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#### Form 990-PF

Department of the Treasury

### **Return of Private Foundation**

#### or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

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

2009

OMB No 1545-0052

For c	alenda	ır year 2009, or tax yea	ar beginning		, and endin	g		
		I that apply	Initial return	Initial return of a fo	rmer public charit	ty	Final return	-
			Amended return	Address chan	ge		Name change	
	the IR	Name of foundation					A Employer identification	number
	erwise	THE OSBORN	N FAMILY FOU	JNDATION, INC	•		58-2364422	
	print	1	O box number if mail is not o		Roo	m/suite	B Telephone number	
	type		EFIELD DRIVI	<u> </u>			770-998-74	87
	Specif ruction:	City of town, state, a					C If exemption application is p	
		ROSWELL, C				_	D 1. Foreign organizations 2. Foreign organizations me check here and attach co	eting the 85% test,
HC		•		exempt private foundation  Other taxable private foundation	ation			
		on 4947(a)(1) nonexemet value of all assets at e		ting method X Cash	Accrual		E If private foundation state under section 507(b)(1)	
		ert II, col. (c), line 16)	·   —	Other (specify)	/\ccitai		F If the foundation is in a	. ,-
\"				umn (d) must be on cash	basis)		under section 507(b)(1)	
Pa	التبتينة	Analysis of Revenue and (The total of amounts in colunecessanly equal the amounts in column expenses and the amount of the amoun	umns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net invest income	ment	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1 C	ontributions, gifts, gran	nts, etc , received				N/A	
		heck X if the foundation	· · · · ·					
	3 lr	iterest on savings and tempo ash investments	xorary					
	4 0	lividends and interest fro	om securities	2,171.	2,	171.		STATEMENT 1
	<b>5a</b> G	iross rents						
	_	let rental income or (loss)		-12,948.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
e	. G	let gain or (loss) from sale of iross sales price for all	f assets not on line 10	-12,340.				
Revenue	i	ssets on line 6a apital gain net income (from	Part IV line 2)			0.		
æ	1	let short-term capital ga				<del>-</del>		
	l	ncome modifications	•••					
		iross sales less returns nd allowances			1			
	bι	ess Cost of goods sold						
	c G	iross profit or (loss)						
		other income		10 777		171.		
		otal. Add lines 1 throug		-10,777.	2,	0.		0
9	I	Compensation of officers, dir Other employee salaries :		-				
J )		Pension plans, employee			· <del>-</del> ·			
ses		egal fees	• • • • • • • • • • • • • • • • • • • •					
		Accounting fees	STMT 2	845.		0.		845
Exper	c C	Other professional fees	f					
Š	17 li	nterest	R	ECEIVED -				
nd Administrati	18 T	axes					<del></del>	· · · · · · · · · · · · · · · · · · ·
inis	19 [	Depreciation and depletion	on 833 A	UG 0 4 2010 9				
ΕÞ	20 (	Occupancy Travel, conferences, and	1 1	2 2010				
Þ	21 T	raver, conterences, and Printing and publications				_	-	
e G	23	Thirting and publications Other expenses	, <u> </u>	BOEN, UT	-			
Operating	24 T	otal operating and adn	ministrative					
per	. e	expenses. Add lines 13 (		845.		0.		845
0	25	Contributions, gifts, gran		13,750.				13,750
		otal expenses and dist	bursements.	14 505		^		14 505
_		Add lines 24 and 25		14,595.		0.	<u> </u>	14,595
	l.	Subtract line 26 from line		_25 272				
	I .	xcess of revenue over expendent		-25,372.	2	171.		
		let investment income ( Adjusted net income (fr				-/+•	N/A	
9235				n Act Notice, see the instruc	tions.	******	·	Form <b>990-PF</b> (2009

1 Cash - non-interest-bearing

3 Accounts receivable ►

4 Pledges receivable

disqualified persons 7 Other notes and loans receivable

8 Inventories for sale or use

13 Investments - other

18 Grants payable 19 Deferred revenue

24 Unrestricted 25 Temporarily restricted 26 Permanently restricted

Less accumulated depreciation 15 Other assets (describe

b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans

5 Grants receivable

2 Savings and temporary cash investments

Less allowance for doubtful accounts

Less allowance for doubtful accounts

Less allowance for doubtful accounts

10a Investments - U.S. and state government obligations

9 Prepaid expenses and deferred charges

14 Land, buildings, and equipment basis

16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses

21 Mortgages and other notes payable 22 Other liabilities (describe

23 Total liabilities (add lines 17 through 22)

and complete lines 27 through 31.

