Form **990-PF**

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

OMB No. 1545-0052

2014

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		ar year 2014, or tax year beginni	ng	, 201	4, and ending		устистивови Ор	en to Public Inspection	
Name o						A	Employer identification nu	mber	
Number	and str	ICIAN FOUNDATION eet (or P.O. box number if mail is not delivered	to street	addrose)	Room/suite		30-0736697		
140	i	19TH ST		uduressy	Room/suite	В	Telephone number (see instr		
		ate or province, country, and ZIP or foreign pos	tal code						
HUNTSVILLE TX 77340						C If exemption application is pending, check here.			
G C	ieck a	Ill that apply: X Initial return		Initial return of a form	er public charity	D	1 Foreign organizations, che	ck horo	
		Final return		Amended return		-	100	L_	
L C	analy to	Address change of organization:		Name change			2 Foreign organizations mee here and attach computation	ting the 85% test, check	
11 0		ection 4947(a)(1) nonexempt charit	tion 50'	1(c)(3) exempt private fo				L_	
I Fa		et value of all assets at end of year			private foundation	E	If private foundation status under section 507(b)(1)(A)	was terminated	
(fr	om Par	! II, column (c), line 16)	J Acc	counting method: X	Cash Accrual			<u> </u>	
>	\$	3,506,713.	(Part I.	column (d) must be on	cash hasis T	F	If the foundation is in a 60-	month termination	
Part	1 4	analysis of Revenue and		and the second s	The second second		under section 507(b)(1)(B)	, cneck nere •	
7.=====	E	xpenses (The total of amounts	in	(a) Revenue and expenses per books	(b) Net investmen income	t	(c) Adjusted net income	(d) Disbursements for charitable	
	S	olumns (b), (c), and (d) may not ne arily equal the amounts in column (ces-	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	moonio		income	purposes	
	(8	see instructions).)						(cash basis only)	
	1	Contributions, gifts, grants, etc, received (attach sche		3,572,490.					
	2	Ck ► if the foundn is not required to altach	Sch B			Me de			
	3	Interest on savings and temporary cash investments							
	4	Dividends and interest from securities					-		
		A Gross rents		6,000.			6,000.		
D			000.						
R E		Nel gain or (loss) from sale of assels not on line 10 Gross sales price for all		Marks and the same of the same				Y NEXT HOLD BY	
Ā	7	assets on line 6a Capital gain net income (from Part IV, line 2							
E N	8	Net short-term capital gain				0.			
U E	9	Income modifications					0.		
_	10	returns and							
	1 1	allowances b Less: Cost of							
	1	goods sold				line.			
	11	Other income (altach schedule)				SIN			
		**							
	12	Total. Add lines 1 through 11		3,578,490.		0.	6,000.		
	13	Compensation of officers, directors, trustees	etc	0.			3,000.		
	14	Other employee salaries and wages . Pension plans, employee benefits		0.					
		Legal fees (attach schedule) L-16a	10	0.			71-		
A D		Accounting fees (attach sch)		2,903.		-	2,903.	2,903.	
N 1		Other prof, fees (attach sch)		0.		Н			
O I	17	Interest		0.					
O PERAT	18	Taxes (attach schedule)(see instrs) APPRALSAL	. FEES.	6,050.			6,050.	6,050.	
A A	19	Depreciation (attach sch) and depletion	Stm+					0,000.	
1 i	20	Occupancy		16,592. 41,821.			16,592.		
N V G E	21	Travel, conferences, and meetings		1,609.			41,821.	41,821.	
A E	22	Printing and publications	• • • • [1,142.			1,142.	1,609. 1,142.	
EXPENSES	23	Other expenses (attach schedule)							
N S	24	See Line 23 Stmt Total operating and administrative		12,840.			12,840.	12,840.	
Ē	2.4	expenses. Add lines 13 through 23 · · ·		82,957.			82,957.	66 265	
	25	Contributions, gifts, grants paid - · · · ·	• • • • [1,750.			02,931.	66,365.	
	26	Total expenses and disbursements.							
_	27	Add lines 24 and 25 · · · · · · ·		84,707.			82,957.	68,115.	
	1.1-1	Excess of revenue over expenses							
		and disbursements		3,493,783.			No.		
		Net investment income (if negative, enter -0	- 1).			
	U	Adjusted net income (if negative, enter -0-)				BIT	0.		

P	art II	Balance Sheets Adduting scriedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End o	of year
		(Gee instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 8	s non interest-bearing	0.	197,701.	197,701
	4 3	Savings and temporary cash investmentsAccounts receivable			151,101
	1 "	Less: allowance for doubtful accounts			
	1 2	Pledges receivable		The second second	ensia her a cappill
	1	Less: allowance for doubtful accounts			
		Grants receivable			
	,	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
A		Less: allowance for doubtful accounts			
S S E T	8				
E	9	Prepaid expenses and deferred charges			
Ś	10	a Investments — U.S. and state government			
		obligations (attach schedule)			
	1	b Investments — corporate stock (attach schedule)			
	1	c Investments — corporate bonds (attach schedule)			
	11	Investments – land huildings and			William West
	1	equipment: basis			
	1	Less: accumulated depreciation (attach schedule)			
	12				
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment: basis			
	l.	LC33, dCCulliulaien nenrecialian			
	202	(attach schedule)	f	2 202 206	2
	15	Other assets (describe		3,293,286.	3,309,012
	10	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I).			
L	17	Accounts payable and accrued expenses.	0.	3,490,987	3,506,713.
A	18	Grants payable			NEWS THE PARTY OF
В	19	Deferred revenue			
Ł I	20	Loans from officers, directors, trustees, & other disqualified persons			
<u> </u>	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe			
E	22	/L			
S	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here And complete lines 24 through 26 and lines 30 and 31.			
F	24			1105	
υl	25	Unrestricted			
N D	26	Temporarily restricted			
- 4		Permanently restricted			
B A		Foundations that do not follow SFAS 117, check here . • X and complete lines 27 through 31.			
L					
A N	28	Capital stock, trust principal, or current funds .		H	
C	29	Paid-in or capital surplus, or land, bldg., and equipment fund			
s	30	Total lightities and und balances (see instructions)		3,490,987.	
	~ .	TOTAL HADRILLES AND NOT RECOVERING balances		3,490,987.	
		(see instructions)	0.	3 400 007	
art	ША	nalysis of Changes in Net Assets or Fund Balances	U.	3,490,987.	
7	otal n	net assets or fund holonous at h	777		
				2 2 WARRES	
				2	2 425
	and in	creases not included in line 2 (itemize)			3,493,783.
A	ad lin	es 1, 2, and 3			3 400 ===
	cci cas	es not included in line 2 (Itemize) ▶ SHOPT-TERM CART	17.T. T.O.O.O.		3,493,783.
T	otal n	et assets or fund balances at end of year (line 4 minus line 5) — Part			2,796. 3,490.987

