efile G	RAPHIC	orint - DO NOT PROCESS As Filed Data -		DLN:	93493219014494
Form 99	<b>א</b> ר	Return of Organization Exempt Fi	rom Income	Tax	OMBNo 1545-0047
Form <b>J</b> J		Under section 501(c), 527, or 4947(a)(1) of the Internal F		2013	
Department of th	be Treasury	foundations) Do not enter Social Security numbers on this form as it may	be made public B	v law. the IRS	
Internal Revenu		generally cannot redact the information	on the form	, ian, ene ine	Open to Public Inspection
A Fortha	2012 color	I ► Information about Form 990 and its instructions is at <u>www</u>			
B Check if a		ndar year, or tax year beginning 05-01-2013 , 2013, and ending C Name of organization	g 04-30-2014	D Employer id	lentification number
Address c		HENRIETTA M RILEY TRUST FOR WATCH TOWER BIBLE		38-60431	03
Name cha	ange	Doing Business As			
🗌 Initial retu	urn	Number and street (or P O box if mail is not delivered to street address)	oom/suite	E Telephone nu	mher
Terminate	ed	PO BOX 75000 MC 7874			
Amended	l return	City or town, state or province, country, and ZIP or foreign postal code Detroit, MI 48275			
Applicatio	on pending			G Gross receipt	s \$ 2,050,629
		F Name and address of principal officer		nis a group retu	
			subo	ordinates?	🔽 Yes 🔽 No
				all subordinates	s
Tax-exer	mpt status	▼ 501(c)(3)   501(c)()   ()   (Insert no)   4947(a)(1) or    527		uded? No." attach a lis	t (see instructions)
	te: ► NON				
				up exemption n	
K Form of o Part I	_	Corporation 🔽 Trust 🔽 Association 🔽 Other 🕨	L Year of f	ormation 1948	<b>M</b> State of legal domicile MI
		scribe the organization's mission or most significant activities			
<b>Ž</b> 5	Total num	f independent voting members of the governing body (Part VI, lin ber of individuals employed in calendar year 2013 (Part V, line ber of volunteers (estimate if necessary)	2a)	· · 4 · · 5 · · 6	0
7a		lated business revenue from Part VIII, column (C), line 12 .		7a	0
Ь	Net unrela	ited business taxable income from Form 990-T, line 34		· · 71	
	C t.u.h.			or Year	Current Year
8 ≝9		utions and grants (Part VIII, line 1h)			0
9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		nent income (Part VIII, column (A), lines 3, 4, and 7d)		353,122	233,942
<sup>22</sup> 11	Other re	evenue (Part VIII, column (A ), lines 5, 6d, 8c, 9c, 10c, and 11e	e)	386,384	473,137
12		venue—add lines 8 through 11 (must equal Part VIII, column (/		739,506	707,079
13		and similar amounts paid (Part IX, column (A), lines 1–3)		719,478	811,982
14	Benefits	s paid to or for members (Part IX, column (A), line 4)			0
ý 15	Salaries 5–10)	s, other compensation, employee benefits (Part IX, column (A ),	lines	15,016	0
୫୫. ଅକ୍ଟର ଅକ୍ଟ ଅକ୍ଟ ଅନ୍ତ ଅନ୍ତ ଅନ୍ତ ଅକ୍ଟ ଅନ୍ତ ଅକ୍ଟର ଅକ୍ଟର ଅନ୍ତ ଅନ୍ତ ଅନ୍ତ ଅନ୍ତ ଅନ୍ତ ଅନୁ ଅନ୍ତ ଅନ୍ତ ଅନ୍ତ ଅନ ଅନ୍ତ ଅନ୍ତ ଅନ ଅନ୍ତ ଅନ୍ତ		ional fundraising fees (Part IX, column (A), line 11e)			0
हे ।	Total fund	traising expenses (Part IX, column (D), line 25) $\blacktriangleright_{$			
17	O ther e	xpenses (Part IX, column (A ), lines 11a-11d, 11f-24e)		2,130	12,271
18		penses Add lines 13–17 (must equal Part IX, column (A), line	-	736,624	824,253
Net Associate of the second se	Revenu	e less expenses Subtract line 18 from line 12	Beginniı	2,882 ng of Current Year	-117,174 End of Year
	Total as	ssets (Part X, line 16)		3,162,268	3,136,622
₹ ₩ ₩ ₩ ₩ 21		abilities (Part X, line 26)			0
		ets or fund balances Subtract line 21 from line 20		3,162,268	3,136,622
Part II	Signa	ture Block			

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

	**	****								
Sign	Signature of officer									
Here	COMERICA BANK TROSTEE									
	Г Ту	Type or print name and title								
Paid		Print/Type preparer's name Lily Ambrosio-Ylen	Preparer's signature							
Prepare	r	Firm's name 🕨 LILY AMBROSIO- YLEN E.	A							
Use Onl		Firm's address Þ 36705 Tulane Dr								
		Sterling Heights, MI 483	312							

May the IRS discuss this return with the preparer shown above? (see instruction rmarked evaluation copy of CVISION PDFCompressor

For Paperwork Reduction Act Notice, see the separate instructions.

	990 (2013)					Page <b>2</b>
Par		nt of Program Se hedule O contains a r			III	
1	Briefly describe th	he organızatıon's mıss	ion			
SUP	PORT WATCH TOW	VER BIBLE AND TRAC	T SOCIETY			
2					r which were not listed on	
	•	D or 990-EZ? these new services of				∏Yes 🔽 No
3	services?	on cease conducting, these changes on Sci			onducts, any program	∏Yes 🔽 No
4	Describe the organ expenses Section	nızatıon's program ser	vice accomplishme )(4 ) organizations	are required to repor	nree largest program services, a t the amount of grants and alloc	
4a	(Code SUPPORTED WATCH	) (Expenses \$ TOWER BBLE AND TRACT \$	-	including grants of \$	811,982 ) (Revenue \$	)
4b	(Code ADMINISTRATION EX	) (Expenses \$ PENSES INCURRED FOR E)	2,080 EMPT PURPOSE	including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
4d	Other program se (Expenses \$	ervices (Describe in S i	chedule O ) ncluding grants of a	\$	) (Revenue \$	)
łe	Total program oc		514,362	sing a waterma	irked evaluation copy of	Form <b>990</b> (2013)

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Part IV Checklist of Required Schedules

Page <b>3</b>

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes					
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No				
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		No				
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		No				
5	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? <i>If "Yes," complete Schedule C, Part III</i>	5						
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? <i>If "Yes," complete Schedule D, Part I</i>	6		No				
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No				
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No				
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		No				
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No				
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable							
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		No				
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No				
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No				
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		No				
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No				
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)? <i>If "Yes," complete Schedule D, Part X</i>	11f		No				
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No				
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 and XII is optional	12b		No				
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E $\ldots$	13		No				
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No				
b	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? <i>If "Yes," complete Schedule F, Parts I and IV</i> .	14b		No				
15	Did the organization report on Part IX, column (A ), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No				
16	Did the organization report on Part IX, column (A ), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No				
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17		No				
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No				
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," complete Schedule G, Part III	19		No				
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No				
PD	If "Yes" is beauton, did the organization associative uppy of its audited for associate technicity to they return?	2.56	SION	PDFC				

Form 990 (2013)

Par	t IV Checklist of Required Schedules (continued)							
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 🔞	21	Yes					
22	Did the organization report more than \$5,000 of grants or 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		No				
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No				
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No				
b	<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?							
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c						
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? $\ldots$ .	24d						
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>							
Ь	<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I							
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i> .	26		No				
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No				
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)							
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part							
	<i>IV</i>	28a		No				
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No				
С	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No				
29	Did the organization receive more than $25,000$ in non-cash contributions? If "Yes," complete Schedule M .	29		No				
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No				
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No				
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No				
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No				
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No				
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No				
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No				
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No				
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No				
<b>2</b> 9	Did the organization complete Schedule Q and provide explanations in Schedule Q for Part VI. lines 11b and 197 Note: AL Form 350 flass are required to complete Schedule Q	3.8	0,5	PDFC				

Did the organization complete Schedule O and provide explanations in Schedule O for Part Note. All Form 956 files are required to complete Schedule O

