See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
Family Care Foundation
1373 Marron Valley Road
Dulzura, CA 91917

Part I: Summary
1. Briefly describe the organization’s mission or most significant activities: **Family Care Foundation’s purpose is to enhance the quality of life for all members of the community, especially those who are poor, suffering or disadvantaged, and to provide knowledge and character building education to help strengthen families and children.**

2. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3. Number of voting members of the governing body (Part VI, line 1a).

4. Number of independent voting members of the governing body (Part VI, line 1b).

5. Total number of individuals employed in calendar year 2011 (Part V, line 2a).

6. Total number of volunteers (estimate if necessary).

7a. Total unrelated business revenue from Part VIII, column (C), line 12.

7b. Net unrelated business taxable income from Form 990-T, line 34.

Part II: Expenses
8. Contributions and grants (Part VIII, line 1h).

9. Program service revenue (Part VIII, line 2g).

10. Investment income (Part VIII, column (A), lines 3, 4, and 7d).

11. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e).

12. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).

13. Grants and similar amounts paid (Part IX, column (A), lines 1-3).

14. Benefits paid to or for members (Part IX, column (A), line 4).

15. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10).

16a. Professional fundraising fees (Part IX, column (A), line 11e).

17. Other expenses (Part IX, column (A), lines 11a-11d, 11l, 24e).

18. Total expenses. Add lines 13-17 (must equal Part VIII, column (A), line 25).

19. Revenue less expenses Subtract line 18 from line 12.

Part III: Signature Block
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 officer) based on all information of which preparer has any knowledge.

Sign Here

Lawrence Corley
Type or print name and title
Ex. Director

Pete Coulston, C.P.A., Pete Coulston, C.P.A.
Preparer Signature
Preparer Signature

Date
11/10/12

Check [X] if self-employed
PTIN P00328453

Paid Preparer Use Only

Pete Coulston, CPA
Firm’s name

P.O. Box 471
Firm’s address
Cardiff, CA 92007

Phone no. (760) 943-0874

May the IRS discuss this return with the preparer shown above? (see instructions)

[ ] Yes [ ] No

BAA For Paperwork Reduction Act Notice, see the separate instructions.
**Part III | Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III: X

1. Briefly describe the organization's mission:
   
   See Schedule O

2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
   - Yes X No
   
   If 'Yes,' describe these new services on Schedule O.

3. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
   - Yes X No
   
   If 'Yes,' describe these changes on Schedule O.

4. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

<table>
<thead>
<tr>
<th>Code</th>
<th>Expenses</th>
<th>Revenue</th>
<th>Schedule O</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a</td>
<td>$1,437,317</td>
<td></td>
<td>See Schedule O</td>
</tr>
<tr>
<td>4b</td>
<td>$263,865</td>
<td></td>
<td>See Schedule O</td>
</tr>
<tr>
<td>4c</td>
<td>$205,237</td>
<td></td>
<td>See Schedule O</td>
</tr>
</tbody>
</table>

4d. Other program services (Describe in Schedule O) See Schedule O

<table>
<thead>
<tr>
<th>Expenses</th>
<th>Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>$22,294</td>
<td></td>
</tr>
</tbody>
</table>

4e. Total program service expenses 1,928,713.
<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>X</td>
</tr>
<tr>
<td>2</td>
<td>X</td>
</tr>
<tr>
<td>3</td>
<td>X</td>
</tr>
<tr>
<td>4</td>
<td>X</td>
</tr>
<tr>
<td>5</td>
<td>X</td>
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<td>6</td>
<td>X</td>
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<td>7</td>
<td>X</td>
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<td>8</td>
<td>X</td>
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<td>9</td>
<td>X</td>
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<tr>
<td>10</td>
<td>X</td>
</tr>
<tr>
<td>11a</td>
<td>X</td>
</tr>
<tr>
<td>11b</td>
<td>X</td>
</tr>
<tr>
<td>11c</td>
<td>X</td>
</tr>
<tr>
<td>11d</td>
<td>X</td>
</tr>
<tr>
<td>11e</td>
<td>X</td>
</tr>
<tr>
<td>11f</td>
<td>X</td>
</tr>
<tr>
<td>12a</td>
<td>X</td>
</tr>
<tr>
<td>12b</td>
<td>X</td>
</tr>
<tr>
<td>13</td>
<td>X</td>
</tr>
<tr>
<td>14a</td>
<td>X</td>
</tr>
<tr>
<td>14b</td>
<td>X</td>
</tr>
<tr>
<td>15</td>
<td>X</td>
</tr>
<tr>
<td>16</td>
<td>X</td>
</tr>
<tr>
<td>17</td>
<td>X</td>
</tr>
<tr>
<td>18</td>
<td>X</td>
</tr>
<tr>
<td>19</td>
<td>X</td>
</tr>
<tr>
<td>20a</td>
<td>X</td>
</tr>
<tr>
<td>20b</td>
<td>X</td>
</tr>
</tbody>
</table>
21. Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If Yes, complete Schedule I, Parts I and II

22. Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If Yes, complete Schedule I, Parts I and III

23. Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J

24a. Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25

b. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

c. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d. Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?

25a. Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I

b. Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part II

26. Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization’s tax year? If 'Yes,' complete Schedule L, Part II

27. Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III

28. Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):

a. A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV

b. A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV

c. An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV

29. Did the organization receive more than $25,000 in non-cash contributions? If 'Yes,' complete Schedule M

30. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M

31. Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I

32. Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II

33. Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I

34. Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1

35a. Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2

36. Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2

37. Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI

38. Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O
### Form 990 (2011) Family Care Foundation

**Part IV** Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096. Enter &quot;0&quot; if applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Enter the number of Forms W-2G included in line 1a. Enter &quot;0&quot; if applicable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b If 'Yes,' enter the name of the foreign country</td>
<td>Denmark</td>
<td></td>
</tr>
<tr>
<td>See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 7 Organizations that may receive deductible contributions under section 170(c).

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>d If 'Yes,' indicate the number of Forms 8282 filed during the year</td>
<td>7d</td>
<td></td>
</tr>
<tr>
<td>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

### 8 Sponsoring organizations maintaining donor advised funds and section 509(e)(3) supporting organizations.

Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

### 9 Sponsoring organizations maintaining donor advised funds.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Did the organization make any taxable distributions under section 4966?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Did the organization make a distribution to a donor, donor advisor, or related person?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 10 Section 501(c)(7) organizations.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Initiation fees and capital contributions included on Part VIII, line 12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td>10b</td>
<td></td>
</tr>
</tbody>
</table>

### 11 Section 501(c)(12) organizations.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Gross income from members or shareholders</td>
<td>11a</td>
<td></td>
</tr>
<tr>
<td>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)</td>
<td>11b</td>
<td></td>
</tr>
</tbody>
</table>

### 12a Section 4947(a)(1) non-exempt charitable trusts.

Is the organization filing Form 990 in lieu of Form 1041? If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.