30 Total net assets or fund balances

6 Receivables due from officers, directors, trustees, and other

STMT 3

Beginning of year

(a) Book Value

69,254.

57,474.

Balance Sheets Attached schedules and amounts in the description

923511
02-02-10

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2 Enter amount from Part I, line 27a

5 Decreases not included in line 2 (itemize)

4 Add lines 1, 2, and 3

Page 3

THE OSBORN FAMILY FOUNDATION, INC.

(a) List and descrit 2-story brick ware	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )  (b) How acquired P - Purchase D - Donation			w acquired Purchase Donation	(mo , d	acquired lay, yr )	(d) Date sold (mo , day, yr )		
1a CHARTER COMMUNI	CATIO	NS				P	12/0	6/99	12/15/09
b									
<u>c</u>									
<u>d</u>		-			<del> </del>				<del></del>
<u>e</u>	(f) Dong	eciation allowed	(n) Co.	st or other basis	1		(h) G	an or floce	<u> </u>
(e) Gross sales price		allowable)		expense of sale	ŀ	(h) Gain or (loss) (e) plus (f) minus (g)			
a				12,94	8.				-12,948.
b								_	
С									
d									
Complete only for assets showing	oain in coliu	mn (h) and owned by	the foundation	on 12/31/69	-		(I) Coine (C	Col (b) goin	minus
Complete only for assets showing	•	ljusted basis		cess of col (I)	$\dashv$	C	ol (k), but i	Col (h) gain not less tha	n -0-) <b>or</b>
(i) F M V as of 12/31/69		of 12/31/69		col (j), if any	İ		Losses	(from col	(h))
a				-					-12,948.
b								·	
С								<del></del>	
<u>d</u>									
<u>e</u>		<u> </u>			$\overline{}$	-			
2 Capital gain net income or (net cap	ıtal loss)	If gain, also enter -0-	r in Part I, line - in Part I, line	/ 7	<b> </b>	2			-12,948.
3 Net short-term capital gain or (loss	•			,			-		· ·
If gain, also enter in Part I, line 8, c	•		ia (0)		}			4-	
If (loss), enter -0- in Part I, line 8		· 4040(-) f	<u> </u>	Tau an Nat	<u> </u>	3		N/A	•
Part V Qualification Un							come		
(For optional use by domestic private f	ioundations s	subject to the Section 2	4940(a) tax on	i net investment ii	iconie )				
If section 4940(d)(2) applies, leave this	s part blank								
Was the foundation liable for the section	on 4942 tax o	on the distributable am	nount of any y	ear in the base pe	riod?				Yes X No
If "Yes," the foundation does not qualify									
1 Enter the appropriate amount in ea	ich column fo	or each year, see instri	uctions before	making any entri					(d)
(a) Base period years		(b) Idjusted qualifying dist	tributions	Net value of no	(C) ancharit	ahle-use asset		Distrib	(d) oution ratio
Calendar year (or tax year beginning	g in) /		9,108.	Net value of the		119,02	l l	(cor (b) aiv	olded by col (c)) .076520
2008			$\frac{3,100.}{2,100.}$			132,55			.091282
2006			1,500.			140,44			.010680
2005			9,408.			115,79	5.		.081246
2004			6,795.			93,41	2.		.072742
									222472
2 Total of line 1, column (d)							_2		.332470
3 Average distribution ratio for the 5-			on line 2 by 5,	or by the number	r of year	S	,		.066494
the foundation has been in existent	ce ir iess (nan	s 5 years					3_		.000474
4 Enter the net value of noncharitable	e-use assets i	for 2009 from Part X	line 5				4		102,637.
4 Enter the net value of mononantable						•			
5 Multiply line 4 by line 3							5_		6,825.
6 Enter 1% of net investment income	(1% of Part	I, line 27b)					_6_		22.
							_		6 017
7 Add lines 5 and 6						•	7	<del> </del>	6,847.
8 Enter qualifying distributions from	Part XII, line	4					8		14,595.
If line 8 is equal to or greater than I			1b, and comp	olete that part usin	ng a 1%	tax rate			
See the Part VI instructions		<del></del>							