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	Check if Schedule O contains a response or note to any line in this Part V			_
-			<u> </u>	
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable . <b>1a</b> 0			
C	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
2	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		No
a	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			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		No
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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		N
,	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			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\cdot$ .	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50		
		5c		1
•	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 as charitable contributions?	6a		N
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		N
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		N
	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
	Did the organization make any taxable distributions under section 4966?	9a		N
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 <b>10a</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club <b>10b</b>			
,	facilities			1
	facilities Section 501(c)(12) organizations. Enter			
	facilities     Section 501(c)(12) organizations. Enter     Gross income from members or shareholders			
•	facilities Section 501(c)(12) organizations. Enter			
•	facilities         Section 501(c)(12) organizations. Enter         Gross income from members or shareholders         Gross income from other sources (Do not net amounts due or paid to other sources)	12a		
	facilities         Section 501(c)(12) organizations. Enter         Gross income from members or shareholders       11a         Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )       11b         Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?         If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
	facilities         Section 501(c)(12) organizations. Enter         Gross income from members or shareholders       11a         Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )       11b         Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?         If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b	12a		
	facilities         Section 501(c)(12) organizations. Enter         Gross income from members or shareholders       11a         Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )       11b         Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?         If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         Section 501(c)(29) qualified nonprofit health insurance issuers.			
	facilities         Section 501(c)(12) organizations. Enter         Gross income from members or shareholders       11a         Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )       11b         Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?         If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b	12a 13a		
	facilities         Section 501(c)(12) organizations. Enter         Gross income from members or shareholders       11a         Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )       11b         Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?         If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         Section 501(c)(29) qualified nonprofit health insurance issuers.       12b         Is the organization licensed to issue qualified health plans in more than one state?       11a			
) ) ) )	facilities         Section 501(c)(12) organizations. Enter         Gross income from members or shareholders       11a         Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )       11b         Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?         If "Yes," enter the amount of tax-exempt interest received or accrued during the year       12b         Section 501(c)(29) qualified nonprofit health insurance issuers.       12b         Is the organization licensed to issue qualified health plans in more than one state?       Note. See the instructions for additional information the organization must report on Schedule O         Enter the amount of reserves the organization is required to maintain by the states       and			

rm 990 (	2013)
Part V	Statements Regarding Other IRS Filing
	Check if Schedule O contains a response or note

•	the supporting organization, or a dor business holdings at any time during
9	Sponsoring organizations maintainin
а	Did the organization make any taxab

Form	990 (2013)			Page <b>6</b>
Part	<ul> <li>VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or change See instructions.</li> <li>Check If Schedule O contains a response or note to any line in this Part VI</li></ul>			
Sec	ction A. Governing Body and Management	-		-,
	cton Ar coverning body and hanagement		Yes	No
	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			
	Enter the number of voting members included in line 1a, above, who are independent			
	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		No
	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		No
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$ .	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, 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		No
	ction B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	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	12a		No
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
	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?			
а	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	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?	16a		No
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 take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
	List the States with which a copy of this Form 990 is required to be filed MI			
	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

Own website Another's website Upon request Other (explain in Schedule O)
 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization >COMERICA BANK PO 20X 75000 MC 7874 Detroit, 41 48275 (205) 966-6344

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# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot recto	not box h ar or/tr	chec c, unle ustee Highest compensated	ess er	(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 from the organization and related organizations
(1) COMERICA BANK	1 50							10.171		
TRUSTEE	0 00		х					10,171	0	0
PDF compression, OCR, web op	otimization	usin	ga	Wa	tei	mai	ke	d evaluation	copy of CVI	SION PDFC

Form 990 (2013)

#### Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						<b>(D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	6	<b>(F)</b> Estima mount of compens from t	other atıon he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensited employee	Former	2/1099-MISC)	2/1099-MISC)		ganızatı relate organızat	d
				Ě			H ed						
1b	Sub-Total			•	•			►					
С	Total from continuation sheet				•	•	-		10.17				
	Total (add lines 1b and 1c) .								10,171		J		0
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more tr	ian			
										F		Yes	No
3	Did the organization list any <b>fo</b> on line 1a? <i>If "Yes," complete S</i>										3		No
4	For any individual listed on line organization and related organ individual	izations greater	than \$	150,	000	? If	"Yes," d	comp	lete Schedule J for s	uch	4		No

#### Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
Total number of independent contractors (including but not limited to those listed above' \$100,000 of compensation from the organization in	who received more than	ISION PDFC

Νo

VIII	Statement of Check If Schedu	le O contains a respo	<u>nse or note to</u> any lu	<u>ne ın thıs Part</u> VIII	<u> </u>	<u></u> .	<u></u> .Г
				<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated camp	aıgns 1a					
5 р	Membership due	es <b>1b</b>					
b c d e f 9 9	Fundraising eve	nts 10					
d	Related organiza	ations 1d					
e	Government grants	(contributions) 1e					
f	All other contribution						
	similar amounts not Noncash contribution						
2 9	1a-1f \$						
, h	Total. Add lines	1a-1f	••••				
2-			Business Code				
2a							
c							
d							
e							
f	All other program	m service revenue					
g	<b>Total.</b> Add lines	2a-2f					
3	Investment inco	ome (including dividen	ds, interest,	F0.000			E0.00
4		r amounts) ment of tax-exempt bond		58,808			58,80
4				473,137			473,13
	[	(ı) Real	(II) Personal				
6a	Gross rents						
b	Less rental expenses						
С	Rental income or (loss)						
d	Net rental incom	ne or (loss)	-				
7a	Gross amount	(I) Securities	(II) Other				
	from sales of assets other	1,518,684					
Ь	than inventory Less cost or						
	other basis and sales expenses	1,343,550					
с	Gain or (loss)	175,134					
d		5)	· · · · ·	175,134			175,134
8a	Gross income fro events (not inclu \$	uding					
	of contributions See Part IV, line	reported on line 1c) 18 a					
Ь	Less dırect exp						
c		oss) from fundraısıng	events 🕨				
9a	Gross income fro See Part IV, line	om gaming activities 19 <b>a</b>					
Ь	Less dırect exp	enses b					
		oss) from gaming act	vities				
10a	Gross sales of Ir returns and allov						
Ь	Less costofgo						
c	-	oss) from sales of inv					
11a	Miscellaneous	Kevenue	Business Code				
b							
c							
d	All other revenu	e					
e	<b>Total.</b> Add lines	11a-11d	<b></b>				
				watermarked			

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#### Form 990 (2013)