### 12b Section 4947(a)(1) non-exempt charitable trusts.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a Is the organization licensed to issue qualified health plans in more than one state?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Note. See the instructions for additional information the organization must report on Schedule O</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans</td>
<td>13b</td>
<td></td>
</tr>
<tr>
<td>c Enter the amount of reserves on hand</td>
<td>13c</td>
<td></td>
</tr>
<tr>
<td>14a Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O</td>
<td>14b</td>
<td></td>
</tr>
</tbody>
</table>
Part VI Governance, Management and Disclosure
For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year
   If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O
   1a Yes No
   1b Enter the number of voting members included in line 1a, above, who are independent
   1b Yes No

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? See Schedule O
   2 X

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?
   3 X

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
   4 X

5 Did the organization become aware during the year of a significant diversion of the organization's assets?
   5 X

6 Did the organization have members or stockholders?
   6 X

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?
   7a X

7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?
   7b X

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following
   a The governing body?
   b Each committee with authority to act on behalf of the governing body?
   8a X
   8b X

Section B. Policies
(This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates?
   10a X

10b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?
   10b X

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
   11a X

11b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O
   11b X

12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13
   12a X

12b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
   12b X

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done
   12c X

13 Did the organization have a written whistleblower policy?
   13 X

14 Did the organization have a written document retention and destruction policy?
   14 X

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?
   a The organization's CEO, Executive Director, or top management official
   15a X
   b Other officers of key employees of the organization
   If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)
   15b X

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
   16a X

16b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?
   16b X

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed
   None

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
   X Own website
   X Another's website
   X Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
   See Schedule O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
   Lawrence Corley 1373 Marron Valley Road, Dulzura, CA 91917 619-468-3191

BAA TEEA0105L 01/23/12 Form 990 (2011)
### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons.

- Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (describe hours for related organizations if other than Schedule O)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Lawrence Corley – Executive Dir</td>
<td>50</td>
<td></td>
<td>$50,000</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>(2) Grant Montgomery – President</td>
<td>50 X X</td>
<td></td>
<td>$21,000</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>(3) Dr. Christine Mlot – Sec/Treasurer</td>
<td>15 X X</td>
<td></td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>(4) Marianne Mullen – Director</td>
<td>5 X</td>
<td></td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>(5) Ken Kelly – Director</td>
<td>10 X</td>
<td></td>
<td>0</td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
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<tr>
<td>(8)</td>
<td></td>
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<tr>
<td>(9)</td>
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<td>(14)</td>
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</tr>
</tbody>
</table>
### Part VII: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from the organization and related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(15)</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>(16)</td>
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<td>(18)</td>
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<td>(24)</td>
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</tr>
<tr>
<td>(25)</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

1 b Sub-total: ➤ $1,000
1 c Total from continuation sheets to Part VII, Section A: ➤ 0
1 d Total (add lines 1b and 1c): ➤ 0

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization: ➤ 0

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual: X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If "Yes" complete Schedule J for such individual: X

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person: X

### Section B: Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization: ➤ 0
### Part VIII Statement of Revenue

<table>
<thead>
<tr>
<th>1a</th>
<th>Federated campaigns</th>
<th>1b</th>
<th>1c</th>
<th>1d</th>
<th>1e</th>
<th>1f</th>
<th>1g</th>
<th>1h</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2,739,209.</td>
</tr>
<tr>
<td>1b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td></td>
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<td>1d</td>
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<tr>
<td>1e</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td>All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2,739,209.</td>
<td></td>
</tr>
<tr>
<td>1g</td>
<td>Noncash contributions included in lines 1a-1f</td>
<td>$86,342.</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
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</table>

**Business Code**

2a

<table>
<thead>
<tr>
<th>2a</th>
<th>2b</th>
<th>2c</th>
<th>2d</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>2b</td>
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<td>2c</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2d</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total. Add lines 2a-2f**

3 Investment income (including dividends, interest and other similar amounts)

<table>
<thead>
<tr>
<th>3a</th>
<th>3b</th>
<th>3c</th>
<th>3d</th>
</tr>
</thead>
<tbody>
<tr>
<td>3a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>3c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3d</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Total. Add lines 2a-2f**

4 Income from investment of tax-exempt bond proceeds

<table>
<thead>
<tr>
<th>4a</th>
<th>4b</th>
<th>4c</th>
<th>4d</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a</td>
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</tr>
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<td>4c</td>
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<tr>
<td>4d</td>
<td></td>
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</table>

**Total. Add lines 2a-2f**

5 Royalties

<table>
<thead>
<tr>
<th>5a</th>
<th>5b</th>
<th>5c</th>
<th>5d</th>
</tr>
</thead>
<tbody>
<tr>
<td>5a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5b</td>
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<tr>
<td>5d</td>
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</tbody>
</table>

6a Gross rents

<table>
<thead>
<tr>
<th>6a</th>
<th>6b</th>
<th>6c</th>
<th>6d</th>
</tr>
</thead>
<tbody>
<tr>
<td>6a</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>6b</td>
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<td>6c</td>
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<tr>
<td>6d</td>
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<td></td>
</tr>
</tbody>
</table>

7a Gross amount from sales of assets other than inventory

<table>
<thead>
<tr>
<th>7a</th>
<th>7b</th>
<th>7c</th>
<th>7d</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
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<tr>
<td>7d</td>
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</tr>
</tbody>
</table>

8a Gross income from fundraising events (not including contributions reported on line 1c).

<table>
<thead>
<tr>
<th>8a</th>
<th>8b</th>
<th>8c</th>
</tr>
</thead>
<tbody>
<tr>
<td>8a</td>
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<td>8b</td>
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<td></td>
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<tr>
<td>8c</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9a Gross income from gaming activities

<table>
<thead>
<tr>
<th>9a</th>
<th>9b</th>
<th>9c</th>
</tr>
</thead>
<tbody>
<tr>
<td>9a</td>
<td></td>
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<tr>
<td>9b</td>
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<td></td>
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<tr>
<td>9c</td>
<td></td>
<td></td>
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</tbody>
</table>

10a Gross sales of inventory, less returns and allowances

<table>
<thead>
<tr>
<th>10a</th>
<th>10b</th>
<th>10c</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
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<td>10b</td>
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<tr>
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</table>

**Total. Add lines 11a-11d**

<table>
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<th>11d</th>
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<tbody>
<tr>
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<td></td>
<td></td>
</tr>
<tr>
<td>11b</td>
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<td></td>
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<tr>
<td>11d</td>
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</table>

**Total revenue. See instructions**

<table>
<thead>
<tr>
<th>12</th>
<th>13</th>
<th>14</th>
<th>15</th>
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<tbody>
<tr>
<td>12</td>
<td></td>
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**Miscellaneous Revenue**

<table>
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<tr>
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<th>16c</th>
<th>16d</th>
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</thead>
<tbody>
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<td>16a</td>
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<td></td>
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<tr>
<td>16b</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>16c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16d</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

**Total. Add lines 11a-11d**

<table>
<thead>
<tr>
<th>17a</th>
<th>17b</th>
<th>17c</th>
<th>17d</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>17b</td>
<td></td>
<td></td>
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<tr>
<td>17c</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>17d</td>
<td></td>
<td></td>
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</tbody>
</table>

**Total revenue. See instructions**

<table>
<thead>
<tr>
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<th>18b</th>
<th>18c</th>
<th>18d</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>18b</td>
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<td>18c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18d</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Part IX: Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX.

