) Net investment<br>income | (c) Adjusted net<br>income | (d) Disbursements<br>for charitable<br>purposes<br>(cash basis only) |
|--------------------------------------------------------------------------------------------------|------------------------------------------|------------------------------|----------------------------|----------------------------------------------------------------------|
| 1 Contributions, gifts, grants, etc., received (attach schedule)                                 |                                          |                              |                            |                                                                      |
| 2 Check <input checked="" type="checkbox"/> if the foundation is not required to<br>attach Sch B |                                          |                              |                            |                                                                      |
| 3 Interest on savings and temporary cash investments                                             |                                          |                              |                            |                                                                      |
| 4 Dividends and interest from securities                                                         | 396,334.                                 | 396,556.                     |                            | STMT 1                                                               |
| 5a Gross rents                                                                                   | 43,096.                                  | 43,096.                      |                            |                                                                      |
| b Net rental income or (loss)                                                                    | -75,822.                                 |                              |                            |                                                                      |
| 6a Net gain or (loss) from sale of assets not on line 10                                         | 133,678.                                 |                              |                            |                                                                      |
| b Gross sales price for all<br>assets on line 6a                                                 | 13,648,255.                              |                              |                            |                                                                      |
| 7 Capital gain net income (from Part IV, line 2)                                                 |                                          | 133,678.                     |                            |                                                                      |
| 8 Net short-term capital gain                                                                    |                                          |                              |                            |                                                                      |
| 9 Income modifications                                                                           |                                          |                              |                            |                                                                      |
| 10a Gross sales less returns<br>and allowances                                                   |                                          |                              |                            |                                                                      |
| b Less Cost of goods sold                                                                        |                                          |                              |                            |                                                                      |
| c Gross profit or (loss) (attach schedule)                                                       |                                          |                              |                            |                                                                      |
| 11 Other income (attach schedule)                                                                | 182,504.                                 | 183,296.                     |                            | STMT 2                                                               |
| 12 Total. Add lines 1 through 11                                                                 | 755,612.                                 | 756,626.                     |                            |                                                                      |
| 13 Compensation of officers, directors, trustees, etc.                                           | 165,897.                                 | 99,538.                      |                            | 66,359.                                                              |
| 14 Other employee salaries and wages                                                             |                                          | NONE                         | NONE                       |                                                                      |
| 15 Pension plans, employee benefits                                                              |                                          | NONE                         | NONE                       |                                                                      |
| 16a Legal fees (attach schedule)                                                                 | 5,225.                                   | NONE                         | NONE                       | 5,225.                                                               |
| b Accounting fees (attach schedule)                                                              | 4,550.                                   | NONE                         | NONE                       | 4,550.                                                               |
| c Other professional fees (attach schedule)                                                      | 392,336.                                 | 286,399.                     |                            | 105,937.                                                             |
| 17 Interest                                                                                      |                                          |                              |                            |                                                                      |
| 18 Taxes (attach schedule) (see instructions)                                                    | 33,000.                                  | 14,346.                      |                            |                                                                      |
| 19 Depreciation (attach schedule) and depletion                                                  |                                          |                              |                            |                                                                      |
| 20 Occupancy                                                                                     |                                          |                              |                            |                                                                      |
| 21 Travel, conferences, and meetings                                                             |                                          | NONE                         | NONE                       |                                                                      |
| 22 Printing and publications                                                                     |                                          | NONE                         | NONE                       |                                                                      |
| 23 Other expenses (attach schedule)                                                              | 151,393.                                 | 170,993.                     |                            |                                                                      |
| 24 Total operating and administrative expenses.<br>Add lines 13 through 23.                      | 752,401.                                 | 571,276.                     | NONE                       | 182,071.                                                             |
| 25 Contributions, gifts, grants paid                                                             | 1,983,443.                               |                              |                            | 1,983,443.                                                           |
| 26 Total expenses and disbursements. Add lines 24 and 25                                         | 2,735,844.                               | 571,276.                     | NONE                       | 2,165,514.                                                           |
| 27 Subtract line 26 from line 12:                                                                |                                          |                              |                            |                                                                      |
| a Excess of revenue over expenses and disbursements                                              | -1,980,232.                              |                              |                            |                                                                      |
| b Net investment income (if negative, enter -0-)                                                 |                                          | 185,350.                     |                            |                                                                      |
| c Adjusted net income (if negative, enter -0-)                                                   |                                          |                              |                            |                                                                      |

JSA For Paperwork Reduction Act Notice, see instructions.

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| <b>Part II Balance Sheets</b>      |                                                                                                                                                    | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)              |             | Beginning of year | End of year    |                       |
|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------|----------------|-----------------------|
|                                    |                                                                                                                                                    |                                                                                                                                 |             | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| <b>Assets</b>                      | 1                                                                                                                                                  | Cash - non-interest-bearing . . . . .                                                                                           |             |                   | -126,017.      | -126,017.             |
|                                    | 2                                                                                                                                                  | Savings and temporary cash investments . . . . .                                                                                |             | 1,151,072.        | 1,068,788.     | 1,068,788.            |
|                                    | 3                                                                                                                                                  | Accounts receivable ▶<br>Less allowance for doubtful accounts ▶                                                                 |             |                   |                |                       |
|                                    | 4                                                                                                                                                  | Pledges receivable ▶<br>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) ▶<br>Less allowance for doubtful accounts ▶                                  | NONE        |                   |                |                       |
|                                    | 8                                                                                                                                                  | Inventories for sale or use . . . . .                                                                                           |             |                   |                |                       |
|                                    | 9                                                                                                                                                  | Prepaid expenses and deferred charges . . . . .                                                                                 |             |                   |                |                       |
|                                    | 10a                                                                                                                                                | Investments - U S and state government obligations (attach schedule) . .                                                        |             | 519,858.          |                |                       |
|                                    | b                                                                                                                                                  | Investments - corporate stock (attach schedule) . . . . .                                                                       |             | 8,959,897.        | 18,742,717.    | 18,680,937.           |
|                                    | c                                                                                                                                                  | Investments - corporate bonds (attach schedule) . . . . .                                                                       |             | 350,548.          |                |                       |
|                                    | 11                                                                                                                                                 | Investments - land, buildings, and equipment basis ▶<br>Less accumulated depreciation (attach schedule) ▶                       | 626,025.    | 626,025.          | 626,025.       | 20,801,402.           |
|                                    | 12                                                                                                                                                 | Investments - mortgage loans . . . . .                                                                                          |             |                   |                |                       |
|                                    | 13                                                                                                                                                 | Investments - other (attach schedule) . . . . .                                                                                 |             | 10,107,290.       |                |                       |
|                                    | 14                                                                                                                                                 | Land, buildings, and equipment basis ▶<br>Less accumulated depreciation (attach schedule) ▶                                     |             |                   |                |                       |
| 15                                 | Other assets (describe ▶)                                                                                                                          |                                                                                                                                 | 1.          | 1.                | 788,725.       |                       |
| 16                                 | <b>Total assets</b> (to be completed by all filers - see the instructions Also, see page 1, item I) . . . . .                                      |                                                                                                                                 | 21,714,691. | 20,311,514.       | 41,213,835.    |                       |
| <b>Liabilities</b>                 | 17                                                                                                                                                 | Accounts payable and accrued expenses . . . . .                                                                                 |             |                   |                |                       |
|                                    | 18                                                                                                                                                 | Grants payable . . . . .                                                                                                        |             |                   |                |                       |
|                                    | 19                                                                                                                                                 | Deferred revenue . . . . .                                                                                                      |             |                   |                |                       |
|                                    | 20                                                                                                                                                 | Loans from officers, directors, trustees, and other disqualified persons .                                                      |             |                   |                |                       |
|                                    | 21                                                                                                                                                 | Mortgages and other notes payable (attach schedule) . . . . .                                                                   |             |                   |                |                       |
|                                    | 22                                                                                                                                                 | Other liabilities (describe ▶)                                                                                                  |             |                   |                |                       |
| 23                                 | <b>Total liabilities</b> (add lines 17 through 22) . . . . .                                                                                       |                                                                                                                                 |             |                   | NONE           |                       |
| <b>Net Assets or Fund Balances</b> | <b>Foundations that follow SFAS 117, check here . ▶ <input type="checkbox"/></b><br><b>and complete lines 24 through 26 and lines 30 and 31.</b>   |                                                                                                                                 |             |                   |                |                       |
|                                    | 24                                                                                                                                                 | Unrestricted . . . . .                                                                                                          |             |                   |                |                       |
|                                    | 25                                                                                                                                                 | Temporarily restricted . . . . .                                                                                                |             |                   |                |                       |
|                                    | 26                                                                                                                                                 | Permanently restricted . . . . .                                                                                                |             |                   |                |                       |
|                                    | <b>Foundations that do not follow SFAS 117, . . . ▶ <input checked="" type="checkbox"/></b><br><b>check here and complete lines 27 through 31.</b> |                                                                                                                                 |             |                   |                |                       |
|                                    | 27                                                                                                                                                 | Capital stock, trust principal, or current funds . . . . .                                                                      |             | 21,714,691.       | 20,311,514.    |                       |
|                                    | 28                                                                                                                                                 | Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .                                                         |             |                   |                |                       |
|                                    | 29                                                                                                                                                 | Retained earnings, accumulated income, endowment, or other funds . .                                                            |             |                   |                |                       |
|                                    | 30                                                                                                                                                 | <b>Total net assets or fund balances</b> (see instructions) . . . . .                                                           |             | 21,714,691.       | 20,311,514.    |                       |
|                                    | 31                                                                                                                                                 | <b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .                                              |             | 21,714,691.       | 20,311,514.    |                       |

**Part III Analysis of Changes in Net Assets or Fund Balances**

|   |                                                                                                                                                                      |   |             |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-------------|
| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . . | 1 | 21,714,691. |
| 2 | Enter amount from Part I, line 27a . . . . .                                                                                                                         | 2 | -1,980,232. |
| 3 | Other increases not included in line 2 (itemize) ▶ <b>SEE STATEMENT 8</b>                                                                                            | 3 | 696,170.    |
| 4 | Add lines 1, 2, and 3 . . . . .                                                                                                                                      | 4 | 20,430,629. |
| 5 | Decreases not included in line 2 (itemize) ▶ <b>SEE STATEMENT 9</b>                                                                                                  | 5 | 119,115.    |
| 6 | <b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30 . . . .                                                 | 6 | 20,311,514. |

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**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co.) |                                            |                                                 | (b) How acquired<br>P - Purchase<br>D - Donation                                                | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|-----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------|
| <b>1a PUBLICLY TRADED SECURITIES</b>                                                                                              |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>b OTHER GAINS AND LOSSES</b>                                                                                                   |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>c</b>                                                                                                                          |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>d</b>                                                                                                                          |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>e</b>                                                                                                                          |                                            |                                                 |                                                                                                 |                                      |                                  |
| (e) Gross sales price                                                                                                             | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g)                                                    |                                      |                                  |
| <b>a</b> 13,586,587.                                                                                                              |                                            | 12,834,970.                                     | 751,617.                                                                                        |                                      |                                  |
| <b>b</b> 61,668.                                                                                                                  |                                            | 679,607.                                        | -617,939.                                                                                       |                                      |                                  |
| <b>c</b>                                                                                                                          |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>d</b>                                                                                                                          |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>e</b>                                                                                                                          |                                            |                                                 |                                                                                                 |                                      |                                  |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69                                       |                                            |                                                 |                                                                                                 |                                      |                                  |
| (i) FMV as of 12/31/69                                                                                                            | (j) Adjusted basis<br>as of 12/31/69       | (k) Excess of col. (i)<br>over col. (j), if any | (l) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |                                      |                                  |
| <b>a</b>                                                                                                                          |                                            |                                                 | 751,617.                                                                                        |                                      |                                  |
| <b>b</b>                                                                                                                          |                                            |                                                 | -617,939.                                                                                       |                                      |                                  |
| <b>c</b>                                                                                                                          |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>d</b>                                                                                                                          |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>e</b>                                                                                                                          |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>2 Capital gain net income or (net capital loss)</b>                                                                            |                                            |                                                 | <b>2</b>                                                                                        | 133,678.                             |                                  |
| { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7                                                 |                                            |                                                 |                                                                                                 |                                      |                                  |
| <b>3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):</b>                                            |                                            |                                                 | <b>3</b>                                                                                        |                                      |                                  |
| If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in<br>Part I, line 8                   |                                            |                                                 |                                                                                                 |                                      |                                  |

