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

2008

OMB No 1545-0052

Department of the Treasury

_		nue Service Note. The foundation may be able			ite reporting	requirements			
<u>For c</u>	calend		and ending 12/3	1/08					
<u>G</u> C	heck a	ill that apply X Initial return Final return	m Amende	ed return	[Address change	Name change		
Use	the IR	S Name of foundation			A Emp	loyer identification num			
	abel.	Charles & Debby Campbell E	Tamily		26	-3889103			
,	erwise		_	B Telephone number (see page 10					
2.4	orint	Number and street (or P O box number if mail is not delivered	to street address)						
· ` `	type.	26 O'Keena Drive	10 01.001 000,		C If exemption application is pending, check here				
	Specif			-					
	uction	only or torni, oldio, and zir oode	2305		D 1. F	mare			
ш с	· 4				2. Foreign deafuzations meeting the				
		ype of organization X Section 501(c)(3) exempt private				15% test, check here and a	• –		
			le private foundation		E If pri	vate foundation status was r section 507(b)(1)(A), che	terminated		
٠,		ket value of all assets at end J Accounting method:	X Cash Acc	rual	unde	s section 507(b)(T)(A),*cne	ck nere		
,		from Part II, col (c), Uther (specify)			F If the	foundation (Smar60-mon	h termination		
~~~	e 16)		be on cash basis)		unde	r section 587/e) (B), che	ck here		
* Pé	irt I	Analysis of Revenue and Expenses (The	(a) Revenue and	/IN No.		<b> </b>	(d) Disbursements		
		total of amounts in columns (b), (c), and (d) may not necessarily	expenses per books	(b) Net in	vestment ome	(c) Adjusted net income	for chantable purposes		
	<del></del>	equal the amounts in column (a) (see pg 11 of the instructions) )				moonic	(cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)	2,000,000						
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B							
	3	Interest on savings and temporary cash investments		_					
	4	Dividends and interest from securities							
	5a	Gross rents		_					
Ø	ь	Net rental income or (loss)							
Revenue	6a	Net gain or (loss) from sale of assets not on line 10							
ē	ь	Gross sales price for all assets on line 6a							
è	7	Capital gain net income (from Part IV, line 2)			0				
	8	Net short-term capital gain			<del>-</del>	0			
	9	Income modifications				<u>-</u>			
	10a	Gross sales less returns & allowances							
	ь	Less: Cost of goods sold							
	C	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)		<u> </u>					
	12	,	2 000 000						
		Total. Add lines 1 through 11	2,000,000	<u> </u>	0	0			
xpenses	13	Compensation of officers, directors, trustees, etc.		<u> </u>	<del></del>	<del></del>			
ПS	14	Other employee salaries and wages	<del></del>	<del></del>			-		
þe	15	Pension plans, employee benefits		<u> </u>					
	16a	Legal fees (attach schedule)	ļ						
é	Ь	Accounting fees (attach schedule)	- "	<u> </u>		RECEIVED	<u> </u>		
and Administrative E	C	Other professional fees (attach schedule)	<del></del>		<del>                                     </del>		있		
štr	17	Interest	,		1=1	10V 1 (5 3033	8		
Ë	18	Taxes (attach schedule) (see page 14 of the instructions)			18	NON TO SOIS			
Ξ	19	Depreciation (attach schedule) and depletion		ļ	11_		1 6 1		
Ad	20	Оссирапсу				DCDEN. UT	<b></b>		
Ď	21	Travel, conferences, and meetings							
ā	22	Printing and publications							
g	23	Other expenses (att sch )							
aţi	24	Total operating and administrative expenses.							