<table>
<thead>
<tr>
<th></th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Grants and other assistance to governments and organizations in the United States See Part IV, line 21</td>
<td>2,325</td>
<td>2,325</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Grants and other assistance to individuals in the United States See Part IV, line 22</td>
<td>9,798</td>
<td>9,798</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16</td>
<td>1,231,003</td>
<td>1,231,003</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Compensation of current officers, directors, trustees, and key employees</td>
<td>51,000</td>
<td>26,872</td>
<td>11,434</td>
</tr>
<tr>
<td>6</td>
<td>Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>7</td>
<td>Other salaries and wages</td>
<td>236,570</td>
<td>124,637</td>
<td>53,053</td>
</tr>
<tr>
<td>8</td>
<td>Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other employee benefits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Payroll taxes</td>
<td>27,447</td>
<td>14,461</td>
<td>6,155</td>
</tr>
<tr>
<td>11</td>
<td>Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Legal</td>
<td>3,400</td>
<td>3,400</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Accounting</td>
<td>17,957</td>
<td>17,957</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Lobbying</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Professional fundraising services See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Investment management fees</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Advertising and promotion</td>
<td>2,231</td>
<td>558</td>
<td>1,673</td>
</tr>
<tr>
<td>13</td>
<td>Office expenses</td>
<td>5,739</td>
<td>3,023</td>
<td>1,287</td>
</tr>
<tr>
<td>14</td>
<td>Information technology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Royalties</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Occupancy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Travel</td>
<td>3,278</td>
<td>1,727</td>
<td>735</td>
</tr>
<tr>
<td>18</td>
<td>Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>7,109</td>
<td>3,745</td>
<td>1,594</td>
</tr>
<tr>
<td>19</td>
<td>Conferences, conventions, and meetings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Interest</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Depreciation, depletion, and amortization</td>
<td>34,722</td>
<td>33,064</td>
<td>786</td>
</tr>
<tr>
<td>23</td>
<td>Insurance</td>
<td>6,109</td>
<td>4,812</td>
<td>616</td>
</tr>
<tr>
<td>24</td>
<td>Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>F.R. Car Search Engine Fees</td>
<td>1,150,236</td>
<td>287,559</td>
<td>862,677</td>
</tr>
<tr>
<td>b</td>
<td>F.R. Towing/Auction/Fees/Repair</td>
<td>312,034</td>
<td></td>
<td>312,034</td>
</tr>
<tr>
<td>c</td>
<td>Auto Expense</td>
<td>65,321</td>
<td>34,415</td>
<td>14,648</td>
</tr>
<tr>
<td>d</td>
<td>Health Insurance</td>
<td>60,272</td>
<td>31,755</td>
<td>13,516</td>
</tr>
<tr>
<td>e</td>
<td>All other expenses</td>
<td>162,724</td>
<td>118,959</td>
<td>20,741</td>
</tr>
<tr>
<td>25</td>
<td>Total functional expenses. Add lines 1 through 24e</td>
<td>3,389,275</td>
<td>1,928,713</td>
<td>145,922</td>
</tr>
<tr>
<td>26</td>
<td>Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here □ if following SOP 98-2 (ASC 958-720)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Part X</strong> Balance Sheet</td>
<td>(A) Beginning of year</td>
<td>(B) End of year</td>
<td></td>
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<tr>
<td>--------------------------</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>1 Cash – non-interest-bearing</td>
<td>1,400,711.</td>
<td>1,291,641.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Savings and temporary cash investments</td>
<td>2</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Pledges and grants receivable, net</td>
<td>3</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)</td>
<td>6</td>
<td></td>
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<tr>
<td>7 Notes and loans receivable, net</td>
<td>1,500.</td>
<td>1,500.</td>
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<tr>
<td>8 Inventories for sale or use</td>
<td>28,321.</td>
<td>35,000.</td>
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<tr>
<td>9 Prepaid expenses and deferred charges</td>
<td>21,336.</td>
<td>10,446.</td>
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<tr>
<td>10a Land, buildings, and equipment cost or other basis</td>
<td>607,680.</td>
<td>10b 177,744.</td>
<td>412,254.</td>
<td>10c 429,936.</td>
</tr>
<tr>
<td>b Less: accumulated depreciation</td>
<td></td>
<td></td>
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<tr>
<td>11 Investments – publicly traded securities</td>
<td>756,026.</td>
<td>600,253.</td>
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<tr>
<td>12 Investments – other securities See Part IV, line 11</td>
<td>12</td>
<td></td>
<td></td>
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<tr>
<td>13 Investments – program-related See Part IV, line 11</td>
<td>13</td>
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<tr>
<td>14 Intangible assets</td>
<td>14</td>
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<tr>
<td>15 Other assets. See Part IV, line 11</td>
<td>15</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>2,958,462.</td>
<td>2,530,067.</td>
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<tr>
<td>17 Accounts payable and accrued expenses</td>
<td>67,718.</td>
<td>31,797.</td>
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</tr>
<tr>
<td>18 Grants payable</td>
<td>18</td>
<td></td>
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<tr>
<td>19 Deferred revenue</td>
<td>500.</td>
<td>19</td>
<td></td>
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</tr>
<tr>
<td>20 Tax-exempt bond liabilities</td>
<td>20</td>
<td></td>
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<tr>
<td>21 Escrow or custodial account liability Complete Part IV of Schedule D</td>
<td>21</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L</td>
<td>22</td>
<td></td>
<td></td>
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<tr>
<td>23 Secured mortgages and notes payable to unrelated third parties</td>
<td>23</td>
<td></td>
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<tr>
<td>24 Unsecured notes and loans payable to unrelated third parties</td>
<td>24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D</td>
<td>474,484.</td>
<td>25</td>
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<tr>
<td>26 Total liabilities. Add lines 17 through 25</td>
<td>542,702.</td>
<td>31,797.</td>
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<tr>
<td>27 Organizations that follow SFAS 117, check here □ and complete lines 27 through 29 and lines 33 and 34.</td>
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<tr>
<td>28 Unrestricted net assets</td>
<td>1,367,244.</td>
<td>997,103.</td>
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<tr>
<td>29 Temporarily restricted net assets</td>
<td>1,048,516.</td>
<td>1,501,167.</td>
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<tr>
<td>30 Permanently restricted net assets</td>
<td>30</td>
<td></td>
<td></td>
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<tr>
<td>Organizations that do not follow SFAS 117, check here □ and complete lines 30 through 34.</td>
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<tr>
<td>31 Retained earnings, endowment, accumulated income, or other funds</td>
<td>31</td>
<td></td>
<td></td>
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<tr>
<td>32 Total net assets or fund balances</td>
<td>2,415,760.</td>
<td>2,498,270.</td>
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<tr>
<td>33 Total liabilities and net assets/fund balances</td>
<td>2,958,462.</td>
<td>2,530,067.</td>
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</table>

**BAA**

Form 990 (2011)
**Part XI. Reconciliation of Net Assets**

Check if Schedule O contains a response to any question in this Part XI

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
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<td>3</td>
<td>Revenue less expenses  Subtract line 2 from line 1</td>
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<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
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<tr>
<td>5</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
</tr>
<tr>
<td>6</td>
<td>Net assets or fund balances at end of year  Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))</td>
</tr>
</tbody>
</table>

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**Part XII. Financial Statements and Reporting**

Check if Schedule O contains a response to any question in this Part XII

1. Accounting method used to prepare the Form 990: [ ] Cash  [x] Accrual  [ ] Other

   - If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.
   - [ ] 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
   - [x] 2b Were the organization's financial statements audited by an independent accountant?

   - [ ] 2c If 'yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

   - If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

   - [x] 2d If 'yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both

     - [x] Separate basis  [ ] Consolidated basis  [ ] Both consolidated and separate basis

   - [ ] 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

   - [x] 3b If 'yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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BAA
**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

- Attach to Form 990 or Form 990-EZ. - See separate instructions.

