_	990-T	l t						income lax	Keturi	n	ON	1B No. 1545-0	687
Form	330-I							ion 6033(e))			4	2012	•
Department of the Treasury		For calendar year 2012 or other tax year beginning , 2012, and						•		Open to	S Public Inspec	ction for	
Internal Revenue Service		ending , 20 . ► See separate instructions.							Open to Public Inspection for 501(c)(3) Organizations Only				
\Box	Check box if address changed		Name of organization	(Chec	k box if name cha	anged a	and see instructions.)				entification n	
B Exer	npt under section	Print								(Emp	ioyees t	rust, see instru	Cuons.)
□ 5	501()() Number, street, and room or suite no. If a P.O. box, see in						see ins	structions.					
	□ 408(e) □ 220(e) Type □										lated bu instructi	siness activity	, codes
	108A 🔲 530(a)		City or town, state, a	nd ZIP o	ode					(300)	ii isti ucti	0113)	
	529(a)												
C Boo at e	k value of all assets nd of year		oup exemption nu										
			neck organization				oratio	on 501(c) tru	st _] 401(a)	trust	U Othe	r trust
			n's primary unrelat										
	= -		•	-		-		parent-subsidiary co	ntrolled g	roup? .	. ▶	☐ Yes	No
			nd identifying numb	er of t	the p	arent corporat	ion.						
_	ne books are in o							Telephor					
Par			e or Business I	ncom	1e			(A) Income	(B) E>	penses		(C) Net	
1a	• .					D							1
b						Balance ►	1c						
2	_		Schedule A, line 7)				2						
3	•		t line 2 from line 1				3						_
4a			me (attach Schedu				4a						
b	• , ,	•	4797, Part II, line 1	, ,		•	4b						_
c	•		n for trusts				4c						_
5	Income (loss) from partnerships and S corporations (attach statement) Rent income (Schedule C)					5 6						+	
6	,		ced income (Sche				7						_
7 8			royalties, and		•								+
0			ule F)				8						
9			of a section										+
J			le G)				9						
10	= :		ivity income (Sche				10						+
11			Schedule J)				11						+
12	_	-	ructions; attach sta				12						+
13	,		3 through 12 .		,		13						1
Par							limita	ations on deduction	ns) (exce	pt for c	ontrib	utions,	
	deduction	s must	be directly conn	ected	with	n the unrelate	d bus	siness income)					
14	Compensation	of offic	cers, directors, an	d trus	tees	(Schedule K)					14		
15	Salaries and w	/ages									15		
16	Repairs and m	naintena	ance								16		
17	Bad debts .										17		
18	Interest (attacl	n stater	nent)								18		
19											19		
20										, · L	20		
21			Form 4562)										
22								. 22a			2b		
23											23		_
24			•	•							24		
25											25		_
26	-	-									26		1
27		-									27		1
28		-	·								28		+
29			_								29		-
30					-	_		on. Subtract line 29 f			30		_
31			·			-					31		+
32								act line 31 from line			32 33		+
33 34	•		•					exceptions) If line 33 is greater			JJ		+