Operating		Add lines 13 through 23	0		0		0		
g	25	Contributions, gifts, grants paid	0				0		
	26	Total expenses and disbursements. Add lines 24 and 25	0		0	0	0		
· <u> </u>	27	Subtract line 26 from line 12							
	a	Excess of revenue over expenses & disbursements	2,000,000						
	ь	Net investment income (if negative, enter -0-)			0				
	С	Adjusted net income (if negative, enter -0-)				0			

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2008)

SCANNED DEC 1

Form 990-PF (2008) Charles & Debby Campbell Family

Fo	<u>orm 990</u>	PF(2008) Charles &	Debby Ca	mppell	Family	26-38891	<u> </u>	Page 2
	Part II	Balance Sheets Attack	hed schedules and	d amounts in the	description column	Beginning of year	End of	year
_		shoul	ld be for end-of-ye	ar amounts only	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing					2,000,000	2,000,000
	2	Savings and temporary cash inves	stments					
	3	Accounts receivable >						
		Less: allowance for doubtful accou	unts 🕨					
	4	Pledges receivable						
		Less: allowance for doubtful accou	unts 🕨		·	[	Ţ	
	5	Grants receivable				· · · · · · · · · · · · · · · · · · ·		
	6	Receivables due from officers, dire	ectors trustees	and other		*****		
		disqualified persons (attach sched						
		instructions)	idic) (see page	10 01 1116				
	7	•	s <b>N</b>					
	<b>'</b>	Other notes and loans receivable (att schedule)	•				Ī	
ທ		Less allowance for doubtful accou	unts -					<del></del>
ë	8	Inventories for sale or use						
Assets	9	Prepaid expenses and deferred ch	•					<del></del>
٩		Investments—U S and state governme	= :	ach schedule)				
	b	Investments—corporate stock (att	•					<del></del>
	С	Investments—corporate bonds (at	ttach schedule)					<del></del> .
	11	Investments—land, buildings, and equipment b	oasis 🕨				1	
		Less accumulated depreciation (attach sch.)	•					
	12	Investments—mortgage loans						
	13	Investments—other (attach sched	ule)					
	14	Land, buildings, and equipment basis					1	
		Less accumulated depreciation (attach sch.)	<b>&gt;</b>					
	15	Other assets (describe			) [			
	16	Total assets (to be completed by	all filers-see th	ne				
_		instructions Also, see page 1, iten	n I)			0	2,000,000	2,000,000
	17	Accounts payable and accrued ex	penses		ļ			
S	18	Grants payable			ļ			
Ë	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trus	stees, and other	disqualified pe	rsons			
<u>.</u>	21	Mortgages and other notes payable (att	tach schedule)					
_	22	Other liabilities (describe			) [		_	
_	23	Total liabilities (add lines 17 throi	ugh 22)			0	0	
		Foundations that follow SFAS 1		_				
es		and complete lines 24 through 2	26 and lines 30	and 31.				
띹	24	Unrestricted					2,000,000	
or Fund Balance	25	Temporarily restricted						
8	26	Permanently restricted			, <del>,</del>			
힡	i e	Foundations that do not follow:		ck here 🕨				
ᆵ		and complete lines 27 through 3	31.					
ō	27_	Capital stock, trust principal, or cur	rrent funds					
ţ	28	Paid-in or capital surplus, or land,	bldg , and equip	oment fund				······································
Se	29	Retained earnings, accumulated in	ncome, endowm	nent, or other fu	ınds			
Ą	30	Total net assets or fund balance	es (see page 17	of the				
Net Assets		instructions)				0	2,000,000	
Z	31	Total liabilities and net assets/fu	und balances (	see page 17				
		of the instructions)				0	2,000,000	·····
_	Part II						<del></del>	
1		net assets or fund balances at begi		Part II, column	(a), line 30 (must a	gree with		
_		f-year figure reported on prior year	's return)				1	
_		amount from Part I, line 27a					2	2,000,000
3		increases not included in line 2 (ite	emize) 🕨				3	
4		nes 1, 2, and 3					4	2,000,000
5		ases not included in line 2 (itemize					5	
_6	Total	net assets or fund balances at end	of year (line 4 n	minus line 5)—f	Part II, column (b), li	ne 30	6	2,000,000 Form <b>990-PF</b> (2008)
								Earn UUII-DE (2000)

26-3889103

	990-PF (2008) Charles & Debby Campbell Family 26-3889103			F	Page 4
Pa	Ft VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	ı			
	Date of ruling letter (attach copy of ruling letter if necessary—see instructions)	1			
b	` ` ' '	1			
	here ▶ and enter 1% of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	1			
	of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	_		0
3	Add lines 1 and 2	3			
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
6	Credits/Payments				
а	2008 estimated tax payments and 2007 overpayment credited to 2008 6a				
b	Exempt foreign organizations—tax withheld at source 6b	I			
C	Tax paid with application for extension of time to file (Form 8868)	1			
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7			
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached 1	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be: Credited to 2009 estimated tax ▶ Refunded ▶ 1	11			
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				
	of the instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation   \$ (2) On foundation managers   \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				
	foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities.				
