



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0052

**2009**

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

**For calendar year 2009, or tax year beginning , 2009, and ending**

**G** Check all that apply ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return  
☐ Amended return ☐ Address change ☐ Name change

Use the  
IRS label.  
Otherwise,  
print  
or type.  
See Specific  
Instructions

**THE DANIEL P. AMOS FAMILY FOUNDATION**  
**POST OFFICE BOX 5346**  
**COLUMBUS, GA 31906**

**A** Employer identification number

58-2005391

**B** Telephone number (see the instructions)**C** If exemption application is pending, check here ☐**D 1** Foreign organizations, check here ☐**2** Foreign organizations meeting the 85% test, check here and attach computation ☐**E** If private foundation status was terminated under section 507(b)(1)(A), check here ☐**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐**H** Check type of organization ☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation**I** Fair market value of all assets at end of year  
(from Part II, column (c), line 16)

▶ \$ 107,490,590.

**J** Accounting method ☐ Cash ☒ Accrual  
☐ Other (specify) \_\_\_\_\_

(Part I, column (d) must be on cash basis)

**Part I Analysis of Revenue and****Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>1</b> Contributions, gifts, grants, etc. received (att sch)	7,740,894.			
<b>2</b> Ck <input type="checkbox"/> if the foundn is not req to att Sch B				
<b>3</b> Interest on savings and temporary cash investments	125,141.	125,141.		
<b>4</b> Dividends and interest from securities	1,817,974.	1,817,974.		
<b>5a</b> Gross rents				
<b>b</b> Net rental income or (loss)				
<b>6a</b> Net gain/(loss) from sale of assets not on line 10	-3,381,375.			
<b>b</b> Gross sales price for all assets on line 6a	8,745,295.			
<b>7</b> Capital gain net income (from Part IV, line 2)		0.		
<b>8</b> Net short-term capital gain			0.	
<b>9</b> Income modifications				
<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less: Cost of goods sold				
<b>c</b> Gross profit/(loss) (att sch)				
<b>11</b> Other income (attach schedule)	-859,324.			
<b>12 Total.</b> Add lines 1 through 11	5,443,310.	1,943,115.	0.	
<b>13</b> Compensation of officers, directors, trustees, etc	0.			
<b>14</b> Other employee salaries and wages				
<b>15</b> Pension plans, employee benefits				
<b>16a</b> Legal fees (attach schedule)				
<b>b</b> Accounting fees (attach sch) SEE ST 2	14,735.	14,735.		
<b>c</b> Other prof fees (attach sch)				
<b>17</b> Interest				
<b>18</b> Taxes (attach schedule) (see instr.) SEE STM 3	25,427.			
<b>19</b> Depreciation (attach sch) and depletion				
<b>20</b> Occupancy				
<b>21</b> Travel, conferences, and meetings				
<b>22</b> Printing and publications				
<b>23</b> Other expenses (attach schedule) SEE STATEMENT 4	135,563.	96,862.		
<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	175,725.	111,597.		
<b>25</b> Contributions, gifts, grants paid PART XV	5,645,792.			5,645,792.
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	5,821,517.	111,597.	0.	5,645,792.
<b>27 Subtract line 26 from line 12:</b>				
<b>a Excess of revenue over expenses and disbursements</b>	-378,207.			
<b>b</b> Net investment income (if negative, enter -0-)		1,831,518.		
<b>c</b> Adjusted net income (if negative, enter 0)			0.	