	EIHICIAN FOUNDATION	Activities & Activities and		30-0736697	Page 3
(a) List and d	s and Losses for Tax on Invest lescribe the kind(s) of property sold (e.g.	www.cf.co.e.co.	(h)	. 17.5	
2-story brick wa	rehouse; or common stock, 200 shares	MLC Company)	(b) How acquir P — Purchas	(month, day, year)	(d) Date sold (month, day, year)
1a REAL ESTATE, 1	220 SAM HOUSTON, HUNTSVI	T.I.E TV	D — Donation		
b	1101111011	THE TA	D	08/19/14	08/29/14
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other bas	is	(h) Gain or	(logg)
	(or allowable)	plus expense of sale		(e) plus (f) mi	nus (g)
a 250,	000.	25	2,796.		
b			27730.		-2,796.
C					
d	110				
e					
Complete only for assets	showing gain in column (h) and owned	by the foundation on 12/31/69		(I) Col. (2.1	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (over column (j), if an		(I) Gains (Col gain minus column (k than -0-) or Losses (fro	hut not less
a	70				
b					-2,796.
С					
d					
е					
2 Capital gain net income o	r (net capital loss) If gain, a If (loss),	also enter in David III			
2 Capital gain net income o	r (net capital loss) — If (loss).	enter -0- in Part I, line /			
3 Net short-term capital gain	n or (loss) as defined in sections 1222(5) and (C):	2		-2,796.
in gain, also enter in Part I	l, line 8, column (c) (see instructions). If ((loss), enter -0-			
Part V Qualification I	Index Section 4040(-) (see Instructions). If (3		-2,796.
	Jnder Section 4940(e) for Redu	uced Tax on Net Investm	ent Incom	e	
	rivate foundations subject to the section	4940(a) tax on net investment in	come.)		
section 4940(d)(2) applies, lea	ave this part blank.				
as the foundation liable for the	a poetion 4040 to a series				
'Yes.' the foundation does not	e section 4942 tax on the distributable ar	mount of any year in the base per	iod?	· · · · TYes	No
1 Enter the appropriate amo	qualify under section 4940(e). Do not co	omplete this part.		L-J	LI
/a)	ount in each column for each year; see th	ne instructions before making any	entries.		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use asset	s (co	(d) Distribution r umn (b) divided by	atio
2013			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , , , , , , , , , , , , ,	-3.4.111 (0))
2012					
2012					
2010					
2009					
2009					
2 Total of line 1, column (d)					
2 Assess 2 4 3 4 3			2		
3 Average distribution ratio for number of years the founda	or the 5-year base period — divide the to ation has been in existence if less than 5	otal on line 2 by 5, or by the 5 years	3		
Title the net value of nonc	charitable-use assets for 2014 from Part	X, line 5	4		
Multiply line 4 by line 3			5		
	income (1% of Part I, line 27b)				
	s from Part XII, line 4				
	er than line 7, check the box in Part VI, li			ate. See the	

- CALLET TRAILET	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	instruc	tionel		
1	a Exempl operating foundations described in section 4940(d)(2), check here ► and enter 'N/A' on line 1.	, matruc	tions	175	- Salawa
	Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)	ONCHARGE PRO			WILLIAM .
	b Domestic foundations that meet the section 4940(e) requirements in Part V.	1			0
	check here . And enter 1% of Part I, line 27b			N 7 - 61	0.
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
2	foundations only. Others enter -0-)	2			^
3	Add lines 1 and 2	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		_0=	0.
6	Credits/Payments:	5			0.
	a 2014 estimated tax pmts and 2013 overpayment credited to 2014 6 a				
	b Exempt foreign organizations — tax withheld at source 6b				
	C Tax haid with application for extension of time to file (Farmaneer)				
	d Backup withholding group a web with build				
7		Was be		2000	
8	Enter any penalty for undernayment of estimated tay Charles have	7			0.
9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.
11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			0.
-	Enter the amount of line 10 to be: Credited to 2015 estimated tax Refunded	11			
	rt VII-A Statements Regarding Activities				
1	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a	Yes	No
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1		X
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published		1 b		X
	or distributed by the roundation in connection with the activities.				
	c Did the foundation file Form 1120-POL for this year?		1 c		X
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation		TA JUICE		-25
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ = Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	d.			311
	foundation managers • \$				
2	The second secon				PRES
	If 'Yes,' attach a detailed description of the activities.		2		X
•					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		1510		
4 8	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3		X
ŀ	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4 a		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the uses?	• • • • •	4 b		
Ū	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
·	 By language in the governing instrument, or 				
			13		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		i some		
7	was the state law remain in the governing institution of the state law remain in the governing institution.		6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		. 7	X	
0 4	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	TX - Texas		100		
Ŀ	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		. 8b		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(6) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		La Maria	Х	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	- 8 5 5		Λ	
	and addresses		. 10	Х	
BAA			1.5	Λ	

BAA

Form 990-PF (2014)

the tax year beginning in 2014?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of

Part VII-B Statements Regarding Activiti	es for Which Form	n 4720 May Be Req	uired (continued)							
5 a During the year did the foundation pay or incur as	•	- 10 to 11 to 11 to 12 t								
(1) Carry on propaganda, or otherwise attempt to	o influence legislation (se	ection 4945(e))?	· · · · Yes X	No						
on, directly or indirectly, any voter registration	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?									
(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes										
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	a charitable, etc, organi	zation described	· · · · Yes X	No						
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	charitable, scientific, lite of cruelty to children or ar	rary, or nimals?.........	· · · · Yes X	No						
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in a (see instructions)?	transactions fail to qualif current notice regarding	y under the exceptions disaster assistance		5b						
Organizations relying on a current notice regarding										
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsible If 'Yes,' attach the statement required by Regulat	ility for the grant?		Yes	No No						
6 a Did the foundation, during the year, receive any f on a personal benefit contract?	unds, directly or indirectl	y, to pay premiums	· · · · Yes X	No						
b Did the foundation, during the year, pay premium	is, directly or indirectly, o	n a personal benefit con	tract?	6 b X						
If 'Yes' to 6b, file Form 8870.										
7 a At any time during the tax year, was the foundationb If 'Yes,' did the foundation receive any proceeds										
Part VIII Information About Officers, Di										
and Contractors		- Odnadaon Mana	gers, riigiliy r ala E	impioyees,						
1 List all officers, directors, trustees, foundation		ompensation (see inst	uctions).							
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances						
GEORGE H. RUSSELL										
1401 - 19TH STREET	DIR/PRESIDENT									
HUNTSVILLE TX 77340	20.00	0.	0.	0.						
MARGARET A. SHURGOT										
1401 - 19TH STREET	DIRECTOR			_						
HUNTSVILLE TX 77340	1.00	0.	0.	0.						
SUZANNE B. RUSSELL 1401 - 19TH STREET	DIRECTOR									
HUNTSVILLE TX 77340	1.00	0.	0.	Ö.						
See Information about Officers, Directors, Trustees, Etc.	1100	0.	0.	0.						
		ν. 0.	0.	0.						
2 Compensation of five highest-paid employee		luded on line 1 – see ir	nstructions). If none, er	nter 'NONE.'						
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances						
NONE			Componedation							
			X11	المرابات الم						
The state of the s										
				-						
Total number of other employees paid over \$50,000 .				None						