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		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	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?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) None				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				ŀ
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			i	ŀ
	or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on				
	page 27)? If "Yes," complete Part XIV		9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10	X	

Form	n 990-PF (2008)	Charles	& Debb	y Campbel	ll Family	26-388910	3			F	Page 5
	art VII-A			Activities (c							
11	At any time during	the year, did the f	oundation, direct	tly or indirectly, own a	a controlled entity within the						
	meaning of section	n 512(b)(13)? If "Y	es," attach sched	dule (see page 20 of t	the instructions)				11		X
12	Did the foundati	ion acquire a dire	ect or indirect	interest in any app	licable insurance contrac	t before					
	August 17, 2008	87							12		X
13			the public insp	ection requirement	ts for its annual returns a	nd exemption applicatio	n?		13	X	
	Website addres		G1 1	~1-11	•						
14	The books are i			Campbell	L	Tele	phone no	•			
		26 O'Ke		.ve				2020	•		
45		Jackson	·-		DE 11 (F 4044	0	ZIP+4 ▶	38305	)		
15					PF in lieu of Form 1041—	-Check here	<b>.</b> 1	4-			▶ ⊔
D:	and enter the ar			eceived or accrued	r Which Form 4720	May Bo Boguirod		15			
5					unless an exception app					Yes	No
1a	During the year				uness an exception apt	piles.				res	NO
					a disqualified person?		Yes	X No			
			_		edit to (or accept it from) a	1		140			
	disqualified	-	,,		on to (or doodprix in oill) d	•	Yes	X No			
			facilities to (or	accept them from	) a disqualified person?		Yes	X No			
	(4) Pay compe	nsation to, or pa	y or reimburse	the expenses of,	a disqualified person?		Yes	X No			
	(5) Transfer an	y income or ass	ets to a disqua	alified person (or m	nake any of either availab	le for	_	_			
	the benefit	or use of a disqu	alified person)	٥ر			Yes	X No			
	(6) Agree to pa	y money or prop	erty to a gove	rnment official? (E	xception. Check "No" if						
	the foundat	ion agreed to ma	ake a grant to	or to employ the of	fficial for a period after		_				
	termination	of government s	service, if term	inating within 90 da	ays)		Yes	X No			
b					lify under the exceptions	<del>-</del>	s	1-			
					sistance (see page 20 of	the instructions)?		N/A	1b		<u> </u>
					stance check here			▶ [_			
С					ribed in 1a, other than ex	cepted acts, that		N/A			•
2			•	ax year beginning		ion was a musta		N/A	1c		
2				)(3) or 4942(j)(5)) [.]	oply for years the foundati	ion was a private					
а			_		buted income (lines 6d ar	nd					
_		r tax year(s) beg			buted moonne (mies od di	no.	Yes	X No			
	If "Yes," list the		, 20		20						
b	Are there any ye	ears listed in 2a			pplying the provisions of	section 4942(a)(2)					
					ed income? (If applying s						
	to all years liste	d, answer "No"	and attach stat	tement—see page	20 of the instructions.)			N/A	2b		
С	If the provisions	of section 4942	(a)(2) are bein	ig applied to <b>any</b> o	f the years listed in 2a, lis	st the years here					
	<b>▶</b> 20 ,	20 , 20	, 20								
3a	Did the foundati	on hold more tha	an a 2% direct	or indirect interest	t in any business		_	_			
		y time during the	-				Yes	X No			
b					t of (1) any purchase by th						
		•			ear period (or longer perio	•		<del></del>			<b></b>
					acquired by gift or beques						
			• .	,	dule C, Form 4720, to de	termine if the		/-			
		excess business	_	•				N/A	3b		