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

| (a)<br>Base period years<br>Calendar year (or tax year beginning in)                                                                                                                  | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-------------------------------------------------------------|
| 2013                                                                                                                                                                                  | 2,184,189.                               | 44,071,933.                                  | 0.049560                                                    |
| 2012                                                                                                                                                                                  | 2,041,845.                               | 41,141,643.                                  | 0.049630                                                    |
| 2011                                                                                                                                                                                  | 2,183,458.                               | 41,784,922.                                  | 0.052255                                                    |
| 2010                                                                                                                                                                                  | 1,980,349.                               | 40,758,226.                                  | 0.048588                                                    |
| 2009                                                                                                                                                                                  | 1,854,494.                               | 41,098,171.                                  | 0.045124                                                    |
| <b>2 Total of line 1, column (d)</b>                                                                                                                                                  |                                          |                                              | <b>2</b> 0.245157                                           |
| <b>3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years</b> |                                          |                                              | <b>3</b> 0.049031                                           |
| <b>4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5</b>                                                                                                 |                                          |                                              | <b>4</b> 43,215,246.                                        |
| <b>5 Multiply line 4 by line 3</b>                                                                                                                                                    |                                          |                                              | <b>5</b> 2,118,887.                                         |
| <b>6 Enter 1% of net investment income (1% of Part I, line 27b)</b>                                                                                                                   |                                          |                                              | <b>6</b> 1,854.                                             |
| <b>7 Add lines 5 and 6</b>                                                                                                                                                            |                                          |                                              | <b>7</b> 2,120,741.                                         |
| <b>8 Enter qualifying distributions from Part XII, line 4</b>                                                                                                                         |                                          |                                              | <b>8</b> 2,165,514.                                         |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

|                                                                                                                                                                                                                                                  |    |        |        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------|--------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 . . . . .<br>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 here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .                                                                           |    | 1      | 1,854. |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b).                                                                                                                        |    |        |        |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                                      |    | 2      |        |
| 3 Add lines 1 and 2 . . . . .                                                                                                                                                                                                                    |    | 3      | 1,854. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                                    |    | 4      | NONE   |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .                                                                                                                                              |    | 5      | 1,854. |
| 6 Credits/Payments                                                                                                                                                                                                                               |    |        |        |
| a 2014 estimated tax payments and 2013 overpayment credited to 2014 . . . . .                                                                                                                                                                    | 6a | 7,000. |        |
| b Exempt foreign organizations - tax withheld at source . . . . .                                                                                                                                                                                | 6b | NONE   |        |
| c Tax paid with application for extension of time to file (Form 8868) . . . . .                                                                                                                                                                  | 6c | NONE   |        |
| d Backup withholding erroneously withheld . . . . .                                                                                                                                                                                              | 6d |        |        |
| 7 Total credits and payments. Add lines 6a through 6d . . . . .                                                                                                                                                                                  | 7  | 7,000. |        |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached . . . . .                                                                                                         | 8  |        |        |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .                                                                                                                                                        | 9  |        |        |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . .                                                                                                                                           | 10 | 5,146. |        |
| 11 Enter the amount of line 10 to be Credited to 2015 estimated tax <input checked="" type="checkbox"/> 1,856. Refunded <input type="checkbox"/> . . . . .                                                                                       | 11 | 3,290. |        |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                                        | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .                                                                                                                                                                      |     | X  |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . .<br>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities |     | X  |
| c Did the foundation file Form 1120-POL for this year? . . . . .                                                                                                                                                                                                                                                                                       |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.<br>(1) On the foundation <input checked="" type="checkbox"/> \$ _____ (2) On foundation managers <input checked="" type="checkbox"/> \$ _____                                                                                                     |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ _____                                                                                                                                                                   |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .<br>If "Yes," attach a detailed description of the activities                                                                                                                                                                               |     | X  |
| 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 . . . . .                                                                                                                 |     | X  |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .                                                                                                                                                                                                                                               |     | X  |
| b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .                                                                                                                                                                                                                                                                           |     |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .<br>If "Yes," attach the statement required by General Instruction T.                                                                                                                                                                        |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either<br>• By language in the governing instrument, or<br>• 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? . . . . .          | 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 Part XV                                                                                                                                                                                                                     | X   |    |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> AR <input checked="" type="checkbox"/> TX                                                                                                                                                                    |     |    |
| 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 . . . . .                                                                                                                                | X   |    |
| 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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .                                                                                       |     | X  |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .                                                                                                                                                                                                        |     | X  |

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**Part VII-A Statements Regarding Activities (continued)**

|                                                                                                                                                            |                                                                                                                                                                                                                                                   |    |     |         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|---------|
| 11                                                                                                                                                         | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) . . . . .                                                 | 11 |     | X       |
| 12                                                                                                                                                         | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .                                                | 12 |     | X       |
| 13                                                                                                                                                         | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>NONE</u>                                                                                                 | 13 | X   |         |
| 14                                                                                                                                                         | The books are in care of ► <u>BANK OF AMERICA, N.A.</u> Telephone no ► <u>(980) 683-9845</u><br>Located at ► <u>150 N COLLEGE ST, FL 26, CHARLOTTE, NC</u> ZIP+4 ► <u>28255</u>                                                                   |    |     |         |
| 15                                                                                                                                                         | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here . . . . . ► <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the year . . . . . ► <u>15</u> |    |     |         |
| 16                                                                                                                                                         | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .                                               | 16 | Yes | No<br>X |
| See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If "Yes," enter the name of the foreign country ► |                                                                                                                                                                                                                                                   |    |     |         |

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Yes                                                                 | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----|
| 1a During the year did the foundation (either directly or indirectly):                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                     |    |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . .                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .                                                                                                                                                                                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |    |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) . . . . .                                                                                                                                                                                                                                                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . .                                                                                                                                                                                                                                                                           | 1b                                                                  | X  |
| Organizations relying on a current notice regarding disaster assistance check here . . . . . ► <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                    |                                                                     |    |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014? . . . . .                                                                                                                                                                                                                                                                                                        | 1c                                                                  | X  |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))                                                                                                                                                                                                                                                                                                                            |                                                                     |    |
| a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? . . . . .                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| If "Yes," list the years ►                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                     |    |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) . . . . .                                                                                                                                                                                       | 2b                                                                  | X  |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►                                                                                                                                                                                                                                                                                                                                                                                        |                                                                     |    |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| b If "Yes," did it have excess business holdings in 2014 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 2014) . . . . . | 3b                                                                  |    |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                                         | 4a                                                                  | X  |
| 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 2014?                                                                                                                                                                                                                                                                        | 4b                                                                  | X  |

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . . . . . ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . . ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? . . . . . ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). . . . . ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . . ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . . ☐ **5b**

Organizations relying on a current notice regarding disaster assistance check here . . . . . ☐

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . . ☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . ☐ **6b** X

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? . . . . . ☐ Yes ☒ No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . . ☐ **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

| (a) Name and address                                                  | (b) Title, and average hours per week devoted to position | (c) Compensation (if not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|-----------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| BANK OF AMERICA, N.A.<br>150 N COLLEGE ST, FL 26, CHARLOTTE, NC 28255 | TRUSTEE<br>1                                              | 165,897.                                  | -0-                                                                   | -0-                                   |
|                                                                       |                                                           |                                           |                                                                       |                                       |
|                                                                       |                                                           |                                           |                                                                       |                                       |
|                                                                       |                                                           |                                           |                                                                       |                                       |
|                                                                       |                                                           |                                           |                                                                       |                                       |

**2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."**

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| NONE                                                          |                                                           | NONE             | NONE                                                                  | NONE                                  |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |

**Total** number of other employees paid over \$50,000 . . . . . **NONE**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five 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 |
|------------------------------------------------------------------------------------|---------------------|------------------|
| NONE                                                                               |                     | NONE             |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
| Total number of others receiving over \$50,000 for professional services . . . . . |                     | NONE             |

**Part IX-A Summary of Direct Charitable Activities**

| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|
| 1 NONE                                                                                                                                                                                                                                                 |          |
| 2                                                                                                                                                                                                                                                      |          |
| 3                                                                                                                                                                                                                                                      |          |
| 4                                                                                                                                                                                                                                                      |          |

**Part IX-B Summary of Program-Related Investments** (see instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
|------------------------------------------------------------------------------------------------------------------|--------|
| 1 NONE                                                                                                           |        |
| 2                                                                                                                |        |
| All other program-related investments. See instructions.                                                         |        |
| 3 NONE                                                                                                           |        |
| Total. Add lines 1 through 3 . . . . .                                                                           |        |

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|          |                                                                                                                       |           |             |
|----------|-----------------------------------------------------------------------------------------------------------------------|-----------|-------------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:           |           |             |
| <b>a</b> | Average monthly fair market value of securities . . . . .                                                             | <b>1a</b> | 21,518,735. |
| <b>b</b> | Average of monthly cash balances . . . . .                                                                            | <b>1b</b> | 1,164,487.  |
| <b>c</b> | Fair market value of all other assets (see instructions). . . . .                                                     | <b>1c</b> | 21,190,124. |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c) . . . . .                                                                       | <b>1d</b> | 43,873,346. |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .   | <b>1e</b> |             |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets . . . . .                                                        | <b>2</b>  | NONE        |
| <b>3</b> | Subtract line 2 from line 1d . . . . .                                                                                | <b>3</b>  | 43,873,346. |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .    | <b>4</b>  | 658,100.    |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . . | <b>5</b>  | 43,215,246. |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5 . . . . .                                                        | <b>6</b>  | 2,160,762.  |

**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)

|           |                                                                                                                     |           |            |
|-----------|---------------------------------------------------------------------------------------------------------------------|-----------|------------|
| <b>1</b>  | Minimum investment return from Part X, line 6 . . . . .                                                             | <b>1</b>  | 2,160,762. |
| <b>2a</b> | Tax on investment income for 2014 from Part VI, line 5 . . . . .                                                    | <b>2a</b> | 1,854.     |
| <b>b</b>  | Income tax for 2014. (This does not include the tax from Part VI.) . . . . .                                        | <b>2b</b> |            |
| <b>c</b>  | Add lines 2a and 2b . . . . .                                                                                       | <b>2c</b> | 1,854.     |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .                                     | <b>3</b>  | 2,158,908. |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions . . . . .                                                 | <b>4</b>  | 50,000.    |
| <b>5</b>  | Add lines 3 and 4 . . . . .                                                                                         | <b>5</b>  | 2,208,908. |
| <b>6</b>  | Deduction from distributable amount (see instructions). . . . .                                                     | <b>6</b>  | NONE       |
| <b>7</b>  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . . | <b>7</b>  | 2,208,908. |

**Part XII Qualifying Distributions** (see instructions)

|          |                                                                                                                                                                |           |            |
|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                                                     |           |            |
| <b>a</b> | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .                                                                        | <b>1a</b> | 2,165,514. |
| <b>b</b> | Program-related investments - total from Part IX-B . . . . .                                                                                                   | <b>1b</b> |            |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .                                            | <b>2</b>  | NONE       |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the:                                                                                           |           |            |
| <b>a</b> | Suitability test (prior IRS approval required) . . . . .                                                                                                       | <b>3a</b> | NONE       |
| <b>b</b> | Cash distribution test (attach the required schedule) . . . . .                                                                                                | <b>3b</b> | NONE       |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .                                    | <b>4</b>  | 2,165,514. |
| <b>5</b> | 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) . . . . . | <b>5</b>  | 1,854.     |
| <b>6</b> | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .                                                                                | <b>6</b>  | 2,163,660. |

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

|                                                                                                                                                                                      | (a)<br>Corpus | (b)<br>Years prior to 2013 | (c)<br>2013 | (d)<br>2014 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2014 from Part XI, line 7 . . . . .                                                                                                                       |               |                            |             | 2,208,908.  |
| 2 Undistributed income, if any, as of the end of 2014                                                                                                                                |               |                            |             |             |
| a Enter amount for 2013 only . . . . .                                                                                                                                               |               |                            | NONE        |             |
| b Total for prior years 20 <u>12</u> , 20 <u>  </u> , 20 <u>  </u> . . . . .                                                                                                         |               | NONE                       |             |             |
| 3 Excess distributions carryover, if any, to 2014                                                                                                                                    |               |                            |             |             |
| a From 2009 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| b From 2010 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| c From 2011 . . . . .                                                                                                                                                                | 145,988.      |                            |             |             |
| d From 2012 . . . . .                                                                                                                                                                | 70,846.       |                            |             |             |
| e From 2013 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| f Total of lines 3a through e . . . . .                                                                                                                                              | 216,834.      |                            |             |             |
| 4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ <u>2,165,514.</u>                                                                                                     |               |                            |             |             |
| a Applied to 2013, but not more than line 2a . . . . .                                                                                                                               |               |                            | NONE        |             |
| b Applied to undistributed income of prior years (Election required - see instructions) . . . . .                                                                                    |               | NONE                       |             |             |
| c Treated as distributions out of corpus (Election required - see instructions) . . . . .                                                                                            | NONE          |                            |             |             |
| d Applied to 2014 distributable amount . . . . .                                                                                                                                     |               |                            |             | 2,165,514.  |
| e Remaining amount distributed out of corpus . . . . .                                                                                                                               | NONE          |                            |             |             |
| 5 Excess distributions carryover applied to 2014 . . . . .<br>(If an amount appears in column (d), the same amount must be shown in column (a) )                                     | 43,394.       |                            |             | 43,394.     |
| 6 Enter the net total of each column as indicated below:                                                                                                                             |               |                            |             |             |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 . . . . .                                                                                                                          | 173,440.      |                            |             |             |
| b Prior years' undistributed income Subtract line 4b from line 2b . . . . .                                                                                                          |               | NONE                       |             |             |
| 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 . . . . . |               | NONE                       |             |             |
| d Subtract line 6c from line 6b Taxable amount - see instructions . . . . .                                                                                                          |               | NONE                       |             |             |
| e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions . . . . .                                                                            |               |                            | NONE        |             |
| f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .                                                                |               |                            |             | NONE        |
| 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) . . . . .       | NONE          |                            |             |             |
| 8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . . . .                                                                              | NONE          |                            |             |             |
| 9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .                                                                                              | 173,440.      |                            |             |             |
| 10 Analysis of line 9                                                                                                                                                                |               |                            |             |             |
| a Excess from 2010 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| b Excess from 2011 . . . . .                                                                                                                                                         | 102,594.      |                            |             |             |
| c Excess from 2012 . . . . .                                                                                                                                                         | 70,846.       |                            |             |             |
| d Excess from 2013 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| e Excess from 2014 . . . . .                                                                                                                                                         | NONE          |                            |             |             |

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

NOT APPLICABLE

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling . . . . .

**b** Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

| Tax year                                                                                                                                                           | Prior 3 years |          |          |          | (e) Total |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------|----------|----------|-----------|
|                                                                                                                                                                    | (a) 2014      | (b) 2013 | (c) 2012 | (d) 2011 |           |
| <b>b</b> 85% of line 2a . . . . .                                                                                                                                  |               |          |          |          |           |
| <b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .                                                                             |               |          |          |          |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .                                                           |               |          |          |          |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .                                   |               |          |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon                                                                                                 |               |          |          |          |           |
| <b>a</b> "Assets" alternative test - enter                                                                                                                         |               |          |          |          |           |
| <b>(1)</b> Value of all assets . . . . .                                                                                                                           |               |          |          |          |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .                                                                                     |               |          |          |          |           |
| <b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .                              |               |          |          |          |           |
| <b>c</b> "Support" alternative test - enter                                                                                                                        |               |          |          |          |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . . |               |          |          |          |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .                                      |               |          |          |          |           |
| <b>(3)</b> Largest amount of support from an exempt organization . . . . .                                                                                         |               |          |          |          |           |
| <b>(4)</b> Gross investment income . . . . .                                                                                                                       |               |          |          |          |           |

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2) )

NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

SEE STATEMENT 12

**b** The form in which applications should be submitted and information and materials they should include:

SEE ATTACHED STATEMENT FOR LINE 2

**c** Any submission deadlines.

SEE ATTACHED STATEMENT FOR LINE 2

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED STATEMENT FOR LINE 2

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| <div>Recipient</div> <div>Name and address (home or business)</div> | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount     |
|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------|------------|
| <b>a Paid during the year</b><br><br>SEE STATEMENT 30               |                                                                                                           |                                |                                  | 1,983,443. |
| <b>Total</b> . . . . .                                              |                                                                                                           |                                | ▶ <b>3a</b>                      | 1,983,443. |
| <b>b Approved for future payment</b>                                |                                                                                                           |                                |                                  |            |
| <b>Total</b> . . . . .                                              |                                                                                                           |                                | ▶ <b>3b</b>                      |            |

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**[illegible]

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- | 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? |                                                                                                                                                                                                                                                                                                                                                                                              | Yes          | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----|
| <b>a</b>                                                                                                                                                                                                                                              | Transfers from the reporting foundation to a noncharitable exempt organization of:                                                                                                                                                                                                                                                                                                           |              |    |
|                                                                                                                                                                                                                                                       | (1) Cash . . . . .                                                                                                                                                                                                                                                                                                                                                                           | <b>1a(1)</b> | X  |
|                                                                                                                                                                                                                                                       | (2) Other assets . . . . .                                                                                                                                                                                                                                                                                                                                                                   | <b>1a(2)</b> | X  |
| <b>b</b>                                                                                                                                                                                                                                              | Other transactions:                                                                                                                                                                                                                                                                                                                                                                          |              |    |
|                                                                                                                                                                                                                                                       | (1) Sales of assets to a noncharitable exempt organization . . . . .                                                                                                                                                                                                                                                                                                                         | <b>1b(1)</b> | X  |
|                                                                                                                                                                                                                                                       | (2) Purchases of assets from a noncharitable exempt organization . . . . .                                                                                                                                                                                                                                                                                                                   | <b>1b(2)</b> | X  |
|                                                                                                                                                                                                                                                       | (3) Rental of facilities, equipment, or other assets . . . . .                                                                                                                                                                                                                                                                                                                               | <b>1b(3)</b> | X  |
|                                                                                                                                                                                                                                                       | (4) Reimbursement arrangements . . . . .                                                                                                                                                                                                                                                                                                                                                     | <b>1b(4)</b> | X  |
|                                                                                                                                                                                                                                                       | (5) Loans or loan guarantees . . . . .                                                                                                                                                                                                                                                                                                                                                       | <b>1b(5)</b> | X  |
|                                                                                                                                                                                                                                                       | (6) Performance of services or membership or fundraising solicitations . . . . .                                                                                                                                                                                                                                                                                                             | <b>1b(6)</b> | X  |
| <b>c</b>                                                                                                                                                                                                                                              | Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .                                                                                                                                                                                                                                                                                                   | <b>1c</b>    | X  |
| <b>d</b>                                                                                                                                                                                                                                              | 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. |              |    |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

  
Signature of officer or trustee  
BANK OF AMERICA, N.A.

12/18/2015  
Date

**TRUSTEE**  
Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

Preparer's signature

|      |  |
|------|--|
| Date |  |
|------|--|

|                                                 |      |
|-------------------------------------------------|------|
| Check <input type="checkbox"/> if self-employed | PTIN |
|-------------------------------------------------|------|

Firm's name 

Firm's EIN ▶

Firm's address ►

Phone no

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

38 ACS PINE BLUFF ARK JEFFERSON CO., ARK

|  |     |  |    |                                                                                    |
|--|-----|--|----|------------------------------------------------------------------------------------|
|  | Yes |  | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|--|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:** 4 - COMMERCIAL

|               |  |  |
|---------------|--|--|
| OTHER INCOME: |  |  |
|               |  |  |
|               |  |  |

**TOTAL GROSS INCOME** . . . . .

**OTHER EXPENSES:**

## INSURANCE

150.

## TAXES

597.

[illegible]

## DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion**

|                                 |            |
|---------------------------------|------------|
| <b>TOTAL EXPENSES</b> . . . . . | <b>747</b> |
|---------------------------------|------------|

|                                                      |             |
|------------------------------------------------------|-------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> . . . . . | <b>-747</b> |
|------------------------------------------------------|-------------|

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others**

|                                          |             |
|------------------------------------------|-------------|
| <b>Net Rent or Royalty Income (Loss)</b> | <b>-747</b> |
|------------------------------------------|-------------|

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

\_\_\_\_\_

| DESCRIPTION OF PROPERTY                  |
|------------------------------------------|
| 274.02 ACS TRACT 2 TWP 7S RNG 21W SEC 12 |

TYPE OF PROPERTY: 4 - COMMERCIAL

|               |  |
|---------------|--|
| OTHER INCOME: |  |
|---------------|--|

[illegible]

|                 |  |  |
|-----------------|--|--|
| OTHER EXPENSES: |  |  |
|-----------------|--|--|

|                                   |        |
|-----------------------------------|--------|
| LEGAL AND OTHER PROFESSIONAL FEES | 2,192. |
|-----------------------------------|--------|

[illegible][illegible][illegible]

|                            |  |  |  |
|----------------------------|--|--|--|
| DEPRECIATION (SHOWN BELOW) |  |  |  |
|----------------------------|--|--|--|

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
| AMORTIZATION                          |  |  |

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
| DEPLETION                             |  |  |

|                             |  |               |
|-----------------------------|--|---------------|
| LESS: Beneficiary's Portion |  |               |
| <b>TOTAL EXPENSES</b>       |  | <b>3,088.</b> |

|                              |  |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |
|------------------------------|--|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| TOTAL RENT OR ROYALTY INCOME |  | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | 2022 | 2023 | 2024 | 2025 | 2026 | 2027 | 2028 | 2029 | 2030 | 2031 | 2032 | 2033 | 2034 | 2035 | 2036 | 2037 | 2038 | 2039 | 2040 | 2041 | 2042 | 2043 | 2044 | 2045 | 2046 | 2047 | 2048 | 2049 | 2050 | 2051 | 2052 | 2053 | 2054 | 2055 | 2056 | 2057 | 2058 | 2059 | 2060 | 2061 | 2062 | 2063 | 2064 | 2065 | 2066 | 2067 | 2068 | 2069 | 2070 | 2071 | 2072 | 2073 | 2074 | 2075 | 2076 | 2077 | 2078 | 2079 | 2080 | 2081 | 2082 | 2083 | 2084 | 2085 | 2086 | 2087 | 2088 | 2089 | 2090 | 2091 | 2092 | 2093 | 2094 | 2095 | 2096 | 2097 | 2098 | 2099 | 2100 | 2101 | 2102 | 2103 | 2104 | 2105 | 2106 | 2107 | 2108 | 2109 | 2110 | 2111 | 2112 | 2113 | 2114 | 2115 | 2116 | 2117 | 2118 | 2119 | 2120 | 2121 | 2122 | 2123 | 2124 | 2125 | 2126 | 2127 | 2128 | 2129 | 2130 | 2131 | 2132 | 2133 | 2134 | 2135 | 2136 | 2137 | 2138 | 2139 | 2140 | 2141 | 2142 | 2143 | 2144 | 2145 | 2146 | 2147 | 2148 | 2149 | 2150 | 2151 | 2152 | 2153 | 2154 | 2155 | 2156 | 2157 | 2158 | 2159 | 2160 | 2161 | 2162 | 2163 | 2164 | 2165 | 2166 | 2167 | 2168 | 2169 | 2170 | 2171 | 2172 | 2173 | 2174 | 2175 | 2176 | 2177 | 2178 | 2179 | 2180 | 2181 | 2182 | 2183 | 2184 | 2185 | 2186 | 2187 | 2188 | 2189 | 2190 | 2191 | 2192 | 2193 | 2194 | 2195 | 2196 | 2197 | 2198 | 2199 | 2200 | 2201 | 2202 | 2203 | 2204 | 2205 | 2206 | 2207 | 2208 | 2209 | 2210 | 2211 | 2212 | 2213 | 2214 | 2215 | 2216 | 2217 | 2218 | 2219 | 2220 | 2221 | 2222 | 2223 | 2224 | 2225 | 2226 | 2227 | 2228 | 2229 | 2230 | 2231 | 2232 | 2233 | 2234 | 2235 | 2236 | 2237 | 2238 | 2239 | 2240 | 2241 | 2242 | 2243 | 2244 | 2245 | 2246 | 2247 | 2248 | 2249 | 2250 | 2251 | 2252 | 2253 | 2254 | 2255 | 2256 | 2257 | 2258 | 2259 | 2260 | 2261 | 2262 | 2263 | 2264 | 2265 | 2266 | 2267 | 2268 | 2269 | 2270 | 2271 | 2272 | 2273 | 2274 | 2275 | 2276 | 2277 | 2278 | 2279 | 2280 | 2281 | 2282 | 2283 | 2284 | 2285 | 2286 | 2287 | 2288 | 2289 | 2290 | 2291 | 2292 | 2293 | 2294 | 2295 | 2296 | 2297 | 2298 | 2299 | 2300 | 2301 | 2302 | 2303 | 2304 | 2305 | 2306 | 2307 | 2308 | 2309 | 2310 | 2311 | 2312 | 2313 | 2314 | 2315 | 2316 | 2317 | 2318 | 2319 | 2320 | 2321 | 2322 | 2323 | 2324 | 2325 | 2326 | 2327 | 2328 | 2329 | 2330 | 2331 | 2332 | 2333 | 2334 | 2335 | 2336 | 2337 | 2338 | 2339 | 2340 | 2341 | 2342 | 2343 | 2344 | 2345 | 2346 | 2347 | 2348 | 2349 | 2350 | 2351 | 2352 | 2353 | 2354 | 2355 | 2356 | 2357 | 2358 | 2359 | 2360 | 2361 | 2362 | 2363 | 2364 | 2365 | 2366 | 2367 | 2368 | 2369 | 2370 | 2371 | 2372 | 2373 | 2374 | 2375 | 2376 | 2377 | 2378 | 2379 | 2380 | 2381 | 2382 | 2383 | 2384 | 2385 | 2386 | 2387 | 2388 | 2389 | 2390 | 2391 | 2392 | 2393 | 2394 | 2395 | 2396 | 2397 | 2398 | 2399 | 2400 | 2401 | 2402 | 2403 | 2404 | 2405 | 2406 |
|------------------------------|--|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|

Depreciation .....

|                             |  |
|-----------------------------|--|
| Investment Interest Expense |  |
|-----------------------------|--|

**Net Income (Loss) to Others** . . . . .

**Deductible Rental Loss (if Applicable)** . . . . .

|  |  |  |     |     |  |                |  |          |
|--|--|--|-----|-----|--|----------------|--|----------|
|  |  |  | (d) | (e) |  | (f) Department |  | (g) Ref. |
|--|--|--|-----|-----|--|----------------|--|----------|

\_\_\_\_\_

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,165.  
-----  
1,165.  
=====

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

609.70 ACS, TRACT 3 TWP 8S RNG 18W SEC

|  |     |  |    |                                                                                    |
|--|-----|--|----|------------------------------------------------------------------------------------|
|  | Yes |  | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|--|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:** 4 - COMMERCIAL

RENTAL INCOME

**OTHER INCOME:**

## OTHER RENTAL INCOME

2,591.

**TOTAL GROSS INCOME**

2,591.

**OTHER EXPENSES.**

## INSURANCE

284.

## LEGAL AND OTHER PROFESSIONAL FEES

4,878.

## TAXES

1,385.

## DEPRECIATION (SHOWN BELOW)

### LESS. Beneficiary's Portion

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion**

6,547.

**TOTAL EXPENSES**

**TOTAL RENT OR ROYALTY INCOME (LOSS)**

-3,956.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

## Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

-3,956.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

2,591.  
-----  
2,591.  
=====

# RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

320 ACS TRACT 4 TWP 8S RNG 19W SEC 25 &

☐ Yes   ☐ No   Did you actively participate in the operation of the activity during the tax year?