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)							
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'							
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation						
NONE							
Total number of others receiving over \$50,000 for professional services	None						
Part IX-A Summary of Direct Charitable Activities							
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses						
1 THE ETHICIAN FOUNDATION OWNS & OPERATES FIVE MUSEUMS. NUMEROUS CONFERENCES AND TOURS WERE CONDUCTED THROUGHOUT THE YEAR FOR GEN PUBLIC & ORGS.							
ADDITIONAL ACQUISIONS OF ART WORK & FURNISHINGS WERE OBTAINED FOR DISPLAY.	66,365.						
2 DONATION TO SAM HOUSTON STATE UNIVERSITY; HUNTSVILLE, TX TO PROMOTE THE ARTS	-						
	1,500.						
3 DONATION TO FM980 VOLUNTEER FIRE DEPT - 501(c)(3) ORG							
FOR PROTECTION OF WILDLIFE SANCTUARIES	-						
	100.						
4							
Part IX-B Summary of Program-Related Investments (see instructions)							
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount						
2							
All other program-related investments. See instructions.							
3							
Total. Add lines 1 through 3							
ВАА	Form 990-PF (2014)						

BAA

Form **990-PF** (2014)

	see instructions.)	7.1: 	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: A Average monthly fair market value of securities	1 a	
	Average of monthly cash balances	1 b	96,326.
	Fair market value of all other assets (see instructions)	1 c	90,320.
	Total (add lines 1a, b, and c)	1 d	96,326.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c	1308	90,320.
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	96,326.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3		30/0201
4	(for greater amount, see instructions)	4	1,445.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	94,881.
6	Minimum investment return. Enter 5% of line 5	6	4,744.
Pa	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here	founda	ations
1	Minimum investment return from Part X, line 6	1	
	a Tax on investment income for 2014 from Part VI, line 5		
	Income tax for 2014. (This does not include the tax from Part VI.)		
•	Add lines 2a and 2b · · · · · · · · · · · · · · · · · ·	2 c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	100000	
5	Add lines 3 and 4		
6	Deduction from distributable amount (see instructions)		
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Pa	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26		
			68,115.
	Program-related investments — total from Part IX-B	L ESTLYS.	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the: 3 Suitability test (prior IRS approval required)	3 a	
- 1	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	68,115.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	68,115.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	undation	

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				
line 7				
a Enter amount for 2013 only				
b Total for prior years: 20, 20, 20			Historia Company	
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e				
XII, line 4: \$ 68,115.				
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years				
(Election required — see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2014 distributable amount				
e Remaining amount distributed out of corpus	68,115.			
5 Excess distributions carryover applied to 2014	1			
(If an amount appears in column (d), the same amount must be shown in column (a).)				
(, ,				
6 Enter the net total of each column as				
indicated below: a Corpus. Add lines 3f, 4c, and 4e, Subtract line 5 · · · ·	60 115			
	68,115.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has				
been issued, or on which the section 4942(a)				
tax has been previously assessed `				
d Subtract line 6c from line 6b. Taxable amount – see instructions		0.		
e Undistributed income for 2013. Subtract line 4a from line 2a, Taxable amount — see instructions			0.	
6 11 Partition of the course of 10044 0 10 10 10				
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2015				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2009 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	60 115			
10 Analysis of line 9:	68,115.			
a Excess from 2010 0.				
b Excess from 2011 0 .				
c Excess from 2012 0 .				
d Excess from 2013 0.				表表的表现的
e Excess from 2014				

b Check box to indicate whether the foundation	is a private operating	j loundation describ	ed in section	X 4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
each year listed	0.				N/A
b 85% of line 2a	0.				N/A
C Qualifying distributions from Part XII, line 4 for each year listed	68,115.				68,115.
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	68,115.	0.	0.	0.	68,115.
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test – enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					,
(4) Gross investment income					
Part XV Supplementary Information			foundation had	\$5,000 or more	in
assets at any time during th		tructions.)			
Information Regarding Foundation Managers a List any managers of the foundation who have close of any tax year (but only if they have confidence of the Suzanne Brusse. Brusse.	e contributed more the ontributed more than s	nan 2% of the total o \$5,000). (See section	contributions receive on 507(d)(2).)	d by the foundation be	efore the
b List any managers of the foundation who own a partnership or other entity) of which the foundation NONE	n 10% or more of the ndation has a 10% or	stock of a corporation greater interest.	on (or an equally lar	ge portion of the owne	ership of
2 Information Regarding Contribution, Gran Check here X if the foundation only marequests for funds. If the foundation makes g complete items 2a, b, c, and d.	kes contributions to p	reselected charitab	le organizations and		
a The name, address, and telephone number of	or e-mail address of th	ne person to whom	applications should I	oe addressed:	
b The form in which applications should be sub	omitted and informatio	on and materials the	y should include:		· · · · · · · · · · · · · · · · · · ·
c Any submission deadlines:					

Form 990-PF (2014) THE ETHICIAN FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment										
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor		Purpose of grant or contribution	Amount						
Name and address (home or business)	substantial contributor									
a Paid during the year										
SAM HOUSTON STATE UNIV										
BOX 2537 HUNTSVILLE TX 77341-25	37	501 (c) (3)	PROMOTE THE ARTS	1,500.						
FM 980 VOLUNTEER FIRE DEPT	57	301 (0) (3)		,						
SAN JACINTO COUNTY			1							
WATERWOOD TX 7734	0	501(c)(3)	PROTECTS WILDLIFE PRESERVES	100.						
THE LONGLEAF ALLIANCE			NATURE CONSERVANCY							
12130 DIXON CENTER ROAD			1							
ANDALUSIA AL 3642	0	501(c)(3)		50.						
BAYOU LAND CONSERVANCY		li .								
10330 LAKE RD. BLDG. J		E01/a)/2)	NATURE CONCERNANCY	100.						
HOUSTON TX 7707	0	201 (C) (3)	NATURE CONSERVANCY	100.						
	ſ									
				W						
			3a	1,750.						
b Approved for future payment				1,750.						
Bripprovou for rataro payment										
		N.								
			1							
aŭ										
Total		** ****** * *		b						