	990-PF (2009) THE OSBORN FAMILY FOUNDATION, I					2364			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940)			, or 4	948	- see i	nstru	ictio	ns)
.1a	Exempt operating foundations described in section 4940(d)(2), check here  and ente								
	Date of ruling or determination letter (attach copy of letter if neces								
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and	enter 1%	<b>)</b>	1				<u>22.</u>
	of Part I, line 27b								
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of line 27b			l					_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Othe	rs enter -(	0-)		2				<u>0.</u>
3	Add lines 1 and 2				3				22.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Other	ers enter -	·0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				5				22.
6	Credits/Payments	1		, , ,					
а	2009 estimated tax payments and 2008 overpayment credited to 2009	6a		702.					
	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				<u>02.</u>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	ed			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			6	80.
	Enter the amount of line 10 to be Credited to 2010 estimated tax		680 - Refund	ed ►	11			_	0.
	rt VII-A Statements Regarding Activities						T	1.0	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislati	ion or did	it participate or in	itervene	ın			Yes	
	any political campaign?						1a	ļ	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes						1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and c	opies of	any matenals p	ublishe	d or				
	distributed by the foundation in connection with the activities								
	Did the foundation file Form 1120-POL for this year?					-	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the ye			^					
	(1) On the foundation > \$ 0 . (2) On foundation managers			0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure	re tax imp	osed on foundation	ОП					
	managers ▶\$	_							v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	7					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 inst		irticles of incorpo	ration, c	r				v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes						3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				'nт	/A	4a		
	If "Yes," has it filed a tax return on Form 990-T for this year?				IA	/ A	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?						5_		
_	If "Yes," attach the statement required by General Instruction T.								
b	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	er							
	By language in the governing instrument, or		Ab - A						
	By state legislation that effectively amends the governing instrument so that no mandatory d	irections	that conflict with	ine State	iaw			Х	
_	remain in the governing instrument?						6	X	
1	Did the foundation have at least \$5,000 in assets at any time during the year?						7	Λ	_
0-	If "Yes," complete Part II, col (c), and Part XV.	\ <b>\</b>							
88	Enter the states to which the foundation reports or with which it is registered (see instructions) ${f GA}$		<u></u>						
		rnov Cono	aral (or decionate)						
C	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto	inley Gene	erar (ur uesigirate)	'			8b	Х	
•	of each state as required by General Instruction G? If "No," attach explanation	on 4049/-	\/3\ or 4049/i\/5\	for colo	ndar		00		
y	Is the foundation claiming status as a private operating foundation within the meaning of section year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," con			iui Gale	iiudi		9		х
40	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," Con-			S	TMT	4	10	Х	<u> </u>
1 11	- DIO ANY DELOCITO DECUNIO GUDGIANINAI CUNTINUMINIO MUNIO UNE LAX YEAR ( IT "YES " Attach e schedule li	usting their i	names and addresse	s . v	***	4	1 10	4.2	1