**TYPE OF PROPERTY:**    4 - COMMERCIAL

|                                                      |        |         |
|------------------------------------------------------|--------|---------|
| RENTAL INCOME                                        |        |         |
| <b>OTHER INCOME:</b>                                 |        |         |
| OTHER RENTAL INCOME                                  | 1,360. |         |
| <b>TOTAL GROSS INCOME</b> . . . . .                  |        |         |
|                                                      |        | 1,360.  |
| <b>OTHER EXPENSES:</b>                               |        |         |
| INSURANCE                                            | 245.   |         |
| LEGAL AND OTHER PROFESSIONAL FEES                    | 2,560. |         |
| TAXES                                                | 749.   |         |
|                                                      |        |         |
|                                                      |        |         |
|                                                      |        |         |
|                                                      |        |         |
|                                                      |        |         |
|                                                      |        |         |
|                                                      |        |         |
|                                                      |        |         |
|                                                      |        |         |
| <b>DEPRECIATION (SHOWN BELOW)</b> . . . . .          |        |         |
| LESS: Beneficiary's Portion . . . . .                |        |         |
| <b>AMORTIZATION</b>                                  |        |         |
| LESS: Beneficiary's Portion . . . . .                |        |         |
| <b>DEPLETION</b> . . . . .                           |        |         |
| LESS: Beneficiary's Portion . . . . .                |        |         |
| <b>TOTAL EXPENSES</b> . . . . .                      |        |         |
|                                                      |        | 3,554.  |
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> . . . . . |        |         |
|                                                      |        | -2,194. |

**Less Amount to**

|                                       |  |  |
|---------------------------------------|--|--|
| Rent or Royalty . . . . .             |  |  |
| Depreciation . . . . .                |  |  |
| Depletion . . . . .                   |  |  |
| Investment Interest Expense . . . . . |  |  |
| Other Expenses . . . . .              |  |  |
| Net Income (Loss) to Others . . . . . |  |  |

**Net Rent or Royalty Income (Loss)** . . . . . -2,194.

**Deductible Rental Loss (if Applicable)** . . . . .

**SCHEDULE FOR DEPRECIATION CLAIMED**

| (a) Description of property | (b) Cost or<br>unadjusted basis | (c) Date<br>acquired | (d)<br>ACRS<br>des | (e)<br>Bus<br>% | (f) Basis for<br>depreciation | (g) Depreciation<br>in<br>prior years | (h)<br>Method | (i) Life<br>or<br>rate | (j) Depreciation<br>for this year |
|-----------------------------|---------------------------------|----------------------|--------------------|-----------------|-------------------------------|---------------------------------------|---------------|------------------------|-----------------------------------|
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
|                             |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |
| <b>Totals</b> . . . . .     |                                 |                      |                    |                 |                               |                                       |               |                        |                                   |

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,360.  
-----  
1,360.  
=====

## RENT AND ROYALTY INCOME

|                                                                        |     |                                         |                                                                                       |
|------------------------------------------------------------------------|-----|-----------------------------------------|---------------------------------------------------------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND     |     | <b>Identifying Number</b><br>75-6331832 |                                                                                       |
| <b>DESCRIPTION OF PROPERTY</b><br>80 ACS TRACT 5 TWP 8S RNG 20W SEC 15 |     |                                         |                                                                                       |
| <input type="checkbox"/>                                               | Yes | <input type="checkbox"/>                | No Did you actively participate in the operation of the activity during the tax year? |
| <b>TYPE OF PROPERTY:</b> 4 - COMMERCIAL                                |     |                                         |                                                                                       |
| RENTAL INCOME                                                          |     |                                         |                                                                                       |
| <b>OTHER INCOME:</b>                                                   |     |                                         |                                                                                       |
| OTHER RENTAL INCOME                                                    |     | 340.                                    |                                                                                       |
| <b>TOTAL GROSS INCOME</b>                                              |     |                                         | 340.                                                                                  |
| <b>OTHER EXPENSES:</b>                                                 |     |                                         |                                                                                       |
| INSURANCE                                                              |     | 150.                                    |                                                                                       |
| LEGAL AND OTHER PROFESSIONAL FEES                                      |     | 640.                                    |                                                                                       |
| TAXES                                                                  |     | 190.                                    |                                                                                       |
|                                                                        |     |                                         |                                                                                       |
|                                                                        |     |                                         |                                                                                       |
|                                                                        |     |                                         |                                                                                       |
|                                                                        |     |                                         |                                                                                       |
|                                                                        |     |                                         |                                                                                       |
|                                                                        |     |                                         |                                                                                       |
|                                                                        |     |                                         |                                                                                       |
|                                                                        |     |                                         |                                                                                       |
|                                                                        |     |                                         |                                                                                       |
| <b>DEPRECIATION (SHOWN BELOW)</b>                                      |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                            |     |                                         |                                                                                       |
| <b>AMORTIZATION</b>                                                    |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                            |     |                                         |                                                                                       |
| <b>DEPLETION</b>                                                       |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                            |     |                                         |                                                                                       |
| <b>TOTAL EXPENSES</b>                                                  |     |                                         | 980.                                                                                  |
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b>                             |     |                                         | -640.                                                                                 |
| <b>Less Amount to</b>                                                  |     |                                         |                                                                                       |
| Rent or Royalty                                                        |     |                                         |                                                                                       |
| Depreciation                                                           |     |                                         |                                                                                       |
| Depletion                                                              |     |                                         |                                                                                       |
| Investment Interest Expense                                            |     |                                         |                                                                                       |
| Other Expenses                                                         |     |                                         |                                                                                       |
| <b>Net Income (Loss) to Others</b>                                     |     |                                         |                                                                                       |
| <b>Net Rent or Royalty Income (Loss)</b>                               |     |                                         | -640.                                                                                 |
| <b>Deductible Rental Loss (if Applicable)</b>                          |     |                                         |                                                                                       |

**SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

340.

-----

340.

=====

## RENT AND ROYALTY INCOME

|                                                                            |    |                                                                                    |         |
|----------------------------------------------------------------------------|----|------------------------------------------------------------------------------------|---------|
| Taxpayer's Name<br><b>ROY AND CHRISTINE STURGIS CHARITABLE AND</b>         |    | Identifying Number<br><b>75-6331832</b>                                            |         |
| DESCRIPTION OF PROPERTY<br><b>225.84 ACS TRACT 8 TWP 10S RNG 18W SEC 2</b> |    |                                                                                    |         |
| Yes                                                                        | No | Did you actively participate in the operation of the activity during the tax year? |         |
|                                                                            |    | <b>4 - COMMERCIAL</b>                                                              |         |
| RENTAL INCOME                                                              |    |                                                                                    |         |
| OTHER INCOME:                                                              |    |                                                                                    |         |
| OTHER RENTAL INCOME                                                        |    | 957.                                                                               |         |
| TOTAL GROSS INCOME                                                         |    |                                                                                    | 957.    |
| OTHER EXPENSES:                                                            |    |                                                                                    |         |
| INSURANCE                                                                  |    | 189.                                                                               |         |
| LEGAL AND OTHER PROFESSIONAL FEES                                          |    | 1,807.                                                                             |         |
| TAXES                                                                      |    | 490.                                                                               |         |
| DEPRECIATION (SHOWN BELOW)                                                 |    |                                                                                    |         |
| LESS: Beneficiary's Portion                                                |    |                                                                                    |         |
| AMORTIZATION                                                               |    |                                                                                    |         |
| LESS: Beneficiary's Portion                                                |    |                                                                                    |         |
| DEPLETION                                                                  |    |                                                                                    |         |
| LESS: Beneficiary's Portion                                                |    |                                                                                    |         |
| TOTAL EXPENSES                                                             |    |                                                                                    | 2,486.  |
| TOTAL RENT OR ROYALTY INCOME (LOSS)                                        |    |                                                                                    | -1,529. |
| Less Amount to                                                             |    |                                                                                    |         |
| Rent or Royalty                                                            |    |                                                                                    |         |
| Depreciation                                                               |    |                                                                                    |         |
| Depletion                                                                  |    |                                                                                    |         |
| Investment Interest Expense                                                |    |                                                                                    |         |
| Other Expenses                                                             |    |                                                                                    |         |
| Net Income (Loss) to Others                                                |    |                                                                                    |         |
| Net Rent or Royalty Income (Loss)                                          |    |                                                                                    | -1,529. |
| Deductible Rental Loss (if Applicable)                                     |    |                                                                                    |         |

[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

957.

-----

957.

=====

\_\_\_\_\_

| DESCRIPTION OF PROPERTY                 |
|-----------------------------------------|
| 430 ACS TRACT 10 TWP 7S RNG 16W SECS 19 |

TYPE OF PROPERTY: 4 - COMMERCIAL

|               |  |
|---------------|--|
| OTHER INCOME: |  |
|---------------|--|

|   |   |   |   |   |   |   |   |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |
|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 | 101 | 102 | 103 | 104 | 105 | 106 | 107 | 108 | 109 | 110 | 111 | 112 | 113 | 114 | 115 | 116 | 117 | 118 | 119 | 120 | 121 | 122 | 123 | 124 | 125 | 126 | 127 | 128 | 129 | 130 | 131 | 132 | 133 | 134 | 135 | 136 | 137 | 138 | 139 | 140 | 141 | 142 | 143 | 144 | 145 | 146 | 147 | 148 | 149 | 150 | 151 | 152 | 153 | 154 | 155 | 156 | 157 | 158 | 159 | 160 | 161 | 162 | 163 | 164 | 165 | 166 | 167 | 168 | 169 | 170 | 171 | 172 | 173 | 174 | 175 | 176 | 177 | 178 | 179 | 180 | 181 | 182 | 183 | 184 | 185 | 186 | 187 | 188 | 189 | 190 | 191 | 192 | 193 | 194 | 195 | 196 | 197 | 198 | 199 | 200 | 201 | 202 | 203 | 204 | 205 | 206 | 207 | 208 | 209 | 210 | 211 | 212 | 213 | 214 | 215 | 216 | 217 | 218 | 219 | 220 | 221 | 222 | 223 | 224 | 225 | 226 | 227 | 228 | 229 | 230 | 231 | 232 | 233 | 234 | 235 | 236 | 237 | 238 | 239 | 240 | 241 | 242 | 243 | 244 | 245 | 246 | 247 | 248 | 249 | 250 | 251 | 252 | 253 | 254 | 255 | 256 | 257 | 258 | 259 | 260 | 261 | 262 | 263 | 264 | 265 | 266 | 267 | 268 | 269 | 270 | 271 | 272 | 273 | 274 | 275 | 276 | 277 | 278 | 279 | 280 | 281 | 282 | 283 | 284 | 285 | 286 | 287 | 288 | 289 | 290 | 291 | 292 | 293 | 294 | 295 | 296 | 297 | 298 | 299 | 300 | 301 | 302 | 303 | 304 | 305 | 306 | 307 | 308 | 309 | 310 | 311 | 312 | 313 | 314 | 315 | 316 | 317 | 318 | 319 | 320 | 321 | 322 | 323 | 324 | 325 | 326 | 327 | 328 | 329 | 330 | 331 | 332 | 333 | 334 | 335 | 336 | 337 | 338 | 339 | 340 | 341 | 342 | 343 | 344 | 345 | 346 | 347 | 348 | 349 | 350 | 351 | 352 | 353 | 354 | 355 | 356 | 357 | 358 | 359 | 360 | 361 | 362 | 363 | 364 | 365 | 366 | 367 | 368 | 369 | 370 | 371 | 372 | 373 | 374 | 375 | 376 | 377 | 378 | 379 | 380 | 381 | 382 | 383 | 384 | 385 | 386 | 387 | 388 | 389 | 390 | 391 | 392 | 393 | 394 | 395 | 396 | 397 | 398 | 399 | 400 | 401 | 402 | 403 | 404 | 405 | 406 | 407 | 408 | 409 | 410 | 411 | 412 | 413 | 414 | 415 | 416 | 417 | 418 | 419 | 420 | 421 | 422 | 423 | 424 | 425 | 426 | 427 | 428 | 429 | 430 | 431 | 432 | 433 | 434 | 435 | 436 | 437 | 438 | 439 | 440 | 441 | 442 | 443 | 444 | 445 | 446 | 447 | 448 | 449 | 450 | 451 | 452 | 453 | 454 | 455 | 456 | 457 | 458 | 459 | 460 | 461 | 462 | 463 | 464 | 465 | 466 |
|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|

|                 |  |  |
|-----------------|--|--|
| OTHER EXPENSES: |  |  |
|-----------------|--|--|

|                                   |        |
|-----------------------------------|--------|
| LEGAL AND OTHER PROFESSIONAL FEES | 3,440. |
|-----------------------------------|--------|

[illegible]

|                                                                    |                                                                    |                                                                    |
|--------------------------------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------|
| <p> <math>\frac{1}{2} \times \frac{1}{2} = \frac{1}{4}</math> </p> | <p> <math>\frac{1}{2} \times \frac{1}{2} = \frac{1}{4}</math> </p> | <p> <math>\frac{1}{2} \times \frac{1}{2} = \frac{1}{4}</math> </p> |
|--------------------------------------------------------------------|--------------------------------------------------------------------|--------------------------------------------------------------------|

[illegible]

|                            |  |  |  |
|----------------------------|--|--|--|
| DEPRECIATION (SHOWN BELOW) |  |  |  |
|----------------------------|--|--|--|

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
| AMORTIZATION                          |  |  |

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
| DEPLETION                             |  |  |

|                             |  |              |
|-----------------------------|--|--------------|
| LESS: Beneficiary's Portion |  |              |
| <b>TOTAL EXPENSES</b>       |  | <b>4,227</b> |

|                                       |  |  |  |  |  |  |  |  |  |     |
|---------------------------------------|--|--|--|--|--|--|--|--|--|-----|
| TOTAL RENT ON NET RENTY INCOME (2000) |  |  |  |  |  |  |  |  |  | 333 |
| Less Amount to                        |  |  |  |  |  |  |  |  |  |     |

Depreciation .....Investment Interest Expense . . . . .Net Income (Loss) to Others . . . . .