**Part I  Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1. A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).
2. A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3. A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state.
5. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vii). (Complete Part II)
8. A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
9. An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)
10. An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
11. An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h

- Type I
- Type II
- Type III - Functionally integrated
- Type III - Other

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>11g(i)</td>
<td></td>
</tr>
<tr>
<td>11g(ii)</td>
<td></td>
</tr>
<tr>
<td>11g(iii)</td>
<td></td>
</tr>
</tbody>
</table>

Provide the following information about the supported organization(s)

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described in lines 1-9 above or IRC section (see instructions))</th>
<th>(iv) Is the organization in column (i) listed in your governing document?</th>
<th>(v) Did you notify the organization in column (i) of your support?</th>
<th>(vi) Is the organization in column (i) organized in the U.S.?</th>
<th>(vii) Amount of support</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td></td>
<td></td>
<td>Yes No</td>
<td>Yes No</td>
<td>Yes No</td>
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<td>(B)</td>
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<td>(C)</td>
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<td><strong>Total</strong></td>
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</tbody>
</table>

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')</td>
<td>4,425,118</td>
<td>8,015,625</td>
<td>7,404,475</td>
<td>4,362,777</td>
<td>2,739,209</td>
<td>26,947,204</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.0</td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.0</td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>4,425,118</td>
<td>8,015,625</td>
<td>7,404,475</td>
<td>4,362,777</td>
<td>2,739,209</td>
<td>26,947,204</td>
</tr>
<tr>
<td>5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>0.0</td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from line 4</td>
<td></td>
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<td></td>
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<td></td>
<td>26,947,204</td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>4,425,118</td>
<td>8,015,625</td>
<td>7,404,475</td>
<td>4,362,777</td>
<td>2,739,209</td>
<td>26,947,204</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>10,543.0</td>
<td>23,644.0</td>
<td>10,108.0</td>
<td>2,468.0</td>
<td>1,226.0</td>
<td>47,989.0</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>0.0</td>
</tr>
<tr>
<td>10 Other income (Do not include gain or loss from the sale of capital assets (Explain in Part IV). See Part IV)</td>
<td>50,400.0</td>
<td>56,400.0</td>
<td>57,200.0</td>
<td>49,800.0</td>
<td>51,039.0</td>
<td>264,839.0</td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>27,260,032.0</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12.0</td>
<td>0.0</td>
</tr>
<tr>
<td>13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
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</table>

### Section C. Computation of Public Support Percentage

<table>
<thead>
<tr>
<th></th>
<th>14</th>
<th>15</th>
<th>16a 33-1/3% support test -- 2011. If the organization did not check the box on line 15, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.</th>
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# Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

## Section A. Public Support

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<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
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<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization’s tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal yr beginning in)</th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add line 9, 10a, 11, and 12.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First five years. If the Form 990 is for the organization’s first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Section C. Computation of Public Support Percentage

| Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| Public support percentage from 2010 Schedule A, Part III, line 15 | 16 | % |

## Section D. Computation of Investment Income Percentage

| Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| Investment income percentage from 2010 Schedule A, Part III, line 17 | 18 | % |

**19a 33-1/3% support tests - 2011.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

**b 33-1/3% support tests - 2010.** If the organization did not check a box on line 14 or line 19a, line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.
Part IV. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
### Part II, Line 10 - Other Income

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Net Rental Income</td>
<td>51,039</td>
<td>49,800</td>
<td>57,200</td>
<td>56,400</td>
<td>50,400</td>
</tr>
<tr>
<td>Wedding Income</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$51,039</td>
<td>$49,800</td>
<td>$57,200</td>
<td>$56,400</td>
<td>$50,400</td>
</tr>
</tbody>
</table>
### Rental Income Worksheet

**Rental Income**
- Gross Rental Income: $51,039.

### Form 990, Part IX, Line 24e

**Other Expenses**

<table>
<thead>
<tr>
<th></th>
<th>(A)</th>
<th>(B)</th>
<th>(C)</th>
<th>(D)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>Program</td>
<td>Management &amp; General</td>
<td>Fundraising</td>
</tr>
<tr>
<td>Bank Charges</td>
<td>13,021</td>
<td>6,860.</td>
<td>2,920.</td>
<td>3,241.</td>
</tr>
<tr>
<td>Computer Expense</td>
<td>39,526</td>
<td>20,824.</td>
<td>8,864.</td>
<td>9,838.</td>
</tr>
<tr>
<td>Dir. Serv.-Retreat Support</td>
<td>28,311</td>
<td>28,311</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payroll Fees</td>
<td>1,645.</td>
<td>867.</td>
<td>369.</td>
<td>409.</td>
</tr>
<tr>
<td>Postage and Shipping</td>
<td>8,074.</td>
<td>4,254.</td>
<td>1,810.</td>
<td>2,010.</td>
</tr>
<tr>
<td>Rents</td>
<td>2,075.</td>
<td>1,976.</td>
<td>47.</td>
<td>52.</td>
</tr>
<tr>
<td>Repairs &amp; Maintenance</td>
<td>20,202.</td>
<td>19,238.</td>
<td>457.</td>
<td>507.</td>
</tr>
<tr>
<td>Special Event</td>
<td>1,525.</td>
<td>1,525.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taxes &amp; Licenses</td>
<td>498.</td>
<td>339.</td>
<td>74.</td>
<td>85.</td>
</tr>
<tr>
<td>Telephone</td>
<td>22,828.</td>
<td>12,026.</td>
<td>5,119.</td>
<td>5,683.</td>
</tr>
<tr>
<td>Utilities</td>
<td>22,471.</td>
<td>21,398.</td>
<td>509.</td>
<td>564.</td>
</tr>
<tr>
<td>Workers Compensation</td>
<td>2,548.</td>
<td>1,341.</td>
<td>572.</td>
<td>635.</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$162,724</td>
<td>$118,959</td>
<td>$20,741</td>
<td>$23,024</td>
</tr>
</tbody>
</table>

### Form 8941, Worksheet 5

**FTE Limitation**

1. Subtract 10 from line 2
2. Divide line 3 by 15
3. Multiply line 1 by line 4
4. Subtract line 5 from line 1. Report this number on line 8
Family Care Foundation

(a) Donor advised funds (b) Funds and other accounts
1 Total number at end of year 2
2 Aggregate contributions to (during year)
3 Aggregate grants from (during year)
4 Aggregate value at end of year 185.

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  X Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  X Yes No

Purpose(s) of conservation easements by the organization (check all that apply)
- Preservation of land for public use (e.g., recreation or education)
- Preservation of an historically important land area
- Protection of natural habitat
- Preservation of a certified historic structure
- Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

<table>
<thead>
<tr>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
</tr>
<tr>
<td>2b</td>
</tr>
<tr>
<td>2c</td>
</tr>
<tr>
<td>2d</td>
</tr>
</tbody>
</table>

a Total number of conservation easements
b Total acreage restricted by conservation easements

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  X Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  X Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X
Schedule D (Form 990) 2011  Family Care Foundation  33-0734917  Page 2

Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3  Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply).
   a  Public exhibition  
   b  Scholarly research  
   c  Preservation for future generations  
   d  Loan or exchange programs  
   e  Other

4  Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5  During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

Part XIV  Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a  Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b  If 'Yes,' explain the arrangement in Part XIV and complete the following table.

<table>
<thead>
<tr>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1c</td>
</tr>
<tr>
<td>1d</td>
</tr>
<tr>
<td>1e</td>
</tr>
<tr>
<td>1f</td>
</tr>
</tbody>
</table>

2a  Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b  If 'Yes,' explain the arrangement in Part XIV

Part IV  Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a  Board designated or quasi-endowment  %

b  Permanent endowment  %

c  Temporarily restricted endowment  %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a  Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i)  unrelated organizations

(ii) related organizations

b  If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?  Yes  No

Part V  Land, Buildings, and Equipment. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td>228,663.</td>
<td>228,663.</td>
<td>228,663.</td>
<td></td>
</tr>
<tr>
<td>b Buildings</td>
<td>188,104.</td>
<td>66,773.</td>
<td>121,331.</td>
<td></td>
</tr>
<tr>
<td>c Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Equipment</td>
<td>132,768.</td>
<td>64,834.</td>
<td>67,934.</td>
<td></td>
</tr>
<tr>
<td>e Other</td>
<td>58,145.</td>
<td>46,137.</td>
<td>12,008.</td>
<td></td>
</tr>
</tbody>
</table>

Total.  Add lines 1a through 1e  (Column (d) must equal Form 990, Part X, column (B), line 10(c))  429,936.

