Form 990

Department of the Treasury internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ► The organization may have to use a copy of this return to satisfy state reporting requirements. OMB No. 1545-0047

2011

Coun to Public Inspection

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9	9 Pro	ogram serv	rice revenue (Pa	rt VIII, ∄ne :	2g)		* * * *			, [161,9	99.		163,1	
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Check Standard or Program Service Accomplishments Revenue Reproduce	-	m 990 (2011) Nathan B. Stubblefield Foundation	59-1619213	Page 2
1 Drefty describe the organization undertake any significant program services during the year which were not listed on the prior form 900 or 900-227. 1 May	Pa	ift III Statement of Program Service Accomplishments		
1 Drefty describe the organization undertake any significant program services during the year which were not listed on the prior form 900 or 900-227. 1 May		Check if Schedule O contains a response to any question in this Part III	• • • • • • • • • • • • • • • • • • • •	X
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-527.	1	Briefly describe the organization's mission:	, 711.21	
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-527.		Broadcasting Community Radio Programs		
Form 990 or 990-E27.				
Form 990 or 990-E27.				
Form 990 or 990-E27.				
Form 990 or 990-E27.	2	Did the organization undertake any significant program services during the year which were not listed on the	ne prior	
If Yes,' describe these new services on Schedule O. 3 Did the organization case conducting or make significent changes in how it conducts, any program services				No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?				, 110
If Yos,' describe these charges on Schedule O. A Describe the organization's program service seconclishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(c)(1) tusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code:	3		es? Yes X	No
4b Code: (Expenses \$ 189,091. including grants of \$) (Revenue \$) Broadcasting radio programs services \$ 63,680. including grants of \$) (Revenue \$) Frequetion of cultural events that bring artists and speakers that have been broadcast in the station's programs. The direct costs of these performances are shown on line 6b.				140
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			Yes	s No
	1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
	2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?			X
	3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
	4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II.	4		X
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III			Х
	6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule Part I.	t D, 6		X
•	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
	B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	., 8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	or X as applicable.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	X	
	b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	. 11k)	X
	c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its tota assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	<u>11 c</u>		X
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		J i	X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		X	
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		_ X _
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	. 12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	. 12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E			<u>X</u>
	a Did the organization maintain an office, employees, or agents outside of the United States?			X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.			_X_
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV			X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If 'Yes,' complete Schedule F, Parts III and IV.</i>			X
	Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).			X
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	. 18		X
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.			X
	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H			X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		_

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. 30	نغت	and an			
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 27 if Yas, complete Schedule I, Parts I and III, parts I and III, column (A), line 27 if Yas, complete Schedule I, Parts I and III, parts I and III, column (A), line 27 if Yas, complete Schedule I, Part III, seek on the lest day of the year, and that was issued after December 31, 2002? If Yes, answer lines 240 brough 24d and complete Schedule K. If Yos, go to line 25. 24a Did the organization have a tax-exempt bone issue with an outstanding principal amount of more than \$100,000 as of the lest day of the year, and that was issued after December 31, 2002? If Yes, answer lines 240 brough 24d and complete Schedule K. If Yos, go to line 25. 25a Did the organization mantain an ascrow account other than a refunding ascrow at any time during the year to defease any tax-exempt bonds? 25a Section 901(c(3) and 901(c(4) organizations, Did the organization act as an fon behalf of issuer for bonds outstanding at any time during the year? 25a Section 901(c(3) and 901(c(4) organizations, Did the organization has a section of the section of th				Yes	No
IX. column (A), line 2? If "Yes, complete Schedule I, Parts I and III 23 Did the organization have a tax-everant born 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, to to line 25. 24a Did the organization have a tax-everant born 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, to to line 25. 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?. 24c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception with a disqualified person during the year? [24d] 25a Section 501(cX3) and 501(cX4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? [17 'es, complete Schedule L, Part I. 25a] 25a Section 501(cX3) and 501(cX4) organizations. Did the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations provide a prant of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part II. 25b 25b Use organization provide a grant of the analysis of the organization's prior forms 990 or 990-E27 if "Yes," complete Schedule L, Part II. 25c 26 Was it does not or by a current or former officer, director, trustee, key employee, injuly compensated amployee, or disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part II. 25c 27b List the organization provide 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 II. 25c 28d Was the organization aparty to a business transaction with one of	2	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	21		X
and former officers, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule V, and that was issued after December 31, 2002 If "Yes," answer inters 24b through 24d and complete Schedule K. If "No, go to line 25. 24a Did the organization have a tax exempt bond issues with an outstanding principal amount of more than \$10,0,000 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. 25a Section 501(cX) and 501(cX) organizations. Did the organization expanse in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I. 25a Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I. 25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule I, Part II. 26c Was a loan to or by a current or former officer, director, fursition, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's toxy ear? If "Yes," complete Schedule I, Part III. 27 Dis the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantia, contributor or employee thereof, a grant selection committee member, or to a 55% controlled entity or family member of any of these persons? If "Yes," complete Schedule I, Part IV. 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule I, Part IV. 28a b. A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV. 28b Did the organization receive contributions of art, historical treasues, or other similar assets, or qualified conservation contributions?	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	22		Х
24a Did the organization have a tax-exempt bond issue with an eutstanding principal amount of more than \$100,000 as of the least day of the year, and that was issued after December 31, 2002f 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 invest any proceeds of tax-exempt bonds beyond a temporary period exception?. 24b c Did the organization act as an "on behalf of issuer for bonds outstanding 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? 24d d Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year? 24d d Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year? 24d d Did the organization act as an "on behalf of issuer for bonds outstanding at any time during the year? 24d d Did the organization act as an "on behalf of issuer for bonds outstanding as an act as a second during the year? 1f "Yes," complete Schedule L, Part 1. 25a Section 501(c/3) and 501(c/4) organizations. Did the organization spine forms 990 or 990-E2? If "Yes," complete Schedule L, Part 1. 25b Uses a loan to or by a current or former officer, director, trustee, key employee, in highly compensated employee, or disqualified person outstanding as of the end of the organization stox year? If "Yes," complete Schedule L, Part IV. 26c Was a loan to or by a current or former officer director, trustee, to an officer, director, trustee, the employee, in the part of year of these persons? If "Yes," complete Schedule L, Part IV. 27d Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV. 28a b A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. 28b Did the organizatio	25	and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete	23		X
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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. 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M. 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II. 32 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. 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1. 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 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 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 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		instructions for applicable filing thresholds, conditions, and exceptions):			
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Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	(28c		Х
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of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2			35 a		<u>X</u>
organization? If 'Yes,' complete Schedule R, Part V, line 2	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	35b		<u>X</u>
treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI		organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
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		treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
	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	38	Х	