**Deductible Rental Loss (if Applicable)** . . . . .

|  |  |  |  |      |      |  |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |     |
|--|--|--|--|------|------|--|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-----|
|  |  |  |  | (11) | (12) |  | (13) | (14) | (15) | (16) | (17) | (18) | (19) | (20) | (21) | (22) | (23) | (24) | (25) | (26) | (27) | (28) | (29) | (30) | (31) | (32) | (33) | (34) | (35) | (36) | (37) | (38) | (39) | (40) | (41) | (42) | (43) | (44) | (45) | (46) | (47) | (48) | (49) | (50) | (51) | (52) | (53) | (54) | (55) | (56) | (57) | (58) | (59) | (60) | (61) | (62) | (63) | (64) | (65) | (66) | (67) | (68) | (69) | (70) | (71) | (72) | (73) | (74) | (75) | (76) | (77) | (78) | (79) | (80) | (81) | (82) | (83) | (84) | (85) | (86) | (87) | (88) | (89) | (90) | (91) | (92) | (93) | (94) | (95) | (96) | (97) | (98) | (99) | (100) | (101) | (102) | (103) | (104) | (105) | (106) | (107) | (108) | (109) | (110) | (111) | (112) | (113) | (114) | (115) | (116) | (117) | (118) | (119) | (120) | (121) | (122) | (123) | (124) | (125) | (126) | (127) | (128) | (129) | (130) | (131) | (132) | (133) | (134) | (135) | (136) | (137) | (138) | (139) | (140) | (141) | (142) | (143) | (144) | (145) | (146) | (147) | (148) | (149) | (150) | (151) | (152) | (153) | (154) | (155) | (156) | (157) | (158) | (159) | (160) | (161) | (162) | (163) | (164) | (165) | (166) | (167) | (168) | (169) | (170) | (171) | (172) | (173) | (174) | (175) | (176) | (177) | (178) | (179) | (180) | (181) | (182) | (183) | (184) | (185) | (186) | (187) | (188) | (189) | (190) | (191) | (192) | (193) | (194) | (195) | (196) | (197) | (198) | (199) | (200) | (201) | (202) | (203) | (204) | (205) | (206) | (207) | (208) | (209) | (210) | (211) | (212) | (213) | (214) | (215) | (216) | (217) | (218) | (219) | (220) | (221) | (222) | (223) | (224) | (225) | (226) | (227) | (228) | (229) | (230) | (231) | (232) | (233) | (234) | (235) | (236) | (237) | (238) | (239) | (240) | (241) | (242) | (243) | (244) | (245) | (246) | (247) | (248) | (249) | (250) | (251) | (252) | (253) | (254) | (255) | (256) | (257) | (258) | (259) | (260) | (261) | (262) | (263) | (264) | (265) | (266) | (267) | (268) | (269) | (270) | (271) | (272) | (273) | (274) | (275) | (276) | (277) | (278) | (279) | (280) | (281) | (282) | (283) | (284) | (285) | (286) | (287) | (288) | (289) | (290) | (291) | (292) | (293) | (294) | (295) | (296) | (297) | (298) | (299) | (300) | (301) | (302) | (303) | (304) | (305) | (306) | (307) | (308) | (309) | (310) | (311) | (312) | (313) | (314) | (315) | (316) | (317) | (318) | (319) | (320) | (321) | (322) | (323) | (324) | (325) | (326) | (327) | (328) | (329) | (330) | (331) | (332) | (333) | (334) | (335) | (336) | (337) | (338) | (339) | (340) | (341) | (342) | (343) | (344) | (345) | (346) | (347) | (348) | (349) | (350) | (351) | (352) | (353) | (354) | (355) | (356) | (357) | (358) | (359) | (360) | (361) | (362) | (363) | (364) | (365) | (366) | (367) | (368) | (369) | (370) | (371) | (372) | (373) | (374) | (375) | (376) | (377) | (378) | (379) | (380) | (381) | (382) | (383) | (384) | (385) | (386) | (387) | (388) | (389) | (390) | (391) | (392) | (393) | (394) | (395) | (396) | (397) | (398) | (399) | (400) | (401) | (402) | (403) | (404) | (405) | (406) | (407) | (408) | (409) | (410) | (411) | (412) | (413) | (414) | (415) | (416) | (417) | (418) | (419) | (420) | (421) | (422) | (423) | (424) | (425) | (426) | (427) | (428) | (429) | (430) | (431) | (432) | (433) | (434) | (435) | (436) | (437) | (438) | (439) | (440) | (441) | (442) | (443) | (444) | (445) | (446) | (447) | (448) | (449) | (450) | (451) | (452) | (453) | (454) | (455) | (456) | (457) | (458) | (459) | (460) | (461) | (462) | (463) | (464) | (465) | (466) | (467) | (468) | (469) | (470) | (471) | (472) | (473) | (474) | (475) | (476) | (477) | (478) | (479) | (480) | (481) | (482) | (483) | (484) | (485) | (486) | (487) | (488) | (489) | (490) | (491) | (492) | (493) | (494) | (495) | (496) | (497) | (498) | (499) | (500) | (501) | (502) | (503) | (504) | (505) | (506) | (507) | (508) | (509) | (510) | (511) | (512) | (513) | (514) | (515) | (516) | (517) | (518) | (519) | (520) | (521) | (522) | (523) | (524) | (525) | (526) | (527) | (528) | (529) | (53 |
|--|--|--|--|------|------|--|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-----|

\_\_\_\_\_

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,828.  
-----  
1,828.  
=====

## RENT AND ROYALTY INCOME

|                                                                           |     |                                         |                                                                                       |
|---------------------------------------------------------------------------|-----|-----------------------------------------|---------------------------------------------------------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND        |     | <b>Identifying Number</b><br>75-6331832 |                                                                                       |
| <b>DESCRIPTION OF PROPERTY</b><br>240 ACS TRACT 11 TWP 7S RNG 17W SEC 2 & |     |                                         |                                                                                       |
| <input type="checkbox"/>                                                  | Yes | <input type="checkbox"/>                | No Did you actively participate in the operation of the activity during the tax year? |
| <b>TYPE OF PROPERTY:</b> 4 - COMMERCIAL                                   |     |                                         |                                                                                       |
| RENTAL INCOME                                                             |     |                                         |                                                                                       |
| OTHER INCOME:                                                             |     |                                         |                                                                                       |
| OTHER RENTAL INCOME                                                       |     | 850.                                    |                                                                                       |
| <b>TOTAL GROSS INCOME</b>                                                 |     |                                         | 850.                                                                                  |
| <b>OTHER EXPENSES.</b>                                                    |     |                                         |                                                                                       |
| INSURANCE                                                                 |     | 189.                                    |                                                                                       |
| LEGAL AND OTHER PROFESSIONAL FEES                                         |     | 1,920.                                  |                                                                                       |
| TAXES                                                                     |     | 441.                                    |                                                                                       |
|                                                                           |     |                                         |                                                                                       |
|                                                                           |     |                                         |                                                                                       |
|                                                                           |     |                                         |                                                                                       |
|                                                                           |     |                                         |                                                                                       |
|                                                                           |     |                                         |                                                                                       |
|                                                                           |     |                                         |                                                                                       |
| <b>DEPRECIATION (SHOWN BELOW)</b>                                         |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                               |     |                                         |                                                                                       |
| <b>AMORTIZATION</b>                                                       |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                               |     |                                         |                                                                                       |
| <b>DEPLETION</b>                                                          |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                               |     |                                         |                                                                                       |
| <b>TOTAL EXPENSES</b>                                                     |     |                                         | 2,550.                                                                                |
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b>                                |     |                                         | -1,700.                                                                               |
| <b>Less Amount to</b>                                                     |     |                                         |                                                                                       |
| Rent or Royalty                                                           |     |                                         |                                                                                       |
| Depreciation                                                              |     |                                         |                                                                                       |
| Depletion                                                                 |     |                                         |                                                                                       |
| Investment Interest Expense                                               |     |                                         |                                                                                       |
| Other Expenses                                                            |     |                                         |                                                                                       |
| Net Income (Loss) to Others                                               |     |                                         |                                                                                       |
| <b>Net Rent or Royalty Income (Loss)</b>                                  |     |                                         | -1,700.                                                                               |
| <b>Deductible Rental Loss (if Applicable)</b>                             |     |                                         |                                                                                       |

[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

850.

-----

850.

=====

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

340 ACS TRACT 12 TWP 7S RNG 17W SEC 31

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:** 4 - COMMERCIAL

RENTAL INCOME

**OTHER INCOME.**

OTHER RENTAL INCOME

1,190.

|                                     |        |
|-------------------------------------|--------|
| <b>TOTAL GROSS INCOME</b> . . . . . | 1,190. |
|-------------------------------------|--------|

**OTHER EXPENSES:**

INSURANCE

245.

LEGAL AND OTHER PROFESSIONAL FEES

2,720.

## TAXES

584.

DEPRECIATION (SHOWN BELOW)

### LESS: Beneficiary's Portion

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion**

3,549.

|                                            |                |
|--------------------------------------------|----------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> | <b>-2,359.</b> |
|--------------------------------------------|----------------|

$$-2,359.$$

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

## Other Expenses

**Net Income (Loss) to Others**

|                                          |                |
|------------------------------------------|----------------|
| <b>Net Rent or Royalty Income (Loss)</b> | <b>-2,359.</b> |
|------------------------------------------|----------------|

---

-2,359.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,190.  
-----  
1,190.  
=====



SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,275.  
-----  
1,275.  
=====

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

### DESCRIPTION OF PROPERTY

320 ACS TRACT 14 TWP 7S RNG 17W SEC 36 &

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

**OTHER INCOME:**

OTHER RENTAL INCOME

1,360.

|                                     |        |
|-------------------------------------|--------|
| <b>TOTAL GROSS INCOME</b> . . . . . | 1,360. |
|-------------------------------------|--------|

OTHER EXPENSES:

INSURANCE

245.

LEGAL AND OTHER PROFESSIONAL FEES

2.560.

TAXES

$$\underline{1.264.}$$

DEPRECIATION (SHOWN BELOW)

**LESS. Beneficiary's Portion**

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLÉTION

**LESS: Beneficiary's Portion**

**TOTAL EXPENSES**

4,069.

|                                            |                |
|--------------------------------------------|----------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> | <b>-2,709.</b> |
|--------------------------------------------|----------------|

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others**

|                                          |               |
|------------------------------------------|---------------|
| <b>Net Rent or Royalty Income (Loss)</b> | <b>-2,709</b> |
|------------------------------------------|---------------|