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by	section 512, 513, or 514		
1 Program service revenue:		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)	

b		15-					
C							
a							
e							
١ ~	Eggs and contracts from any any and any air						
	Fees and contracts from government agencies			-			
	Membership dues and assessments						
	Interest on savings and temporary cash investments Dividends and interest from securities						
	Net rental income or (loss) from real estate:	TENDER DESIGNATION OF THE PERSON OF THE PERS					
	Debt-financed property			RELIEF AND			
	Not debt-financed property						
	Net rental income or (loss) from personal property			16	6,000.		
7	Other investment income			- 10			
	Gain or (loss) from sales of assets other than inventory			18	141,204.		
	Net income or (loss) from special events						
	Gross profit or (loss) from sales of inventory						
	Other revenue:						
''	Other revenue.						
a b							
C		-					
d							
e							
-	Subtotal Add columns (b) (d) and (o)	EMILE BARREY		G 100 00 00 00			
12	Subtotal. Add columns (b), (d), and (e)				147,204.		
	Total. Add line 12, columns (b), (d), and (e)				13	147,204.	
200	worksheet in line 13 instructions to verify coloulations	١			-		
	worksheet in line 13 instructions to verify calculations						
	worksheet in line 13 instructions to verify calculations XVI-B Relationship of Activities to the		shment of Exem	pt Purpos	es		
art	XVI-B Relationship of Activities to the	Accompli	l in column (e) of Par	t X\/I-Δ contrib	outed importantly to the	20	
Pari	No. Explain below how each activity for which inco- accomplishment of the foundation's exempt put	Accompliance is reported urposes (other	d in column (e) of Par than by providing fun	t XVI-A contrib lds for such pu	outed importantly to thurposes). (See instruc	20	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the purposes). (See instructive COSTS.	ne ctions.)	
Part Line	No. Explain below how each activity for which inco- accomplishment of the foundation's exempt put	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the purposes). (See instructive COSTS.	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the purposes). (See instructive COSTS.	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the purposes). (See instructive COSTS.	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the purposes). (See instructive COSTS.	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the purposes). (See instructive COSTS.	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the purposes). (See instructive COSTS.	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the purposes). (See instructive COSTS.	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	
Part Line	No. Explain below how each activity for which inco accomplishment of the foundation's exempt put THE MINIMAL RENT OF AN OFFICE	Accompliance is reported arposes (other	d in column (e) of Par than by providing fun MUSEUM OFFSE	t XVI-A contritions of the contribution of the	outed importantly to the property (See instruction)	ne ctions.)	

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

de	scribed	rganization direct d in section 501(c o political organiza	ly or indirectly enga) of the Code (other	age in any of the than section	ne following with 501(c)(3) organi:	any other o zations) or i	rganization n section 527,			Yes	No
	_	-	ig foundation to a r	noncharitable e	exempt organizat	ion of					
								reger a un un reger	1 a (1)	\$100 KIN	Χ
											X
		nsactions:									TA THE
(1)	Sale	s of assets to a no	oncharitable exem	ot organization					1 b (1)	(0000150)	Х
			om a noncharitabl								X
			ipment, or other a								X
` '			gements								X
, ,			ees						\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		X
, ,		J	es or membership						2 0		X
			ment, mailing lists,	_					200 (0)		X
					o. para orriproyou	•		SENSONIE SO SE SE DESCRICO			
the	e aood	s, other assets, or	above is 'Yes,' cor r services given by arrangement, sho	the reporting f	oundation. If the	foundation	received less tha	an fair market va	ket value of alue in		
(a) Line	no.	(b) Amount involved	d (c) Name o	of noncharitable ex	xempt organization	(d	Description of tran	sfers, transactions,	and sharing arrar	gements	s
							=/=r===::::==::::::::::::::::::::::::::				
		o-e-wir- m-ne-bi-e-									
de	scribe	undation directly o d in section 501(c complete the follow	r indirectly affiliate) of the Code (othe ving schedule.	d with, or relate er than section	ed to, one or moi 501(c)(3)) or in s	e tax-exem ection 527	pt organizations	# 1084004 NE NE WELLES	Ye	s X	No
	(a)	Name of organiz	ation	(b) Ty	pe of organization	on	(0) Description of	relationship		
Sign	Under po correct,	enalties of perjury, I dec and complete, Declarat	clare that I have examine ion of preparer (other tha	d this return, includi in taxpayer) is base	ing accompanying sch d on all information of	edules and sta which prepare	tements, and to the be r has any knowledge.	est of my knowledge a	May the	IRS discu	JSS
Here					11/16/15	, • ,	PRESIDENT		preparer	n with the	elow
	Signa	ture of officer or trustee		The state of the s	Date		itle			Yes	No
		Print/Type preparer's	name	Prepare	r's signature		Date	Check X			
Paid		Candvce F.	Dixon, CPA	Α			11/16/15	self-employed	P0095.	3675	
	ror	Firm's name	Candyce F.		CDA		144/40/43		-2123532	J U I J	
Prepa Use O		Firm's address	1106 Avenu		Of th			74	4143334		
use U	illy		Huntsville			TX 77	340-4444	Phone no. (C	36) 291-	7316	
BAA			TIGHTOATTIC			TV //	JIV TITT	1 13	Form 99		

Schedule B

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

Schedule of Contributors

2014

Employer Identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization 30-0736697 THE ETHICIAN FOUNDATION Organization type (check one): Section: Filers of: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule 💢 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

_		
n.	- ~	_
_,	-1()	

of

1 of **Part 1**

Name of organization

Employer identification number

30-0736697

THE ET	HICIAN FOUNDATION	30-07	36697
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	e is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GEORGE H & SUZANNE B RUSSELL 1401-19TH STREET HUNTSVILLE TX 77340	\$3,511,050.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DR. DIMITRIOS MANTZOROS 133 MEDICAL PARK LANE HUNTSVILLE TX 77340	\$60,0 <u>0</u> 0.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ _\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
and the st		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total	(d) Type of contribution

Person Payroll Noncash

(Complete Part II for noncash contributions.)