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Form 990 (2011) Nathan B. Stubblefield Foundation Pait V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V.			Г
		Yes	No
1a Enter the number reported in Box 3 of Form 1096, Enter -0- if not applicable	9		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u> </u>		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	. 1c	: X	
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 2a 2		1	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	. 20		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	*****	######################################	1 00000
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	. 3b	-	 -
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)?	4a		X
b If 'Yes,' enter the name of the foreign country: ►			
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	7		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	***********	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	1 1	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c	 	
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?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
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?	.,	v	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7a	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7b		
1.01111.02.02.;	7c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	.00000000000	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	\dashv	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business.	711		
riordings at any little during the years	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
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			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

Form 990 (2011) Nathan B. Stubblefield Foundation 59-1619213 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..... X Section A. Governing Body and Management Yes No Ta 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. 15 1a b Enter the number of voting members included in line 1a, above, who are independent.... 13 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? 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 χ 5 Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 6 Did the organization have members or stockholders?.... 6 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?.... 7 a X **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?..... X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... 8a X **b** Each committee with authority to act on behalf of the governing body?..... Χ 8b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates?..... X 10 a b ff '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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... X 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b X X 12c 13 Did the organization have a written whistleblower policy?..... X 13 14 Did the organization have a written document retention and destruction policy?..... Χ 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... See. Schedule........... Χ 15a b Other officers of key employees of the organization...See.Schedule.0.... 15b X If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 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?.... Х 16 a b 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 Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed FL 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. Another's website X Upon request Describe in Schedule 0 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 0 State the name, physical address, and telephone number of the person who possesses the books and records of the organization;

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a 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	n nor any	relate	d or	gani	zatio	on con	nper	nsated any current off	icer, director, or trust	ee.
				Pos	C) sition			-		435 T-P-18"4816 - 18"5
(A) Name and title	(B) Average hours per week	L	t che is per and a	ck m rson i dired	ore this both ctor/tr	nan one n an off ustee)	box, icer	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Nancy Cox-Johnson]									
Vice President	1	X						0.	0.	0.
(2) Jeff Harris										
Secretary	1	Х		X				0.	0.	0.
_(3) Rick Hurley Vice President	1	v	1		ļ	ľ			_	
(4) Kurt Madsen	1	X			-		-	0.	0.	0.
Director	1	Х				İ		,		_
(5) Richard Manning			-				-	0.	0.	0.
Director	1	Х	- 1			ľ		0.	0.	٥
(6) Louis Putney			-				$\neg +$			0.
Vice President	1	Х		Х				0.1	0.	0.
(7) Letty Valdez									0.	.
President	1	Х		X				0.	0.	0.
(8) Loraine Thomas		Ţ								
Director	1	Х		Ì				0.	0.1	0.
(9) Ian DeBarry	1									
Director	1	Х].		0.	0.	0.
(10) Diane Dill-Peterson	_			Ì						
Director	1	X	4	_	-			0.	0.	0.
(11) Rachael O'Connor Director	.	.,						.		
(12) Ryan Lacovacci	1	Х	\dashv	\dashv	-			0.	0.	0,
Director	1	Х					- 1	0.	_	
(13) Patti Marsters			-		+	-	+	U.	0.	0.
Director	1.	х						0.	0.	0.
(14) Sydney White				-	-	-	+		0.	<u>U.</u>
Director	40	Х						19,615.	0.	0.