Characterized Color         Conot include         Do not include         I       Grants United         Comparized         States         Hension         Competition         Key em         Competition         Competition         Key em         Competition         Competition         (as definition         describ         Pension         and 40.         Pothers         Benefit:         Competition         (as definition         describ         Description         Description         Description         Column         Schedu         Dother (column         Schedu         Information         Column         Sc	Statement of Functional Expenses (c)(3) and 501(c)(4) organizations must complete all columns All theck if Schedule O contains a response or note to any line in this de amounts reported on lines 6b, nd 10b of Part VIII. s and other assistance to governments and organizations United States See Part IV, line 21 s and other assistance to individuals in the d States See Part IV, line 22 s and other assistance to governments, izations, and individuals outside the United s See Part IV, lines 15 and 16 its paid to or for members ensation of current officers, directors, trustees, and mployees ensation not included above, to disqualified persons effined under section 4958(f)(1)) and persons ibed in section 4958(c)(3)(B)		·		(D) Fundraising expenses
Ch Do not include 7b, 8b, 9b, and 1 Grants in the U 2 Grants United 3 Grants organiz States 4 Benefit: 5 Compei (as defi- describ 7 Other s 8 Pension and 40. 9 Other e 10 Payroll 11 Fees for a Manage b Legal c Accourd d Lobbyin e Profess f Investr g Other ( column Schedu 12 Adverti 13 Office e 14 Informa 15 Royalti 16 Occupa 17 Travel 18 Paymen state, c 19 Conferes 20 Interes 21 Paymen 22 Deprec 23 Insurar	Check if Schedule O contains a response or note to any line in this de amounts reported on lines 6b, nd 10b of Part VIII. s and other assistance to governments and organizations United States See Part IV, line 21 s and other assistance to individuals in the d States See Part IV, line 22 s and other assistance to governments, izations, and individuals outside the United s See Part IV, lines 15 and 16 its paid to or for members ensation of current officers, directors, trustees, and mployees ensation not included above, to disqualified persons effined under section 4958(f)(1)) and persons ibed in section 4958(c)(3)(B)	Part IX (A) Total expenses	(B) Program service expenses	<b>(C)</b> Management and	Fundraising
Do not include (b, 8b, 9b, and (b, 8b, 9b, and)1Grants in the U2Grants United3Grants organiz States4Benefit: 55Comper (as defides crib)7Other states8Pension and 40.9Other states10Payroll11Fees for and 40.9Other states6Courper (as defides crib)7Other states8Pension and 40.9Other states10Payroll11Fees for and 40.9Other states10Payroll11Fees for and 40.9Other states10Payroll11Fees for and 40.12Advertu13Office states14Information states, color15Royaltu16Occupation states, color17Travel18Payment state, color20Interes21Payment state, color22Deprec23Insurar	de amounts reported on lines 6b, nd 10b of Part VIII. s and other assistance to governments and organizations United States See Part IV, line 21 s and other assistance to individuals in the d States See Part IV, line 22 s and other assistance to governments, izations, and individuals outside the United s See Part IV, lines 15 and 16 its paid to or for members ensation of current officers, directors, trustees, and mployees ensation not included above, to disqualified persons efined under section 4958(f)(1)) and persons ibed in section 4958(c)(3)(B)	(A) Total expenses	( <b>B</b> ) Program service expenses	<b>(C)</b> Management and	Fundraising
<ul> <li>in the U</li> <li>Grants United</li> <li>Grants organiz States</li> <li>Benefit:</li> <li>Competive key em</li> <li>Competive key em</li> <li>Competive (as defindescrib)</li> <li>Other s</li> <li>Pension and 40.</li> <li>Other s</li> <li>Competive and 40.</li> <li>Conter s</li> <li>Conference</li> <li>Interess</li> <li>Payment</li> <li>Conference</li> <li>Interess</li> <li>Payment</li> <li>Deprec</li> <li>Insurar</li> </ul>	United States See Part IV, line 21 s and other assistance to individuals in the d States See Part IV, line 22 s and other assistance to governments, izations, and individuals outside the United s See Part IV, lines 15 and 16 its paid to or for members ensation of current officers, directors, trustees, and mployees ensation not included above, to disqualified persons effined under section 4958(f)(1)) and persons ibed in section 4958(c)(3)(B)	811,982			
<ul> <li>United</li> <li>Grants organiz States</li> <li>Benefit:</li> <li>Competic key em</li> <li>Competic key em</li> <li>Competic key em</li> <li>Competic describ</li> <li>Other s</li> <li>Pension and 40.9</li> <li>Other s</li> <li>Manage</li> <li>Legal c Accourt d Lobbyin e Profess</li> <li>f Investr</li> <li>g Other ( column Schedu</li> <li>12 Advertuin 3 Office s</li> <li>14 Information Schedu</li> <li>15 Royaltuin 6 Occupation state, contents</li> <li>20 Interess</li> <li>21 Payments</li> <li>22 Deprect</li> <li>23 Insurar</li> </ul>	d States See Part IV, line 22 s and other assistance to governments, izations, and individuals outside the United s See Part IV, lines 15 and 16 its paid to or for members ensation of current officers, directors, trustees, and mployees ensation not included above, to disqualified persons ifined under section 4958(f)(1)) and persons ibed in section 4958(c)(3)(B)				
<ul> <li>organiz States</li> <li>4 Benefit:</li> <li>5 Competively em</li> <li>6 Competively em</li> <li>6 Competively em</li> <li>6 Competively em</li> <li>6 Competively em</li> <li>7 Others</li> <li>8 Pension and 40.</li> <li>9 Others</li> <li>8 Pension and 40.</li> <li>9 Others</li> <li>10 Payroll</li> <li>11 Fees for</li> <li>a Manage</li> <li>b Legal</li> <li>c Accourt</li> <li>d Lobbyin</li> <li>e Profess</li> <li>f Investr</li> <li>g Other (column Schedu)</li> <li>12 Advertin</li> <li>13 Office et</li> <li>14 Information Schedu)</li> <li>15 Royaltin</li> <li>16 Occupation</li> <li>17 Travel</li> <li>18 Payment State, condition</li> <li>20 Interes</li> <li>21 Payment</li> <li>22 Deprec</li> <li>23 Insurar</li> </ul>	Izations, and individuals outside the United s See Part IV, lines 15 and 16 its paid to or for members ensation of current officers, directors, trustees, and mployees ensation not included above, to disqualified persons fined under section 4958(f)(1)) and persons ibed in section 4958(c)(3)(B)				
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<ul> <li>(as defined describ)</li> <li>7 Other is</li> <li>8 Pension and 40.</li> <li>9 Other is</li> <li>10 Payroll</li> <li>11 Fees for a Manage</li> <li>b Legal</li> <li>c Accourted Lobbying</li> <li>e Profession</li> <li>f Investring</li> <li>g Other (column Schedut)</li> <li>12 Advertine</li> <li>13 Office is</li> <li>14 Information</li> <li>15 Royaltine</li> <li>16 Occupation</li> <li>17 Travel</li> <li>18 Payment State, column State, colum</li></ul>	fined under section 4958(f)(1)) and persons ibed in section 4958(c)(3)(B)				
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<ul> <li>10 Payroll</li> <li>11 Fees fo</li> <li>a Manage</li> <li>b Legal</li> <li>c Accour</li> <li>d Lobbyin</li> <li>e Profess</li> <li>f Investr</li> <li>g Other ( column</li> <li>Schedu</li> <li>12 Adverti</li> <li>13 Office e</li> <li>14 Informa</li> <li>15 Royalti</li> <li>16 Occupa</li> <li>17 Travel</li> <li>18 Paymen state, c</li> <li>19 Conferes</li> <li>20 Interes</li> <li>21 Paymen</li> <li>22 Deprec</li> <li>23 Insurar</li> </ul>	on plan accruals and contributions (include section 401(k) 03(b) employer contributions)				
<ul> <li>Fees fo</li> <li>Manage</li> <li>Legal</li> <li>Accourt</li> <li>Lobbyin</li> <li>Profess</li> <li>Investr</li> <li>Other ( column Schedu</li> <li>Advertu</li> <li>Office e</li> <li>Advertu</li> <li>Office e</li> <li>Information</li> <li>Royaltu</li> <li>Royaltu</li> <li>Occupation</li> <li>Royaltu</li> <li>Occupation</li> <li>Royaltu</li> <li>Occupation</li> <li>Royaltu</li> <li>Occupation</li> <li>Royaltu</li> <li>Confere</li> <li>Confere</li> <li>Confere</li> <li>Confere</li> <li>Payment</li> <li>Confere</li> <li>Payment</li> <li>Deprec</li> <li>Insurar</li> </ul>	employee benefits				
<ul> <li>a Manage</li> <li>b Legal</li> <li>c Accour</li> <li>d Lobbyin</li> <li>e Profess</li> <li>f Investr</li> <li>g Other ( column Schedu</li> <li>12 Advertri</li> <li>13 Office e</li> <li>14 Information</li> <li>15 Royaltri</li> <li>16 Occupation</li> <li>17 Travel</li> <li>18 Payment state, o</li> <li>19 Conferes</li> <li>20 Interess</li> <li>21 Payment</li> <li>22 Deprec</li> <li>23 Insurar</li> </ul>	ll taxes				
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<ul> <li>c Accour</li> <li>d Lobbyir</li> <li>e Profess</li> <li>f Investring</li> <li>g Other ( column Schedu</li> <li>12 Adverting</li> <li>13 Office et</li> <li>14 Information</li> <li>15 Royalting</li> <li>16 Occupation</li> <li>17 Travel</li> <li>18 Payment state, contents</li> <li>20 Interess</li> <li>21 Payment</li> <li>22 Deprecont</li> <li>23 Insurart</li> </ul>	gement	10,171		10,171	
<ul> <li>d Lobbyin</li> <li>e Profess</li> <li>f Investring</li> <li>g Other ( column Schedut</li> <li>12 Advertring</li> <li>13 Office et</li> <li>14 Information</li> <li>15 Royaltring</li> <li>16 Occupation</li> <li>17 Travel</li> <li>18 Payment state, contents</li> <li>20 Interess</li> <li>21 Payment</li> <li>22 Deprect</li> <li>23 Insurant</li> </ul>		870	870		
<ul> <li>Profess</li> <li>Investr</li> <li>Other ( column Schedu</li> <li>Advertr</li> <li>Office et</li> <li>If Information</li> <li>Royaltr</li> <li>Royaltr</li> <li>Occupation</li> <li>Royaltr</li> <li>Occupation</li> <li>Payment state, co</li> <li>Conferes</li> <li>Conferes</li> <li>Payment</li> <li>Payment</li> <li>Payment</li> <li>Deprec</li> <li>Insurar</li> </ul>	unting	310	310		
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column Schedu 12 Adverti 13 Office e 14 Informa 15 Royalti 16 Occupa 17 Travel 18 Paymen state, c 19 Confere 20 Interes 21 Paymen 22 Deprec 23 Insurar	tment management fees				
<ul> <li>13 Office e</li> <li>14 Informa</li> <li>15 Royalta</li> <li>16 Occupa</li> <li>17 Travel</li> <li>18 Paymen state, c</li> <li>19 Conferes</li> <li>20 Interes</li> <li>21 Paymen</li> <li>22 Deprec</li> <li>23 Insurar</li> </ul>	(If line 11g amount exceeds 10% of line 25, in (A ) amount, list line 11g expenses on lule O )				
<ul> <li>14 Informa</li> <li>15 Royaltu</li> <li>16 Occupa</li> <li>17 Travel</li> <li>18 Paymen state, o</li> <li>19 Conferes</li> <li>20 Interes</li> <li>21 Paymen</li> <li>22 Deprec</li> <li>23 Insurar</li> </ul>	tising and promotion				
<ul> <li>15 Royaltu</li> <li>16 Occupa</li> <li>17 Travel</li> <li>18 Paymen state, c</li> <li>19 Confere</li> <li>20 Interes</li> <li>21 Paymen</li> <li>22 Deprec</li> <li>23 Insurar</li> </ul>	expenses	ļ			
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<ol> <li>Travel</li> <li>Paymen state, c</li> <li>Confere</li> <li>Conferes</li> <li>Interes</li> <li>Paymen</li> <li>Deprec</li> <li>Insurar</li> </ol>	ties				
<ol> <li>Paymen state, c</li> <li>Confere</li> <li>Interes</li> <li>Paymen</li> <li>Paymen</li> <li>Deprec</li> <li>Insurar</li> </ol>	pancy				
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<ol> <li>Interes</li> <li>Paymer</li> <li>Deprec</li> <li>Insurar</li> </ol>	ents of travel or entertainment expenses for any federal, or local public officials				
21         Paymer           22         Deprec           23         Insurar	rences, conventions, and meetings	ļ			
<ul><li>22 Deprec</li><li>23 Insurar</li></ul>	est				
23 Insurar	ents to affiliates				
	ciation, depletion, and amortization				
24 Othere	ance				
miscell of line 2	expenses Itemize expenses not covered above (List Ilaneous expenses in line 24e Ifline 24e amount exceeds 10% 25, column (A) amount, list line 24e expenses on Schedule O)				
a <u>taxp</u> r	PREPARATION FEE	900	900		
<b>b</b> INVES	STMENT EXPENSE	20		20	
с		ļ			
d					
	her expenses	ļ			
25 Total f	functional expenses. Add lines 1 through 24 e	824,253	814,062	10,191	0
reporte educati	costs. Complete this line only if the organization ed in column (B) joint costs from a combined tional campaign and fundraising solicitation Check F T if following SOP 98-2 (ASC 953-720)				
PUP COM		rmarked e	valuation G	opy of CVIS	ION PDFComp