enter the smaller of zero or line 32

Form 990-T (2012) Page **2**

Part I	∐ Ta	ax Computation												
35	Organi	zations taxable as corpo	rations (s	ee instrud	ctions	for t	ax computati	ion). C	ontrolled grou	ıр				
	membe	ers (sections 1561 and 1563	3) check he	ere 🕨 🗌	See	instru	uctions and:							
а	Enter ye	our share of the \$50,000, \$	25,000, an	d \$9,925,	000 ta	axable	e income brad	ckets (i	in that order):					
	(1) \$	(2)				(3)		`	<u> </u>					
b		rganization's share of: (1) A		% tax (no	ot mo	٠, ۲	-	\$						
		itional 3% tax (not more the		-			-	\$						
С		tax on the amount on line		-						<u> </u>	35c			
36														
	Trusts taxable at trust rates (see instructions for tax computation). Income tax of the amount on line 34 from: Tax rate schedule or Schedule D (Form 1041)										36			
27	Proxy tax (see instructions)													
37	Alternative minimum tax													
											38			
39			35C or 36,	wnicneve	r app	iles .					39			
Part I		ax and Payments						1 1						
		tax credit (corporations attac						40a						
b	Other c	redits (see instructions) .												
С	General business credit. Attach Form 3800 (see instructions)													
d	d Credit for prior year minimum tax (attach Form 8801 or 8827) 40d													
е	Total c	redits. Add lines 40a throu	gh 40d .								40e			
41	Subtrac	ct line 40e from line 39 .									41			
42										42				
43														
44a	Payments: A 2011 overpayment credited to 2012													
	-	stimated tax payments .						44b						
		posited with Form 8868 .						44c						
								44d						
	Foreign organizations: Tax paid or withheld at source (see instructions) . 44d Backup withholding (see instructions)													
	-	or small employer health in	-					44f						
		redits and payments:					11 0941) .	771						
-		• •	☐ Form 2	2439			 Total ▶	44						
	Form		_	-				44g			45			
	-	ayments. Add lines 44a th									45			
46		ed tax penalty (see instruct									46			
47		e. If line 45 is less than the								•	47			
48	-	yment. If line 45 is larger t					, enter amour	nt over		•	48			
49		amount of line 48 you want:						<u> </u>	Refunded	<u> </u>	49			
Part '		tatements Regarding C						•						
1		time during the 2012											Yes	No
		ner authority over a												
		s," the organization ma						, Rep	ort of Fore	ign	Bank a	ind		
		al Accounts. If "Yes," enter			_									
2	During t	he tax year, did the organization	on receive a	distributio	n fron	າ, or w	as it the granto	or of, or	transferor to, a	fore	eign trust?	.		
	If "Yes,	" see instructions for other	forms the	organizati	ion m	ay hav	ve to file.							
3	Enter th	ne amount of tax-exempt in	terest rece	ived or a	ccrue	d duri	ng the tax ye	ar 🕨	\$					
Sched	dule A-	-Cost of Goods Sold. E	Inter meth	nod of in	vento	ry va	luation >							
1	Invento	ry at beginning of year	1			6	Inventory at	end o	fyear		6			
2	Purcha	ses	2			7	Cost of g	oods	sold. Subtra	ct				
3	Cost of	labor	3						Enter here ar					
		nal section 263A costs	in Part I, line 2							7				
		statement)	4a			8	Do the rule	s of s	section 263A	(witl		to	Yes	No
b	-	osts (attach statement)	4b			·			d or acquired					
5		Add lines 1 through 4b	5						1?					
		enalties of perjury, I declare that I have	-	s return. incli	udina a	compai	-						oelief. it	is true
Sign		and complete. Declaration of prepare												
_				1			,				May the IRS			
Here		ure of officer		Det		′				_	(see instruct			
	Joignati	ure of officer		Date Date 'a			Title Title		Data				INI	
Paid		Print/Type preparer's name		Preparer's	signati	пе			Date		eck L if	PTI	IIN	
Prepa	arer										f-employed			
Use (Firm's name ►								Firm's EIN ►				
'	-,	Firm's address ►								Pho	ne no.			