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,360.  
-----  
1,360.  
=====

```

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```

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

149.

-----

149.

=====

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

280 ACS TRACT 16 TWP 8S RNG 16W SEC 8

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

|               |  |  |
|---------------|--|--|
|               |  |  |
| OTHER INCOME: |  |  |
|               |  |  |

TOTAL GROSS INCOME . . . . .

**OTHER EXPENSES:**

[illegible]

## DEPRECIATION (SHOWN BELOW)

|                                              |  |  |
|----------------------------------------------|--|--|
| <b>LESS: Beneficiary's Portion</b> . . . . . |  |  |
|----------------------------------------------|--|--|

## AMORTIZATION

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
|---------------------------------------|--|--|

## DEPLETION

|                                      |  |  |
|--------------------------------------|--|--|
| LESS Beneficiary's Portion . . . . . |  |  |
|--------------------------------------|--|--|

**TOTAL EXPENSES**

|                                            |                |
|--------------------------------------------|----------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> | <b>-3,023.</b> |
|--------------------------------------------|----------------|

**Less Amount to**

|                                    |       |
|------------------------------------|-------|
| <b>Rent or Royalty</b>             | _____ |
| <b>Depreciation</b>                | _____ |
| <b>Depletion</b>                   | _____ |
| <b>Investment Interest Expense</b> | _____ |
| <b>Other Expenses</b>              | _____ |
| <b>Net Income (Loss) to Others</b> | _____ |

**Net Rent or Royalty Income (Loss)**Deductible Rental Loss (if Applicable) . . . . .

### SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]



SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

595.

-----

595.

=====

143 -

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

595.

-----

595.

=====

# RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

140 ACS TRACT 21 TWP 8S RNG 17W SECS 23

☐ Yes ☐ No Did you actively participate in the operation of the activity during the tax year?

**TYPE OF PROPERTY:** 4 - COMMERCIAL

|                                            |        |        |
|--------------------------------------------|--------|--------|
| RENTAL INCOME                              |        |        |
| <b>OTHER INCOME:</b>                       |        |        |
| OTHER RENTAL INCOME                        | 595.   |        |
| <b>TOTAL GROSS INCOME</b>                  |        | 595.   |
| <b>OTHER EXPENSES:</b>                     |        |        |
| INSURANCE                                  | 189.   |        |
| LEGAL AND OTHER PROFESSIONAL FEES          | 1,120. |        |
| TAXES                                      | 210.   |        |
|                                            |        |        |
|                                            |        |        |
|                                            |        |        |
|                                            |        |        |
|                                            |        |        |
|                                            |        |        |
|                                            |        |        |
|                                            |        |        |
| <b>DEPRECIATION (SHOWN BELOW)</b>          |        |        |
| LESS: Beneficiary's Portion                |        |        |
| <b>AMORTIZATION</b>                        |        |        |
| LESS: Beneficiary's Portion                |        |        |
| <b>DEPLETION</b>                           |        |        |
| LESS: Beneficiary's Portion                |        |        |
| <b>TOTAL EXPENSES</b>                      |        | 1,519. |
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> |        | -924.  |

**Less Amount to**

|                             |  |  |
|-----------------------------|--|--|
| Rent or Royalty             |  |  |
| Depreciation                |  |  |
| Depletion                   |  |  |
| Investment Interest Expense |  |  |
| Other Expenses              |  |  |
| Net Income (Loss) to Others |  |  |

**Net Rent or Royalty Income (Loss)** -924.

**Deductible Rental Loss (if Applicable)**

**SCHEDULE FOR DEPRECIATION CLAIMED**

| (a) Description of property | (b) Cost or unadjusted basis | (c) Date acquired | (d) ACRS des | (e) Bus % | (f) Basis for depreciation | (g) Depreciation in prior years | (h) Method | (i) Life or rate | (j) Depreciation for this year |
|-----------------------------|------------------------------|-------------------|--------------|-----------|----------------------------|---------------------------------|------------|------------------|--------------------------------|
|                             |                              |                   |              |           |                            |                                 |            |                  |                                |
|                             |                              |                   |              |           |                            |                                 |            |                  |                                |
|                             |                              |                   |              |           |                            |                                 |            |                  |                                |
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|                             |                              |                   |              |           |                            |                                 |            |                  |                                |
|                             |                              |                   |              |           |                            |                                 |            |                  |                                |
| <b>Totals</b>               |                              |                   |              |           |                            |                                 |            |                  |                                |

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

595.  
-----  
595.  
=====

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

180 ACS TRACT 22 TWP 9S RNG 15W SEC 7 &

|     |    |                                                                                    |
|-----|----|------------------------------------------------------------------------------------|
| Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

**OTHER INCOME:**

OTHER RENTAL INCOME

765.

|                                     |             |
|-------------------------------------|-------------|
| <b>TOTAL GROSS INCOME</b> . . . . . | <b>765.</b> |
|-------------------------------------|-------------|

**OTHER EXPENSES:**

INSURANCE

189.

LEGAL AND OTHER PROFESSIONAL FEES

1,440.

TAXES

388.

DEPRECIATION (SHOWN BELOW)

**LESS. Beneficiary's Portion**

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

### LESS Beneficiary's Portion

|                          |        |
|--------------------------|--------|
| TOTAL EXPENSES . . . . . | 2,017. |
|--------------------------|--------|

|                                                      |                |
|------------------------------------------------------|----------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> . . . . . | <b>-1,252.</b> |
|------------------------------------------------------|----------------|

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others**

|                                             |         |
|---------------------------------------------|---------|
| Net Rent or Royalty Income (Loss) . . . . . | -1,252. |
|---------------------------------------------|---------|

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

765.

-----

765.

=====



SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,360.  
-----  
1,360.  
=====

\_\_\_\_\_

|                                                  |       |         |
|--------------------------------------------------|-------|---------|
| Less Amount to                                   |       |         |
| Rent or Royalty . . . . .                        | _____ |         |
| Depreciation . . . . .                           | _____ |         |
| Depletion . . . . .                              | _____ |         |
| Investment Interest Expense . . . . .            | _____ |         |
| Other Expenses . . . . .                         | _____ |         |
| Net Income (Loss) to Others . . . . .            | _____ |         |
| Net Rent or Royalty Income (Loss) . . . . .      |       | - 641 . |
| Deductible Rental Loss (if Applicable) . . . . . |       |         |

| SCHEDULE FOR DEPRECIATION CLAIMED |                              |                   |              |           |                            |                                 |            |                  |                                |
|-----------------------------------|------------------------------|-------------------|--------------|-----------|----------------------------|---------------------------------|------------|------------------|--------------------------------|
| (a) Description of property       | (b) Cost or unadjusted basis | (c) Date acquired | (d) ACRS des | (e) Bus % | (f) Basis for depreciation | (g) Depreciation in prior years | (h) Method | (i) Life or rate | (j) Depreciation for this year |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
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|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

425.  
-----  
425.  
=====

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

TRACT 29, 108 ACS DALLAS CO ARK

|  |     |  |    |                                                                                    |
|--|-----|--|----|------------------------------------------------------------------------------------|
|  | Yes |  | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|--|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:**      4 - COMMERCIAL

|               |  |  |
|---------------|--|--|
| OTHER INCOME: |  |  |
|               |  |  |
|               |  |  |

**TOTAL GROSS INCOME** . . . . .

**OTHER EXPENSES:**

[illegible]

**DEPRECIATION (SHOWN BELOW)**

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
| <b>AMORTIZATION</b>                   |  |  |
| LESS: Beneficiary's Portion . . . . . |  |  |
| <b>DEPLETION</b> . . . . .            |  |  |
| LESS: Beneficiary's Portion . . . . . |  |  |

**TOTAL EXPENSES**

1,253.

**TOTAL RENT OR ROYALTY INCOME (LOSS)**

-1,253.

**Less Amount to**

|                                       |       |
|---------------------------------------|-------|
| Rent or Royalty . . . . .             | _____ |
| Depreciation . . . . .                | _____ |
| Depletion . . . . .                   | _____ |
| Investment Interest Expense . . . . . | _____ |
| Other Expenses . . . . .              | _____ |
| Net Income (Loss) to Others . . . . . | _____ |

|                                             |         |
|---------------------------------------------|---------|
| Net Rent or Royalty Income (Loss) . . . . . | -1,253. |
|---------------------------------------------|---------|

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## RENT AND ROYALTY INCOME

|                                                                    |     |                                         |                                                                                       |
|--------------------------------------------------------------------|-----|-----------------------------------------|---------------------------------------------------------------------------------------|
| Taxpayer's Name<br><b>ROY AND CHRISTINE STURGIS CHARITABLE AND</b> |     | Identifying Number<br><b>75-6331832</b> |                                                                                       |
| DESCRIPTION OF PROPERTY<br><b>TRACT 30, 285 ACS DALLAS CO ARK</b>  |     |                                         |                                                                                       |
| <input type="checkbox"/>                                           | Yes | <input type="checkbox"/>                | No Did you actively participate in the operation of the activity during the tax year? |
| TYPE OF PROPERTY. <b>4 - COMMERCIAL</b>                            |     |                                         |                                                                                       |
| RENTAL INCOME                                                      |     |                                         |                                                                                       |
| OTHER INCOME:                                                      |     |                                         |                                                                                       |
| OTHER RENTAL INCOME                                                |     | 1,211.                                  |                                                                                       |
| TOTAL GROSS INCOME                                                 |     |                                         | 1,211.                                                                                |
| OTHER EXPENSES:                                                    |     |                                         |                                                                                       |
| INSURANCE                                                          |     | 245.                                    |                                                                                       |
| LEGAL AND OTHER PROFESSIONAL FEES                                  |     | 2,280.                                  |                                                                                       |
| TAXES                                                              |     | 586.                                    |                                                                                       |
|                                                                    |     |                                         |                                                                                       |
|                                                                    |     |                                         |                                                                                       |
|                                                                    |     |                                         |                                                                                       |
|                                                                    |     |                                         |                                                                                       |
|                                                                    |     |                                         |                                                                                       |
|                                                                    |     |                                         |                                                                                       |
| DEPRECIATION (SHOWN BELOW)                                         |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                        |     |                                         |                                                                                       |
| AMORTIZATION                                                       |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                        |     |                                         |                                                                                       |
| DEPLETION                                                          |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                        |     |                                         |                                                                                       |
| TOTAL EXPENSES                                                     |     |                                         | 3,111.                                                                                |
| TOTAL RENT OR ROYALTY INCOME (LOSS)                                |     |                                         | -1,900.                                                                               |
| Less Amount to                                                     |     |                                         |                                                                                       |
| Rent or Royalty                                                    |     |                                         |                                                                                       |
| Depreciation                                                       |     |                                         |                                                                                       |
| Depletion                                                          |     |                                         |                                                                                       |
| Investment Interest Expense                                        |     |                                         |                                                                                       |
| Other Expenses                                                     |     |                                         |                                                                                       |
| Net Income (Loss) to Others                                        |     |                                         |                                                                                       |
| Net Rent or Royalty Income (Loss)                                  |     |                                         | -1,900.                                                                               |
| Deductible Rental Loss (if Applicable)                             |     |                                         |                                                                                       |

[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,211.  
-----  
1,211.  
=====

JSA

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

468.

-----

468.

=====

158 -

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

425.

-----

425.

=====

\_\_\_\_\_

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

TRACT 34, 160 ACS DALLAS CO ARK

|  |     |  |    |                                                                                    |
|--|-----|--|----|------------------------------------------------------------------------------------|
|  | Yes |  | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|--|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:** 4 - COMMERCIAL

## RENTAL INCOME

**OTHER INCOME:**

## OTHER RENTAL INCOME

680.

|                                     |             |
|-------------------------------------|-------------|
| <b>TOTAL GROSS INCOME</b> . . . . . | <b>680.</b> |
|-------------------------------------|-------------|

**OTHER EXPENSES:**

## INSURANCE

189.

## LEGAL AND OTHER PROFESSIONAL FEES

1,280.

## TAXES

295.

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

### LESS: Beneficiary's Portion

## DEPLETION

### LESS. Beneficiary's Portion

|                                 |               |
|---------------------------------|---------------|
| <b>TOTAL EXPENSES</b> . . . . . | <b>1,764.</b> |
|---------------------------------|---------------|

|                                            |                |
|--------------------------------------------|----------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> | <b>-1,084.</b> |
|--------------------------------------------|----------------|

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others**

|                                             |         |
|---------------------------------------------|---------|
| Net Rent or Royalty Income (Loss) . . . . . | -1,084. |
|---------------------------------------------|---------|

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

680.  
-----  
680.  
=====

\_\_\_\_\_

| DESCRIPTION OF PROPERTY          |
|----------------------------------|
| TRACT 35, 1608 ACS DALLAS CO ARK |

TYPE OF PROPERTY: 4 - COMMERCIAL

|               |  |
|---------------|--|
| OTHER INCOME: |  |
|---------------|--|