4a					er that would jeopardize it				4a		X
b		-	-	onor year (but after	r December 31, 1969) tha	it could jeopardize its	20				•

Form	990-PF (2008)	Charles	& Debby	Campbell Page 1	Family	26-3	<u> 388910</u>	3					Page 6
P	irt VII-B	Statements	Regarding A	ctivities for W	hich Form	4720 May Be F	Required	(cor	ntinue	ed)			
5a	During the year	did the foundation	on pay or incur an	y amount to:									
	(1) Carry on pr	ropaganda, or oth	nerwise attempt to	ınfluence legislati	on (section 494	15(e))?		\[\]	Yes	X No			
	(2) Influence th	ne outcome of an	y specific public e	lection (see section	on 4955); or to o	carry on,		_		_			
	directly or i	ndırectly, any vot	er registration driv	∕e [?]				י ∐	Yes	X No			
	(3) Provide a g	rant to an individ	lual for travel, stud	ly, or other sımılar	purposes?			\[\begin{array}{c} \gamma \cdot \cdo	Yes	X No			1
	(4) Provide a g	rant to an organi	zation other than	a chantable, etc ,	organization de	scribed in							1
	section 509	9(a)(1), (2), or (3)	, or section 4940(	d)(2)? (see page 2	22 of the instruc	ctions)		. □ ·	Yes	X No			1
	(5) Provide for	any purpose oth	er than religious,	charitable, scientif	ic, literary, or			_		_			1
	educationa	l purposes, or for	the prevention of	cruelty to children	or animals?			$\square$	Yes	X No			
b	If any answer is	s "Yes" to 5a(1)-(	5), did any of the	transactions fail to	qualify under t	he exceptions desc	ribed in	_		_			
	Regulations see	ction 53 4945 or i	in a current notice	regarding disaste	r assistance (s	ee page 22 of the ii	nstructions)	7		N/A	.   5b	]	I
				g disaster assistai		· -	,		•	$\Box$			1
С			_	foundation claim e					-	_			1
			ire responsibility f		•		N/A		<b>Yes</b>	☐ No			1
				ions section 53 49	)45-5(d).		•						
6a				inds, directly or in		premiums							
-		enefit contract?	Ja., 1000110 a.i., 10	mao, amoody or mi	anddily, to pay	premanis			res -	X No			
ь	•		ear nav nremiums	: directly or indire	ctly on a nerso	nal benefit contract	2		163	110	6ь	Ì	x
-		d "Yes" to 6b, also		s, directly of fildire	city, on a perso	mai beneni contract	.:				60	+	<del>  ^</del>
7a	-	· ·		n a party to a prof	ubited tay chelt	er transaction?			res -	X No			
b						er transaction? to the transaction?	1	Ш,	res	N/A		+	<del> </del>
	***************************************					ndation Manag		alse D	-:4 5	<u>-</u>		т—	
r x		id Contractor		Directors, 111	ustees, rou	iiuatioii Manaç	jers, nigi	IIY F	aiu E	inploye	es,		
						on (see page 22 o	£ 41 14	-41					
<u> </u>	ist all Unicers,	directors, truste	es, iounuation i	ianagers and the	iir compensati		(c) Comper		(d) (	Contributions	to I	٠	
		(a)	Name and address			(b) Title, and average hours per week	(If not paid,	enter	`emp	ployee benefi and deferred empensation	i (	e) Exp	ense other
	arles Campbe	.11		Jackson		devoted to position  Pres/Directo	-0-)		, 00	mpensation	_	allowar	ices
	O'Keena Dri			TN 38305		Pres/Directo		_					_
	bby Campbell			Jackson	<del></del> -	20 0 /Do		0			-		
						Sec/Director							_
	O'Keena Drı	.ve		TN 38305		1		0		-	0		0
											İ		
							-						
						1							
	<u> </u>		<del></del>			1			<u> </u>				
2			-paid employees	(other than thos	e included on	line 1—see page 2	23 of the in:	structi	ions).				
	If none, enter	NONE."				<u> </u>	1		ī				
	(a) N:	ame and address of	f each employee paid	1 more than \$50 000		(b) Title, and average hours per week	(2) (2			ontributions l		e) Exp	
	(4)	and dudiess of	caon employee par	Timore than \$50,000		devoted to position	(c) Compe	nsation	plans	and deferred		ccount, allowar	
									<u>ω</u>	mpensation			
NC	NE .												