#### Form 990 (2013)

Part X Balance Sheet

			<b>_</b>
	<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1 Cash-non-interest-bearing		1	
<b>2</b> Savings and temporary cash investments	228,627	2	225,478
<b>3</b> Pledges and grants receivable, net		3	1
<b>4</b> Accounts receivable, net		4	+
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
6 Loans and other 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) Complete Part II of Schedule L			
		6	
7 Notes and loans receivable, net		7	
8 Inventories for sale or use		8	<u> </u>
9 Prepaid expenses and deferred charges		9	
<b>10a</b> Land, buildings, and equipment cost or other basis Complete         Part VI of Schedule D <b>10a</b>			
b Less accumulated depreciation 10b	]	10c	
<b>11</b> Investments—publicly traded securities	2,933,638	11	2,911,141
<b>12</b> Investments—other securities See Part IV, line 11		12	1
<b>13</b> Investments—program-related See Part IV, line 11		13	1
<b>14</b> Intangible assets		14	<u> </u>
15 Other assets See Part IV, line 11	3		3
16     Total assets. Add lines 1 through 15 (must equal line 34)	3,162,268		3,136,622
17     Accounts payable and accrued expenses	,,	17	+
18   Grants payable   Grants   Grants		18	1
<b>19</b> Deferred revenue		19	1
20         Tax-exempt bond liabilities		20	+
21 Escrow or custodial account liability Complete Part IV of Schedule D		20	+
<ul> <li>22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified</li> </ul>			+
persons Complete Part II of Schedule L		22	
23 Secured mortgages and notes payable to unrelated third parties		22	+
<ul> <li>24 Unsecured notes and loans payable to unrelated third parties</li> </ul>		23	+
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			<u> </u>
D		25	<b></b>
26 Total liabilities. Add lines 17 through 25	0	26	0
Organizations that follow SFAS 117 (ASC 958), check here ▶ ┌─ and complete lines 27 through 29, and lines 33 and 34.			
<b>27</b> Unrestricted net assets		27	<u> </u>
<b>28</b> Temporarily restricted net assets		28	<u> </u>
<b>29</b> Permanently restricted net assets		29	
Organizations that do not follow SFAS 117 (ASC 958), check here   and complete lines 30 through 34.			
<b>30</b> Capital stock or trust principal, or current funds	815,764	30	815,764
<b>31</b> Paid-in or capital surplus, or land, building or equipment fund		31	1
	2,346,504	32	2,320,858
32 Retained earnings, endowment, accumulated income, or other funds			2,320,858 3,136,622
32 Retained earnings, endowment, accumulated income, or other funds	2,346,504 3,162,268	33	· · · ·

Form	990	(201	.3)
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Part	XI	<b>Reconcilliation of Net Assets</b> Check If Schedule O contains a response or note to any line in this Part XI			· • ·	ম	
1	Total	revenue (must equal Part VIII, column (A ), line 12)	1		7	707,079	
2	Total	expenses (must equal Part IX, column (A ), line 25)	2		ç	324,253	
3	Rever	nue less expenses Subtract line 2 from line 1				524,255	
	Nota	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		- :	117,174	
4	Neta	ssets of fund balances at beginning of year (must equal Part X, me 55, column (A))	4		3,3	162,268	
5	Net u	nrealized gains (losses) on investments	5				
6	Donat	ted services and use of facilities	6				
7	Inves	tment expenses					
8	Prior	period adjustments	7				
			8				
9	Other	changes in net assets or fund balances (explain in Schedule O )	9			91,528	
		ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, in (B))	10		3,2	136,622	
Part	XII	Financial Statements and Reporting					
		Check if Schedule O contains a response or note to any line in this Part XII		• •		. Г	
					Yes	No	
	Ifthe	unting method used to prepare the Form 990					
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a		No	
		s,' check a box below to indicate whether the financial statements for the year were compiled or revie arate basis, consolidated basis, or both	ewed or	ו			
	Γs	eparate basis 🔰 Consolidated basis 🔰 Both consolidated and separate basis					
b	Were	the organization's financial statements audited by an independent accountant?		2b		No	
		s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both	arate				
	Γs	eparate basis 🔰 Consolidated basis 👘 Both consolidated and separate basis					
		s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c			
	Ifthe	organization changed either its oversight process or selection process during the tax year, explain i dule O	n				
3a	Asaı	result of a federal award, was the organization required to undergo an audit or audits as set forth in th e Audit Act and OMB Circular A-133?	ne	3a		No	
DħI	- If"Ye	s," did the organization undergo the required audit or audits? If the organization did not undergo the eq audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3/2	ION		
	. cquii	ea addre of addres, explain why in senedate of and desence any steps taken to undergo such addres			orm <b>99</b>	<b>D</b> (2013)	