Part VII Section A. Officers, Directors, Trus	tees,	Key	y Er	mp	loy	ees	, ar	nd Highest Co	mpensated Em	ployees (cont)
(A) Name and title	(B) Average hours per	e box offi	, unie cer ar	Pos check ess pe nd a c	erson direct	e thar is bo	than stee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation
	per week (describ e hours for related organi- zations in Sch O)		Institutional trustee	Officer	Key employee	employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15) Beth Bell Director	40	X				 		37,879.	0.	0.
(16)						-		01/0101		0.
(17)										
(18)	<u> </u>			[
(19)									·	
(20)									*****	1
(21)					İ					
(22)				_						
(23)				1						
(24)					_		_			
(25)					1					
1 b Sub-total.		, .					-	57,494.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)	o those	e list	ed a	hov	 e) w	ho r	ecei	57,494.	0.	0.
from the organization ► 0						-		vocamore than pro	Do,ooo or reportable	e compensation
3 Did the organization list any former officer, director or on line 1a? If 'Yes,' complete Schedule J for such indi	truste	e, ke	y en	nplo	yee	, or	high	est compensated	employee	Yes No
4 For any individual listed on line 1a, is the sum of repo the organization and related organizations greater that such individual.	rtable o	omp	ens	atio	n an	id ot	her	compensation from		
Did any person listed on line 1a receive or accrue comfor services rendered to the organization? If 'Yes,' cor									ividual	4 X
Section B. Independent Contractors										5 X
1 Complete this table for your five highest compensated compensation from the organization. Report compensation.	indepe	ende or the	nt co	ontra enda	actor	rs th	at re	eceived more than	\$100,000 of	y vear
(A) Name and business address								(B) Description of		(C) Compensation
Brown Engineering P.O. Box 113 Seffne	er, F	L 3	335	83			E	Ingineering		136,472.
							-			
							-			
2 Total number of independent contractors (including but \$100,000 in compensation from the organization ► 1	: not lin	nited	to t	hose	e lis	ted a	abov	/e) who received n	nore than	

-			TE Statement of Re			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS	R SIMILAR AMOUNTS	i 0 0	 Federated campaigns. Membership dues Fundraising events Related organizations. Government grants (contributed) All other contributions, gifts. 	1 1 tions) 1	a b c d d e				
CONTRIBU	ANDOTH	ç	All other contributions, gifts, similar amounts not included Noncash contributions included Total. Add lines 1a-1f.	ed in Ins 1a-1f:	f 1,204,847 \$				
ä	1				Business Code	2/201/01/	•		
VEN		2a	Cultural Perfo	rmances		98,578	. 98,578	•	
R			Underwriting			63,421			
ΝCE		¢	Advertising _			1,125		1,125.	
Ä		d							-
Σ		e							
S. S.		f	All other program servi						
<u> </u>		g	Total. Add lines 2a-2f			163,124.			
		3	Investment income (incother similar amounts). Income from investmen			3,621.			3,621.
	Ì	5	Royalties			•			
			•	(i) Real	(ii) Personal				
		6a	Gross rents						
	1	b	Less; rental expenses						
	-	¢	Rental income or (loss)						
	i		Net rental income or (lo	ss)		-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
				(i) Securities	(ii) Other				
			Gross amount from sales of assets other than inventory.						
	ļ	b	Less: cost or other basis and sales expenses						
		С	Gain or (loss)						
		d	Net gain or (loss),		· · · · · · · · · · · · · · · · · · ·	•			
NUE			Gross income from fund (not including, \$		_				
S	ľ		of contributions reported						
8			See Part IV, line 18						
OTHER REVEN			Less: direct expenses						
٠		c	Net income or (loss) from	m fundraising	ev <u>ents ►</u>				
	9	;	Gross income from gam See Part IV, line 19		a				
			Less: direct expenses		þ				
J		c i	Net income or (loss) fror	n gaming activ	/iti <u>es ,</u>				
	10	ŧ	Gross sales of inventory and allowances						
İ			Less: cost of goods sold Net income or (loss) fron						
ł		<u> </u>	Miscellaneous Revenue		Business Code	52.		52.	
- }	77	a	Subcarrier	*	Dusiness Gode	70,350.			70 250
		_	Miscellaneous			18,694.			70,350.
-			Book and Record	Sale		12,810.			18,694.
		_	All other revenue			12,010.			12,810.
			otal. Add lines 11a-11d		-	101,854.			
	12		otal revenue. See instru		· ·	1,473,498.	161,999.	1,177.	105,475.
	_					~, , , .		4,111	100,410.