orm 990-PF (2009) THE OSBORN FAMILY FOUNDA			<u>58-23644</u>	22	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	<del></del>	
5a During the year did the foundation pay or incur any amount to					
. (1) Carry on propaganda, or otherwise attempt to influence legislation (section	п 4945(е))?	Y6	es X No		
(2) Influence the outcome of any specific public election (see section 4955), or	or to carry on, directly or indire	ectly,			
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	32	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or 1		[V]		
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in Regulations	N/A	_	1
section 53 4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f			es 🔲 No		
expenditure responsibility for the grant?		I/A Y6	S L NO		
If "Yes," attach the statement required by Regulations section 53.494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		s X No		
a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a property of the foundation.	pareanal hanafit contract?	10	S A NU	6b	x
If "Yes" to 6b, file Form 8870.	bersonal benefit contract?		ŀ	- 00	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?		s X No		
b If yes, did the foundation receive any proceeds or have any net income attribut			N/A	7b	
Information About Officers Directors Truck		nagers. Highly		•••	
Part VIII Paid Employees, and Contractors		g,g	•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e	Expense ount, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation		llowances
KEITH D. OSBORN	DIRECTOR				
1840 RIDGEFIELD DRIVE	<u> </u>				
ROSWELL, GA 30075	0.00	0.	0.		0.
DANA W. OSBORN	DIRECTOR				
1840 RIDGEFIELD DRIVE	]		_		•
ROSWELL, GA 30075	0.00	0.	0.		0.
<u></u>					
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1) If none	enter "NONE "			
2 Compensation of the mignest-paid employees (other than those int	(b) Title and average	The results	(d) Contributions to	(e	) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	acc	ount, other llowances
NONE	devoted to position		compensation	1 "	1011011003
NOND					
			-	1 -	
	1				
		<del> </del>			
	1				
				1	
	7				
Total number of other employees paid over \$50,000					

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0.

Total. Add lines 1 through 3

Forr	n 990-PF (2009) THE OSBORN FAMILY FOUNDATION, INC.	58	3-2364422	Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	s, see 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	63,	810.
b	Average of monthly cash balances	1b	40,	<u>,390.</u>
C	Fair market value of all other assets	10		
d	Total (add lines 1a, b, and c)	1d	104,	200.
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		<u> </u>
3	Subtract line 2 from line 1d	3		200.
4	Cash deemed held for charitable activities  Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,	563.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	102,	637.
6	Minimum investment return. Enter 5% of line 5	6	5,	132.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certaii		
1	Minimum investment return from Part X, line 6	1	5,	132.
2a	Tax on investment income for 2009 from Part VI, line 5			
b	Income tax for 2009 (This does not include the tax from Part VI)			
	Add lines 2a and 2b	2c		22.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,	,110.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	5,	,110.
6	Deduction from distributable amount (see instructions)	6		0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,	,110.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	4-	1.4	505
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	14,	,595 <u>.</u>
	Program-related investments - total from Part IX-B	1b		<u> </u>
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			
	Suitability test (prior IRS approval required)	3a		
þ	Cash distribution test (attach the required schedule)	3b	1.4	F 0 F
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	14,	595.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			22
	income Enter 1% of Part I, line 27b	5		22.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6		573.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	for the section	

4940(e) reduction of tax in those years

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THE OSBORN FAMILY FOUNDATION, INC.

-	(2)	(b)	(c)	(d)
	(a) Corpus	Years prior to 2008	2008	2009
1 Distributable amount for 2009 from Part XI,				
line 7				5,110.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004 2,134. b From 2005 3,802.				
c From 2006				
d From 2007 7,022.				
e From 2008 3,211.				
f Total of lines 3a through e	16,169.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 14,595.				
a Applied to 2008, but not more than line 2a			0.	
<b>b</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				5,110.
e Remaining amount distributed out of corpus	9,485.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	25,654.			
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 instr			0.	
f Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	2 124			
not applied on line 5 or line 7	2,134.			
9 Excess distributions carryover to 2010.	22 520			
Subtract lines 7 and 8 from line 6a	23,520.			
10 Analysis of line 9				
a Excess from 2005 3,802.				
b Excess from 2006				
c Excess from 2007 7,022.			1	
d Excess from 2008 3, 211.				
e Excess from 2009 9, 485.				- 000 DE (000)

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of recipient any foundation manager or substantial contributor Name and address (home or business) a Paid during the year SEE STATEMENT 6 13,750. **▶** 3a Total b Approved for future payment NONE **▶** 3b 0. Total 923611 02-02-10 Form **990-PF** (2009)