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SCI	HEDU		 Dublic (	harity 9	Statue a	nd Publi		ort	ΟΜΕ	3 No 1545-0047
	n 990 or		r upile C nplete if the organiza	ation is a see		(3) organizat			1)	2013
Treasu	ment of th ry al Revenue		<ul> <li>Attach to F</li> <li>Information</li> </ul>	orm 990 or l n about Sche	· Form 990-EZ	. 🕨 See sepai n 990 or 990-				pen to Public Inspection
		organization			initinger / it	<u></u>		Employer i	dentificatio	n number
HENRI	EITA M RI	LEY TRUST FOR WAT	CH TOWER BIBLE					38-60431	03	
Par	rt I I	Reason for Pu	blic Charity Sta	tus (All or	anizations	must com	plete this p			
			te foundation becaus							<u> </u>
1	Γ A	church, convent	ion of churches, or as	sociation of	churches d	escribed in <b>s</b>	ection 170(b	)(1)(A)(i).		
2	ΓA	school described	d in section 170(b)(1	)(A)(ii). (At	tach Schedu	ıle E)	-			
3	ΓA	hospital or a coo	operative hospital se	rvice organiz	ation descri	bed in <b>sectio</b>	n 170(b)(1)	(A)(iii).		
4	ΓA	medical researc	h organization operat	ed in conjun	ction with a	hospital desc	cribed in <b>sec</b>	tion 170(b)(	1)(A)(iii). E	nter the
	h	ospital's name, c	ity, and state							
5			perated for the benefi		or universit	ty owned or o	perated by a	a government	al unit desc	ribed in
_	_		(A)(iv). (Complete P	•						
6	·		r local government or	-						
7		-	at normally receives on 170(b)(1)(A)(vi).			support from	a governme	ntal unit or fr	om the gene	erai pudiic
8			t described in section	• •		nplete Part II	)			
9	ΓA	n organization th	at normally receives	(1) more th	an 331/3% o	fits support	from contrib	utions, meml	pership fees	, and gross
	re	eceipts from activ	vities related to its ex	empt functi	ons—subjec	t to certain e	xceptions, a	nd (2) no mo	re than 331/	3% of
	ıt	s support from gr	oss investment inco	me and unre	lated busine	ss taxable ın	come (less :	section 511	tax) from bu	sinesses
	a	cquired by the or	ganızatıon after June	30,1975 S	ee section 5	509(a)(2). (C	omplete Par	tIII)		
10	ΓA	n organızatıon or	ganized and operated	lexclusively	to test for p	oublic safety	See <b>section</b>	509(a)(4).		
11	o tł	ne or more public ne box_that descr	ganized and operated ly supported organiz ibes the type of supp <b>b</b> Type II <b>c</b>	ations descr or <u>ti</u> ng organ	ibed in secti ization and c	on 509(a)(1) complete line	) or section s 11e throug	509(a)(2) Se gh 11h	ee section 5	<b>09(a)(3).</b> Check
e	of		ox, I certify that the ion managers and otl							
f	I f	the organization heck this box	received a written de						III supportı	ng organization,
g		ollowing persons?	2006, has the organı	zation accer	rea any gift	or contribution	on nom any	orthe		
			irectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons des	cribed in (ii)		Yes No
	a	nd (111) below, the	governing body of th	e supported	organızatıor	?۱			<b>11g</b>	(i) No
	-		per of a person descri						<b>11g</b>	(ii) No
			olled entity of a perso						11g(	(iii) No
h	Р	rovide the followi	ng information about	the support	ed organızat	ion(s)				
sup	lame of ported nization	<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is organızatı col (i) lıs your gove docume	on in ted in rning	(v) Did you the organiz in col (i) o suppor	zation f your	<b>(vi)</b> Is t organızatı col <b>(i)</b> orga ın the U	on in anized	(vii) A mount of monetary support
			instructions))	Yes	No	Yes	No	Yes	No	]
TOWE	/ATCH ER BIBLE FRACT	111857820	501c3	Yes		Yes		Yes		o

Total

Pa	rt II Support Schedule for (Complete only if you c						
	Part III. If the organiza						
	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🏲	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	Include any "unusual						
2	grants ") Tax revenues levied for the						
2	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	<b>Total.</b> Add lines 1 through 3						
	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						
<u> </u>	line 4						
	ection B. Total Support			1	T		1
cure	in) ►	<b>(a)</b> 2009	(b) 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(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						
10	on Other income Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV )						
1	Total support (Add lines 7 through						
2							
12	Gross receipts from related activitie	, (	,		6.64		
L3	First five years. If the Form 990 is f this box and stop here						
S	ection C. Computation of Pub						
4	Public support percentage for 2013			11, column (f))		14	
5	Public support percentage for 2012 Schedule A, Part II, line 14						
6a							
	and <b>stop here.</b> The organization qua	-					▶
b	33 1/3% support test-2012. If the o	organization did	not check a box o	on line 13 or 16a,	, and line 15 is 33	1/3% or more, ch	
7-	box and <b>stop here.</b> The organization				na 10 10	h and line 4.4	▶
./a	<b>10%-facts-and-circumstances test</b> - is 10% or more, and if the organizat	-				•	n
	in Part IV how the organization mee						
	organization		_ encomptances	Lest the organi	a. quannes a.	- a papirory pupp	
b	10%-facts-and-circumstances test-						r
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat	ion meets the "f	facts-and-circum	stances" test Th	ie organization qu	alífies as a public	
L8	supported organization <b>Private foundation.</b> If the organization	ion did not chec	k a box on line 13	. 16a. 16b 17a	or 17b check the	s box and see	▶
Dr	instructions			, 100, 100, 170,	evaluation		

## 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 organiza	ition fails to q	ualify under the	e tests listed b	elow, please co	mplete Pa	art II.)
	ction A. Public Support					-	
Cale	ndar year (or fiscal year beginning in) 🏲	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201	13 (f) Total
1	<b>III) </b> ► Gifts, grants, contributions, and						
-	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organızatıon's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons Amounts included on lines 2 and 3						
D	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b		_				
8	Public support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1				
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2009	(b) 2010	(c) 2011	(d) 2012	<b>(e)</b> 201	13 <b>(f)</b> Total
9	Amounts from line 6						
10a	Gross income from interest,						
104	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
b	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the						
12	business is regularly carried on Other income Do not include						
12	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) <b>First five years.</b> If the Form 990 is fo	r the organizati	l Ion's first second	thurd fourth or	l fifth tay year ac :	$\frac{1}{501(c)(3)}$	
14	check this box and <b>stop here</b>	in the organization	ion s mst, second	, tillia, lourtil, or	illuli tax yeal as a	3 301(0)(3)	
Se	ection C. Computation of Publi	c Support P	ercentage				F,
15	Public support percentage for 2013 (			13, column (f))		15	
16	Public support percentage from 2012			, (),			
		-	-			16	
-	ction D. Computation of Inve				am (f))		
17	Investment income percentage for <b>2</b>				ın (f))	17	
18	Investment income percentage from	2012 Schedule	A, Part III, line 1	7		18	
19a	33 1/3% support tests—2013. If the c						
	more than 33 1/3%, check this box ar						▶
b	<b>33</b> 1/3% support tests—2012. If the c						
20	is not more than 33 1/3%, check this <b>Private foundation.</b> If the organization						
PD				, 190.01 190.01			<b>SVISION PDFC</b>

**Part IV** Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

	Facts And Circumstances Test	
Return Reference	Explanation	

Schedule A (Form 990 or 990-EZ) 2013

efil	le GRAPHIC p	orint - DO NOT PROCESS	As Filed Data -		DLN: 93493219014494
SCH	<b>HEDULE D</b>	Supple	mental Financial S	tatomonts	OMB No 1545-0047
•	m 990) nent of the Treasury	► Complete if Part IV, line 6, 7, ► Attach to Form 990. ► See se	the organization answered " 8, 9, 10, 11a, 11b, 11c, 11d, parate instructions. ► Inform	Yes," to Form 990, 11e, 11f, 12a, or 12b nation about Schedule D (	Form 990) Open to Public
ntemal	Revenue Service	and its in	structions is at <u>www.irs.go</u>	ov/form990.	Inspection
	<b>ne of the organi</b> RIFTTA M RILEY TR	zation UST FOR WATCH TOWER BIBLE		Emple	oyer identification number
					043103
Pa		izations Maintaining Dono ation answered "Yes" to Forr		ther Similar Funds o	or Accounts. Complete if the
	organiz	ation answered Tes to for	(a) Donor adv	vised funds (	<b>b)</b> Funds and other accounts
L	Total number at	t end of year			
2	Aggregate cont	ributions to (during year)			
3	Aggregate gran	ts from (durıng year)			
ł	Aggregate valu	e at end of year			
5	funds are the o	ation inform all donors and donor rganization's property, subject to	the organization's exclusive	e legal control?	sed <b>Ves TNo</b>
5	used only for cl	ation inform all grantees, donors, haritable purposes and not for the ermissible private benefit?			purpose <b>Yes   No</b>
Par		rvation Easements. Comp	ete if the organization ai	nswered "Yes" to Form	990, Part IV, line 7.
L		onservation easements held by t			
		on of land for public use (e g , recr		Preservation of an historic	
	·	of natural habitat	1	Preservation of a certified	historic structure
		on of open space			
		2a through 2d if the organizatior ie last day of the tax year	held a qualified conservatio	n contribution in the form	of a conservation
					Held at the End of the Year
а	Total number o	f conservation easements		2a	
b	Total acreage r	restricted by conservation easem	ents	2b	
с	Number of cons	servation easements on a certifie	d historic structure included	ın (a) <b>2c</b>	
d		servation easements included in ire listed in the National Register		ind not on a 2d	
3	Number of cons	servation easements modified, tra	insferred, released, extingui	shed, or terminated by the	e organization during
	the tax year 🕨				
•	Number of stat	es where property subject to con	servation easement is locate	ed ▶	
;		ization have a written policy rega the conservation easements it h		g, inspection, handling of	violations, and <b>Yes I No</b>
5	Staff and volun <sup>.</sup> ▶	teer hours devoted to monitoring	inspecting, and enforcing co	onservation easements di	uring the year
,		enses incurred in monitoring, insp	ecting, and enforcing conse	rvation easements during	the year
8	Does each con and section 17	servation easement reported on l 0(h)(4)(B)(II)?	ine 2(d) above satisfy the re	quirements of section 17	0(h)(4)(B)(I)
•	balance sheet,	escribe how the organization repo and include, if applicable, the tex n's accounting for conservation e	t of the footnote to the orgar		
Par	t IIII Organi	izations Maintaining Colle	ctions of Art, Historica		er Similar Assets.
la	works of art, his	tion elected, as permitted under S storical treasures, or other simila e, in Part XIII, the text of the foo	r assets held for public exhi	bition, education, or resea	arch in furtherance of public
b	works of art, his	tion elected, as permitted under S storical treasures, or other simila e the following amounts relating t	r assets held for public exhi		
	(i) <sub>Revenues I</sub>	ncluded in Form 990, Part VIII, I	ne 1		►\$
	(ii) Assets Incl	uded in Form 990, Part X			►\$
2	If the organizat	tion received or held works of art, nts required to be reported under			al gain, provide the
а	Revenues inclu	ided in Form 990, Part VIII, line	1		▶\$
Ł	Assets include	d in Form 990, Pari X			copy of CVISION PDFC
or P		tion Act Notice, see the Instruct	ions for Form 990	Cat No 52283	