Page

1 to

2 of Part II

Name of organization

THE ETHICIAN FOUNDATION

Employer identification number

30-0736697

	Noncash Property (see instructions). Use duplicate copies of Part II if additional space		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	HISTORIC HOUSE MUSEUM (BAIRD HOUSE) 1418 UNIVERSITY AVE HUNTSVILLE, TX 77340 PER APPRAISAL	\$215,000.	05/30/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	MUSEUM OF ECCLETIC ART (BIRMINGHAM HOUSE) 1428 UNIVERSITY AVE HUNTSVILLE, TX 77340 PER APPRAISAL	\$225,000.	05/30/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	MUSEUM_OF_TEXAS_ART_(KING_HOUSE) 1425_UNIVERSITY_AVE HUNTSVILLE, TX 77340 PER_APPRAISAL	\$250,000.	05/30/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	MUSEUM_OF_TEXAS_STONEWARE_(MARTIN_HOUSE) 1501_UNIVERSITY_AVE HUNTSVILLE, TX 77340 PER_APPRAISAL	\$125,000.	_05/30/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	PELICAN POINT CONFERENCE CENTER & LOTS6,7,RES 20369 BAY HILL ROAD HUNTSVILLE, TX PER APPRAISAL	\$500,000.	08/04/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	PELICAN POINT CONFERENCE CENTER #2 LOT 4 BAY HILL ROAD HUNTSVILLE, TX PER APPRAISAL	\$360,000.	08/04/14

Page

2 to

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

of Part II

Name of organization

BAA

THE ETHICIAN FOUNDATION

Employer Identification number

30-0736697

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space	is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1220 SAM HOUSTON & LOT HUNTSVILLE, TX 77340		
	PER APPRAISAL	\$285,000.	08/19/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	MUSEUM OF TEXAS FURNITURE (SMITHER WAREHOUSE) 1011 - 14TH STREET HUNTSVILLE, TX 77340 PER APPRAISAL	\$270,000.	10/31/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	ARCHAELOGICAL SITE: DOOLEY BOTTOM (131 AC) SAN JACINTO COUNTY, TX		
v=1	PER APPRAISAL	\$197,000.	12/04/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	ARCHAELOGICAL SITE: POOL'S CREEK (46 AC) SAN JACINTO COUNTY, TX		
	PER APPRAISAL	\$97,000.	12/04/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	21 DEDICATED WILDLIFE PRESERVES (785.41 AC) SAN JACINTO COUNTY, TX		
	PER APPRAISAL	\$982,000.	12/30/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Form **4562**

Depreciation and Amortization (Including Information on Listed Property) Attach to your tax return.

OMB No. 1545-0172

2014

Department of the Treasury Internal Revenue Service Attachment Sequence No. 179 (99) Information about Form 4562 and its separate instructions is at www.irs.gov/form4562. Name(s) shown on return Identifying number THE ETHICIAN FOUNDATION 30-0736697 Business or activity to which this form relates Form 990-PF page 1