Part XVI-A

**Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		code		
ā	-		<del> </del>		
b				<u> </u>	
<u> </u>			ļ		
d			<del> </del>		
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
Investments					
4 Dividends and interest from securities		· · · · · · · · · · · · · · · · · · ·	14	2,171.	
5 Net rental income or (loss) from real estate			<del> </del>	,,_,	
a Debt-financed property			1		
b Not debt-financed property					<u></u> .
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			<u> </u>		-
than inventory			18	-12,948.	
9 Net income or (loss) from special events			1	•	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
C					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		-10,777.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	-10,777.
(See worksheet in line 13 instructions to verify calculations )					
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incor	ne is reported	in column (e) of Part XVI-A	contrit	outed importantly to the accord	nplishment of
the foundation's exempt purposes (other than t				, , , , , , , , , , , , , , , , , , , ,	
	•				<u>.                                      </u>
		<del>" -</del>			
				· · · ·	_
		•			

923621 02-02-10

P	art XVII	Information Re Exempt Organ		ers To and	Transactions	and Relati	onships With Non	charitable	<b>&gt;</b>	_,
1	Did the ora		rectly engage in any of th	ne following wil	th any other organiza	ition described i	n section 501(c) of		Yes	No
•			c)(3) organizations) or in				7 000.1011 00 1(0) 01			···
а	•		lation to a noncharitable of		=	,				
_	(1) Cash	orn the reporting realis		oxompt organiz				1a(1)		Х
	(2) Other a	ssets						1a(2)		Х
b										
-			able exempt organization					16(1)	[ ]	Х
			oncharitable exempt organ	nization				1b(2)	$\Box$	Х
	• •	of facilities, equipment,						16(3)		Х
	-	ursement arrangements						1b(4)		X
		or loan guarantees	,					1b(5)		X
		•	embership or fundraising	solicitations				1b(6)		Х
C			ailing lists, other assets, o		ees			1c		Х
	-		-			always show the	fair market value of the go		·	
_		-	•	=	• •		action or sharing arrangem		010,	
			other assets, or services			,				
a)	<del></del> ,	b) Amount involved	<del></del>		mpt organization	(d) Des	conption of transfers, transaction	s, and sharing an	rangeme	nts
			1	N/A						
				···········			<del> </del>			
		·-··	<del>                                     </del>							
			<del>                                     </del>							
			<u> </u>					<del></del>		
							<u></u>			-
		<del></del>								
			<del></del>	** ***						
		<del></del>			<del></del>		<del></del>			
_		-								
2a		•	ctly affiliated with, or relater than section 501(c)(3))			inizations descri	bed	Yes	<u></u>	□ No
h		nplete the following sch		,	,			103		J 140
	1 100, 00.	(a) Name of or		(b)	Type of organization	n	(c) Description of rela	tionship		
		N/A	<u></u>				<u></u>			
		<del></del>								
			1	- ,			best of my knowledge and belie	ef, it is true, corre	ct,	
	and complete	Declaration of propare (oth	fr than taxpayer or fiduciary)	is based on all inf	ormation of which prepa	rer has any knowle	dge A			
-			<b></b>		17/23/10		President			
9	Signatu	re of officer or trystee			Date	Title				
Ĕ	Prer	arer's				Data /	Check if F	Preparer's identify	ving num	ıber
ğ	િ રૂં ≶ siau	ature Anc	Keelee			1/21/10	self- employed >			
"	12 2 Q 1	name (or yours MOOR	RE STEPHENS	TILLER	LLC	·	EIN ►			
j	L Se lisell	employed). 180	JOHNSON FER			5	<u> </u>			
- [	addm	s and 7IP code		00242	<b>-</b>		0	4 256	160	6

						<u> </u>		
FORM 990-PF DIVIDENT	S AND	INTER	EST	FROM	SECUI	RITIES	STATEMENT	1
SOURCE		GROSS	AMO	DUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	.)
UBS FINANCIAL SERVICES	•		2	171.		0.	2,1	71.
TOTAL TO FM 990-PF, PART I, I	LN 4		2	171.		0.	2,1	71.
FORM 990-PF	AC	COUNTI	NG I	FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INV IT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		845.	-		0.		8	45.
TO FORM 990-PF, PG 1, LN 16B		845.			0.		8	45.
FORM 990-PF	CO	RPORAT	E S	госк			STATEMENT	3
DESCRIPTION					вос	OK VALUE	FAIR MARKE VALUE	т
ACE LIMITED FRANKLIN/TEMPLETON GLOBAL BON HARTFORD CAPITAL APPRECIATION IVY ASSET STRATEGY FUND PFIZER INC PIMCO COMMODITY REAL RETURN S	1		D			19,360. 10,296. 12,114. 10,023. 13,051. 10,765.	25,2 11,4 9,5 11,9 10,0 13,9	09. 47. 35. 05.
TOTAL TO FORM 990-PF, PART II	I, LIN	Е 10В				75,609.	82,0	21.