SCANNED NOV 17 2009  
OASD-ISA  
NOV 16 2009  
IRS-OSC

13

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1	Cash — non-interest-bearing		601,321.		
	2	Savings and temporary cash investments		1,556,251.	1,947,138.	1,947,138.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach sch)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges		40,466.	42,632.	42,632.
	10a	Investments — U.S. and state government obligations (attach schedule)				
	b	Investments — corporate stock (attach schedule) STATEMENT 5		37,803,703.	42,677,789.	42,677,789.
	c	Investments — corporate bonds (attach schedule)				
	11	Investments — land, buildings, and equipment basis				
	Less: accumulated depreciation (attach schedule)					
12	Investments — mortgage loans					
13	Investments — other (attach schedule) STATEMENT 6		52,101,022.	62,823,031.	62,823,031.	
14	Land, buildings, and equipment basis					
	Less: accumulated depreciation (attach schedule)					
15	Other assets (describe )					
16	<b>Total assets</b> (to be completed by all filers — see instructions Also, see page 1, item I)		92,102,763.	107,490,590.	107,490,590.	
LIABILITIES	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, & other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe )				
	23	<b>Total liabilities</b> (add lines 17 through 22)		0.	0.	
NET ASSETS OR FUND BALANCES		<b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> <input checked="" type="checkbox"/>				
	24	Unrestricted		92,102,763.	107,490,590.	
	25	Temporarily restricted				
	26	Permanently restricted				
		<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> <input type="checkbox"/>				
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, building, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	<b>Total net assets or fund balances</b> (see the instructions)		92,102,763.	107,490,590.	
	31	<b>Total liabilities and net assets/fund balances</b> (see the instructions)		92,102,763.	107,490,590.	

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	92,102,763.
2	Enter amount from Part I, line 27a	2	-378,207.
3	Other increases not included in line 2 (itemize) <b>SEE STATEMENT 7</b>	3	15,766,034.
4	Add lines 1, 2, and 3	4	107,490,590.
5	Decreases not included in line 2 (itemize)	5	
6	<b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) — Part II, column (b), line 30	6	107,490,590.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a SEE STATEMENT 8				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	— [ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ]	2	-3,381,375.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	— [ If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0- in Part I, line 8 ]	3	-539,920.

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008	4,821,591.	111,339,405.	0.043305
2007	3,899,746.	100,950,177.	0.038630
2006	2,982,085.	77,085,783.	0.038685
2005	2,764,189.	62,185,736.	0.044451
2004	1,992,500.	56,717,662.	0.035130
2 Total of line 1, column (d)		2	0.200201
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years		3	0.040040
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5		4	85,950,738.
5 Multiply line 4 by line 3		5	3,441,468.
6 Enter 1% of net investment income (1% of Part I, line 27b)		6	18,315.
7 Add lines 5 and 6		7	3,459,783.
8 Enter qualifying distributions from Part XII, line 4		8	5,645,792.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructions)**

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary - see instr.)		1	18,315.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (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	18,315.
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	18,315.
6 Credits/Payments			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	6a	42,632.	
b Exempt foreign organizations – tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	42,632.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	24,317.	
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> 24,317. Refunded <input type="checkbox"/> 0.	11	0.	

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		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		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T		X
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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) GA		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		X

BAA

Form 990-PF (2009)

**Part VII-A Statements Regarding Activities Continued**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address <u>N/A</u>				
14	The books are in care of <u>JEANNIE CHOBOTIUK</u> Telephone no <u></u>			
Located at <u>P.O. BOX 5566 COLUMBUS GA</u> ZIP + 4 <u>31906</u>				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <u>N/A</u> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u> <u>N/A</u>			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	N/A
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see the instructions)	2b	N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	3b	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

BAA

Form 990-PF (2009)

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b N/A

Organizations relying on a current notice regarding disaster assistance check here

☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?N/A ☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b X

If 'Yes' to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b N/A

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906	PRESIDENT 0	0.	0.	0.
MORTON A. HARRIS 2854 CROMWELL DRIVE COLUMBUS, GA 31906	ASSISTANT SE 0	0.	0.	0.
LAUREN A. AMOS P.O. BOX 5346 COLUMBUS, GA 31906	VICE CHAIRMA 0	0.	0.	0.
DAVID B. PLYLER 3715 NS PKWY NC 200, SUITE 600 ATLANTA, GA 30327	SECRET/ASST 0	0.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	0	0.	0.	0.

Total number of other employees paid over \$50,000

0

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services – (see instructions). If none, enter 'NONE.'