Par	Election To Exp Note: If you have an	ense Certain	Property Under Se	ction 179				
1	Maximum amount (see instr						1	
2	Total cost of section 179 pro	•				۱	2	
3	Threshold cost of section 17					4	3	
4	Reduction in limitation. Subt						4	
5	Dollar limitation for tax year.	Subtract line 4 fro	om line 1. If zero or less, e	enter -0 If married	d filing	1		
6	separately, see instructions	Description of property		(b) Cost (business		(c) Elected cost	5	
	(6)			(b) Sost (business)	use only)	(C) Liected cost		
7	Listed property. Enter the ar	mount from line 29)		. 7		-	
8	Total elected cost of section						8	
9	Tentative deduction. Enter t	he smaller of line	5 or line 8				9	
10	Carryover of disallowed ded						10	
11	Business income limitation.	Enter the smaller	of business income (not le	ess than zero) or li	ine 5 (see inst	rs)	11	
12	Section 179 expense deduc	tion. Add lines 9 a	ind 10, but do not enter m	ore than line 11.			12	
13	Carryover of disallowed ded				▶ 13			
	Do not use Part II or Part III							
Par	t II Special Depreci	ation Allowar	nce and Other Depr	eciation (Do no	ot include liste	d property.) (S	See in	structions.)
14	Special depreciation allowar tax year (see instructions)	nce for qualified pr	roperty (other than listed p	property) placed in	service during	g the	14	
15	Property subject to section						15	
16	Other depreciation (including						16	
Par			include listed property.) (S		· · · · · · · ·		10	
ı uı	till IlliAolto Depret	ומנוסוו (נסווטני)	Section					
17	MACRS deductions for asset	4. 1 11 1						
			ce in tax years beginning				17	
18	If you are electing to group a asset accounts, check here	any assets placed	in service during the tax	year into one or m	ore general	▶ 🔲		
	If you are electing to group a asset accounts, check here Section B	any assets placed	in service during the tax	year into one or m	ore general	▶ 🔲		m
	If you are electing to group a asset accounts, check here	any assets placed	in service during the tax	year into one or m	ore general	▶ 🔲		m (g) Depreciation deduction
18	If you are electing to group a asset accounts, check here Section B (a)	- Assets Placed (b) Month and year placed	in service during the tax y in Service During 2014 (c) Basis for depreciation (business/investment use	year into one or mo	ore general	epreciation S		(g) Depreciation
18	If you are electing to group a asset accounts, check here Section B (a) Classification of property	- Assets Placed (b) Month and year placed	in service during the tax y in Service During 2014 (c) Basis for depreciation (business/investment use	year into one or mo	ore general	epreciation S		(g) Depreciation
18 19 a	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property	- Assets Placed (b) Month and year placed	in Service during the tax in Service During 2014 (c) Basis for depreciation (business/investment use only — see instructions)	year into one or mo	he General D (e) Convention	epreciation S	Syste	(g) Depreciation deduction
19 a	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 7-year property	- Assets Placed (b) Month and year placed	in service during the tax y in Service During 2014 (c) Basis for depreciation (business/investment use	year into one or mo	ore general	epreciation S	Syste	(g) Depreciation
19 a	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property	- Assets Placed (b) Month and year placed	in Service during the tax y in Service During 2014 (c) Basis for depreciation (business/investment use only — see instructions) 3,162.	year into one or moved	he General D (e) Convention	epreciation \$ (f) Method	Syste	(g) Depreciation deduction
19 a b c d	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property	- Assets Placed (b) Month and year placed	in Service during the tax in Service During 2014 (c) Basis for depreciation (business/investment use only — see instructions)	year into one or mo	he General D (e) Convention	epreciation S	Syste	(g) Depreciation deduction
19 a b c d e f	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 20-year property	- Assets Placed (b) Month and year placed	in Service during the tax y in Service During 2014 (c) Basis for depreciation (business/investment use only — see instructions) 3,162.	year into one or mo	he General D (e) Convention	epreciation S (f) Method 200 DE	Syste	(g) Depreciation deduction
19 a b c d d e f g	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 20-year property	- Assets Placed (b) Month and year placed	in Service during the tax y in Service During 2014 (c) Basis for depreciation (business/investment use only — see instructions) 3,162.	year into one or moved	he General D (e) Convention MQ MQ	epreciation S (f) Method 200 DE 150 DE	Syste	(g) Depreciation deduction
19 a b c d d e f g	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential	- Assets Placed (b) Month and year placed	in Service during the tax y in Service During 2014 (c) Basis for depreciation (business/investment use only — see instructions) 3,162.	Tax Year Using t (d) Recovery period 7.0 yrs 15.0 yrs 25 yrs 27.5 yrs	he General D (e) Convention MQ MQ	epreciation S (f) Method 200 DE 150 DE S/L S/L	Syste	(g) Depreciation deduction
19 a b c d e f g h	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property	- Assets Placed (b) Month and year placed in service	in Service during the tax your service During 2014 (c) Basis for depreciation (business/investment use only — see instructions) 3,162.	Tax Year Using t (d) Recovery period 7.0 yrs 15.0 yrs 25 yrs 27.5 yrs 27.5 yrs	mQ MQ MM MM MM MM	epreciation S (f) Method 200 DE 150 DE S/L S/L S/L	Syste	(g) Depreciation deduction 339.
19 a b c d e f g h	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 20-year property Residential rental property Nonresidential real	- Assets Placed (b) Month and year placed in service	in Service during the tax your service During 2014 (c) Basis for depreciation (business/investment use only — see instructions) 3,162. 43,379.	7.0 yrs 25 yrs 27.5 yrs 27.5 yrs 39 yrs	me general D (e) Convention MQ MQ MMQ MMM MMM MMM	epreciation S (f) Method 200 DI 150 DI S/L S/L S/L S/L	Syste	(g) Depreciation deduction 339. 894.
19 a b c d e f g h	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property	- Assets Placed (b) Month and year placed in service	in Service during the tax y in Service During 2014 (c) Basis for deprenation (business/investment use only — see instructions) 3, 162. 43, 379.	7.0 yrs 15.0 yrs 25 yrs 27.5 yrs 27.5 yrs 39 yrs 39.0yrs	my My MM MM MM	epreciation S (f) Method 200 DE 150 DE S/L S/L S/L S/L S/L	Syste 33	(g) Depreciation deduction 339. 894. 2,724. 12,635.
19 a b c c d e f f g h h	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 20-year property Residential rental property Nonresidential real property Section C —	- Assets Placed (b) Month and year placed in service	in Service during the tax your service During 2014 (c) Basis for depreciation (business/investment use only — see instructions) 3,162. 43,379.	7.0 yrs 15.0 yrs 25 yrs 27.5 yrs 27.5 yrs 39 yrs 39.0yrs	my My MM MM MM	epreciation S (f) Method 200 DE 150 DE S/L S/L S/L S/L S/L S/L Depreciation	Syste 33	(g) Depreciation deduction 339. 894. 2,724. 12,635.
19 a b c d d e f f g h i 20 a a	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property	- Assets Placed (b) Month and year placed in service	in Service during the tax y in Service During 2014 (c) Basis for deprenation (business/investment use only — see instructions) 3, 162. 43, 379.	7.0 yrs 15.0 yrs 25 yrs 27.5 yrs 27.5 yrs 39 yrs 39.0yrs ax Year Using the	my My MM MM MM	epreciation S (f) Method 200 DE 150 DE S/L S/L S/L S/L S/L S/L S/L S/	Syste 33	(g) Depreciation deduction 339. 894. 2,724. 12,635.
19 a b c d e e f g h i 20 a b	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property	- Assets Placed (b) Month and year placed in service	in Service during the tax y in Service During 2014 (c) Basis for deprenation (business/investment use only — see instructions) 3, 162. 43, 379.	7.0 yrs 15.0 yrs 25 yrs 27.5 yrs 27.5 yrs 27.5 yrs 39 yrs 39.0yrs ax Year Using the	MQ MM M	epreciation S (f) Method 200 DE 150 DE S/L S/L S/L S/L S/L S/L S/L S/	Syste 33	(g) Depreciation deduction 339. 894. 2,724. 12,635.
19 a b c c d e e f g h i 20 a b c c	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property	- Assets Placed (b) Month and year placed in service 05/14 Various - Assets Placed in	in Service during the tax y in Service During 2014 (c) Basis for deprenation (business/investment use only — see instructions) 3, 162. 43, 379.	7.0 yrs 15.0 yrs 25 yrs 27.5 yrs 27.5 yrs 39 yrs 39.0yrs ax Year Using the	my My MM MM MM	epreciation S (f) Method 200 DE 150 DE S/L S/L S/L S/L S/L S/L S/L S/	Syste 33	(g) Depreciation deduction 339. 894. 2,724. 12,635.
19 a b c d e f g h i 20 a b c C Par	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 20-year property 25-year property Nonresidential rental property Section C — Class life 12-year 40-year Summary (See insertions)	- Assets Placed (b) Month and year placed in service 05/14 Various - Assets Placed in service	in Service During 2014 (c) Basis for deprenation (business/investment use only — see instructions) 3,162. 43,379. 169,957. 1,102,381. n Service During 2014 T	7.0 yrs 15.0 yrs 25 yrs 27.5 yrs 27.5 yrs 39 yrs 39.0yrs ax Year Using the	MQ MM MM MM MM MM MM MM MM MM	epreciation S (f) Method 200 DE 150 DE S/L S/L S/L S/L S/L S/L S/L S/	B Syste	(g) Depreciation deduction 339. 894. 2,724. 12,635.
19 a b c c d e e f g h i 20 a b c c	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 20-year property Residential rental property Nonresidential real property Section C — Class life 12-year 40-year Listed property. Enter amou Total. Add amounts from line 12, 1	- Assets Placed (b) Month and year placed in service 05/14 Various - Assets Placed in service	in Service during the tax your service During 2014 (c) Basis for deprenation (business/investment use only — see instructions) 3, 162. 43, 379. 169, 957. 1, 102, 381. n Service During 2014 T	Tax Year Using to (d) Recovery period 7.0 yrs 15.0 yrs 25 yrs 27.5 yrs 27.5 yrs 39 yrs 39.0yrs ax Year Using the	MQ MM M	epreciation S (f) Method 200 DE 150 DE S/L S/L S/L S/L S/L S/L S/L S/	B Syste	(g) Depreciation deduction 339. 894. 2,724. 12,635.
19 a b c c d e e f g h i 20 a b c c Par 21	If you are electing to group a asset accounts, check here Section B (a) Classification of property 3-year property 5-year property 10-year property 20-year property 20-year property Residential rental property Nonresidential real property Section C — Class life 12-year 40-year Listed property. Enter amou	Assets Placed (b) Month and year placed in service 05/14 Various Assets Placed in structions.) nt from line 28 ines 14 through 17, lin. Partnerships and S	in Service During 2014 (c) Basis for depreciation (business/investment use only — see instructions) 3, 162. 43, 379. 169, 957. 1, 102, 381. n Service During 2014 T	Tax Year Using to (d) Recovery period 7.0 yrs 15.0 yrs 25 yrs 27.5 yrs 27.5 yrs 39 yrs 39.0yrs ax Year Using the 12 yrs 40 yrs	MQ MM MM MM MM MM MM MM MM MM	epreciation S (f) Method 200 DE 150 DE S/L S/L S/L S/L S/L S/L S/L S/	B Syste	(g) Depreciation deduction 339. 894. 2,724. 12,635.