BAA

Schedule D (Form 990) 2011
**Part VII | Investments – Other Securities.** See Form 990, Part X, line 12. N/A

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
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<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
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<tr>
<td>(F)</td>
<td></td>
<td></td>
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<td>(G)</td>
<td></td>
<td></td>
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<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(I)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990 Part X, column (B) line 12.)

**Part VIII | Investments – Program Related.** See Form 990, Part X, line 13. N/A

<table>
<thead>
<tr>
<th>(a) Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
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<tr>
<td>(4)</td>
<td></td>
<td></td>
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<tr>
<td>(5)</td>
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<td>(8)</td>
<td></td>
<td></td>
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<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)

**Part IX | Other Assets.** See Form 990, Part X, line 15. N/A

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
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<tr>
<td>(5)</td>
<td></td>
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<tr>
<td>(6)</td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, column (B), line 15)

**Part X | Other Liabilities.** See Form 990, Part X, line 25.

<table>
<thead>
<tr>
<th>(a) Description of liability</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
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<td>(8)</td>
<td></td>
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<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

See Part XIV
### Part XIV. Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total revenue (Form 990, Part VIII, column (A), line 12)</td>
<td>3,471,785</td>
</tr>
<tr>
<td>Total expenses (Form 990, Part IX, column (A), line 25)</td>
<td>3,389,275</td>
</tr>
<tr>
<td>Excess or (deficit) for the year. Subtract line 2 from line 1</td>
<td>82,510</td>
</tr>
<tr>
<td>Net unrealized gains (losses) on investments</td>
<td></td>
</tr>
<tr>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>Total adjustments (net): Add lines 4 through 8</td>
<td></td>
</tr>
<tr>
<td>Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9</td>
<td>82,510</td>
</tr>
</tbody>
</table>

### Part XV. Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>3,471,785</td>
</tr>
<tr>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12</td>
<td></td>
</tr>
<tr>
<td>a. Net unrealized gains on investments</td>
<td></td>
</tr>
<tr>
<td>b. Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>c. Recoveries of prior year grants</td>
<td></td>
</tr>
<tr>
<td>d. Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>e. Add lines 2a through 2d</td>
<td></td>
</tr>
<tr>
<td>Subtract line 2e from line 1</td>
<td>3,471,785</td>
</tr>
<tr>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1</td>
<td></td>
</tr>
<tr>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td></td>
</tr>
<tr>
<td>b. Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>c. Add lines 4a and 4b</td>
<td></td>
</tr>
<tr>
<td>Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)</td>
<td>3,471,785</td>
</tr>
</tbody>
</table>

### Part XVI. Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total expenses and losses per audited financial statements</td>
<td>3,389,275</td>
</tr>
<tr>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25</td>
<td></td>
</tr>
<tr>
<td>a. Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>b. Prior year adjustments</td>
<td></td>
</tr>
<tr>
<td>c. Other losses</td>
<td></td>
</tr>
<tr>
<td>d. Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>e. Add lines 2a through 2d</td>
<td></td>
</tr>
<tr>
<td>Subtract line 2e from line 1</td>
<td>3,389,275</td>
</tr>
<tr>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1</td>
<td></td>
</tr>
<tr>
<td>a. Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td></td>
</tr>
<tr>
<td>b. Other (Describe in Part XIV)</td>
<td></td>
</tr>
<tr>
<td>c. Add lines 4a and 4b</td>
<td></td>
</tr>
<tr>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)</td>
<td>3,389,275</td>
</tr>
</tbody>
</table>

### Part XVII. Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

---

**Part X: FIN 48 Footnote**

**FIN 48 note included in Audit Report Note 3. Below is the note used in the audit.**

---

**Uncertain Tax Position**

---

**Accounting Principles generally accepted in the United States of America require the**

**organization's management evaluate tax positions taken by the organization and recognize a tax liability if the organization has taken an uncertain position that**
Part X - FIN 48 Footnote (continued)

More likely than not would not be sustained upon examination by applicable taxing authorities. Management has analyzed the tax positions taken by the organization and has concluded that as of December 31, 2011, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The organization is subject to routine audits by taxing jurisdictions; however there are currently no audits for any tax periods in progress.
Statement of Activities Outside the United States

Part I: General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.

1. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes [X] No

2. For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

Part V: Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees, agents, and independent contractors in region</th>
<th>(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)</th>
<th>(e) If activity listed in (d) is a program service, describe specific type of service(s) in region</th>
<th>(f) Total expenditures for and investments in region</th>
</tr>
</thead>
<tbody>
<tr>
<td>See Attached Schedule #2</td>
<td>-0-</td>
<td>See Attached Schedule #2</td>
<td>Various</td>
<td>1,227,342.</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td>(3)</td>
<td>(4)</td>
<td>(5)</td>
<td>(6)</td>
<td>(7)</td>
</tr>
</tbody>
</table>

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Family Care Foundation  
F.E.I.N. 33-0734917  

Form 990, Schedule F, Part I – General Information on Activities outside the United States  

Schedule #2  

Activities per Region.  