											1		
										_	$\pm$		
									ļ				
									<u></u>		$\bot$		
			<u> </u>										
Tota	number of other	employees paid	over \$50,000									<b>\</b>	
											Form 9	90-PF	(2008)

orm 990-PF (20		26-3889103	Page 1
Part VIII	Information About Officers, Directors, Trustees, Founda and Contractors (continued)	tion Managers, Highly Paid Empl	oyees,
3 Five highe	st-paid independent contractors for professional services (see page 23	of the instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			<del> </del>
•			
	<del> </del>		
otal number of	others receiving over \$50,000 for professional services		<b>•</b>
Part IX-A	Summary of Direct Charitable Activities		
	n's four largest direct chantable activities during the tax year. Include relevant statistical is and other beneficianes served, conferences convened, research papers produced, etc.	nformation such as the number	Expenses
1 N/A			
· ·			
2			
3			
4			<del></del>
Part IX-B	Summary of Program-Related Investments (see page	23 of the instructions)	
	largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
1 N/A			
-			
			·
-			
All other program	-related investments See page 24 of the instructions		
3			
<del></del>			
Total. Add lines	1 through 3	. <b>▶</b> }	

Form **990-PF** (2008)

orn	1990-PF(2008) Charles & Debby Campbell Family 26-3889103	_	Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. Fore	gn fou	
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		-
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	76,923
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	76,923
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	76,923
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25		
	of the instructions)	4	1,154
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,154 75,769
6	Minimum investment return. Enter 5% of line 5	6	279
P	PIT XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operations	erating	
	foundations and certain foreign organizations check here and do not complete this part )	Ū	
1	Minimum investment return from Part X, line 6	1	279
2a	Tax on investment income for 2008 from Part VI, line 5		
b	Income tax for 2008 (This does not include the tax from Part VI )	1 1	
С	Add lines 2a and 2b	2c ]	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	279
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	279
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	279
Pa	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	0
b	Program-related investments—total from Part IX-B	1b	
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		
а	Suitability test (pnor IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0
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 page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation		
	gualifies for the section (1940/o) reduction of tay in these years		

<u>Form</u>	990-PF (2008) Charles & Debby Campbel	.l Family	26-3889103	3	Page 9
Pa	art XIII Undistributed Income (see page 26 of	the instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2008 from Part XI,	Corpus	Years prior to 2007	2007	2008
•	line 7				279
2	Undistributed income, if any, as of the end of 2007			279	
a b	Enter amount for 2007 only  Total for prior years 20 , 20 , 20			2/9	
3	Excess distributions carryover, if any, to 2008:				······
	From 2003				
b	From 2004			Ī	
c	From 2005			1	
d				Ī	
e					
f	Total of lines 3a through e	İ		#	
4	Qualifying distributions for 2008 from Part XII,				
	line 4 ▶\$				
а	Applied to 2007, but not more than line 2a				
	Applied to undistributed income of prior years (Election				
	required—see page 26 of the instructions)			1	
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2008 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2008				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))			1	
6	Enter the net total of each column as			1	
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed			1	
	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			1	
	amount—see page 27 of the instructions				
е					
	4a from line 2a Taxable amount—see page				
	27 of the instructions			279	
T	Undistributed income for 2008 Subtract lines				
	4d and 5 from line 1. This amount must be				070
7	distributed in 2009	<u></u>	<u> </u>		279
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2003 not				
Ü	applied on line 5 or line 7 (see page 27 of the			1	
	instructions)			1	
9	Excess distributions carryover to 2009.	·			····
-	Subtract lines 7 and 8 from line 6a			I	
10	Analysis of line 9:				
a	Excess from 2004			-	
b	Excess from 2005			1	
c	Excess from 2006			1	
d	Excess from 2007			-	
e	Excess from 2008		1	1	

Pa	rt XIV Private Operating Fou	ndations (see pa	ge 27 of the instr	uctions and Part V	(II-A, question 9)	
1a	If the foundation has received a ruling or d					
	foundation, and the ruling is effective for 2		-	<b>•</b>		
b	Check box to indicate whether the foundary		-	d in section 49	494 (J)(3) or	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Iolai
	investment return from Part X for	(4) 2000	(2) 200.	(0) 2000	(4) 2000	
	each year listed					
ь.	85% of line 2a		<del></del>			
b		<u> </u>				
С	Qualifying distributions from Part XII,					
	line 4 for each year listed				<del></del>	
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities			<u> </u>		<del></del>
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c				<u></u> .	
3	Complete 3a, b, or c for the					
	alternative test relied upon.					
а	"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)				, <del>_</del>	
	(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				<del></del>	
Pa	TXV Supplementary Inform	ation (Complete	this part only if th	ne foundation had	\$5,000 or more i	n assets
	at any time during the	•	•		<b>,</b> , ,	
1	Information Regarding Foundation Mar					
а	List any managers of the foundation who l	-	than 2% of the total cor	ntributions received by t	he foundation	
	before the close of any tax year (but only			•		
	Charles and Debby Ca		, , , , , , , , , , , , , , , , , , , ,		\$2	2,000,000
	List any managers of the foundation who		e stock of a corporation	(or an equally large po		
	ownership of a partnership or other entity)			<u> </u>		
	N/A		J			
2	Information Regarding Contribution, G	rant, Gift, Loan, Scho	larship, etc., Program	is:		<u>-</u>
				organizations and doe	s not accept	
	unsolicited requests for funds if the found					
	organizations under other conditions, com					
	The name, address, and telephone number			ne addressed		<del></del>
u	Charles Campbell 731		approduorio siloulu t	444100000		
	26 O'Keena Drive Jac		305			
	The form in which applications should be			should include:		
U	See Form 1023	Japinikou anu impimal	on and materials triey :	onduid moduc.		