cne	dule D (Form 990) 2013									Page <b>2</b>
Part	Organizations Maintaining Co									(continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, check			-		sıgnıfıcant us	e of its	
а	Public exhibition		d 「	Loan or e	excha	ange progr	ams			
b	☐ Scholarly research		e 🗆	Other						
с	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and expla	aın how the	ey further t	he org	ganızatıon	's exe	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							lar	∏ Yes	- <b>⊡ No</b>
Par	t IV Escrow and Custodial Arrang					answere	d "Ye	es" to Form	990,	
	Part IV, line 9, or reported an an									
	Is the organization an agent, trustee, custod included on Form 990, Part X?				ons or	other ass	ets n	ot	∏ Yes	5 <b>🗆 No</b>
b	If "Yes," explain the arrangement in Part XII	I and complete the	e following '	table		г				
~						ŀ		A	mount	
с с	Beginning balance					ŀ	1c			
d	Additions during the year					ŀ	1d			
e £	Distributions during the year					-	1e			
f	Ending balance					L	1f		<b>–</b>	<b>—</b>
2a	Did the organization include an amount on Fo								∏ Yes	
b	If "Yes," explain the arrangement in Part XII									. /
Pa	<b>t V Endowment Funds.</b> Complete	f the organizatio	n answer (b)Prior					IV, line 10, hree years back		r years back
1a	Beginning of year balance	(a)canent year		ycai D		years back		filee years back		T years back
b	Contributions									
с	Net investment earnings, gains, and losses									
4	Cranta ar achalarahan									
d e	Grants or scholarships Other expenditures for facilities									
е	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end balan	ice (line 1g	), column (	(a)) he	eld as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨									
с	Temporarily restricted endowment 🕨									
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	zation that	are held aı	nd ad	ministered	d for t	he	Ye	es No
	(i) unrelated organizations							3a	i(i)	
	(ii) related organizations								(ii)	
b	If "Yes" to 3a(II), are the related organizatio				•	• • •	•	3	ßb	
ł	Describe in Part XIII the intended uses of the type of					and Yos	' to [		art TV	luno
Peli	Land, Buildings, and Equipme 11a. See Form 990, Part X, line		the organ		1115 WE	ereu res	lo r	01111 990, P	art IV,	me
				(a) Cost or o		(b)Cost or		(c) Accumula		<b>)</b> Book value
	Description of property		I D	asıs (ınvestm	nent)	basıs (otl	ier)	depreciatio	"	
	Description of property									
1a										
		· · · · · ·	· _		,					
b	_and	· · · · · ·	· _							
b c	_and	· · · · · ·	·							

	See Form 990, Part X, line 12. Description of security or category	(b)Book value	(c) Method of va	luation
)Financial	(including name of security)		Cost or end-of-year	
	derivatives			
Closely-h her	neld equity interests			
		<b>.</b>		
	(b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related.	Complete if the organization	 n answered 'Yes' to Fo	orm 990 Part IV line 11
	See Form 990, Part X, line 13.			in 550, Part IV, me II
	(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
	n (b) must equal Form 990, Part X, col (B) line 13 )	►		
art IX	Other Assets. Complete if the organization	tion answered 'Yes' to Form 99 cription	0, Part IV, line 11d See I	orm 990, Part X, line 15 (b) Book value
)OIL GAS	& MINERAL INTEREST			
,				
otal. (Colum	nn (b) must equal Form 990, Part X, col.(B) line	e 15.)		
Part X	Other Liabilities. Complete if the or			ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25.	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability			ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See
Part X	Other Liabilities. Complete if the or Form 990, Part X, line 25. (a) Description of liability	ganization answered 'Yes' t		ine 11e or 11f. See

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

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

 2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been

Schee	lule D (Form 990) 2013		Page <b>4</b>
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue   the organization answered 'Yes' to Form 990, Part IV, line 12a.	per Re	<b>turn</b> Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	]	
с	Recoveries of prior year grants	7	
d	Other (Describe in Part XIII )	]	
е	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line ${f 1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )	]	
с	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12).......	5	
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per F	Return. Complete
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
с	Other losses		
d	Other (Describe in Part XIII )		
е	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )		
с	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18 )	5	

#### Part XIII Supplemental Information

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

Return Reference	Explanation
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Schedule D (Form 990) 2013

Part XIII       Supplemental Information (continued)         Return Reference       Explanation		
Return Reference       Explanation	Part XIII Supplemental Info	prmation (continued)
	Return Reference	Explanation

Schedule D (Form 990) 2013

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efile GRAPHIC print - DC	D NOT PROCESS	As Filed Data -					<b>DLN: 93493219014494</b> OMB No 1545-0047	
Schedule I (Form 990)	Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.							
Department of the Treasury Internal Revenue Service	🕨 Inform	ation about Schedule I	Attach to Form 9 Attach to Form 9 (Form 990) and its inst		<u>s.gov/form990</u> .		Open to Public Inspection	
Name of the organization HENRIETTA M RILEY TRUST F	OR WATCH TOWER B	BIBLE				Employer iden 38-604310	ntification number	
Part I General Inform	nation on Grants	and Assistance				38-604310.	2	
	d to award the grants o rganization's procedure <b>ner Assistance to</b>	rassistance? es for monitoring the us Governments and	e of grant funds in the Organizations in	United States		ganization answei		
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) Amount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistan		
(1) WATCH TOWER BIBLE & TRACT SOC 25 COLUMBIA HTS Brooklyn,NY 11201	11-1857820	501c3						

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

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Schedule I (Form 990) 2013

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<b>(a)</b> Type of grant or assistar	nce <b>(b)</b> Number of recipients	<b>(c)</b> Amount of cash grant	(d)A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance		
Part IV Supplemental	Information. Provide the in	formation required in I	Part I, line 2, Part III, co	lumn (b), and any other a	dditional information.		
Return Reference	Explanation						
onitoring procedures (Part I, THE GRANTEE/DONEE IS SPECIFIED ON THE DOCUMENT COURT ACCOUNTINGS ARE ALSO FILED ANNUALLY ne 2)							

Schedule I (Form 990) 2013

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efile GRAPHIC pr	int - DO NOT PROCESS	As Filed Data -		DLN: 93493219014494				
SCHEDULE O	<u>Cumplemente</u>		омв № 1545-0047 <b>2013</b>					
(Form 990 or 990-EZ)	Supplementa	Supplemental Information to Form 990 or 990-EZ						
Department of the Treasury Internal Revenue Service		Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990 or 990-EZ.						
	Information about	Schedule O (Form 990 o www.irs.gov/fo	or 990-EZ) and its instructions is at rm990.					
Name of the organizati			Employe	r identification number				
HENRIETTA M RILEY TRUST	FOR WATCH TOWER BIBLE		38-6043	3103				