[illegible]

|                 |  |  |
|-----------------|--|--|
| OTHER EXPENSES. |  |  |
|                 |  |  |

|                                   |        |
|-----------------------------------|--------|
| LEGAL AND OTHER PROFESSIONAL FEES | 8,064. |
|-----------------------------------|--------|

[illegible]

\_\_\_\_\_

[illegible]

|                            |  |  |
|----------------------------|--|--|
| DEPRECIATION (SHOWN BELOW) |  |  |
|----------------------------|--|--|

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
| AMORTIZATION                          |  |  |

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
| DEPLETION                             |  |  |

|                |       |
|----------------|-------|
| TOTAL EXPENSES | 9.956 |
|----------------|-------|

**Less Amount to**

Depreciation .....Investment Interest Expense . . . . .

**Net Income (Loss) to Others** . . . . .

Deductible Rental Loss (if Applicable) . . . . .

|  |  |  | (d) | (e) |  | (g) Denomination |  | (h) Life |
|--|--|--|-----|-----|--|------------------|--|----------|
|--|--|--|-----|-----|--|------------------|--|----------|

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|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

4,263.  
-----  
4,263.  
=====



SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

839.

-----

839.

=====



SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

701.  
-----  
701.  
=====



SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,360.  
-----  
1,360.  
=====

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

TRACT 39,240 ACS DALLAS CO ARK

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

|               |  |  |
|---------------|--|--|
| RENTAL INCOME |  |  |
|---------------|--|--|

**OTHER INCOME:**

|                     |        |
|---------------------|--------|
| OTHER RENTAL INCOME | 1,020. |
|---------------------|--------|

|                              |        |
|------------------------------|--------|
| TOTAL GROSS INCOME . . . . . | 1,020. |
|------------------------------|--------|

**OTHER EXPENSES:**

|           |      |
|-----------|------|
| INSURANCE | 189. |
|-----------|------|

|                                   |        |
|-----------------------------------|--------|
| LEGAL AND OTHER PROFESSIONAL FEES | 1,920. |
|-----------------------------------|--------|

|       |      |
|-------|------|
| TAXES | 249. |
|-------|------|

|                                      |  |  |
|--------------------------------------|--|--|
| DEPRECIATION (SHOWN BELOW) . . . . . |  |  |
|--------------------------------------|--|--|

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
|---------------------------------------|--|--|

|              |  |  |
|--------------|--|--|
| AMORTIZATION |  |  |
|--------------|--|--|

|                                              |  |  |
|----------------------------------------------|--|--|
| <b>LESS. Beneficiary's Portion</b> . . . . . |  |  |
|----------------------------------------------|--|--|

|                     |  |  |
|---------------------|--|--|
| DEPLETION . . . . . |  |  |
|---------------------|--|--|

|                                       |  |  |
|---------------------------------------|--|--|
| LESS: Beneficiary's Portion . . . . . |  |  |
|---------------------------------------|--|--|

|                                 |               |
|---------------------------------|---------------|
| <b>TOTAL EXPENSES</b> . . . . . | <b>2,358.</b> |
|---------------------------------|---------------|

|                                            |                |
|--------------------------------------------|----------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> | <b>-1,338.</b> |
|--------------------------------------------|----------------|

**Less Amount to**

**Rent or Royalty** . . . . . \_\_\_\_\_

Depreciation . . . . .

Depletion . . . . . \_\_\_\_\_

Investment Interest Expense . . . . . \_\_\_\_\_

**Other Expenses** . . . . .

**Net Income (Loss) to Others** . . . . .

|                                          |                |
|------------------------------------------|----------------|
| <b>Net Rent or Royalty Income (Loss)</b> | <b>-1,338.</b> |
|------------------------------------------|----------------|

**Deductible Rental Loss (if Applicable)** . . . . .

**SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,020.  
-----  
1,020.  
=====

172 -

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

4,023.  
-----  
4,023.  
=====



SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,360.  
-----  
1,360.  
=====

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

TRACT 42, 340 ACS DALLAS CO ARK

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

**OTHER INCOME:**

OTHER RENTAL INCOME

1,445.

|                                     |               |
|-------------------------------------|---------------|
| <b>TOTAL GROSS INCOME</b> . . . . . | <b>1,445.</b> |
|-------------------------------------|---------------|

**OTHER EXPENSES:**

## INSURANCE

245.

## LEGAL AND OTHER PROFESSIONAL FEES

2,720.

## TAXES

610.

DEPRECIATION (SHOWN BELOW)

### LESS: Beneficiary's Portion

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion**

|                                 |               |
|---------------------------------|---------------|
| <b>TOTAL EXPENSES</b> . . . . . | <b>3,575.</b> |
|---------------------------------|---------------|

|                                            |                |
|--------------------------------------------|----------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> | <b>-2,130.</b> |
|--------------------------------------------|----------------|

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others**

|                                          |                |
|------------------------------------------|----------------|
| <b>Net Rent or Royalty Income (Loss)</b> | <b>-2,130.</b> |
|------------------------------------------|----------------|

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

1,445.  
-----  
1,445.  
=====

## RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

TRACT 43, 1360 ACS DALLAS CO ARK

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

**OTHER INCOME:**

OTHER RENTAL INCOME

5,079.

|                                     |               |
|-------------------------------------|---------------|
| <b>TOTAL GROSS INCOME</b> . . . . . | <b>5,079.</b> |
|-------------------------------------|---------------|

**OTHER EXPENSES:**

## INSURANCE

403.

LEGAL AND OTHER PROFESSIONAL FEES

10,840.

## TAXES

2,366.

DEPRECIATION (SHOWN BELOW)

**LESS. Beneficiary's Portion**

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion**

|                          |         |
|--------------------------|---------|
| TOTAL EXPENSES . . . . . | 13,609. |
|--------------------------|---------|

|                                            |                |
|--------------------------------------------|----------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> | <b>-8,530.</b> |
|--------------------------------------------|----------------|

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others**

|                                          |                |
|------------------------------------------|----------------|
| <b>Net Rent or Royalty Income (Loss)</b> | <b>-8,530.</b> |
|------------------------------------------|----------------|

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

5,079.  
-----  
5,079.  
=====



# RENT AND ROYALTY INCOME

|                                                                    |                                         |
|--------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>ROY AND CHRISTINE STURGIS CHARITABLE AND | <b>Identifying Number</b><br>75-6331832 |
|--------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**  
 TRACT 46, 580 ACS GRANT CO ARK

|     |    |                                                                                    |
|-----|----|------------------------------------------------------------------------------------|
| Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|-----|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:** 4 - COMMERCIAL

|                           |  |        |
|---------------------------|--|--------|
| RENTAL INCOME             |  |        |
| <b>OTHER INCOME:</b>      |  |        |
| OTHER RENTAL INCOME       |  | 2,040. |
| <b>TOTAL GROSS INCOME</b> |  | 2,040. |

|                                   |  |        |
|-----------------------------------|--|--------|
| <b>OTHER EXPENSES:</b>            |  |        |
| INSURANCE                         |  | 284.   |
| LEGAL AND OTHER PROFESSIONAL FEES |  | 4,640. |
| TAXES                             |  | 1,305. |
|                                   |  |        |
|                                   |  |        |
|                                   |  |        |
|                                   |  |        |
|                                   |  |        |
|                                   |  |        |
|                                   |  |        |
|                                   |  |        |

|                                            |  |         |
|--------------------------------------------|--|---------|
| <b>DEPRECIATION (SHOWN BELOW)</b>          |  |         |
| LESS: Beneficiary's Portion                |  |         |
| <b>AMORTIZATION</b>                        |  |         |
| LESS: Beneficiary's Portion                |  |         |
| <b>DEPLETION</b>                           |  |         |
| LESS: Beneficiary's Portion                |  |         |
| <b>TOTAL EXPENSES</b>                      |  | 6,229.  |
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> |  | -4,189. |

**Less Amount to**

|                                          |  |         |
|------------------------------------------|--|---------|
| Rent or Royalty                          |  |         |
| Depreciation                             |  |         |
| Depletion                                |  |         |
| Investment Interest Expense              |  |         |
| Other Expenses                           |  |         |
| <b>Net Income (Loss) to Others</b>       |  |         |
| <b>Net Rent or Royalty Income (Loss)</b> |  | -4,189. |

**Deductible Rental Loss (if Applicable)**

| SCHEDULE FOR DEPRECIATION CLAIMED |                              |                   |              |           |                            |                                 |            |                  |                                |
|-----------------------------------|------------------------------|-------------------|--------------|-----------|----------------------------|---------------------------------|------------|------------------|--------------------------------|
| (a) Description of property       | (b) Cost or unadjusted basis | (c) Date acquired | (d) ACRS des | (e) Bus % | (f) Basis for depreciation | (g) Depreciation in prior years | (h) Method | (i) Life or rate | (j) Depreciation for this year |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
|                                   |                              |                   |              |           |                            |                                 |            |                  |                                |
| <b>Totals</b>                     |                              |                   |              |           |                            |                                 |            |                  |                                |

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

2,040.  
-----  
2,040.  
=====



SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

510.  
-----  
510.  
=====



| JSA                             |
|---------------------------------|
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SUPPLEMENT TO RENT AND ROYALTY SCHEDULE  
=====

OTHER INCOME

OTHER RENTAL INCOME

272.

-----

272.

=====

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

| DESCRIPTION                              | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | NET<br>INVESTMENT<br>INCOME |
|------------------------------------------|-----------------------------------------|-----------------------------|
| -----                                    | -----                                   | -----                       |
| USGI REPORTED AS NONQUALIFIED DIVIDENDS  | 3,076.                                  | 3,076.                      |
| FOREIGN DIVIDENDS                        | 81,707.                                 | 81,707.                     |
| NONDIVIDEND DISTRIBUTIONS                | 1,951.                                  |                             |
| DOMESTIC DIVIDENDS                       | 196,146.                                | 196,146.                    |
| OTHER INTEREST                           | 15,138.                                 | 15,138.                     |
| FOREIGN INTEREST                         | 909.                                    | 909.                        |
| U.S. GOVERNMENT INTEREST(FEDERAL TAXABLE | 4,118.                                  | 4,118.                      |
| NON-TAXABLE FOREIGN INCOME               | -2,173.                                 |                             |
| NONDISTRIBUTIVE U.S. GOVERNMENT INTEREST | 257.                                    | 257.                        |
| MARKET DISCOUNT - OTHER INTEREST         | 8.                                      | 8.                          |
| NONQUALIFIED FOREIGN DIVIDENDS           | 27,573.                                 | 27,573.                     |
| NONQUALIFIED DOMESTIC DIVIDENDS          | 67,624.                                 | 67,624.                     |
|                                          | -----                                   | -----                       |
| TOTAL                                    | 396,334.                                | 396,556.                    |
|                                          | =====                                   | =====                       |

FORM 990PF, PART I - OTHER INCOME  
=====

| DESCRIPTION<br>-----     | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- |
|--------------------------|--------------------------------------------------|--------------------------------------|
| GROSS O&G ROYALTY INCOME | 182,432.                                         | 182,432.                             |
| PARTNERSHIP INCOME       |                                                  | 792.                                 |
| TRADE ERROR COMPENSATION | 72.                                              | 72.                                  |
|                          | -----                                            | -----                                |
| TOTALS                   | 182,504.                                         | 183,296.                             |
|                          | =====                                            | =====                                |

FORM 990PF, PART I - LEGAL FEES

=====

| DESCRIPTION<br>----- | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- | ADJUSTED<br>NET<br>INCOME<br>----- | CHARITABLE<br>PURPOSES<br>----- |
|----------------------|--------------------------------------------------|--------------------------------------|------------------------------------|---------------------------------|
| ROSE LAW FIRM        | 5,225.                                           |                                      |                                    | 5,225.                          |
|                      | -----                                            | -----                                | -----                              | -----                           |
| TOTALS               | 5,225.                                           | NONE                                 | NONE                               | 5,225.                          |
|                      | =====                                            | =====                                | =====                              | =====                           |

FORM 990PF, PART I - ACCOUNTING FEES  
=====

| DESCRIPTION<br>-----      | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- | ADJUSTED<br>NET<br>INCOME<br>----- | CHARITABLE<br>PURPOSES<br>----- |
|---------------------------|--------------------------------------------------|--------------------------------------|------------------------------------|---------------------------------|
| TAX PREPARATION FEE - BOA | 4,550.                                           |                                      |                                    | 4,550.                          |
| TOTALS                    | 4,550.                                           | NONE                                 | NONE                               | 4,550.                          |
|                           | =====                                            | =====                                | =====                              | =====                           |

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

=====

| DESCRIPTION<br>-----      | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- | CHARITABLE<br>PURPOSES<br>----- |
|---------------------------|--------------------------------------------------|--------------------------------------|---------------------------------|
| PROPERTY MGMT FEES - BOA  | 237,664.                                         | 237,664.                             |                                 |
| OIL & GAS MGMT FEES - BOA | 15,503.                                          | 15,503.                              |                                 |
| GRANTMAKING FEES - BOA    | 75,687.                                          |                                      | 75,687.                         |
| INVESTMENT ADVISORY FEES  | 33,232.                                          | 33,232.                              |                                 |
| GRANT CONSULTANT FEES -   |                                                  |                                      |                                 |
| * BETH COULSON            | 28,502.                                          |                                      | 28,502.                         |
| * KAREN SHUFORD           | 1,748.                                           |                                      | 1,748.                          |
|                           | -----                                            | -----                                | -----                           |
| TOTALS                    | 392,336.                                         | 286,399.                             | 105,937.                        |
|                           | =====                                            | =====                                | =====                           |

FORM 990PF, PART I - TAXES

=====

| DESCRIPTION                    | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | NET<br>INVESTMENT<br>INCOME |
|--------------------------------|-----------------------------------------|-----------------------------|
| -----                          | -----                                   | -----                       |
| FOREIGN TAXES                  | 13,354.                                 | 13,354.                     |
| NON-RENTAL PROPERTY TAXES      | 212.                                    | 212.                        |
| EXCISE TAX - PRIOR YEAR        | 11,654.                                 |                             |
| EXCISE TAX ESTIMATES           | 7,000.                                  |                             |
| FOREIGN TAXES ON QUALIFIED FOR | 379.                                    | 379.                        |
| FOREIGN TAXES ON NONQUALIFIED  | 401.                                    | 401.                        |
|                                | -----                                   | -----                       |
| TOTALS                         | 33,000.                                 | 14,346.                     |
|                                | =====                                   | =====                       |

## FORM 990PF, PART I - OTHER EXPENSES

=====

| DESCRIPTION                  | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS | NET<br>INVESTMENT<br>INCOME |
|------------------------------|-----------------------------------------|-----------------------------|
| -----                        | -----                                   | -----                       |
| RENT AND ROYALTY EXPENSES    | 118,918.                                |                             |
| * PROPERTY TAXES             |                                         | 21,217.                     |
| * INSURANCE                  |                                         | 8,129.                      |