	Any submission deadlines	-				
•	N/A					
d	Any restrictions or limitations on awards,	such as by geographica	al areas, chantable field	ls, kinds of institutions.	or other factors	
-	N/A		,			
	<del></del>				·—·	

Part XV Supplementary Information (co	ntinued)			
3 Grants and Contributions Paid During the	Year or Approved for Fu	ture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor			
a Paid during the year				
N/A				
		}		
			1	
			<u> </u>	
			i i	
Total			▶ 3a	
b Approved for future payment				
N/A				
:				
Total	-	<u> </u>	<b>▶</b> 3b	<del></del>
		- · · · · · · · · · · · · · · · · · · ·		

Part X	/I-A Analysis of Income-Producing Acti	vities				
	s amounts unless otherwise indicated	1	ed business income	Exclude	d by section 512, 513, or 514	(e)
J		(a) Business code	(b) Amount	(c) Exclusion	(d)	Related or exempt function income (See page 28 of
1 Progra	m service revenue			code		the instructions)
а						
b						
c						<u> </u>
d						
е	<u></u>					<u>.</u> .
f						
g Fe	es and contracts from government agencies					
2 Member	ership dues and assessments					
	t on savings and temporary cash investments					
4 Divide	nds and interest from securities					
	ntal income or (loss) from real estate.					
	bt-financed property					
	t debt-financed property					
	ntal income or (loss) from personal property					
	nvestment income		<u></u>			
	r (loss) from sales of assets other than inventory					
	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue a					
ь						
	al. Add columns (b), (d), and (e)		0			0
	Add line 12, columns (b), (d), and (e)				13	0
(See works	heet in line 13 instructions on page 28 to verify calculations					0
	heet in line 13 instructions on page 28 to verify calculations    F-B   Relationship of Activities to the Activities	complishme				0
(See works	#Inheet in line 13 instructions on page 28 to verify calculations  #Inheet in line 13 instructions on page 28 to verify calculations  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activities to the Activi	complishme reported in col	umn (e) of Part XVI-A o	ontribute	ed importantly to	0
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	*** ****	Exempt Organiza	tions	101010 10 4114 114			· · · · · · · · · · · · · · · · · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
1	Did the org	ganization directly or indire		in any of the following v	with any other	er organ	nization describe	ed			Yes	No
		501(c) of the Code (other										
	organizatio	ons?										
а	Transfers	from the reporting founda	tion to a none	chantable exempt organ	nization of							
	(1) Cash									1a(1)		_X_
	(2) Other	assets								1a(2)		X
b	Other tran	sactions										
	(1) Sales	of assets to a nonchantal	ble exempt or	ganization						1b(1)		<u> </u>
	(2) Purch	ases of assets from a nor	nchantable ex	empt organization						1b(2)		X
	(3) Renta	I of facilities, equipment, o	or other asset	s						1b(3)		<u> </u>
	(4) Reimb	oursement arrangements								1b(4)		X
	(5) Loans	or loan guarantees								1b(5)		X
		mance of services or mer	•	<del>-</del>						1b(6)		<u>X</u>
	_	facilities, equipment, mai	_	•	-					_1c_		<u> </u>
d		ver to any of the above is										
		ne goods, other assets, or										
	-	ny transaction or sharing a								<del></del>		
1/.	a) Line no	(b) Amount involved	(c) Name	of nonchantable exempt or	ganization	(d)	Description of tr	ansfers, transact	ions, and s	sharing arranger	nents	
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2a	Is the four	ndation directly or indirectl	ly affiliated wi	th, or related to, one or	more tax-ex	empt o	rganızatıons				_	,
		in section 501(c) of the C		an section 501(c)(3)) or	r in section 5	27?				∐ Ye	es X	No
b	If "Yes," c	omplete the following scho	edule		-							
		(a) Name of organization		(b) Type of organiz	zation			(c) Description	n of relation	onship		
	N/A	<del></del>						· ·				
				<del></del>					_			
				<del></del> -								
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	belief, it	ilties of perjury, I declare that rue correct, and complete De	eclaration of pro	eparer (other than taxpayer	onipanying sci or fiduciary) is	s based	on all information o	of which preparer	has any k	nowledge		
Į		Parile Car	11/11		111/	14/1	7	Presid	ent			
ļ	Signat	ure of officer or trustee	11/1/4		Date	1//		Title	<u>ec</u>			
<u>e</u>							Date	<u> </u>		Preparer's identif		
Sign Here			_	111			Date	Check if		number (see Sig	-	n .