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.											
	not include amounts reported on lines , 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21											
2	Grants and other assistance to individuals in the United States. See Part IV, line 22											
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16…											
4 5		57,494.	0.	57,494.	0.							
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.							
7	Other salaries and wages	529,496.	264,146.	218,391.	46,959.							
8	(include section 401(k) and section 403(b) employer contributions).											
9	Other employee benefits	84,669.	38,101.	39,794.	6,774.							
10	Payroli taxes	46,071.	20,732.	21,653.	3,686.							
11	Fees for services (non-employees):											
á	Management											
1	• Legal	6,780.	6,780.									
	Accounting	33,600.		33,600.								
(Lobbying											
•	Professional fundraising services. See Part IV, line 17											
f	Investment management fees											
ç	Other											
12	Advertising and promotion	2,893.			2,893.							
13	Office expenses	10,745.		10,745.								
14	Information technology	48,076.	32,145.	9,727.	6,204.							
15	Royalties											
16	Occupancy:	76,734.	76,734.									
17	Travel	321.	131.	180.	10.							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.											
19	Conferences, conventions, and meetings	836.	99.	130.	607.							
20	Interest	43,681.	34,945.	6,989.	1,747.							
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	154,520.	119,914.	32,028.	2,578.							
	Insurance	50,947.	37,139.	11,996.	1,812.							
	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.)											
а	Engineering	92,602.	92,602.									
b	Programming	55,064.	55,064.									
c	Utilities	43,108.	10,129.	32,979.								
d	Repairs & Maintenence	33,180.	2,320.	30,860.								
е	All other expenses	142,498.	51,985.	57,941.	32,572.							
	Total functional expenses. Add lines 1 through 24e [1,513,315.	842,966.	564,507.	105,842.							
	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 X if following											
	SOP 98-2 (ASC 958-720)											
	001 00-2 (A00 300-720)			· · · · · · · · · · · · · · · · · · ·								

			(A) Beginning of year		(B) End of year
ļ	1	Cash - non-interest-bearing		1	673,91
	2	Savings and temporary cash investments	192,748.	2	213,33
	3	Pledges and grants receivable, net	15,283.	3	
	4	Accounts receivable, net	836.	4	3,98
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	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).		6	
3	7	Notes and loans receivable, net	6,000.	7	· · · · · · · · · · · · · · · · · · ·
	8	Inventories for sale or use	- 0,000.	8	
	9	Prepaid expenses and deferred charges.	65,405.	9	45,36
-	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	05, 403.	3	40,00
		Less: accumulated depreciation	2,519,759.	10 c	2,378,52
-	11	Investments – publicly traded securities.	2,313,133,	11	2,310,32
	12	Investments – other securities. See Part IV, line 11.		12	
	13	Investments – program-related. See Part IV, line 11.			
	14	Intangible assets		13	-
		Other assets. See Part IV, line 11.		14	
	16	Total accepts Add lines 1 through 15 (must arrive line 24)	2 206 052	15	0 045 40
	7	Total assets. Add lines 1 through 15 (must equal line 34)	3,386,253. 33,293.	16	3,315,12
1		Grants payable	33,293.	17	23,88
		Deferred revenue.	41,664.	18 19	10,31
2		Tax-exempt bond liabilities	41,004.	20	10,51
2		Escrow or custodial account liability. Complete Part IV of Schedule D		21	
1	2	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		22	
2	3	Secured mortgages and notes payable to unrelated third parties		23	
2		Unsecured notes and loans payable to unrelated third parties	648,758.	24	622,002
2		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.	70,010.	25	87,72
2		Total liabilities. Add lines 17 through 25	793,725.	26	743,921
		Organizations that follow SFAS 117, check here ► X and complete lines	13371201		140/52
		27 through 29 and lines 33 and 34.			
27	7 (Unrestricted net assets	2,592,528.	27	2,571,200
28		Temporarily restricted net assets	2,002,0201	28	2,011,200
29		Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ► and complete			
1		lines 30 through 34.			
30		Capital stock or trust principal, or current funds.		30	
31		Paid-in or capital surplus, or land, building, or equipment fund.		_	
32		Retained earnings, endowment, accumulated income, or other funds		31	
33		Fotal net assets or fund balances	2 502 520	32	0 571 000
34		Total fliabilities and net assets/fund balances.		33	2,571,200
	r	Total habilities and het assets/fulld balances	3,386,253.	34	3,315,121