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation					
Governing body meeting documentation Part VI line 8a	THIS TRUST IS UNDER PROBATE ADMINISTRATION AN ANNUAL REPORT IS SUBMITTED TO THE PROBATE COURT FOR APPROVAL					
Form 990 governing body review Part VI line 11	COPY OF TAX RETURN IS SUBMITTED TO TRUSTEE BEFORE IT IS FILED WITH THE INTERNAL REVENUE SERVICE FOR THE TRUSTEE'S REVIEW AND APPROVAL					
Governing documents etc available to public Part VI line 19	TAX RETURNS AND TRUST DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST EITHER BY PHONE OR BY MAIL					
Explanation of other changes in net assets or fund balances Part XI line 9	DEPLETION EXPENSE					

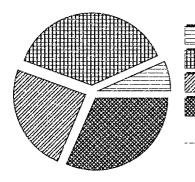
#### H. M. RILEY TRUST FOR WATCH TOWER BIBLE AND TRACT SOCIETY Period 5/1/2013 to 4/30/2014 Royalty Income and Expenses

Royalty Income		610,189.00
Expenses:		
Property Tax	18,910.00	
Managerial fee	85.00	
Trustee Fee	26,529.00	
Depletion	91,528.00	
Total expenses		137,052.00
		473,137.00

1045001628 Account Number Statement Period May 01, 2013 Through April 30 2014

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#### **Investment Portfolio Summary**



	Tax Co	Market Val	Percent				
CASH AND EQUIVALENTS	225, 478	48	225, 478	48	6	6%	
EQUITIES	1,039,793	01	1 284,652	64	37	8%	
FIXED INCOME	803, 151	45	818, 172	87	24	1%	
ALTERNATIVE INVESTMENTS	1,068,195	95	1,073,025	03	31	5%	
OTHER ASSETS	3	00	3	00	0	0%	
 Total	3, 136, 621	89	3 401, 332	02	100	0%	

### **Investment Detail**

Description			Total Market/ Total Cost	Market Price/ Cost Price	Est Annual Inc / Unreal Gain / Loss	Current Yıeld
Cash And Equivalents						
FIDELITY INST GOVERNMENT-III			225,478-48 225,478-48	1 00 1 00	22 55	0 01
* Total Cash And Equivalents			225,478 48 225,478 48		22 55 0 00	0 01
Description	Ticker	Shares	Total Market/ Total Cost	Market Price/ Cost Price	Est Annual Inc / Unreal Gain / Loss	Current Yield
Equities						
ADOBE SYS INC	ADBE	90-000	5 552 10 5,536 46	61 69 61 52	15 64	
AMAZON COM INC	AMZN	15 000	4,561 95 4,879 38	304 13 325 29	317 43-	
AMERICAN EXPRESSICO	AXP	90 000	7 868 70 7 570 95	87 43 84 12	82 80 297 75	1 05
AMERICAN INTL GROUP INC	AIG	210 000	11,157-30 10,227-48	53 13 48 70	105-00 929-82	0 94
AMGEN INC	AMGN	110 000	12,292-50 9,458-12	111 75 85 98	268-40 2,834-38	2 18
APPLE INC	AAPL	25 000	14 752 25 8 003 46	590-09 320-14	329-00 6-748-79	2 23



Account Number 1045001628

Statement Period May 01, 2013 Through April 30 2014

#### Investment Detail (Continued)

			Total Market/	Market Price/	Est Annual Inc / Unreal	Current
Description	Ticker	Shares	Total Cost	Cost Price	Gain / Loss	Yield
Equities						
AVERY DENNISON CORP	AVY	100 000	4,866-00 4-950-47	48 66 49 50	140 00 84 47	2 68
BANK OF AMERICA CURP	ЬАС	180-000	2 725 20 2,573 35	15 14 14 30	7 20 151 85	0 26
BAXTER INTL INC	ΒΑΧ	50 000	3 539 50 3,506 86	72 79 72 14	98-00 32-64	2 69
BERKSHIRE HATHAWAY CL B	BRK/B	110 000	14 173 50 12 707 27	128 85 115 52	1 466 23	
BIGGEN IDEC INC	BIIB	20 000	5,742 40 4 780 15	287 12 239 01	<b>96</b> 2 25	
BLACKROCK INC	BLK	25 000	7,525-00 7,632-98	301 00 305 32	193 00 107 98-	2 56
BOEING CO	BA	20 000	2 589 40 2 592 93	129 02 129 65	58 40 12 53-	2 26
BRISTOL MYERS SQUIBB CO	ΒΜΥ	90 000	4 508 1J 4 506 24	50 09 51 18	129-60 98-14	2 87
CBS CORPINEW OL B	CBS	30 000	5,198-40 5-335-96	57-76 59-29	43 20 137 56	0 83
CELGENE CORP	CELG	60 000	8 820 60 8,956 36	147 01 149 27	135 76-	
CONOCOPHILLIPS	COP	145 000	10 774 95 4,207 29	74 31 29 02	400-20 6-567-66	3 71
CONSTELLATION BRANDS INCICLA	ST2	30 000	2 395 20 2 387 30	79 84 79 58	7 90	
DEVON ENERGY CORPORATION	DVN	115 000	8,050-00 6-406-99	70 00 55 71	110 40 1 643 01	1 37
DISNEY WALT CO	DIS	100 000	7,934-00 7,112-62	79-34 71-13	86 00 821 38	1 08
DOW CHEMICAL CO	DOW	70 000	3 493 00 3 381 00	49-90 48-30	103 60 112 00	2 97
EOG RESOURCES INC	EOG	100 000	980000 835600	98 00 83 86	50-00 1,414-00	0 51
ECOLAB INC	ECL	60 000	6,27840 381694	104 64 63 62	66 00 2,461 46	1 05
EXPRESS SCRIP I'S HLDG CO	ESRX	100-000	6 658 00 5,383 25	66 58 53 63	1 274 75	
FACEBOOK INC	FB	140 000	6 369 20 6,891 66	59 78 49 23	1 477 54	
FISERY INC	FISV	120 000	7 293 60 3 370 33	60 78 28 09	3 923 27	

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Statement Period May 01, 2013 Through April 30 2014

#### Investment Detail (Continued)

			Tatal	Maulent	Cat Americal	
Description	Ticker	Shares	Total Market/ Total Cost	Market Price/ Cost Price	Est Annual Inc / Unreal Gain / Loss	Current Yield
-	110/01	onares	Total Cost	003111100		i nordi
Equities						
GENERAL ELECTRIC CG	GE	370 000	9,949-30 9-459-04	26 89 25 56	325 60 490 26	3 27
GILEAD SCIENCES INC	GILO	70 000	5 494 30 5,254 96	78 49 75 67	230 34	
GOOGLE INCICLIC	GOOG	16 000	6 426 56 8,884 66	526 66 555 29	458 10	
HARBOR INTL FD	HAINX	4,031 025	295 877 24 235 089 53	73 40 58 32	6,026-38 60-787-71	2 04
HERSHEY CO COMMON STOCK	HSY	80 000	7,699 20 7 699 70	96-24 96-25	155-20 0-50	2 02
HOME DEPCT INC	HD	90 000	7,155-90 7,019-55	79-51 78-00	169-20 136-35	2 36
HONEYWELL INTERNATIONAL INC	HON	60 000	5 574 00 5 569 31	92-90 92-82	108 00 4 69	1 94
INTERNATIONAL FLAVORS	IFF	60 000	5 911 20 5 297 01	98 52 88 28	93 60 614 19	1 58
JOHNSON & JOHNSON	JNJ	160 000	16,206-40 6-850-99	101 29 42 82	448 00 9,355 41	2 76
KANSAS UITY SOUTHERN	KSU	40 000	4 035 20 4,950 54	100 88 123 76	44 80 915 34-	1 11
KIMBERLY CLARK CORP	KMB	70 000	7 857 50 7,284 98	112 25 104 07	235-20 572-52	2 99
KRAFT FOODS GROUP INC	KRFT	100 000	5 696 00 5 264 53	56 86 52 65	210 00 421 47	3 69
LIONS GATE ENTERTAINMENT CORP	2312684	170 000	4,510 10 5 227 35	26 53 30 75	34 00 717 25	0 75
LOCKHEED MARTIN CORP	LM1	30 000	4,921-20 4,825-16	164 14 160 84	159-60 99-04	3 24
MFS IN IL NEW DISCOVERY I	MWNIX	6,529-187	192 872 18 152 416 77	29 54 23 34	2 383 15 40,455 41	1 24
AMG SOUTHERNSUN SMALL CAP-INST	SSSIX	2 515 332	75 912 7 <i>2</i> 51 363 08	30 18 20 42	27 67 24,549 64	0 04
MEDTRONIC INC	MD1	120 000	7,058 40 6 903 50	58 82 57 53	134-40 154-90	1 90
MERCK & CO INC NEW	MRK	240 000	14 054 40 11,203 03	58 56 46 68	422 40 2 851 37	3 01
MICROSOFT CORP	MSFT	440 000	17 776 00 11,321 84	40 40 25 73	492 80 6 454 16	2 77
MOLSON COORS BREWING CO CL B	ТАР	90 000	5 397 30 4 825 57	59 97 53 62	133-20 571-73	2 47