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

BAA

Form 990-PF (2009)



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	83,561,509.
b Average of monthly cash balances	1b	3,698,123.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	87,259,632.
e 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	87,259,632.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,308,894.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	85,950,738.
6 Minimum investment return. Enter 5% of line 5	6	4,297,537.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1 Minimum investment return from Part X, line 6	1	4,297,537.
2a Tax on investment income for 2009 from Part VI, line 5	2a	18,315.
b Income tax for 2009 (This does not include the tax from Part VI)	2b	
c Add lines 2a and 2b	2c	18,315.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	4,279,222.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	4,279,222.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4,279,222.

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	5,645,792.
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		
a Suitability test (prior 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	5,645,792.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	18,315.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,627,477.

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7.				4,279,222.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only			5,519,906.	
b Total for prior years 20__, 20__, 20__		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 5,645,792.				
a Applied to 2008, but not more than line 2a			5,519,906.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2009 distributable amount				125,886.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions.		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				4,153,336.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2009	(b) 2008	(c) 2007	(d) 2006	
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon				
a 'Assets' alternative test — enter				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				
c 'Support' alternative test — enter				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

**Part XV Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year — see instructions.)

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
DANIEL P. AMOS

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  
NONE

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	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
<i>a</i> Paid during the year SEE STATEMENT 9				
<b>Total</b>			<b>3 a</b>	5,645,792.
<i>b</i> Approved for future payment				
<b>Total</b>			<b>3 b</b>	

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514	
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
<b>1</b> Program service revenue					
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b>					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments					
<b>3</b> Interest on savings and temporary cash investments			14	125,141.	
<b>4</b> Dividends and interest from securities			14	1,817,974.	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property					
<b>b</b> Not debt-financed property					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income			14	-859,324.	
<b>8</b> Gain or (loss) from sales of assets other than inventory			18	-3,381,375.	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue					
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>12</b> Subtotal. Add columns (b), (d), and (e)				-2,297,584.	
<b>13</b> Total. Add line 12, columns (b), (d), and (e)					-2,297,584.

(See worksheet in the instructions for line 13 to verify calculations.)

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

[illegible]



**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, or 990-PF

OMB No 1545-0047

**2009**

Name of the organization

THE DANIEL P. AMOS FAMILY FOUNDATION

Employer identification number

58-2005391

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

- ☐ 501(c)(\_\_\_\_) (enter number) organization  
☐ 4947(a)(1) nonexempt charitable 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 an organization 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 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 (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions 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 990-EZ, that received from any one contributor, during the year, 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. ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

**Schedule B** (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

THE DANIEL P. AMOS FAMILY FOUNDATION

58-2005391

**Part I** Contributors (see instructions)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906	\$ 844,600.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	THE PAUL S & JEAN R AMOS CLAT 3715 NORTHSIDE PARKWAY ATLANTA, GA 30327	\$ 1,115,395.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
3	DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906	\$ 1,072,233.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
4	DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906	\$ 415,414.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
5	DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906	\$ 1,010,068.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
6	DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906	\$ 1,237,638.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)



Name of organization

Employer identification number

THE DANIEL P. AMOS FAMILY FOUNDATION

58-2005391

**Part I** Contributors (see instructions)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906	\$ 2,045,546.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

THE DANIEL P. AMOS FAMILY FOUNDATION

58-2005391

**Part II** Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	20,000 SHARES OF AFLAC, INC. STOCK		
		\$ 844,600.	10/01/09
3	18,000 SHARES OF AFLAC, INC. STOCK		
		\$ 1,072,233.	12/01/09
4	9,493 SHARES OF AFLAC, INC. STOCK		
		\$ 415,414.	11/10/09
5	23,082 SHARES OF AFLAC, INC. STOCK		
		\$ 1,010,068.	11/10/09
6	27,500 SHARES OF AFLAC, INC. STOCK		
		\$ 1,237,638.	11/17/09
7	53,000 SHARES OF AFLAC, INC. STOCK		
		\$ 2,045,546.	11/30/09

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

THE DANIEL P. AMOS FAMILY FOUNDATION

58-2005391

**Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year.** (Complete cols (a) through (e) and the following line entry )For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000 or less** for the year (Enter this information once – see instructions )

► \$ N/A

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

BAA

2009

## FEDERAL STATEMENTS

PAGE 1

THE DANIEL P. AMOS FAMILY FOUNDATION

58-2005391

STATEMENT 1  
FORM 990-PF, PART I, LINE 11  
OTHER INCOME

	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
OTHER INVESTMENT INCOME	\$ -859,324.		
TOTAL	\$ -859,324.	\$ 0.	\$ 0.