	tubblefield Foundation	<u> </u>	59-1619213	}	Pa	ge 12
Part XI Reconciliation of Ne						
Check if Schedule O cont	ains a response to any question in	this Part XI				. X
• •				1,47		
. , ,		***********		1,51		
·		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			39,8	
		K, line 33, column (A))		2,59		
5 Other changes in net assets or full	und balances (explain in Schedule (O)SeeSchedule.O	5	1	<u>.8,4</u>	<u>89.</u>
	nd of year. Combine lines 3, 4, and	15 (must equal Part X, line 33,	6	2,57	1,2	00.
Part XII Financial Statements	and Reporting					
Check if Schedule O conta	ins a response to any question in t	this Part XII				. 🔲
					Yes	No
 Accounting method used to prepare 	are the Form 990: 🔲 Cash 🛛	X Accrual Other				
If the organization changed its m in Schedule O.	ethod of accounting from a prior ye	ear or checked 'Other,' explain				
2a Were the organization's financial	statements compiled or reviewed b	y an independent accountant?		2a		X
b Were the organization's financial	statements audited by an independ	dent accountant?		2b	X	
c If 'Yes' to line 2a or 2b, does the review, or compilation of its finan	organization have a committee tha	at assumes responsibility for oversight independent accountant?	of the audit,	2c	Х	
•		process during the tax year, explain				
separate basis, consolidated basi	s, or both:	inancial statements for the year were	ssued on a			
3a As a result of a federal award, wa Audit Act and OMB Circular A-133	as the organization required to undo 3?	ergo an audit or audits as set forth in	the Single	3a		<u>X</u>
b If 'Yes,' did the organization unde or audits, explain why in Schedul	ergo the required audit or audits? If e O and describe any steps taken t	f the organization did not undergo the to undergo such audits	required audit	3b	200 (20142

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

	han B. Stubbles							59-1	161921	L3		
Par	(III Reason for Pu	blic Charity Statu	ıs (All organization	s mus	t comp	lete th	nis par	t.) Se	e instru	ictions.		
The	organization is not a priv											
1			ociation of churches des		n sectio	n 170(b)	(1)(A)(i)					
2			Xii). (Attach Schedule I									
3			ce organization describe									
4			d in conjunction with a h	ospital (describe	d in sec	tion 170)(b)(1)(A	.)(iii) . En	iter the hosp	oital's	
5	name, city, and sta An organization ope 170(b)(1)(A)(iv). (C)	erated for the benefit of	of a college or university	7 owned	or oper	ated by	a gover	nmental	unit des	scribed in se	ection	
6 7	A federal, state, or An organization tha	local government or g	overnmental unit descri substantial part of its su	bed in s pport fr	ection 1 om a go	70(b)(1) vernmer	(A)(v). ntal unit	or from	the gen	eral public	descrit	ped
8			7 0(b)(1)(A)(vi). (Complet	o Borti	1.5							
9	X An organization that	t pormolly received: (1	Note than 22 1/20/ of	e Part I	,} 					•		
	June 30, 1975. See	section 509(a)(2). (Co) more than 33-1/3% of ons — subject to certain s taxable income (less mplete Part III.)	section :	oli tax)	from bu	Isinesse	es acquir	snip tee /3% of it ed by th	s, and gros is support fr e organizat	s rece om gr ion aft	ipts oss ter
10			exclusively to test for pu									
11	describes the type of	orted organizations des of supporti <u>ng</u> organizat	exclusively for the benef scribed in section 509(a don and complete lines)(I) or s 11e thro	ection 5 ough 11h	09(a)(2) 1.	. See si	f, or car ection 50	ry out th 19(a)(3).	e purposes Check the	of one box th	∍ or nat
	a ∐Type I	b Type II	c Type II						d 🗌	Type III -		r
е	By checking this box other than foundation section 509(a)(2).	k, I certify that the orgin managers and other	anization is not controller than one or more publ	ed directicly supp	tly or inc ported o	lirectly b rganizat	y one d ions de	or more scribed	disqualif in sectio	ied persons n 509(a)(1)	or	
f	check this box	*********	mination from the IRS f								_! .	
g	Since August 17, 200	06, has the organization	on accepted any gift or	contrib	ution fro	m any o	f the fo	llowing p	ersons?			
	(i) A person who o	directly or indirectly co	ontrols, either alone or toported organization?	ogether	with per	rsons de	scribed	l in (ii) a	nd (iii)	11 (1)	Yes	No
			ped in (i) above?									
			described in (i) or (ii) ab									
h			supported organization							. 11 g (iii)		
	(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see Instructions))	(iv) organiz column (is the ration in i) listed in overning	the organ	ou notify sization in n (i) of	organiz	s the ation in nn (i)	(vil) Amoun	t of sup	port
			(00011100100010))	docu	ment?	your su	ipport:	U.	ed in the 3.?			
				Yes	No	Yes	No	Yes	No			
<u>(A)</u>												
(B)						-						
(C)					-							
<u>(D)</u>												
(E)												
Total												
RAA F	or Paperwork Reduction	n Act Notice, see the l	nstructions for Form 99	10 or 990	-EZ.		5	Schedule	e A (Fori	m 990 or 99	0-EZ)	2011