딞	ا ڇِ ڀَ	Preparer's	7.					self-employed	⊓l	page 30 of the in		
ิ	aid On On	signature Michael	1 M. He	witt // c	10		11/14/1		. ,	P00083		-
	Paid Preparer's Use Only	Firm's name (or yours if		der Thompso	n Arno	ld,		- 1				
	-	self-employed), address,		l Well Rd		•	-		EIN ▶			
_		and ZIP code	Jacks		05				Phone no	731-42	7-8	<del>571</del>
										Form 99	0-PF	(2008)

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

Department of the Treasury Internal Revenue Service

## Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2008

**Employer identification number** 

Name of the organization
Charles & Debby Campbell Family

Foundation 26-3889103 Organization type (check one) Filers of Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 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 organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable. scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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 of \$5,000 or more during the year)

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990,

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

990-EZ, or 990-PF)

Person Payroll

Noncash

(d)

Type of contribution

(Complete Part II if there is a noncash contribution )

(c)

**Aggregate contributions** 

\$

(a)

No.

(b)

Name, address, and ZIP + 4

86180 Charlès & Debby Campbell Family
26-3889103 Federal Statements 11/14/2012 9:07 AM FYE: 12/31/2008 Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000 Name of Manager Amount Charles and Debby Campbell 2,000,000 Total 2,000,000 Form 990-PF, Part XV, Line 2b - Application Format and Required Contents Description See Form 1023

86180 11/14/2012 12 53 PM **Power of Attorney** OMB No 1545-0150 (R. March 2012) Department of the Treasury and Declaration of Representative For IRS Use Only Internal Revenue Service ▶ Type or print. ▶ See the separate instructions. Received by **Power of Attorney** Name . Caution: A separate Form 2848 should be completed for each taxpayer Form 2848 will not be honored Telephone for any purpose other than representation before the IRS Function Taxpayer information. Taxpayer must sign and date this form on page 2, line 7 Date Taxpayer name and address Taxpayer identification number(s) Charles & Debby Campbell Family 26-3889103 Foundation Daytime telephone number Plan number (if applicable) 26 O'Keena Drive Jackson TN 38305 731-668-8934 hereby appoints the following representative(s) as attorney(s)-in-fact 2 Representative(s) must sign and date this form on page 2, Part II 5000-73607R Name and address CAF No Michael M. Hewitt [Alexander Thomps PTIN 227 Oil Well Rd 731-427-8571 Telephone No. Jackson TN 38305 731-424-5701 Fax No Check if to be sent notices and communications Check if new Address Telephone No. Fax No Name and address CAF No PTIN Telephone No. Fax No Check if to be sent notices and communications Check if new Address Telephone No Fax No Name and address CAF No PTIN Telephone No Fax No Telephone No Check if new Address Fax No to represent the taxpayer before the Internal Revenue Service for the following matters Matters Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Tax Form Number Year(s) or Period(s) (if applicable) Practitioner Discipline, PLR, FOIA, Civil Penalty, etc.) (see instructions for line 3) (1040, 941, 720, etc.) (if applicable) (see instructions for line 3) Ret of Private Found. 990-PF 2008 - 2011 **Excise Tax** 4720 2008 - 2011 Specific use not recorded on Centralized Authorization File (CAF) of the power of attorney is for a specific use not recorded on CAF,

check this box. See the instructions for Line 4. Specific Uses Not Recorded on CAF Acts authorized. Unless otherwise provided below, the representatives generally are authorized to receive and inspect confidential tax information and to perform any and all acts that I can perform with respect to the tax matters described on line 3, for example, the authority to

sign any agreements, consents, or other documents. The representative(s), however, is (are) not authorized to receive or negotiate any amounts paid to the client in connection with this representation (including refunds by either electronic means or paper checks). Additionally, unless the appropriate box(es) below are checked, the representative(s) is (are) not authorized to execute a request for disclosure of tax returns or return information to a third party, substitute another representative or add additional representatives, or sign certain tax returns

Substitute or add representative(s);

Disclosure to third parties, Signing a return,

(see instructions for more information)

Exceptions. An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations An enrolled actuary may only represent taxpayers to the extent provided in section 10 3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan agent may only represent taxpayers to the extent provided in section 10 3(e) of Circular 230. A registered tax return preparer may only represent taxpayers to the extent provided in section 10.3(f) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practitioner's (level k) authority is limited (for example, they may only practice under the supervision of another practitioner)

List any specific deletions to the acts otherwise authorized in this power of attorney:

Other acts authorized

DAA

oum 28	48 (Rev. 3-20	(2) Charles & Debi	y campbell ramily	26-3889103	Page <b>2</b>	
6 R	etention/revo	cation of prior power(s) of attorr	ney.The filing of this power of attorney	automatically revokes all earlier power(s) of		
at	torney on file w	with the Internal Revenue Service for	r the same tax matters and years or p	eriods covered by this document. If you do not	t want	
	revoke a pnor power of attorney, check here					
Y	OU MUST AT	TACH A COPY OF ANY POWER	OF ATTORNEY YOU WANT TO RE	MAIN IN EFFECT.		