| * APPRAISAL FEES             |                                         | 89,572.                     |
| ROYALTY EXPENSES -           |                                         |                             |
| * PRODUCTION TAXES           | 5,247.                                  | 5,247.                      |
| * RECORDING FEES             | 156.                                    | 156.                        |
| * LEASE OPERATING            | 15,587.                                 | 15,587.                     |
| * AVT CONSULTANT FEES        | 428.                                    | 428.                        |
| * AD VALOREM TAXES           | 10,820.                                 | 10,820.                     |
| OTHER INVESTMENT FEES        | 87.                                     | 87.                         |
| NON RENTAL PROPERTY EXPENSES | 150.                                    | 150.                        |
| PARTNERSHIP EXPENSES         |                                         | 19,600.                     |

## TOTALS

|          |          |
|----------|----------|
| -----    | -----    |
| 151,393. | 170,993. |
| =====    | =====    |

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

| DESCRIPTION                       | AMOUNT   |
|-----------------------------------|----------|
| -----                             | -----    |
| Y/E SALES ADJUSTMENT - 2014       | 17,958.  |
| NET ROUNDING                      | 12.      |
| PARTNERSHIP ADJUSTMENT            | 628,197. |
| GRANT RECOVERY                    | 50,000.  |
| PURCHASED ACCRUED INTEREST - 2013 | 3.       |
|                                   | -----    |
| TOTAL                             | 696,170. |
|                                   | =====    |

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES  
=====

| DESCRIPTION<br>-----              | AMOUNT<br>----- |
|-----------------------------------|-----------------|
| Y/E SALES ADJUSTMENT - 2013       | 2,625.          |
| BASIS ADJUSTMENT - SALES          | 1,518.          |
| PURCHASED ACCRUED INTEREST - 2014 | 2,570.          |
| CTF TIMING ADJUSTMENT             | 107,721.        |
| ROC BASIS ADJUSTMENT              | 2,993.          |
| NET FACTORING ADJUSTMENT          | 1,688.          |
|                                   | -----           |
| TOTAL                             | 119,115.        |
|                                   | =====           |

75-6331832

JSA  
4F0970 1 000

GAINS AND LOSSES FROM PASS-THRU ENTITIES  
=====

NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS  
AND OTHER FIDUCIARIES

|                    |            |
|--------------------|------------|
| COMMON TRUST FUNDS | -51,297.00 |
|--------------------|------------|

-----

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

-----  
-51,297.00

=====

NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS  
AND OTHER FIDUCIARIES

|                    |            |
|--------------------|------------|
| COMMON TRUST FUNDS | -13,801.00 |
|--------------------|------------|

PARTNERSHIPS, TRUSTS, S CORPORATIONS

-628,197.00

-----

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

-----  
-641,998.00

=====

=====

RECIPIENT NAME:

ROBERT FOX - BANK OF AMERICA, N.A.

ADDRESS:

150 N COLLEGE ST, FL 26

CHARLOTTE, NC 28255

RECIPIENT'S PHONE NUMBER: 980-639-9845

E-MAIL ADDRESS: N/A

FORM, INFORMATION AND MATERIALS:

GRANT GUIDELINES AND APPLICATION FORM ARE AVAILABLE ONLINE AT

[www.bankofamerica.com/philanthropic/grantmaking.go](http://www.bankofamerica.com/philanthropic/grantmaking.go)

SUBMISSION DEADLINES:

MARCH 1

RESTRICTIONS OR LIMITATIONS ON AWARDS:

RESTRICTED TO QUALIFIED IRC SECTION 501(c)(3) ORGANIZATIONS LOCATED IN  
THE STATES OF ARKANSAS AND TEXAS (PRIMARILY IN THE DALLAS AREA)

RECIPIENT NAME:

UNIVERSITY OF ARKANSAS FOUNDATION, INC.  
COLLEGE OF ARTS & SCIENCES

ADDRESS:

535 RESEARCH CTR BLVD, STE 120  
FAYETTEVILLE, AR 72701

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

ENDOW STURGIS INTERNATIONAL SCHOLARS PROGRAM

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 155,000.

RECIPIENT NAME:

THE ARKANSAS SYMPHONY ORCHESTRA  
SOCIETY, INC.

ADDRESS:

2417 N TYLER ST  
LITTLE ROCK, AR 72217

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

SYMPHONY BRINGS MUSIC TO MAIN STREET

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:

UNIVERSITY OF TEXAS AT DALLAS

ADDRESS:

800 W CAMPBELL RD, HH30  
RICHARDSON, TX 75080

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

ACADEMIC BRIDGE PROGRAM

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 25,000.

RECIPIENT NAME:

ARKANSAS ZOOLOGICAL FOUNDATION, INC.

ADDRESS:

1 JONESBORO DR

LITTLE ROCK, AR 72205-5403

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

PURCHASE TRAIN RIDE FOR LITTLE ROCK ZOO

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:

PHILANTHROPY SOUTHWEST

ADDRESS:

624 N. GOOD - LATIMER EXPY

DALLAS, TX 75204

RELATIONSHIP:

NA

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 3,000.

RECIPIENT NAME:

UNIVERSITY OF ARKANSAS LITTLE ROCK

ENDOWMENT NANOTECHNOLOGY CENTER

ADDRESS:

2801 S UNIVERSITY AVE.

LITTLE ROCK, AR 72204

RELATIONSHIP:

NA

PURPOSE OF GRANT:

UNRESTRICTED GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 150,000.

RECIPIENT NAME:  
PI BETA PHI FOUNDATION  
ADDRESS:  
2801 S UNIVERSITY AVE.  
LITTLE ROCK, AR 72204  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
UNRESTRICTED GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 35,000.

RECIPIENT NAME:  
OUR HOUSE, INC  
ADDRESS:  
P.O BOX 34155  
LITTLE ROCK, AR 72203  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
LEARNING CENTER EXPANSION  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 30,000.

RECIPIENT NAME:  
EASTER SEALS ARKANSAS  
ADDRESS:  
3920 WOODID HEIGHTS ROAD  
LITTLE ROCK, AR 72212  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
CHILDREN'S REHABILITATION BATHROOM RENOVATION  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
YOUTH HOME, INC.  
ADDRESS:  
20400 COLONEL GLENN  
LITTLE ROCK, AR 72201  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
UNRESTRICTED GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
ARKANSAS ARTS CENTER FOUNDATION  
ADDRESS:  
P.O BOX 2137  
LITTLE ROCK, AR 72203  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
ARTMOBILE AND CHILDREN'S THEATRE ON TOUR  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 25,000.

RECIPIENT NAME:  
MINISTRY CENTER  
ADDRESS:  
766 HARKRIDER  
CONWAY, AR 72032  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
CRISIS HOUSING FOR FAULKNER COUNTY  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 60,000.

RECIPIENT NAME:  
CAMP SUMMIT  
ADDRESS:  
17210 CAMPBELL ROAD  
DALLAS, TX 75252  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
OPENING GATES CAPITAL CAMPAIGN  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
ENCORE PARK DALLAS  
ADDRESS:  
1835 YOUNG STREET  
DALLAS, TX 75201  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
PARK RENOVATION  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
CAPTAIN HOPE'S KIDS  
ADDRESS:  
10480 SHADY TRAIL  
DALLAS, TX 75220  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
CAPTAIN HOPES'S CLOSET  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 15,000.

=====

RECIPIENT NAME:  
ARKANSAS FOOD BANK NETWORK, INC  
ADDRESS:  
8121 DISTRIBUTION DRIVE  
LITTLE ROCK, AR 72209  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
FEEDING FUTURE SCHOOL PANTRIES  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
ARKANSAS MISSION OF MERCY, INC.  
C/O ARKANSAS STATE DENTAL ASSOCIATION  
ADDRESS:  
7480 HIGHWAY 107  
SHERWOOD, AR 72120  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
FREE DENTAL CLINIC EVENT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 40,000.

RECIPIENT NAME:  
BAPTIST HEALTH FOUNDATION  
ADDRESS:  
9601 INTERSTATE 630  
LITTLE ROCK, AR 72205  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
ADOLESCENT WEIGHT LOSS PROGRAM  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 30,000.

RECIPIENT NAME:  
WALTON ARTS CENTER COUNCIL, INC  
ADDRESS:  
P.O BOX 3547  
FAYETTEVILLE, AR 72702  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
DIGGING UP AK STATE WIDE TOUR  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
AMY'S FRIENDS  
NEW FRIENDS NEW LIFE  
ADDRESS:  
P.O BOX 192378  
DALLAS, TX 75219  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
GENERAL OPERATING SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:  
BIG BROTHERS BIG SISTERS LONE STAR  
ADDRESS:  
450 E. JOHN CARPENTER FREEWAY  
IRVING, TX 75062-3955  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
COMMUNITY - BASED MENTORING PROGRAM  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 20,000.

=====

RECIPIENT NAME:  
CHILDCARE GROUP  
ADDRESS:  
1420 WEST MOCKINGBIRD LANE  
DALLAS, TX 75247  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
STEM EDUCATION PROGRAM  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:  
DALLAS LIGHTHOUSE FOR THE BLIND  
ADDRESS:  
4306 CAPITOL AVENUE  
, TX 75204  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
SERVICE FOR SENIORS  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 6,000.

RECIPIENT NAME:  
BOYS & GIRLS CLUBS OF GREATER DALLAS  
ADDRESS:  
4816 WORTH STREET  
DALLAS, TX 75246  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
PURCHASE 2 USED PASSENGER VANS  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 30,000.

RECIPIENT NAME:  
BRIGHTER TOMORROWS, INC  
ADDRESS:  
P.O BOX 532151  
GRAND PRAIRIE, TX 75053  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
EMERGENCY SHELTER PROGRAM  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
DALLAS AREA HABITAT FOR HUMANITY  
ADDRESS:  
2800 NORTH HAMPTON RD  
DALLAS, TX 75212  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
KINDNESS PROGRAM  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:  
DALLAS SERVICES  
ADDRESS:  
4242 OFFICE PARKWAY  
DALLAS, TX 75204  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
VISION FOR CHILDREN  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 25,000.

RECIPIENT NAME:

EDUCATION IS FREEDOM FOUNDATION

ADDRESS:

1111 W. MOCKINGBIRD LANE  
DALLAS, TX 75247

RELATIONSHIP:

NA

PURPOSE OF GRANT:

CAREER CONNECTION CENTER

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:

FAMILY COMPASS

ADDRESS:

4210 JUNIUS STREET  
DALLAS, TX 75246

RELATIONSHIP:

NA

PURPOSE OF GRANT:

FAMILIES TOGETHER PROGRAM

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:

FOUNDATION FOR THE EDUCATION  
OF YOUNG WOMEN

ADDRESS:

2804 SWISS AVENUE  
DALLAS, TX 75204

RELATIONSHIP:

NA

PURPOSE OF GRANT:

ROAD TO COLLEGE PROGRAM

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
HEALING HANDS MINISTRIES, INC  
ADDRESS:  
P.O BOX 741524  
DALLAS, TX 75347-1524  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
MEDICAL & DENTAL FOR CHILDREN  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:  
INTER FAITH HOUSING COALITION  
ADDRESS:  
P.O BOX 720206  
DALLAS, TX 75372  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
CHILDREN AND YOUTH CENTER  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:  
IRVING HEALTHCARE FOUNDATION  
ADDRESS:  
1901 N MACARTHUR BLVD  
IRVING, TX 75061  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
EMERGENCY. DEPT. EXPANSION PROJECT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
JUBILEE PARK & COMMUNITY CENTER  
CORPORATION  
ADDRESS:  
P.O BOX 710759  
DALLAS, TX 75371  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
CHILDREN'S EDUCATION INITIATIVE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
JUNIOR PLAYERS GUILD  
ADDRESS:  
4054 MCKINNEY AVENUE  
DALLAS, TX 75204  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
GENERAL OPERATIONS  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
NEW BEGINNING CENTER, INC  
ADDRESS:  
218 N. TENTH STREET  
GARLAND, TX 75040  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
GENERAL OPERATING SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:  
NEXUS RECOVERY CENTER INCORPORATED  
ADDRESS:  
8733 LA PRADA DRIVE  
DALLAS, TX 75228  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
ADULT WOMEN TREATMENT PROGRAM  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 30,000.

RECIPIENT NAME:  
NORTH TEXAS FOOD BANK  
ADDRESS:  
4500 S. COCKRELL HILL ROAD  
DALLAS, TX 75236  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
GENERAL OPERATING SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 30,000.

RECIPIENT NAME:  
OPEN ARMS, INC.  
ADDRESS:  
P.O BOX 35868  
DALLAS, TX 75235  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
CHILD CARE PROGRAM  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:  
PROJECT TRANSFORMATION  
ADDRESS:  
547 E. JEFFERSON BLVD  
DALLAS, TX 75203  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
TRAINING CENTER RENOVATION PROJECT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 25,000.

RECIPIENT NAME:  
READING PARTNERS  
ADDRESS:  
2910 SWISS AVENUE  
DALLAS, TX 75204  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
LITERACY INTERVENTION SERVICE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:  
AUSTIN STREET CENTRE  
ADDRESS:  
P.O BOX 710729  
DALLAS, TX 75371  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
UNRESTRICTED GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 15,000.

RECIPIENT NAME:  
THE CONCILIO  
ADDRESS:  
400 S ZANG BLVD.  
DALLAS, TX 75208  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
SUPPORT PARENTS FOR STUDENT EXCELLENCE  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:  
WINGS OF HOPE EQUITHERAPY  
ADDRESS:  
P.O BOX 445  
BURLESON, TX 76097  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
DISABILITIES PROGRAM SCHOLARSHIP FUND  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
CRYSTAL BRIDGES MUSEUM OF  
AMERICAN ART, INC  
ADDRESS:  
600 MUSEUM WAY  
BENTONVILLE, AR 72712-4947  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
EXHIBITIONS PROGRAM  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
ST. MARK'S EPISCOPAL CHURCH  
ADDRESS:  
516 SOUTH O'CONNOR ROAD  
IRVING, TX 75060  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
UNRESTRICTED GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 19,443.

RECIPIENT NAME:  
CARTI FOUNDATION  
ADDRESS:  
P.O BOX 55011  
LITTLE ROCK, TX 72215  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
CAPITAL CAMPAIGN CARTI CANCER CENTER  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 50,000.

RECIPIENT NAME:  
LYON COLLEGE  
ADDRESS:  
P.O BOX 2317  
BATES VILLE, TX 72501  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
NEW RESIDENCE HALL  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 100,000.

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RECIPIENT NAME:  
HENDRIX COLLEGE  
ADDRESS:  
1600 WASHINGTON AVENUE  
CONWAY, AR 72032  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
WELNESS AND ATHLETICS FACILITIES  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 100,000.

RECIPIENT NAME:  
YOUTH VILLAGE RESOURCES OF DALLAS, INC  
ADDRESS:  
6333 E MOCKINGBIRD LANE,  
DALLAS, TX 75214-2692  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
GENERAL OPERATING SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 10,000.

RECIPIENT NAME:  
CITY OF LITTLE ROCK  
ADDRESS:  
500 WEST MARKHAM  
LITTLE ROCK, TX 72201  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
STONE BRIDGE AT CLINTOLIBRARY CENTER AND P  
FOUNDATION STATUS OF RECIPIENT:  
NONE  
AMOUNT OF GRANT PAID ..... 150,000.

RECIPIENT NAME:  
ARKANSAS CHILDREN'S HOSPITAL FOUNDATION  
ADDRESS:  
1 CHILDREN'S WAY  
LITTLE ROCK, TX 72202  
RELATIONSHIP:  
NA  
PURPOSE OF GRANT:  
SOUTH WING EXPANSION  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 100,000.

RECIPIENT NAME:  
FOUNDATION FOR THE CALLIER CENTER AND  
COMMUNICATION DISORDERS  
ADDRESS:  
1966 INWOOD RD  
DALLAS, TX 75204  
RELATIONSHIP:  
N/A  
PURPOSE OF GRANT:  
SUPPORT PEDIATRIC HEARING ADI PROJECT  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 25,000.

TOTAL GRANTS PAID: 1,983,443.  
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## RENT AND ROYALTY SUMMARY

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| PROPERTY             | TOTAL<br>INCOME | DEPLETION/<br>DEPRECIATION | OTHER<br>EXPENSES | ALLOWABLE<br>NET<br>INCOME |
|----------------------|-----------------|----------------------------|-------------------|----------------------------|
| -----                | -----           | -----                      | -----             | -----                      |
| 38 ACS PINE BLUFF AR |                 |                            | 747.              | -747.                      |
| 274.02 ACS TRACT 2 T | 1,165.          |                            | 3,088.            | -1,923.                    |
| 609.70 ACS, TRACT 3  | 2,591.          |                            | 6,547.            | -3,956.                    |
| 320 ACS TRACT 4 TWP  | 1,360.          |                            | 3,554.            | -2,194.                    |
| 80 ACS TRACT 5 TWP 8 | 340.            |                            | 980.              | -640.                      |
| 225.84 ACS TRACT 8 T | 957.            |                            | 2,486.            | -1,529.                    |
| 430 ACS TRACT 10 TWP | 1,828.          |                            | 4,227.            | -2,399.                    |
| 240 ACS TRACT 11 TWP | 850.            |                            | 2,550.            | -1,700.                    |
| 340 ACS TRACT 12 TWP | 1,190.          |                            | 3,549.            | -2,359.                    |
| 360 ACS TRACT 13 TWP | 1,275.          |                            | 3,125.            | -1,850.                    |
| 320 ACS TRACT 14 TWP | 1,360.          |                            | 4,069.            | -2,709.                    |
| 195 ACS TRACT 15 TWP | 149.            |                            | 2,093.            | -1,944.                    |
| 280 ACS TRACT 16 TWP |                 |                            | 3,023.            | -3,023.                    |
| 160 ACS TRACT 17 TWP | 595.            |                            | 1,782.            | -1,187.                    |
| 160 ACS TRACT 18 TWP | 595.            |                            | 1,786.            | -1,191.                    |
| 140 ACS TRACT 21 TWP | 595.            |                            | 1,519.            | -924.                      |
| 180 ACS TRACT 22 TWP | 765.            |                            | 2,017.            | -1,252.                    |
| 320 ACS TRACT 23 TWP | 1,360.          |                            | 3,221.            | -1,861.                    |
| 100 ACS TRACT 25 TWP | 425.            |                            | 1,066.            | -641.                      |
| TRACT 29, 108 ACS DA |                 |                            | 1,253.            | -1,253.                    |
| TRACT 30, 285 ACS DA | 1,211.          |                            | 3,111.            | -1,900.                    |
| TRACT 32, 110 ACS DA | 468.            |                            | 1,252.            | -784.                      |
| TRACT 33, 100 ACS DA | 425.            |                            | 1,043.            | -618.                      |
| TRACT 34, 160 ACS DA | 680.            |                            | 1,764.            | -1,084.                    |
| TRACT 35, 1608 ACS D | 4,263.          |                            | 9,956.            | -5,693.                    |
| TRACT 36, 197.35 ACS | 839.            |                            | 2,207.            | -1,368.                    |
| TRACT 37, 208.80 ACS | 701.            |                            | 2,140.            | -1,439.                    |
| TRACT 38,320 ACS DAL | 1,360.          |                            | 3,440.            | -2,080.                    |
| TRACT 39,240 ACS DAL | 1,020.          |                            | 2,358.            | -1,338.                    |
| TRACT 40, 846.50 ACS | 4,023.          |                            | 9,211.            | -5,188.                    |
| TRACT 41, 320 ACS DA | 1,360.          |                            | 3,303.            | -1,943.                    |
| TRACT 42, 340 ACS DA | 1,445.          |                            | 3,575.            | -2,130.                    |
| TRACT 43, 1360 ACS D | 5,079.          |                            | 13,609.           | -8,530.                    |
| TRACT 44, 100 ACS DA |                 |                            | 800.              | -800.                      |
| TRACT 46, 580 ACS GR | 2,040.          |                            | 6,229.            | -4,189.                    |
| TRACT 47,120 ACS HOT | 510.            |                            | 1,438.            | -928.                      |
| TRACT 48, 64 ACS QUA | 272.            |                            | 800.              | -528.                      |
| TOTALS               | 43,096.         |                            | 118,918.          | -75,822.                   |
|                      | =====           | =====                      | =====             | =====                      |