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support				7.4.6		
Cal beg	endar year (or fiscal year jinning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		į				
	Total support. Add lines 7 through 10	iaa ata (asa inat	(Joliana)			10	
	Gross receipts from related activit		•				
	First five years. If the Form 990 is organization, check this box and	stop here		l, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶∏
	tion C. Computation of Pul			11			
	Public support percentage for 201 Public support percentage from 20						<u>%</u> %
	•••	•	,				
	16a 33-1/3% support test — 2011. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.						
b	b 33-1/3% support test 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.						
17 a	10%-facts-and-circumstances test or more, and if the organization methor organization meets the 'facts-a	eets the 'facts-an	id-circumstances'	test, check this be	ox and stop here.	Explain in Part IV I	now
	10%-facts-and-circumstances test or more, and if the organization morganization meets the 'facts-and-	eets the 'facts-an circumstances' te	id-circumstances' st. The organizati	test, check this be on qualifies as a	ox and stop here. I publicly supported	Explain in Part IV I organization	now the
18	Private foundation. If the organiza	tion did not check	k a box on line 13	, 16a, 16b, 17a, o			
BAA					Sch	edule A (Form 990	or 990-EZ) 2011

Part III 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	isted below, pleas	o complete rait i	·· <i>)</i>	· · ·		
	(a) 2007	(k) 2000	(=) 2000	(d) 0010	1 , , , , , , ,	1 07.
Calendar year (or fiscal yr beginning in) ► 1 Gifts, grants, contributions	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusuai grants.').	1.423.192	1 356 804	1 436 665	1 462 549	1,204,847.	6,884,057
2 Gross receipts from admis-		1,000,001.	1,430,003.	1,402,545.	1,204,041.	0,004,007
sions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's						
tax-exempt purpose	368,980.	412,824.	333,694.	302,898.	317,382.	1,735,778
3 Gross receipts from activities that are not an unrelated trade or business under section 513	21,580.	22,741.	18,803.	16,221.	17,008.	96,353
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge				V		0
6 Total. Add lines 1 through 5	1,813,752.	1,792,369.	1,789,162.	1,781,668.	1,539,237.	8,716,188
7a Amounts included on lines 1,					_,,,	<u> </u>
and 3 received from disqualified persons. Amounts included on lines 2	20,634.	9,739.	8,035.	13,908.	17,147.	69,463
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	0.	0.	82,757.	41,145.	0.	123,902
c Add lines 7a and 7b	20,634.	9,739.	90,792.	55,053.	17,147.	193,365
8 Public support (Subtract line 7c from line 6.)						8,522,823
Section B. Total Support		·····				
Calendar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	1,813,752.	1,792,369.	1,789,162.	1,781,668.	1,539,237.	8,716,188
royalties and income from similar sources	24,444.	4,083.	2,597.	3,141.	3,621.	37,886
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	21,1111	1,0001	27007.	3,141.	3,021.	0
c Add lines 10a and 10b	24,444.	4,083.	2,597.	3,141.	3,621.	37,886
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	-13,933.	-7,618.	5,039.	800.	1,177.	-14,535
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). See Part. IV				333.	1,1,1,	11,000
	78,617.	57,980.	95,226.	99,866.	152,465.	484,154.
13 Total support. (Add Ins 9, 19c, 11, and 12.)	1,902,880.				1,696,500.	9,223,693.
14 First five years. If the Form 990 is organization, check this box and s	for the organizati	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	.
Section C. Computation of Pub	olic Support P	ercentage			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
15 Public support percentage for 201			13. column (ft)		15	92.40 %
16 Public support percentage from 20						93.00 %
ection D. Computation of Inve	estment Incom	ne Percentage)			33.00 8
17 Investment income percentage for	· · · · · · · · · · · · · · · · · · ·			(f)	17	0.41 %
18 Investment income percentage fro						0.50 %
19a 33-1/3% support tests 2011. If the is not more than 33-1/3%, check the						
b 33-1/3% support tests — 2010. If the line 18 is not more than 33-1/3%,	ne organization did check this box and	d not check a box d stop here. The c	on line 14 or line organization qualit	19a, and line 16 i ies as a publicly s	is more than 33-1/ supported organiza	3%, and ation ►
20 Private foundation. If the organiza						

Schedule A (Form 990 or 990-EZ) 2011 Nathan B. Stubblefield Foundation	59-1619213	Page 4
Part IV Supplemental Information. Complete this part to provide the explanations repart II, line 17a or 17b; and Part III, line 12. Also complete this part for any (See instructions).	equired by Part II, line additional information	∍ 10; i.
	 	
	8-10° 10°-10° 1-10	
		
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Schedule A, Part IV - Supplemental Information

Page 5

Nathan B. Stubblefield Foundation

59-1619213

Part I	II.	Line	12 -	Other	Income
--------	-----	------	------	-------	--------

Nature and Source	2011	2010	2009	2008	2007
Subcarrier Royalty	70,350.	44,267.	50,123.	10,650.	28,000.
Miscellaneous	18,694.	5,042.	1,717.	1,131.	1,566.
Underwriting	63,421.	50,557.	43,386.	46,199.	49,051.
Total	152,465. \$	99,866. \$	95,226.	\$ 57,980. \$	78,617.