	gnature of taxpayer. If a tax matter concerns a year in which a joint return was filed, the husband and wife must each file a separate power					
of	attorney even	ttorney even if the same representative(s) is (are) being appointed. If signed by a corporate officer, partner, guardian, tax matters partner,				
executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of taxpayer					ne	
•	IF NOT SIGN	IED AND DATED, THIS POWER	OF ATTORNEY WILL BE RETURNI	ED TO THE TAXPAYER.		
	11/2.	1. 1 6.01		lula Pi	/ 1	
	Will	ru cuysum		11/14/12 Presid	. ent	
		Signature		Date Title (if ap	plicable)	
$\mathcal{C}$	Planelac	Signature  Campbell  Brot Name		Charles & Dahbar Camba	-11 Bomile	
C	Alon 162	Campbell	DIN Number	Charles & Debby Campbe	=	
		Print Name	PIN Number	Print name of taxpayer from line 1 if other	r than individual	
art i	l Declara	tion of Representative	<del></del>		<del></del>	
		perjury, I declare that.		· · · · · · · · · · · · · · · · · · ·		
	•	• • •	rom practice before the Internal Reve	nue Service.		
		•	·	erning practice before the Internal Revenue Se	rvice.	
	• I am authorized to represent the taxpayer identified in Part I for the matter(s) specified there, and					
	am one of the f		, , ,			
а	Attorney—a	member in good standing of the bai	of the highest court of the jurisdiction	shown below.		
b						
С	<b>-</b>					
d	d Officer—a bona fide officer of the taxpayer's organization.					
е	e Full-Time Employee—a full-time employee of the taxpayer					
f Family Member—a member of the taxpayer's immediate family (for example, spouse, parent, child, grandparent, grandchild, child, brother, or sister)					rent, step-	
					· · · · · · · · · · · · · · · · · · ·	
g	g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before					
the Internal Revenue Service is limited by section 10 3(d) of Circular 230)						
h		Unenrolled Return Preparer —Your authority to practice before the Internal Revenue Service is limited. You must have been eligible to sign the				
••	return under examination and have signed the return. See Notice 2011-6 and Special rules for registered tax return preparers and unenrolled					
	return preparers in the instructions.					
	• •					
i		Registered Tax Return Preparer—registered as a tax return preparer under the requirements of section 10.4 of Circular 230. Your authority to				
		practice before the Internal Revenue Service is limited. You must have been eligible to sign the return under examination and have signed the return. See Notice 2011-6 and Special rules for registered tax return preparers and unenrolled return preparers in the instructions.				
_				• •		
k				his/her status as a law, business, or accounting		
	working in Ll	TC or STCP under section 10.7(d)	of Circular 230 See instructions for P	art II for additional information and requirement	s	
r	Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the					
	Internal Reve	enue Service is limited by section 10	0.3(e))			
	▶ IF THIS	<b>DECLARATION OF REPRESI</b>	ENTATIVE IS NOT SIGNED AN	D DATED, THE POWER OF ATTORNE	Y WILL BE	
	RETURNE	D. REPRESENTATIVES MUS	T SIGN IN THE ORDER LISTED	IN LINE 2 ABOVESee the instructions	for Part II.	
Note:	For designation	ns d-f, enter your title, position, or re	elationship to the taxpayer in the "Lice	nsing jurisdiction" column. See the instructions	for Part II	
	re information		stationism to the taxpayor in the 2100	noning jurious colorini Colorini Colorino	ioi i ait ii	
			Bar, license, certification,			
)esians	ation — Insert	Licensing jurisdiction (state) or other	registration, or			
above letter (a-r)		licensing authority	enrollment number (if applicable) See	Signature D	Date	
		(ıf applicable)	instructions for Part II for			
			more information		<del></del>	
	,	_		1/	<u></u>	
b		Tennessee	5811	I want Have	11/14/12	
				,		
			<u> </u>			