STATEMENT 2  
FORM 990-PF, PART I, LINE 16B  
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
WITT CALLIER & PRESTLEY, CPAS	\$ 14,735.	\$ 14,735.		
TOTAL	\$ 14,735.	\$ 14,735.	\$ 0.	\$ 0.

STATEMENT 3  
FORM 990-PF, PART I, LINE 18  
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX	\$ 25,397.			
STATE REGISTRATION FEES	30.			
TOTAL	\$ 25,427.	\$ 0.	\$ 0.	\$ 0.

STATEMENT 4  
FORM 990-PF, PART I, LINE 23  
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES	\$ 206.	\$ 206.		
CONSULTING FEES	38,347.			
CUSTODY FEES	5,286.	5,286.		
INVESTMENT FEES	90,695.	90,695.		
MANAGEMENT FEES	675.	675.		
PENALTIES	248.			
POSTAGE EXPENSE	106.			
TOTAL	\$ 135,563.	\$ 96,862.	\$ 0.	\$ 0.

STATEMENT 5  
FORM 990-PF, PART II, LINE 10B  
INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
AFLAC, INC. COMMON STOCK-NORTHERN TRUST	MKT VAL	\$ 42,677,789.	\$ 42,677,789.
NORTEL NETWORK CORP	MKT VAL	0.	0.
	TOTAL	\$ 42,677,789.	\$ 42,677,789.

STATEMENT 6  
FORM 990-PF, PART II, LINE 13  
INVESTMENTS - OTHER

OTHER INVESTMENTS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
TEMPLETON INCOME TR GLOBAL BOND FUND	MKT VAL	\$ 0.	\$ 0.
VANGUARD TOTAL STOCK MKT INDEX INSTL	MKT VAL	3,218,204.	3,218,204.
ARCADIAN NON-US ALL CAP	MKT VAL	4,764,281.	4,764,281.
DFA EMERGING MARKETS VALUE PORTFOLIO	MKT VAL	4,870,673.	4,870,673.
SANDERSON INTERNATIONAL VALUE FUND	MKT VAL	3,782,931.	3,782,931.
WILLIAM BLAIR INT EQ FUND CL 1	MKT VAL	3,190,403.	3,190,403.
WESTERN ASSET CORE PLUS BOND PORT INST	MKT VAL	2,964,391.	2,964,391.
COMMONFUND CAPITAL INTL PTRS VI	MKT VAL	233,549.	233,549.
COMMONFUND CAPITAL PVT EQUITY PTRS VII	MKT VAL	309,928.	309,928.
COMMONFUND VENTURE PTRS VIII	MKT VAL	171,357.	171,357.
HRJ DOMESTIC	MKT VAL	1,186,267.	1,186,267.
HRJ INTERNATIONAL	MKT VAL	971,309.	971,309.
LANDMARK EQUITY PARTNERS XIV	MKT VAL	451,434.	451,434.
METROPOLITAN RE PARTNERS	MKT VAL	170,542.	170,542.
VERDIS REAL ASSETS FUND	MKT VAL	706,425.	706,425.
SAPERE CTA FUND	MKT VAL	0.	0.
CANYON VALUE REALIZATION FUND	MKT VAL	2,358,733.	2,358,733.
KING STREET CAPITAL	MKT VAL	2,896,670.	2,896,670.
AFLAC CALLS	MKT VAL	-605,000.	-605,000.
ADAGE CAPITAL PARTNERS LP	MKT VAL	5,009,412.	5,009,412.
ARCHSTONE OFFSHORE PARTNERS LTD	MKT VAL	7,519,783.	7,519,783.
HIGHLINE CAPITAL INTERNATIONAL; LTD	MKT VAL	1,568,864.	1,568,864.
LIBERTY SQUARE OFFSHORE PARTNERS	MKT VAL	0.	0.
ROYALCAP VALUE FUND	MKT VAL	2,012,983.	2,012,983.
BLAIR WILLIAM FDS	MKT VAL	1,636,273.	1,636,273.
MFO ADVISORS INNER CIRCLE	MKT VAL	1,931,412.	1,931,412.
WT MT FD CRM	MKT VAL	1,446,117.	1,446,117.
NATURAL GAS PARTNERS IX LP	MKT VAL	698,450.	698,450.
WELLINGTON DIVERSIFIED INFALTION HDG FND	MKT VAL	3,806,460.	3,806,460.
TEMPLETON INCOME TR GLOBAL BOND FUND	MKT VAL	1,318,414.	1,318,414.
OZ OVERSEAS FUND II	MKT VAL	2,060,006.	2,060,006.
TACONIC OPPORTUNITY OFFSHORE FUND	MKT VAL	2,063,558.	2,063,558.
NGP ENERGY TECHNOLOGY PARTNERS II	MKT VAL	109,202.	109,202.
	TOTAL	\$ 62,823,031.	\$ 62,823,031.