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer Identification number

Nathan B. Stubblefield Foundation	59-1619213
Part I Organizations Maintaining Donor Advised Funds or Other Sin the organization answered 'Yes' to Form 990, Part IV, line 6.	nilar Funds or Accounts. Complete if
(a) Donor advised funds Total number at end of year	
5 Did the organization inform all donors and donor advisors in writing that the assets he funds are the organization's property, subject to the organization's exclusive legal control or the organization or	eld in donor advised ntrol?Yes No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grused only for charitable purposes and not for the benefit of the donor or donor advisor purpose conferring impermissible private benefit?	rant funds can be or, or for any other Yes No
Part II Conservation Easements. Complete if the organization answere	ed 'Yes' to Form 990, Part IV, line 7.
	ervation of an historically important land area ervation of a certified historic structure
a Total number of conservation easements.	
b Total acreage restricted by conservation easements	
${f c}$ Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on structure listed in the National Register.	a historic 2d
3 Number of conservation easements modified, transferred, released, extinguished, or tax year ►	terminated by the organization during the
4 Number of states where property subject to conservation easement is located ►	•
5 Does the organization have a written policy regarding the periodic monitoring, inspect and enforcement of the conservation easements it holds?	training to the same of the sa
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation	on easements during the year
 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation ea ▶ \$	sements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirement 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	Yes No
9 In Part XIV, describe how the organization reports conservation easements in its reveinclude, if applicable, the text of the footnote to the organization's financial statements conservation easements.	s that describes the organization's accounting for
Part III Organizations Maintaining Collections of Art, Historical Treasu Complete if the organization answered 'Yes' to Form 990, Part I	ures, or Other Similar Assets. V, line 8.
1a if the organization elected, as permitted under SFAS 116 (ASC 958), not to report in it art, historical treasures, or other similar assets held for public exhibition, education, or in Part XIV, the text of the footnote to its financial statements that describes these iter	s revenue statement and batance sheet works of research in furtherance of public service, provide, ns.
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re historical treasures, or other similar assets held for public exhibition, education, or res following amounts relating to these items:	earch in furtherance of public service, provide the
(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 a amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	ssets for financial gain, provide the following
a Revenues included in Form 990, Part VIII, line 1.	
b Assets included in Form 990, Part X	

Part III Organizations Mainta	aining Collection	ns of Art, His	torical	<u>Treasures, o</u>	r Other	r Similar As	ssets	(conti	nued)
3 Using the organization's acquisiti items (check all that apply):	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection								
a Public exhibition		d Loan	or excha	inge programs					
b Scholarly research		e Other							
c Preservation for future gener	ations	لمسا	•						***************************************
4 Provide a description of the organ Part XIV.		and explain how	they fur	ther the organiza	ation's ex	xempt purpose	e in		
5 During the year, did the organiza assets to be sold to raise funds r							Yes		No
Part IV Escrow and Custodia line 9, or reported an	a l Arrangements amount on Forr	. Complete if n 990, Part X,	the org line 2	ganization an 1.	swered	d 'Yes' to F	orm 9	90, Pá	art IV,
1 a is the organization an agent, trus included on Form 990, Part X?	tee, custodian, or of	her intermediary	for contr	ibutions or other	assets i	not	Yes	. [No
b if 'Yes,' explain the arrangement					• • • • • • • •			' L	
•			-				Amour	nt	
c Beginning balance					. 1c		7	```	
d Additions during the year							-		
e Distributions during the year						·· ········			
f Ending balance									
2a Did the organization include an ar							Yes	f	No
b If 'Yes,' explain the arrangement		rait A, iiile & r i		• • • • • • • • • • • • • • • • •	• •		l les	l.	
Part V Endowment Funds. Co		ganization an	SWORD	'Ves' to For	m 990	Part IV lin	20.10		
Endownent runus.	(a) Current year	(b) Prior year	-	(c) Two years back				Four year	n hoole
1a Beginning of year balance	10,037.			C) I wo years back		hree years back 0	1000035006500	ruui yeai	S Dauk
	10,037.	10,0	20.			Ų,			
b Contributions		 		10,000	•		-		
c Net investment earnings, gains, and losses	6.		17.	20					
d Grants or scholarships		l.							
e Other expenditures for facilities and programs						0.			
f Administrative expenses									
g End of year balance	10,043.	10,0	37.	10,020	.	0.			
2 Provide the estimated percentage	of the current year	end balance (line	g, colu	ımn (a)) held as:	······				
a Board designated or quasi-endow).00 %	٥.	` ''					
b Permanent endowment ►	8								
c Temporarily restricted endowment	>	૪							
The percentages in lines 2a, 2b, a		100%.							
3a Are there endowment funds not in organization by:	the possession of t	ne organization ti	hat are h	eld and administ	ered for	the	ſ	Yes	No
(i) unrelated organizations							2-45	162	X
							3a(i)		
(ii) related organizations							3a(ii)		X
b If 'Yes' to 3a(ii), are the related or						· · · · · · · · · · · · · · · · · · ·	3b		il
4 Describe in Part XIV the intended Part VI Land, Buildings, and E				ne 10					
Description of property		t or other basis		st or other	(a) A a a	umulated	(4) E	Book va	
		vestment)		s (other)		eclation	(u) L	JOUR VA	liue
1 a Land		<i>'</i>		321,727.				321,	,727.
b Buildings			1,	893,304.	4	83,827.	1	, 409,	
c Leasehold improvements	c Leasehold improvements								
d Equipment			1.	022,568.	F	78,863.			705.
e Other			-,	449,679.		76,037.			642.
Total. Add lines 1a through 1e. (Column	···	n 990. Part X .co	lumn /R				2	,378,	
BAA	1-7			,					0) 2011
							V		-/

 (a) Description of liability
 (b) Book value

 (1) Federal income taxes
 87,722.