Form 990-T (2012) Page 3 Schedule C-Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1. Description of property (1) (2) (3) (4) 2. Rent received or accrued 3(a) Deductions directly connected with the income (a) From personal property (if the percentage of rent (b) From real and personal property (if the in columns 2(a) and 2(b) (attach statement) for personal property is more than 10% but not percentage of rent for personal property exceeds more than 50%) 50% or if the rent is based on profit or income) (1) (2) (3)(4) Total Total (b) Total deductions. (c) Total income. Add totals of columns 2(a) and 2(b). Enter Enter here and on page 1, here and on page 1, Part I, line 6, column (A) Part I, line 6, column (B) ▶ Schedule E-Unrelated Debt-Financed Income (see instructions) 3. Deductions directly connected with or allocable to 2. Gross income from or debt-financed property 1. Description of debt-financed property allocable to debt-financed (a) Straight line depreciation (b) Other deductions property (attach statement) (attach statement) (1) (2) (3)(4) 4. Amount of average 5. Average adjusted basis 6. Column 8. Allocable deductions acquisition debt on or of or allocable to 7. Gross income reportable 4 divided (column 6 × total of columns allocable to debt-financed debt-financed property (column 2 × column 6) by column 5 3(a) and 3(b)) property (attach statement) (attach statement) % (1) (2)% (3)% % Enter here and on page 1, Enter here and on page 1, Part I, line 7, column (A). Part I, line 7, column (B). Total dividends-received deductions included in column 8 Schedule F-Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) **Exempt Controlled Organizations** 1. Name of controlled 2. Employer 5. Part of column 4 that is 6. Deductions directly 3. Net unrelated income 4. Total of specified organization identification number included in the controlling connected with income (loss) (see instructions) payments made organization's gross income in column 5 (1) (2)(3) Nonexempt Controlled Organizations 10. Part of column 9 that is 11. Deductions directly 8. Net unrelated income 9. Total of specified 7. Taxable Income included in the controlling connected with income in (loss) (see instructions) payments made organization's gross income column 10 (1) (2)(3)(4) Add columns 5 and 10. Add columns 6 and 11. Enter here and on page 1, Enter here and on page 1, Part I, line 8, column (A). Part I, line 8, column (B).

Totals

Schedule G-Investment Inco	me of a Section	501(c)	(7), (9),	or (17) Organi	zation (see inst	truction	ıs)		
1. Description of income	2. Amount of inco		3. dired	Deductions ctly connected ach statement)	4. Set-aside (attach statem	:S	5. To and s	otal deductions set-asides (col. 3 plus col. 4)	
(1)									
(2)									
(3)									
(4)									
	Enter here and on Part I, line 9, colur						Enter here and on page 1, Part I, line 9, column (B).		
Totals									
Schedule I—Exploited Exempt	Activity Incom	e, Othe	er Than	Advertising In	ncome (see inst	ruction	s)		
Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income		4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	attrib	openses utable to umn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)									
(2)									
(3)									
(4)									
Totals	Enter here and on page 1, Part I, line 10, col. (A).	page ⁻	ere and on 1, Part I, , col. (B).					Enter here and on page 1, Part II, line 26.	
Schedule J—Advertising Incom	ne (see instruction	ns)							
Part I Income From Perio			Consoli	dated Basis					
1. Name of periodical	2. Gross advertising income	3. [Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income 6.		adership costs	7. Excess readership costs (column 6 minus column 5, bu not more than column 4).	
(1)									
(2)				-				_	
(3)				1					
(4)				-					
Totals (carry to Part II, line (5))	•								
Part II Income From Perior through 7 on a line-by-		on a S	Separat	e Basis (For ea	ch periodical list	ted in F	art II, fill	in columns 2	
1. Name of periodical	2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs		7. Excess readership costs (column 6 minus column 5, bu not more than column 4).	
(1)									
(2)									
(3)									
(4)									
Totals from Part I				_					
Enter here and on page 1, Part I, line 11, col. (A). Totals, Part II (lines 1-5)			ere and on I, Part I, , col. (B).					Enter here and on page 1, Part II, line 27.	
Schedule K—Compensation o	f Officers. Direc	tors. 2	nd Tru	stees (see instri	uctions)				
1. Name	<u> </u>			2. Title	3. Percent of time devoted to business			tion attributable to ed business	
(1)						%			
(2)						%			
(3)						%			
(4)						%			
Total Enter here and on page 1 Part II	line 14	-				<u> </u>			