Pa	art V Listed	Property (Incoment, recreation	clude automob	iles, cert		r vehicles	, certai	n airc	raft,	certain	comput	ers, and	30-0 i propert) 73669 y used fo	97 ir	Page
	Note: F	or any vehicle fo	r, or amuseme	nu.) Lucina th	a stand	ard miles	~~ ~~4-	owaran.								
-		s (a) through (c) o n A – Deprecia														
24	a Do you have evide	nce to support the b	usiness/investmer	nt use clain	ned?	aution: (Yes		4							
	(a)	(b)	(c)		d)		(e)		140	(f)	res, is t	ne evider	nce written	(h)	Yes	(i) N
	Type of property (list vehicles first)	Date placed in service	Business/ investment use percentage	Cos	it or basis	(busin	for depred ess/invest use only)			Recovery period	0	Method/ envention		preciation eduction	100000	Elected ction 179
25	Special depreci	ation allowance	for qualified list	ted prope	erty plac	ed in serv	vice du	ing th	e tax	x vear	l and		+			cost
26	used more than	<u>i 50% in a qualifi</u> nore than 50% ir	ed business us	e (see in	struction	<u>ıs)</u>	•0.000		***		444	25			110000	
		Total start 50 70 II	l d qualified bu	3111033 U									I		-	
27	Property used 5	0% or less in a q	ualified busine	ess use:												
												-			世皇	
28	Add amounts in	column (h) lines	25 through 27	7 Entor h				340		-		122				
29	Add amounts in	column (h), lines column (i), line 2	6. Enter here a	and on lir	iere and ne 7. pad	on line 2 de 1	1, page	1.	• 🔅 •		* * = :	28		29	11223	
2				Section	B — Infe	ormation	on Us	e of \	/ehid	cles						
Con to ye	nplete this section our employees, fir	for vehicles used st answer the qu	d by a sole pro estions in Sect	prietor, p	artner, o	or other 'n	nore the	an 5%	owi	ner,' or	related	person.	If you pr	ovided v	ehicles	
								T			528	7.8W		72 1000	Ι .	
30	during the year	nvestment miles (do not include		Vehi	cle 1	(b Vehic	de 2	V	(c) ehic	le 3	Vehi	i) icle 4	Veh	e) icle 5	Veh	f) icle 6
31		S)														
32	Total other pers	iles driven during the onat (noncommu	ting)													
	miles driven .															
33	Total miles drive lines 30 through	n during the yea	r. Add													
				Yes	No	Yes	No	Ye	s	No	Yes	No	Yes	No	Yes	No
34	Was the vehicle during off-duty h	available for per ours?	sonal use													
35	Was the vehicle than 5% owner o	used primarily by	/ a moro						1							
36	ls another vehicl personal use?	e available for							1							
		Section C	- Questions	for Emp	loyers \	Nho Pro	vide Ve	hicle	s for	r Use h	v Their	Employ	200			
Ansv 5% c	ver these question owners or related p	is to determine if	Voll meet an a	exception	to comp	oleting Se	ection E	for v	ehicl	es use	d by em	ployees	who are	not moi	e than	
37	Do you maintain by your employed	a written policy s	tatement that p	orohibits	ali perso	onal use o	of vehic	les, ir	nclud	ling cor	nmuting	1			Yes	No
38	Do you maintain employees? See	a written policy s	tatement that r	nrohibite	norcono	Luca of v	ممامامم					our		***		
39	Do you treat all u															
40	Do you provide myehicles, and reta	nore than five yet	nicles to your a	mnlovoo	c obtair	informa							of the			
41	Do you meet the Note : <i>If your ans</i>															
ar	t VI Amortiz	ration	, 40, 01 41 15 1	es, ao 1	ioi comp	nete Seci	ion B to	or the	cove	ered ve	hicles.				A TORS	
		(a)			b)		(c)		T	(6	d)		(e)		(f)	
	Desc	ription of costs		Date amo	ortization gins	· A	mortizable amount	9			de	Amo	rtization riod or		mortization or this year	l
12	Amortization of co	osts that begins o	during your 20:	14 tay yo	or (000 i	notwistle					******	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	centage		, and your	
_		- 10 mar bogins	aaring your 20	i i iax ye	ar (5 00 1	nstruction	118):					T				
3 4	Amortization of o	osts that began I	before your 20	14 tax ye	ar	Tekna pospora							43			
	Total. Add amou	irits iri column (†)	. See the instru	ictions fo		to report 20812 06/2			• •	· · · · ·		• • •	44		455	(00111
														FO	rm 4562	(2014)

30-0736697

1

Election Statement

Election out of Qualified Economic Stimulus Property

Election Out of Qualified Economic Stimulus Property

Attach to your return

Taxpayer hereby elects under IRC Section 168(k)(2)(D)(iii) out of having Qualified Economic Stimulus property for the following asset classes placed in service during the tax year ending:

December 31, 2014

ALL ELIGIBLE CLASSES OF PROPERTY

Additional Information

MUSEUM COLLECTIONS

THE ETHICIAN FOUNDATION HAS A COLLECTION OF BOOKS, MANUSCRIPTS, PHOTOGRAPHS, ARTWORK, MAPS, MICROFILM. AND OTHER MEMORABILIA ALONG WITH FURNITURE, DECORATIVE FURNISHINGS AND ACCESSORIES, RELATED TO HISTORY THAT IS AVAILABLE TO THE GENERAL PUBLIC FOR VIEWING AND RESEARCH. THE ETHICIAN FOUNDATION HAS ADOPTED A POLICY OF NOT CAPITALIZING THE COLLECTION IN ITS FINANCIAL STATEMENTS. ACCORDINGLY, NO COLLECTION ITEMS ARE RECOGNIZED AS ASSETS, WHETHER THEY ARE PURCHASED OR RECEIVED. THE BOARD OF DIRECTORS VOLUNTEERS TO ENSURE THE VARIOUS COLLECTIONS ARE PROTECTED, PRESERVED AND MADE ACCESSIBLE TO THE PUBLIC. IT IS THE POLICY OF THE ETHICIAN FOUNDATION THAT THE PROCEEDS FROM THE SALE OF ANY COLLECTION ITEMS. THE FOUNDATION PURCHASED \$12,760 OF ARTWORKS AND DECORATIVE FURNISHINGS IN 2014.

Additional Information

PART VII-A LINE 8(B)

NEITHER TEXAS ATTORNEY GENERAL OR SECRETARY OF STATE ACCEPT COPIES OF FORM 990PF. IN LIEU, A PERIODIC REPORT IS REQUIRED TO BE FILED AT LEAST EVERY FOUR YEARS.