<table>
<thead>
<tr>
<th>(a) Region</th>
<th>(b) Number of offices in the region</th>
<th>(c) Number of employees or agents in the region</th>
<th>(d) Activities conducted in region (by type)</th>
<th>(e) If activity listed in (d) is a program service describe specific type of service (s) in region</th>
<th>(f) Total expenditures in region</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caribbean</td>
<td>0</td>
<td>1</td>
<td>Grantmaking, Program Services</td>
<td>Educational programs</td>
<td>3,273.00</td>
</tr>
<tr>
<td>Central America</td>
<td>0</td>
<td>1</td>
<td>Grantmaking, Program Services</td>
<td>Vocational training programs</td>
<td>21,490.00</td>
</tr>
<tr>
<td>East Asia and the Pacific</td>
<td>0</td>
<td>13</td>
<td>Grantmaking, Program Services</td>
<td>Educational programs, Community center, Medical equipment, Disaster recovery, Humanitarian aid, Orphanage renovations, Leadership training,</td>
<td>237,118.60</td>
</tr>
<tr>
<td>Europe</td>
<td>0</td>
<td>7</td>
<td>Grantmaking, Program Services</td>
<td>Humanitarian aid, Youth programs, Food distribution, Transition home for orphans, Educational programs</td>
<td>24,847.00</td>
</tr>
<tr>
<td>North America (Mexico)</td>
<td>0</td>
<td>9</td>
<td>Grantmaking, Program Services</td>
<td>Orphanage programs, Food &amp; clothing distribution, Soup kitchen, Humanitarian aid, Prosthetics program, Hospital laughter therapy program, Educational programs, Community center construction</td>
<td>57,261.00</td>
</tr>
<tr>
<td>Russia (Ukraine)</td>
<td>0</td>
<td>2</td>
<td>Grantmaking, Program Services</td>
<td>Humanitarian Aid, Orphanage and Rehabilitation Center</td>
<td>5,110.00</td>
</tr>
<tr>
<td>South America</td>
<td>0</td>
<td>6</td>
<td>Grantmaking, Program Services</td>
<td>Soup kitchen, Educational programs, Food and clothing distribution program, Vocational training, Humanitarian aid, Orphan &amp; street youth programs</td>
<td>57,636.42</td>
</tr>
<tr>
<td>South Asia</td>
<td>0</td>
<td>12</td>
<td>Grantmaking, Program Services</td>
<td>Education, Vocational training, Hearing-impaired programs, Orphanage support, AIDS programs</td>
<td>50,890.00</td>
</tr>
<tr>
<td>Sub-Saharan Africa</td>
<td>0</td>
<td>14</td>
<td>Grantmaking, Program Services</td>
<td>Malaria control and prevention, Vocational training, Food programs, School additions and renovations, Training center, Educational programs, Radio</td>
<td>769,715.96</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>0</strong></td>
<td><strong>65</strong></td>
<td></td>
<td></td>
<td><strong>1,227,341.98</strong></td>
</tr>
</tbody>
</table>
### Part II
Grants and Other Assistance to Organizations or Entities Outside the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN (if applicable)</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of non-cash assistance</th>
<th>(h) Description of non-cash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(1)</td>
<td>See Sch. 3</td>
<td>Various</td>
<td></td>
<td>1,191,740</td>
<td>Various</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>(2)</td>
<td></td>
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<td>(3)</td>
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<td></td>
<td>(13)</td>
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<td></td>
<td>(14)</td>
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<td>(15)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3. Enter total number of other organizations or entities
<table>
<thead>
<tr>
<th>(a) Name of organization</th>
<th>(b) IRS code section and EIN</th>
<th>(c) Region</th>
<th>(d) Purpose of grant</th>
<th>(e) Amount of cash grant</th>
<th>(f) Manner of cash disbursement</th>
<th>(g) Amount of non-cash assistance</th>
<th>(h) Description of non-cash assistance</th>
<th>(i) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Small Beginnings, Greater Ends</td>
<td>NA</td>
<td>Central America</td>
<td>Orphan education and vocational training</td>
<td>21,490.00</td>
<td>Check</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Central America Total</td>
<td></td>
<td>21,490.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cornerstone Project</td>
<td>NA</td>
<td>East Asia &amp; the Pacific</td>
<td>Rural education and orphan support</td>
<td>60,506.00</td>
<td>WT</td>
<td>3,661.00</td>
<td>Volunteer Incurred Expenses</td>
<td></td>
</tr>
<tr>
<td>Family Care Cambodia</td>
<td>NA</td>
<td>East Asia &amp; the Pacific</td>
<td>Support for rescue shelter for abused girls</td>
<td>53,784.50</td>
<td>WT</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Side by Side International</td>
<td>NA</td>
<td>East Asia &amp; the Pacific</td>
<td>Earthquake/Tsunami relief and Emergency Medical Services support</td>
<td>27,850.00</td>
<td>WT</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Care Indonesia</td>
<td>NA</td>
<td>East Asia &amp; the Pacific</td>
<td>Rural school expansion and Mount Merapi volcano relief</td>
<td>14,783.50</td>
<td>WT</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Siam Family Services</td>
<td>NA</td>
<td>East Asia &amp; the Pacific</td>
<td>Educational program support and humanitarian aid</td>
<td>5,220.00</td>
<td>WT</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foundation for Developing and Supporting Children</td>
<td>NA</td>
<td>East Asia &amp; the Pacific</td>
<td>Educational development programs</td>
<td>67,730.00</td>
<td>WT</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Central Thailand Mission</td>
<td>NA</td>
<td>East Asia &amp; the Pacific</td>
<td>Assistance to refugees, orphans and the handicapped</td>
<td>6,079.60</td>
<td>WT</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Asia and The Pacific Total</td>
<td></td>
<td></td>
<td></td>
<td>239,614.60</td>
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<tr>
<td>FAVOR</td>
<td>NA</td>
<td>Europe</td>
<td>Transitional home for orphans Humanitarian aid distribution</td>
<td>15,925.00</td>
<td>Check</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Europe Total</td>
<td></td>
<td></td>
<td></td>
<td>15,925.00</td>
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</tr>
<tr>
<td>Mex Mission</td>
<td>NA</td>
<td>North America (Mexico)</td>
<td>Hospital laughter therapy program and humanitarian aid</td>
<td>8,547.00</td>
<td>Check</td>
<td>-</td>
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</tr>
<tr>
<td></td>
<td>Location</td>
<td>Description</td>
<td>Amount</td>
<td>Payment Method</td>
<td>Notes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------------</td>
<td>---------------</td>
<td>-----------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>Proyecto Refugio</td>
<td>North America (Mexico)</td>
<td>Purchase of aid distribution vehicle</td>
<td>12,220.00</td>
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<tr>
<td>Rescate</td>
<td>North America (Mexico)</td>
<td>Drug rehabilitation program</td>
<td>29,904.00</td>
<td>Check</td>
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<tr>
<td></td>
<td>North America (Mexico) Total</td>
<td></td>
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</tr>
<tr>
<td>Firefly Project</td>
<td>Ukraine</td>
<td>Humanitarian aid distribution</td>
<td>5,110.00</td>
<td>Check</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ukraine Total</td>
<td></td>
<td>5,110.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FEDES</td>
<td>South America</td>
<td>Vocational trade school and job placement</td>
<td>27,581.42</td>
<td>WT</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Los Andes Mission</td>
<td>South America</td>
<td>Food and clothing distribution program</td>
<td>20,050.00</td>
<td>Check</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>VivAmor</td>
<td>South America</td>
<td>Setup of a cultural center for community assistance and humanitarian</td>
<td>10,005.00</td>
<td>Check/WT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>South America Total</td>
<td></td>
<td>57,636.42</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Family Educational</td>
<td>South Asia</td>
<td>Academic and vocational schools for the deaf</td>
<td>7,242.00</td>
<td>Check/WT</td>
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</tr>
<tr>
<td>Services</td>
<td>South Asia</td>
<td>Elementary schools for underprivileged children</td>
<td>18,120.00</td>
<td>WT</td>
<td></td>
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</tr>
<tr>
<td>Education in India</td>
<td>South Asia</td>
<td>IT center and library for the deaf</td>
<td>9,000.00</td>
<td>WT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Services, Vizak</td>
<td>South Asia</td>
<td>Deaf mime workshops and training</td>
<td>9,602.00</td>
<td>WT</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Family Care</td>
<td>South Asia</td>
<td></td>
<td>43,964.00</td>
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<td></td>
</tr>
<tr>
<td>Eduvision Mumbai</td>
<td>Sub-Saharan Africa</td>
<td>Youth development programs</td>
<td>32,275.02</td>
<td>WT</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Miles for Smiles</td>
<td>Sub-Saharan Africa</td>
<td></td>
<td>664,465.00</td>
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</tr>
<tr>
<td>Family Care Assoc.</td>
<td>Sub-Saharan Africa</td>
<td>Malaria control and prevention program</td>
<td>5,789.00</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nigeria</td>
<td>Sub-Saharan Africa</td>
<td>Renovation/addition to orphanage</td>
<td>11,000.00</td>
<td>Check</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>African Educational</td>
<td>Sub-Saharan Africa</td>
<td>HIV/AIDS Care for children and education for their caregivers</td>
<td>9,000.00</td>
<td>WT</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Services</td>
<td>Sub-Saharan Africa</td>
<td>Vehicle for student transportation</td>
<td>9,000.00</td>
<td>WT</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Espoir Congo</td>
<td>NA</td>
<td>Sub-Saharan Africa</td>
<td>Rural orphan program</td>
<td>34,800 00</td>
<td>WT</td>
<td>-</td>
<td>Sub-Saharan Africa Total</td>
<td>757,329.02</td>
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<td>-----------</td>
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<td>-----------</td>
</tr>
</tbody>
</table>