## THE DANIEL P. AMOS FAMILY FOUNDATION

58-2005391

## STATEMENT 7

FORM 990-PF, PART III, LINE 3  
OTHER INCREASES

UNREALIZED GAIN IN MARKET VALUE

	\$ 15,766,034.
TOTAL	\$ 15,766,034.

## STATEMENT 8

FORM 990-PF, PART IV, LINE 1  
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
1	SHORT TERM LOSS FROM K-1S	PURCHASED	VARIOUS	VARIOUS
2	LONG TERM LOSS FROM K-1S	PURCHASED	VARIOUS	VARIOUS
3	1201.602 SAPARE CTA FUND LP	PURCHASED	VARIOUS	6/16/2009
4	1741.92 SAPERE CTA FUND LP	PURCHASED	VARIOUS	9/17/2009
5	500 CALL AFL FEB 09 @45	PURCHASED	11/26/2008	2/24/2009
6	1,500 CALL AFL FEB 09 @50	PURCHASED	11/26/2008	2/24/2009
7	2,000 CALL AJO NOV 09 @40	PURCHASED	5/05/2009	11/13/2009
8	1,000 CALL AJO NOV 09@45	PURCHASED	6/01/2009	10/30/2009
9	491.58 MFO DFA EMERGING MARKETS	PURCHASED	9/09/2009	12/02/2009
10	50,600 AFLAC INC	PURCHASED	11/07/2005	12/02/2009
11	15,231.69 AFLAC INC	PURCHASED	10/05/2006	12/02/2009

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
1	0.		1049175.	-1049175.				\$ -1049175.
2	0.		2374111.	-2374111.				-2374111.
3	2000000.		2000000.	0.				0.
4	2335488.		2335488.	0.				0.
5	271,659.		0.	271,659.				271,659.
6	472,173.		0.	472,173.				472,173.
7	530,173.		1010478.	-480,305.				-480,305.
8	294,874.		50,817.	244,057.				244,057.
9	15,632.		13,961.	1,671.				1,671.
10	2340928.		2754360.	-413,432.				-413,432.
11	484,368.		538,280.	-53,912.				-53,912.
							TOTAL	\$ -3381375.

## STATEMENT 9

FORM 990-PF, PART XV, LINE 3A  
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
ST LUKE UM CHURCH PO BOX 867 COLUMBUS, GA 31902,	NONE	NA	CAPITAL BUILDING FUND	\$ 169,000.