Additional Information

SECTION 1.263(a)-1(f)

THE ETHICIAN FOUNDATION ELECTS TO MAKE THE DE MINIMIS SAFE HARBOR ELECTION UNDER THE REGULATION 1.263(a)-1(f).

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

	•	5	
or calendar year 2014, or fiscal year beginning			
		2014 and anding	

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service	 Do not send to the IRS. Keep for your records. Information about Form 8879-EO and its instructions is at www.irs.gov/form88 	2014
Name of exempt organization		mployer identification number
THE ETHICIAN FOUR	JDATTON	0-0736697
GEORGE H RUSSELL		
Part I Type of Retur	PRESIDENT rn and Return Information (Whole Dollars Only)	
Uneck the hoy for the return	for subtate sees that the	
leave line 1b. 2b 3b 4b or	for which you are using this Form 8879-EO and enter the applicable amount, if any, fror 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return not complete more than 1 line in Part I.	n the return. If you 1 was blank, then 1, then enter -0- on
1 a Form 990 check here	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	
2 a Form 990-EZ check he	h Total revenue, if any (Form 990, Part VIII, column (A), line 12)	· · · 1b
3 a Form 1120-POL check	[] [] [] [] [] [] [] [] [] []	2 b
4 a Form 990-PF check he	re X b Tax based on investment income (Form coo DE D	
5 a Form 8868 check here	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	4b0.
	The second second control of the second seco	5 b
Part II Declaration a	nd Signature Authorization of Officer	
	declare that I am an officer of the above organization and that I have examined a copy of anying schedules and statements and to the best of my knowledge and belief, they are until in Part I above is the amount shown on the copy of the organization's electronic results.	5 th
the IRS (a) an acknowledger refund, and (c) the date of an funds withdrawal (direct debit organization's federal taxes o contact the U.S. Treasury Fin authorize the financial institutianswer inquiries and resolve	untin Part I above is the amount shown on the copy of the organization's electronic return transmitter, or electronic return originator (ERO) to send the organization's return to the nent of receipt or reason for rejection of the transmission, (b) the reason for any delay in y refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent on the financial institution account indicated in the tax preparation software for pawed on this return, and the financial institution to debit the entry to this account. To revo ancial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settions involved in the processing of the electronic payment of taxes to receive confidential issues related to the payment. I have selected a personal identification number (PIN) as n and, if applicable, the organization's consent to electronic funds withdrawal.	Iffi. I consent to allow my e IRS and to receive from processing the return or to initiate an electronic lyment of the ke a payment, I must lement) date. I also
Officer's PIN: check one bo	<u> </u>	
V alence and a	ERO firm name to enter my PIN	as my signature
on the same strongs	Enter	five numbers, but t enter all zeros
a state agency(ies) regula the return's disclosure cor	do not dear 2014 electronically filed return. If I have indicated within this return that a copy of the ting charities as part of the IRS Fed/State program, I also authorize the aforementioned isent screen.	e return is being filed with ERO to enter my PIN on
X As an officer of the organi indicated within this return program, I will enter my Pi	zation, I will enter my PIN as my signature on the organization's tax year 2014 electronic that a copy of the return is being filed with a state agency(ies) regulating charities as pa N on the return's disclosure consent screen.	cally filed return. If I have art of the IRS Fed/State
Officer's signature	Date ▶ 11/16/2015	
Part III Certification as		
ERO's EFIN/PIN. Enter your s	ix-digit electronic filing identification ur five-digit self-selected PIN	
	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
I certify that the above numeric above. I confirm that I am subr Authorized IRS e-file Providers	c entry is my PIN, which is my signature on the 2014 electronically filed return for the org mitting this return in accordance with the requirements of Pub 4163 , Modernized e-File (s for Business Returns.	do not enter all zeros ganization indicated MeF) Information for
ERO's signature	Date ► <u>11/16/2015</u>	
	ERO Must Retain This Form — See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So	

BAA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2014)

Form 990-PF, Page 1, Part I, Line 23

Line	23	Stmt
------	----	------

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
ART WORK & DECOR (STMT ATTACHED)	12,760.		12,760.	12,760.
OFFICE EXPENSE	80.		80.	80.

Total

12,840.

12,840.

12,840.

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person . X Business . JANE R. McCULLAH 1401 - 19TH STREET HUNTSVILLE TX 77340 Person . X Business . KAREN L. ROBINSON	DIRECTOR 1.00	0.	0.	0.
HUNTSVILLE TX 77340 Person. X Business . GEORGE A. RUSSELL	DIRECTOR 1.00	0.	0.	0.
HUNTSVILLE TX 77340 Person. X Business . SUE ANN DELK	DIRECTOR 1.00	0.	0.	0.
1401 - 19TH STREET HUNTSVILLE TX 77340	DIR/SECRETARY 20.00	0.	0.	0.

Total

_____0. ____0

Form 990-PF, Page 1, Part I Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SMITHER, MARTIN, HENDERSON	GIFT DEEDS	2,903.		2,903.	2,903.

Total

2,903.

2,903.

2,903.

Form 990-PF, Line 19 Allocated Depreciation

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Life	Current Depr	Net Invest Income	Adjusted Net Income
HISTORIC HOUSE MUSEUM (BAIRD HOUSE)	05/30/14	215000		SL	39.00	2724		
KUSEUM OF ECCLETIC ART (BIRMINGHAM	00005/30/14	225000	***	SL		2724		
MUSEUM OF TX ART (KING HOUSE)	05/30/14	250000			39.00	2444		
USEUM OF TX STONEWARE (MARTIN HOUS)	05/30/14	125000		SL	39.00	3006		
PEL.POINT1-CONF CENTER&LOTS	08/04/14		<u> </u>	SL	39.00	_ 1522		
PEL. POINT 2 CONF CENTER	08/04/14	500000		SL	39.00	2407		
		360000		SL	39.00	2384		
JSEUM OF TX FURNITURE (SMITHER WAR	$\frac{ 0 SQ/31/14}{ 0 SQ/31/14}$	270000	-	SL	39.00	864	19	
USEUM OF TX ART (KING) - PAVING PAT	ING20/19/14	18388		150DB	15.00	230		
USEUM OF TX ART (KING HOUSE) BLDG		6097		SL	39.00	7		
L220 SKYBRIDGE	08/21/14	14058		150DB	15.00	- F07		
JSEUM OF TX STONEWARE (MARTIN)-WIR N	GIS281X/031/14	10933		150DB		527		
LICAN PT CONF CENTER - BLDG IMPROT	12/01/14	1380			15.00	137		
	09/22/14	3162		SL	39,00	1		
- (3).		<u> </u>		200DB	7.00	339		

Total