Total Grants & Other Assistance to Organizations or Other Entities outside the United States — $5,000 or more

1,191,740.04
Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Region</th>
<th>(c) Number of recipients</th>
<th>(d) Amount of cash grant</th>
<th>(e) Manner of cash disbursement</th>
<th>(f) Amount of non-cash assistance</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Method of valuation (book, FMV, appraisal, other)</th>
</tr>
</thead>
<tbody>
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<td>(1)</td>
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</tbody>
</table>

BAA
Part IV Foreign Forms

1. Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)
   - Yes [ ] No [x]

2. Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)
   - Yes [ ] No [x]

3. Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)
   - Yes [ ] No [x]

4. Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)
   - Yes [ ] No [x]

5. Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)
   - Yes [ ] No [x]

6. Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)
   - Yes [ ] No [x]
- **Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US**
  
  **Monitoring of grant funds outside the US is conducted with all of our grantees on a**
  **regular basis, via mail, email, phone, and site visits. To be eligible to be**
  **considered for grant funds, an initial application process is used to vet potential**
  **grantees, and eligibility is maintained by their monthly Activity and Finance Reports**
  **we require. We also conduct an annual recertification process of all grantees for**
  **them to be able to remain eligible for grant funds. Larger grants require an**
  **additional, separate application process over and above the initial application and**
  **annual recertification. Upon completion, an additional narrative and financial report**
  **is required, with accompanying supporting information such as photos, video footage,**
  **receipts, third party appreciation certificates or letters, etc. over and above the**
  **regular monthly reports and annual recertification process. Site visits are also**
  **conducted by our Director of Programs on a yearly basis. Written reports of such**
  **visits are also used as a monitoring process of our grantees.**

- **Part II, Line 1 - Additional Supplemental Information**

  **See Schedule 3**
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22.  
Attach to Form 990.

Name of the organization: Family Care Foundation
Employee identification number: 33-0734917

Part I. General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  
   - See Part IV

Part II. Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000.  
   - Part II can be duplicated if additional space is needed. [X]

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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</tbody>
</table>

2. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

   ▶ 0

3. Enter total number of other organizations listed in the line 1 table

   ▶ 0

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III: Grants and Other Assistance to Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th></th>
<th>Type of Grant or Assistance</th>
<th>Number of Recipients</th>
<th>Amount of Cash Grant</th>
<th>Amount of Non-Cash Assistance</th>
<th>Method of Valuation (Book, FMV, Appraisal, Other)</th>
<th>Description of Non-Cash Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>See Attached Schedule #4</td>
<td>392</td>
<td>70</td>
<td>9,728</td>
<td>FMV = $ 18 cents per pound</td>
<td>Food</td>
</tr>
<tr>
<td>2</td>
<td></td>
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</tbody>
</table>

### Part IV: Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any other additional information.

**Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.**

- A grant for medical assistance to individuals is used to pay medical costs. Our US-based project uses their grant funds for their Humanitarian aid program. Non-cash grants/assistance is used by low income families to help meet their needs.

Monitoring of Grant Funds distributed in the United States is done via written notes and reports, and/or via telephone conversations or on site visitations.
<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of Recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation</th>
<th>(f) Description of non-cash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash assistance</td>
<td></td>
<td>70.20</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food to low-income families</td>
<td>392 (monthly average)</td>
<td></td>
<td>9,728.29</td>
<td>.18 per pound</td>
<td>Food</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>70.20</td>
<td>9,728.29</td>
<td></td>
<td></td>
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</tbody>
</table>
Family Care Foundation

Part I: Types of Property

<table>
<thead>
<tr>
<th></th>
<th>(a) Check if applicable</th>
<th>(b) Number of contributions or items contributed</th>
<th>(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g</th>
<th>(d) Method of determining noncash contribution amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Art – Works of art</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2</td>
<td>Art – Historical treasures</td>
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<td></td>
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<tr>
<td>3</td>
<td>Art – Fractional interests</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Books and publications</td>
<td></td>
<td></td>
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<tr>
<td>5</td>
<td>Clothing and household goods</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Cars and other vehicles</td>
<td>X</td>
<td>15</td>
<td>76,206. FMV</td>
</tr>
<tr>
<td>7</td>
<td>Boats and planes</td>
<td></td>
<td></td>
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<tr>
<td>8</td>
<td>Intellectual property</td>
<td></td>
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</tr>
<tr>
<td>9</td>
<td>Securities – Publicly traded</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>10</td>
<td>Securities – Closely held stock</td>
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<tr>
<td>11</td>
<td>Securities – Partnership, LLC, or trust interests</td>
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<tr>
<td>12</td>
<td>Securities – Miscellaneous</td>
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</tr>
<tr>
<td>13</td>
<td>Qualified conservation contribution – Historic structures</td>
<td></td>
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<tr>
<td>14</td>
<td>Qualified conservation contribution – Other</td>
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<tr>
<td>15</td>
<td>Real estate – Residential</td>
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<tr>
<td>16</td>
<td>Real estate – Commercial</td>
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<tr>
<td>17</td>
<td>Real estate – Other</td>
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<td>Collectibles</td>
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<td>19</td>
<td>Food inventory</td>
<td>X</td>
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<td>8,879. FMV</td>
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<td>20</td>
<td>Drugs and medical supplies</td>
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<tr>
<td>21</td>
<td>Taxidermy</td>
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<tr>
<td>22</td>
<td>Historical artifacts</td>
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<tr>
<td>23</td>
<td>Scientific specimens</td>
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<tr>
<td>24</td>
<td>Archeological artifacts</td>
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<tr>
<td>25</td>
<td>Other ► (Supplies-Maint. _____)</td>
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<td>1,257. FMV</td>
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<td>Other ► ( _______ )</td>
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<tr>
<td>27</td>
<td>Other ► ( _______ )</td>
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<tr>
<td>28</td>
<td>Other ► ( _______ )</td>
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</tbody>
</table>

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 

<table>
<thead>
<tr>
<th>30a</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
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</table>

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

<table>
<thead>
<tr>
<th>31</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

<table>
<thead>
<tr>
<th>32a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990.
Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
Family Care Foundation

**Form 990, Part III, Line 1 - Organization Mission**

Family Care Foundation's purpose is to enhance the quality of life for all members of the community, especially those who are poor, suffering, or disadvantaged, and to provide knowledge and character building education to help strengthen families and children.

**Form 990, Part III, Line 4a - Program Service Accomplishments**

The Mission Support and Humanitarian Services Program seeks and provides funding for projects and missions operating under its umbrella in 33 countries. These projects provide services to a varied constituency, including guidance to youth at risk, collections and distribution of humanitarian aid, support for foreign and domestic Christian Missions, educational and vocational services for the handicapped, medical facilities and health care programs, assistance to shelters and food kitchens, and comfort and care to the sick and elderly.

Please see the list below for a sampling of the incredible work accomplished by our project partners in 2011.

- 723,847 meals were served.
- 11,909,727 lbs. of food items were distributed.
- 170,830 individuals received donated food.
- Estimated value of the food distributed - $3,339,588.

221,676 lbs. of donated clothing and household items were distributed.
Form 990, Part III, Line 4a - Program Service Accomplishments

- Estimated value of the clothing and household items distributed - $1,343,331.