STATEMENT 9 (CONTINUED)  
 FORM 990-PF, PART XV, LINE 3A  
 RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
VALLEY RESCUE MISSION P.O. BOX 1232 COLUMBUS, GA 31902,	NONE	NA	CARE OF THE HOMELESS	\$ 108,833.
HOUSE OF MERCY P.O. BOX 641 COLUMBUS, GA 31902,	NONE	NA	CARE OF THE HOMELESS	50,000.
AFLAC CANCER CENTER 1687 TULLIE CIRCLE ATLANTA, GA 30329,	NONE	NA	CANCER RESEARCH	160,748.
MISSION AMERICA 640-1312 CAMINO SAN DIEGO, CA 92108,	NONE	NA	911 REMEMBRANCE	40,000.
ASBURY THEOLOGICAL SEMINARY 204 N. LEXINGTON AVENUE WILMORE, KY 40390,	NONE	NA	EDUCATION	2,150,000.
ASIAN ACCESS PO BOX 200 SAN DIMAS CA 91773-0200,	NONE	NA	JAPAN MINISTRIES	500,000.
SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607,	NONE	NA	MEDICAL DIAGN TB	250,000.
COLUMBUS MUSEUM 1251 WYNNTON ROAD COLUMBUS, GA 31906,	NONE	NA	BENEFACTOR	7,500.
OPEN DOOR COMMUNITY HOUSE 2405 2ND AVENUE COLUMBUS, GA 31902,	NONE	NA	FINANCIAL ASSISTANCE	75,000.
MUSCOGEE COUNTY LIBRARY FD 3000 MACON ROAD COLUMBUS, GA 31906	NONE	NA	FINANCIAL ASSISTANCE	5,000.
ST THOMAS DAY SCHOOL 830 WHITNEY AVENUE NEW HAVEN, CT 06511	NONE	NA	FINANCIAL ASSISTANCE	10,000.
STEWART COMMUNITY HOME, INC 1125 15TH STREET COLUMBUS, GA 31901	NONE	NA	FINANCIAL ASSISTANCE	25,000.
EDGEWOOD BAPTIST CHURCH 3564 FOREST ROAD COLUMBUS, GA 31907	NONE	NA	FINANCIAL ASSISTANCE	2,000.

STATEMENT 9 (CONTINUED)  
 FORM 990-PF, PART XV, LINE 3A  
 RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
ST FRANCIS FOUNDATION 2122 COLUMBUS MANCHESTER EXPW COLUMBUS, GA 31904	NONE	NA	FINANCIAL ASSISTANCE	\$ 2,500.
MAKE A WISH FOUNDATION PO BOX 29119 PHOENIX, AZ 85038	NONE	NA	FINANCIAL ASSISTANCE	5,000.
DUKE DIVINITY SCHOOL PO BOX 90968 DURHAM, NC 30097	NONE	NA	FINANCIAL ASSISTANCE	150,000.
ATLANTA YOUTH PROJECT 680 W PEACHTREE ST NW ATLANTA, GA 30308	NONE	NA	FINANCIAL ASSISTANCE	75,000.
SALVATION ARMY 3126 VETERANS PKWY COLUMBUS, GA 31904	NONE	NA	FINANCIAL ASSISTANCE	50,000.
ST THOMAS EPISCOPAL CHURCH 2100 HILTON AVE COLUMBUS, GA 31906	NONE	NA	FINANCIAL ASSISTANCE	20,000.
BROOKSTONE SCHOOL 440 BRADLEY PARK DRIVE COLUMBUS, GA 31904	NONE	NA	FINANCIAL ASSISTANCE	5,000.
CHATTAHOOCHEE VALLEY EPISCOPAL CHURCH 2100 HILTON AVENUE COLUMBUS, GA 31906	NONE	NA	FINANCIAL SUPPORT	-1,000.
ATLANTA YOUTH ACADEMIES FOUNDATION 2120 FORREST PARK ROAD ATLANTA, GA 30315	NONE	NA	FINANCIAL ASSISTANCE	20,000.
TWIN CEDARS YOUTH SERVICES INC COLUMBUS, GA 31904	NONE	NA	FINANCIAL ASSISTANCE	50,000.
THE CHAPEL AT ROSEMARY BEACH P.O. BOX 611041 ROSEMARY BEACH, FL 32461	NONE	NA	FINANCIAL ASSISTANCE	9,500.
HOPE HARBOUR, INC P.O. BOX 4182 COLUMBUS, GA 31914	NONE	NA	FINANCIAL ASSISTANCE	5,000.