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Statement Period May 01, 2013 Through April 30 2014

#### Investment Detail (Continued)

			Total Market/	Market Price/	Est Annual Inc / Unreal	Current
Description	Ticker	Shares	Total Cost	Cost Price	Gain / Loss	Yield
Equities						
MONSANTO CO	MON	40 000	4,428-00 4-542-20	110 70 113 56	68 80 114 20	1 55
MONSTER BEVERAGE CORP	MNST	120 000	8 035 20 8,032 90	66 96 66 94	2 30	
MORGAN STANLEY	MS	170 000	5 258 10 5,268 92	30 93 30 99	68 00 10 82	1 29
NEWELL RUBBERMAID INC	NVVI	170 000	5 118 70 5 283 85	50-11 31-08	102 00 165 15	1 99
NIKE INC CL B	NKE	50 000	3,647 50 1 363 91	72 95 27 <i>2</i> 8	48 00 2 283 59	1 32
NORTHROP GRUMMAN CORP	NOC	30 000	3,545-30 3,336-70	121 51 111 22	73-20 308-60	2 01
OCCIDENTAL PETROLEUM CORP	ΟΧΥ	90 000	8 617 50 7 186 92	95 75 79 85	259-20 1,430-58	3 01
OPPENHEIMER DEVELOPING MARKETS FUND-Y	CDVYX	4 002 056	147 875 97 126 325 95	36 95 31 57	652-34 21,550-02	0 44
PNC FINANCIAL SERVICES GROUP	FNC	50 000	4,202 00 4 202 18	84 04 84 04	96 00 0 18	2 28
PEPSICO INC	PEP	120 000	10 306 80 9,930 03	85 89 82 75	272 40 376 77	2 64
PFIZER INC	PFE	330 000	10 322 40 10,185 78	31 28 30 87	343-20 136-62	3 32
PRINCIPAL MIDCAP BLEND	POBIX	3,374 088	69 101 32 48 316 94	20 48 14 32	168-70 20-784-38	0 24
PROCTER & GAMBLE CO	PG	90 000	7,429 50 7 151 17	82 55 79 46	231 66 278 33	3 12
QUALCOMM INC	QCOM	150 000	11,806-50 9,770-51	78 71 65 14	252 00 2,035 99	2 13
ROLLINS INC	ROL	170 000	5 113 60 5 003 90	30 08 29 43	71 40 109 70	1 40
ROPER INDS INCINEW	ROP	55 000	7 642 25 3 596 64	138 95 65 39	44 00 4,045 61	0 58
SEALED AIR CORP NEW	SEE	120 000	4,117 20 ≲ 796 €0	34-31 51-64	62 40 320 60	1 52
STARBUCKS CORP	SPIIX	70 000	4 943 40 5,358 24	70 62 76 55	/2 80 414 84-	1 4/
THERMO FISHER SCIENTIFIC INC	тмо	40 000	4 560 00 4,833 04	114 00 120 83	24 00 273 04	0 53
TIME WARNEP INC	тwx	80 000	5 316 80 5 159 04	66 46 64 49	101 60 157 76	1 91

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Statement Period May 01, 2013 Through April 30 2014

## Investment Detail (Continued)

		<b>*</b>	Total Market/	Market Price/	Est Annual Inc / Unreal	Current
Description	Ticker	Shares	Total Cost	Cost Price	Gain / Loss	Yield
Equities						
UNITED TECHNOLOGIES CORP	UTX	90 000	10,649-70 9-829-08	118 33 109 21	212 40 820 62	1 99
VERIZON COMMUNICATIONS	VZ	265-000	12 383 45 9,988 88	46 73 37 69	561 80 2 394 57	4 54
VIACOM INCICL 5	VIA/B	110 000	9 347 80 8,858 67	84 98 80 53	132 00 489 13	1 41
VISA INC CL A	V	50 000	10 130 50 3 858 48	202-51 77-17	80 00 6 272 02	0 79
WABTEC CORP	WAB	90 000	6,709-50 4-811-41	74 55 53 46	14 40 1 898 09	0 21
WELLS FARGO & CO NEW	WFC	170 000	8,438-80 8,193-06	49-64 48-19	238 00 245 74	2 82
LAZARU LTD CL A	LAZ	130 000	6 116 50 4 135 11	47 05 31 81	156 00 1,981 39	2 55
* Total Equities			1,284 652 64 1.039,793 01		18,280 30 244,859 63	1 42
Fixed Income						
BHP FINANCE USA LTD 5 4% 03/29/2017		50 000 000	56 061 50 48,700 00	112 12 97 40	2,700 00 7,361 50	4 82
FEDERAL HOME LN BKS 7% 08/15/2014		50 000 000	51,000 00 50 087 50	102 00 100 18	3,500-00 912-50	6 86
LOWES COS INC 5% 10/15/2015		50 000 000	53,145 50 50,545 00	106-29 101-09	2 500 00 2 600 50	4 70
MERCK & CO INC 4% 06/39/2015		100 000 000	104,340 00 105,044 00	104 34 105 04	4,000 00 704 00-	3 83
MICROSOFT CORP 2 95% 06/01/2014		100,000 000	100 235 00 101,758 00	100 24 101 76	2,950-00 1-523-00	2 94
OPPENHEIMER IN L BOND FD Y	OIBYX	16,028 579	98 415 48 99 072 89	6 14 6 18	3 702 60 657 41-	3 76
PIMCO TOTAL RETURN FD INSTL	PTTRX	9,675 587	104,883 36 104,592 04	10 84 10 81	2,389 87 291 32	2 28
PIMCO HIGH YIELD FD INSTL	PHIYX	3 372 831	32,817 65 32,261 17	9 73 9 57	1 904 02 556 48	5 82
PROCTER & GAMBLE CO NT 3 5% 02/15/2015		50 000 000	51 167 50 50,085 00	102 34 100 17	1,750-00 1,082-50	3 42
TARGET CORP 5 875% 07/15/2016		50 000 000	55,429 00 50 568 00	110 86 101 14	2 937 50 4,861 00	5 30
VANGUARD S/T CORPORATE FD-ADM	VFSUX	10 295 617	110,677 89 110 437 85	10 75 10 73	2 141 49 240 03	1 93
* Total Fixed Income			818,172.87 803,151.45		30,480 48 15,521 42	3 73

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Account Number 1045001628

Statement Period May 01, 2013 Through April 30 2014

## Investment Detail (Continued)

			Total Market/	Market Price/	Est Annual Inc / Unreal	Current
Description	Ticker	Shares	Total Cost	Cost Price	Gain / Loss	Yield
Alternative Investments						
THE ARBITRAGE FUND R	ARBN≭	8,376 009	107,464-20 107-296-68	12 83 12 81	1 063 75 167 52	0 99
COHEN & STEERS REAUTY SHS	CSR5X	1 549 455	109 577 46 107,494 98	70 72 69 38	2,485-33 2-082-48	2 21
FEDERATED PRUDENT BEAR FUND	PBRIX	16,690 597	43 562 46 56,980 41	2 61 3 36	12 517 95	
ABSOLUTE STRATEGIES FUND-1	ASFIX	4,936-701	55 093 58 55 192 32	11 16 11 18	14 81 98 74	0 03
GOLDMAN SACHS TR STRATEGIC INCOME FD	GSZIX	23 598 919	250,148-54 250-148-54	10 60 10 60	6 772 89	2 71
FDS INC ASSET STRATEGY FD CL	MAEX	5 236 301	163, 477-32 140, 385-23	31-22 26-81	1 015 84 23,092 09	0 62
MAINS LAY FDS TR MARKETFIELD FUND -1	MFLDX	16,061 568	286 056 53 291 999 31	17 81 18 18	32 12 5,942 78-	0 01
PIMCO COMMODITY RR STRAT INS STRATEGY FUND-INS	PCRIX	9 465 508	57 644 94 59 596 48	6 09 6 30	482 74 1,953 54	0 84
* Total Alternative Investments			1,073,025 03 1,068,195 95		11,367 48 4,829 08	1 11
Other Assets						
SUMMARY ASSET FOR ALL CIL, GAS AND MINERAL INTERESTS	OILGAS	3 000	3 00 3 00	1 00 1 00		
* Total Other Assets			3 00 3 00		0 00 0 00	0 00
Grand Total Assets			3,401 332 02 3 136,621 89		60,650 81 264,710 13	1 78

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