- 13,311 people were given medical treatment.

- 1,447,502 pieces of medical equipment and supplies were distributed.

- Estimated value of the medical supplies distributed - $1,172,734.

- 15,711 disaster victims were assisted.

- 637,131 lbs. of humanitarian supplies were distributed.

- Estimated value of the humanitarian supplies distributed - $155,940.

- 476 classes were given tailored specifically to the needs of women.

- In addition to the 59 financial empowerment programs for women that began in 2010, 17 new programs were established in 2011. These programs have helped to launch the business endeavors of 657 female entrepreneurs.

- Six new schools were opened, and 15 new classrooms were built.

- 19 schools were renovated and 36 additional classrooms were constructed, renovated or furnished, serving a total of 2,082 students.
Form 990, Part III, Line 4a - Program Service Accomplishments

- 24,376 people received personal counseling.
- 16,845 educational seminars or classes were given, attended by 126,315 people.
- 3,209 Bible studies were given to 24,982 students.
- 5,188 handicapped individuals were assisted.
- 17,995 people were visited while in hospitals or clinics.
- 1,071 inspirational or educational performances were given, to a total audience of 61,884.
- 76,543 orphans, street children and youth at risk were assisted.
- 5,338 people were visited while in prisons, juvenile centers or other institutions.
- 144 educational courses were created.
- 3,343 volunteers donated their time and expertise to our project partners.

Form 990, Part III, Line 4b - Program Service Accomplishments

The Spiritual Retreat and Missionary Training Program (SRMTP) has two purposes:

1) To provide resources for the training and continuing education of full time missionaries and other Christian and humanitarian workers while on the field, or in the US on furlough or otherwise, especially those associated with FCF Project.
Form 990, Part III, Line 4b - Program Service Accomplishments

- Partners, and

- 2) To provide resources for individuals, both Christian workers and others, to have a time of spiritual refreshing and retreat.

The SRMTP is designed to provide further development of the skills necessary for fruitful missionary and humanitarian activity. It consists of program development and consulting services for associates of program partners and other individuals and organizations who can benefit from the organization's expertise and intellectual capital, capacity building for our project partners, training in the business and administrative skills necessary to achieve maximum effectiveness in a missionary or humanitarian project, as well as the study of scripture, classes both formal and informal, counsel, seminars, prayer and fellowship. Participants may live on the Family Care Foundation premises during their involvement with the program.

In 2011, we received and processed approximately 1360 reports from Project Partners as well as wrote approximately 300 training letters, notes of encouragement, phone calls.

We had 8 Project Managers come here to participate in a total of 22 days of training programs, which included strategic planning, meetings with the Executive committee, presentations to the staff, work on their webpage, and personal counseling.

18 other missionaries participated in the spiritual retreat program as guests for a total of 172 days.
Form 990, Part III, Line 4b - Program Service Accomplishments

For those who are on staff at FCF and volunteers, we provided counseling on a daily
or weekly basis and provided a community atmosphere which engenders both personal
and professional growth.

Form 990, Part III, Line 4c - Program Service Accomplishments

The Education and Advocacy Program. The board of directors of Family Care Foundation
recognizes the growing importance to the organization of engaging in a significant
public outreach campaign to educate and inform members of the public about the needs
of the world's poorest and most needy communities, families, and individuals, and to
advocate for comprehensive solutions to such global social ills as poverty,
illiteracy, illness, and oppression.

The organization understands the responsibility we have to engage in these education
and advocacy activities as a distinct program over and above and in addition to our
role as a funder and conductor of charitable relief and development activities.

Therefore, some of the organization's time, effort, and money should continue to be
spent on these activities that form an important part of our exempt-purpose mission
of improving the quality of life of all members of the global community.

Family Care Foundation believes that it is vital to not only work to improve the
quality of life for all members of the global community through the programs in
developing nations that we fund and conduct, but to also educate and inform the
public in the United States and other developing nations about the issues involved.

Financial and educational resources deployed at the grassroots level to address
global needs are and will remain the organization's primary focus. However, we also
recognize our growing role as an educator for individuals, families, communities,
and organizations, philanthropic and otherwise, in this country.
Form 990, Part III, Line 4c - Program Service Accomplishments

In 2011 we conducted significant public outreach in fulfillment of this purpose via the organization's websites and by phone. The organization's websites received approximately 400,643 visits in 2011 and we received over 9051 phone calls.

Form 990, Part III, Line 4d - Other Program Services Description

The Humanitarian Aid Program provides humanitarian aid to assist in natural disasters and other situations where emergency aid is essential to the well being of the population. It also includes longer-term efforts to rebuild community infrastructure and essential services such as medical care, education, and housing following such disasters.

In, 2011 FCF gave away 54,400 pounds of food, at a cost of $9,728.
The food went to an average of 392 individuals each month.

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

Directors Ken Kelly and Dr. Christine Mlot are married.

Form 990, Part VI, Line 11b - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Anything that we have is available upon request either written or in person.
Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box.
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T, or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I - Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only.

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions.

<table>
<thead>
<tr>
<th>Type or print</th>
<th>Name of exempt organization or other filer, see instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Care Foundation</td>
<td></td>
</tr>
<tr>
<td>Number, street, and room or suite no If a P.O. box, see instructions</td>
<td></td>
</tr>
<tr>
<td>1373 Marron Valley Road</td>
<td></td>
</tr>
<tr>
<td>City, town or post office, state, and ZIP code For a foreign address, see instructions</td>
<td></td>
</tr>
<tr>
<td>Dultzura, CA 91917</td>
<td></td>
</tr>
</tbody>
</table>

Enter the Return code for the return that this application is for (file a separate application for each return).

Application Is For | Return Code | Application Is For | Return Code
---|---|---|---
Form 990 | 01 | Form 990-T (corporation) | 07
Form 990-BL | 02 | Form 1041-A | 08
Form 990-EZ | 01 | Form 4720 | 09
Form 990-PF | 04 | Form 5227 | 10
Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11
Form 990-T (trust other than above) | 06 | Form 8870 | 12

The books are in the care of: Lawrence Corley.

Telephone No. 619-468-3191
FAX No. 619-468-6996

- If the organization does not have an office or place of business in the United States, check this box.
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) and attach a list with the names and EINs of all members the extension is for.

1. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15/12, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
   - ☐ calendar year 2011 or
   - ☐ tax year beginning , and ending , 20

2. If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

3b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

3c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Cat No 27916D

Form 8868 (Rev 1-2012)
**Part II**  Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

<table>
<thead>
<tr>
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<td>06</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enter the Return code for the return that this application is for (file a separate application for each return) . . . .

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **Lawrence Corley**
  - Telephone No. ▶ 619-468-3191
  - FAX No. ▶ 619-468-6996
- If the organization does not have an office or place of business in the United States, check this box ▶ □
- If this is for a Group Return, enter the organization’s four digit Group Exemption Number (GEN) ▶ □. If this is for the whole group, check this box ▶ □. If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all members the extension is for.

4. I request an additional 3-month extension of time until November 15, 2012.
5. For calendar year 2011, or other tax year beginning , 20 , and ending , 20 .
6. If the tax year entered in line 5 is for less than 12 months, check reason: □ Initial return □ Final return □ Change in accounting period
7. State in detail why you need the extension Additional time needed as financial audit not yet completed

8a. If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
   - 8a $ 0
8b. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.
   - 8b $ 0
8c. **Balance due:** Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.
   - 8c $ 0

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ □
Title ▶ C.P.A.  
Date ▶ 9/4/12