STATEMENT 9 (CONTINUED)  
 FORM 990-PF, PART XV, LINE 3A  
 RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
COLUMBUS BOTANICAL GARDENS 3603 WEEMS RD COLUMBUS, GA 31909	NONE	NA	FINANCIAL ASSISTANCE	\$ 1,000.
UNITED METHODIST HOMES 10 ACRE PLACE BINGHAMPTON, NY 13904	NONE	NA	FINANCIAL ASSISTANCE	25,000.
NORTH POINT MINISTRIES 4350 NORTHPOINT PARKWAY ALPHARETTA, GA 30022	NONE	NA	FINANCIAL ASSISTANCE	35,000.
SCAD -ATLANTA 1600 PEACHTREE ST. NW ATLANTA, GA 30309	NONE	NA	FINANCIAL ASSISTANCE	50,000.
HISTORIC COLUMBUS FOUNDATION P.O. BOX 5312 COLUMBUS, GA 31906	NONE	NA	FINANCIAL ASSISTANCE	2,500.
MIDTOWN INC 1236 WILDWOOD AVE COLUMBUS, GA 31906	NONE	NA	FINANCIAL ASSISTANCE	2,500.
IN TOUCH MINISTRIES P.O. BOX 7900 ATLANTA, GA 30357	NONE	NA	FINANCIAL ASSISTANCE	250,000.
MAINE SEA COAST MISSION 127 WEST STREET BAR HARBOR , ME 04609	NONE	NA	FINANCIAL ASSISTANCE	100,545.
ST. LUKE SCHOOL 318 11TH STREET COLUMBUS, GA 31901	NONE	NA	FINANCIAL ASSISTANCE	5,000.
EMORY INIVERSITY 201 DOWMAN DRIVE ATLANTA, GA 30307	NONE	NA	FINANCIAL ASSISTANCE	15,000.
THE RIDGE 6045 KNOLOGY WAY COLUMBUS, GA 31909	NONE	NA	FINANCIAL ASSISTANCE	37,500.
USO COUNCIL OF GEORGIA 6000 N TERMINAL PKWY # 320 ATLANTA, GA 30320	NONE	NA	FINANCIAL ASSISTANCE	25,000.

STATEMENT 9 (CONTINUED)  
FORM 990-PF, PART XV, LINE 3A  
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
CENTRAL CONFERENCE PENSION INITIATIVE 1901 CHESTNUT AVE GLENVIEW, IL 60025	NONE	NA	FINANCIAL ASSISTANCE	\$ 1,000,000.
THE MAILBOX CLUB INTERNATIONAL 404 EAGER RD VALDOSTA, GA 31602	NONE	NA	FINANCIAL ASSISTANCE	25,000.
COLUMBIA INTERNATIONAL 7435 MONTICELLO ROAD COLUMBIA, SC 29203	NONE	NA	FINANCIAL ASSISTANCE	25,000.
CHRIST COMMUNITY CHURCH 1215 HILLSBORO RD FRANKLIN, TN 37069	NONE	NA	FINANCIAL ASSISTANCE	25,000.
NATIONAL EATING DISORDER ASSOCIATION 603 STEWART STREET, SUITE 803 SEATTLE , WA 98101	NONE	NA	FINANCIAL ASSISTANCE	26,666.
CHATTAHOOCHEE VALLEY LAND TRUST P.O. BOX 175 COLUMBUS, GA 31902	NONE	NA	FINANCIAL ASSISTANCE	1,000.
INTERNATIONAL FRIENDS CHAPEL HILL, NC	NONE	NA	FINANCIAL ASSISTANCE	50,000.
TOTAL				\$ 5,645,792.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	THE DANIEL P. AMOS FAMILY FOUNDATION	58-2005391
	Number, street, and room or suite number. If a P.O. box, see instructions.	For IRS use only
	WITT, CALLIER & PRESTLEY, CPAS, LLP 7290 NORTH LAKE DRIVE SUITE 503	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	COLUMBUS, GA 31909	

**Check type of return to be filed** (File a separate application for each return):

<input type="checkbox"/> Form 990	<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

• The books are in care of **JEANNIE CHOBOTIUK**

Telephone No. \_\_\_\_\_

FAX No. \_\_\_\_\_

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 11/15, 2010.

5 For calendar year 2009, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_.

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension. ... TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$	42,880.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	42,880.
c <b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs	8c \$	0.

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature James A. Callier Title Certified Public Acct Date 8/16/10