 (2) Accrued Employee Compensation
 87,722.

 (3)
 (4)

 (5)
 (6)

 (7)
 (8)

 (9)
 (10)

 (11)
 (11)

 Total. (Column (b) must equal Form 990, Part X, column (B) line 25)......
 87,722.

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 financial statements that reports the organization's financial statements that reports the organization's financial statements that reports the

Sch	edule D (Form 990) 2011 Nathan B. Stubblefield Foundation	59-1619213	Page 4
Pa	tt XIII Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	,473,498.
. 2	Total expenses (Form 990, Part IX, column (A), line 25).		,513,315.
3	• • • • • • • • • • • • • • • • • • • •		-39,817.
4	Net unrealized gains (losses) on investments		18,489.
5	Donated services and use of facilities		10,405.
_		·····	
6	Investment expenses.		
7	Prior period adjustments.		
8	Other (Describe in Part XIV.)		
9	Total adjustments (net). Add lines 4 through 8		18,489.
10	Excess or (deficit) for the year per audited financial statements, Combine lines 3 and 9		-21,328.
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1 1	,765,560.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	a Net unrealized gains on investments	89.	
ŀ	Donated services and use of facilities		
	Recoveries of prior year grants		
	Other (Describe in Part XIV.). See Part XIV. 2d 218,80	<u>na</u>	
	Add lines 2a through 2d		292,062.
3	Subtract line 2e from line 1.		
ى 4)	, 5 1 1,	<u>, 473, 498.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV.)		
	Add lines 4a and 4b		
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		473,498.
Par	[XIII] Reconciliation of Expenses per Audited Financial Statements With Expenses per I	Return	
1	Total expenses and losses per audited financial statements	1 1,	786,888.
	Amounts included on line 1 but not on Form 990, Part IX, tine 25:		
а	Donated services and use of facilities	39.	
b	Prior year adjustments		
	Other losses		
	Other (Describe in Part XIV.)See. Part. XIV	14	
	Add lines 2a through 2d.		273,573.
	Subtract line 2e from line 1.		
		3 1,	513,315.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
D C	Other (Describe in Part XIV.)		
	Add lines 4a and 4b	4c	E10 01E
		5 1,	513,315.
	XIV Supplemental Information		
Comp	blete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I /, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comple	IV, lines 1b and 2b;	ido
rait' anv a	v, nice 4, Fart X, nice 2, Fart XI, nice 6, Fart XII, nices 2d and 40, and Fart XIII, nices 2d and 40. Also comple dditional information.	ate this part to provi	de
u., .,			
			

Schedule D (Form 990) 2011 Nathan B. Part XIV Supplemental Information	Stubblefield Foundation	59-1619213	Page 5
Part XIV Supplemental Information	ı (continued)		
	· · · · · · · · · · · · · · · · · · ·		. – – – –
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2011	Schedule D, Part XIV - Supplemental Information	Page 6
	Nathan B. Stubblefield Foundation	59-1619213
Schedule I Other Reve), Part XII, Line 2d nue Included In F/S But Not Included On Form 990	
Cultural	Event Expense	218,804. 218,804.
), Part XIII, Line 2d nses And Losses Per Audited F/S	
Cultural	Event Expense	218,804. 218,804.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Nathan B. Stubblefield Foundation	59-1619213				
Form 990, Part III, Line 4d - Other Program Services Description					
Producing program information for listeners of the radio st	ation, approximately 9000				
program guides are distributed on a bimonthly basis					
Form 990, Part VI, Line 11b - Form 990 Review Process					
Board members not qualified to understand complexities of r	eturn. Manager reviews				
return and is given explanations as needed.					
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of	of Conflicts				
The manager reports to the board each month and discusses a	ny new business				
arangements. Board members are aware of each others busine	sses and would quickly				
bring to discussion any potential conflicts.					
Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CE	O, Exec. Dir., or Top Mgtment				
Board approves budget including all salaries					
Form 990, Part VI, Line 15b - Compensation Review & Approval Process for Offi	cers & Key Employees				
Board approves budget including all salaries					
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Availa	ble				
Documents are available at office upon request.					

2011 Schedule O - Supplemental Information Nathan B. Stubblefield Foundation

Page 2

59-1619213

Form 990, Part XI, Line 5 Other Changes in Net Assets or Fund Balances

Net Unrealized Gains or Losses on Investments..... \S Total \S