4

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

**ADDRESS** 

DR. & MRS. KEITH OSBORN

1840 RIDGEFIELD DRIVE ROSWELL, GA 30075

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

5

NAME OF MANAGER

KEITH D. OSBORN DANA W. OSBORN

FORM 990-PF

6

STATEMENT

	DURING THE YEAR		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ATLANTA SYMPHONY ORCHESTRA 1280 PEACHTREE STREET NE, SUITE #4074 ATLANTA, GA 30309	NONE GENERAL SUPPORT	501(C)(3)	2,750.
BREWSTER CONSERVATION TRUST P.O. BOX 268 BREWSTER, MA 02631	NONE GENERAL SUPPORT	501(C)(3)	2,000.
COMMUNITY ADVANCED PRACTICE NURSES 173 BOULEVARD NE ATLANTA, GA 30312	NONE GENERAL SUPPORT	501(C)(3)	1,000.
FERNBANK MUSEUM OF NATURAL HISTORY 767 CLIFTON ROAD NE ATLANTA, GA 30307	NONE ANNUAL FUND	501(C)(3)	500.
GEORGIA AQUARIUM 255 BAKER STREET NW ATLANTA, GA 30313	NONE GENERAL SUPPORT	501(C)(3)	2,500.
JOHNS HOPKINS DEPARTMENT OF ORTHOPAEDIC SURGERY 601 NORTH CAROLINE STREET BALTIMORE, MD 21287	NONE GENERAL SUPPORT	501(C)(3)	1,000.
MEDICAL ALUMNI ASSOCIATION OF THE UNIVERSITY OF MARYLAND 522 WEST LOMBARD STREET BALTIMORE, MD 21201	NONE GENERAL SUPPORT	501(C)(3)	1,500.
ORTHOPAEDIC RESEARCH & EDUCATION FOUNDATION 6300 NORTH RIVER ROAD, SUITE 700 ROSEMONT, IL 60018	NONE GENERAL SUPPORT	501(C)(3)	1,000.

GRANTS AND CONTRIBUTIONS

THE OSBORN FAMILY FOUNDATION,	INC.			58-2364422
ST. JOSEPH'S MERCY FOUNDATION 5673 PEACHTREE DUNWOODY ROAD NE ATLANTA, GA 30342	NONE GENERAL SUPPORT	•	501(C)(3)	1,500.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

13,750.

#### Form **8868**

(Rev. April 2009)
Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box					
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).					
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.					
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).				
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete					
Part I only					
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time					
to file income tax returns					
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit <a href="https://www.irs.gov/efile">www.irs.gov/efile</a> and click on e-file for Chanties & Nonprofits					
Type o	Name of Exempt Organization	Emp	loyer identifica	tion number	
print	THE ACRAPH FAMILY FOUNDATION INC.	_	0 226442	2	
File by the due date for filing your return. See instructions			8-236442		
	1840 RIDGEFIELD DRIVE				
Check type of return to be filed (file a separate application for each return):					
X Form 990 Form 990-T (corporation)					
Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 5227					
	Form 990-EZ Form 990-T (trust other than above) Form 6069				
	☐ Form 990-PF ☐ Form 1041-A ☐ Form 8870				
MOORE STEPHENS TILLER LLC					
• The books are in the care of > 780 JOHNSON FERRY RD, S-325 - ATLANTA, GA 30342					
Telephone No ► 404-256-1606 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   ightharpoonup In the group, check this box is and attach a list with the names and EINs of all members the extension will cover.					
box   If it is for part of the group, check this box   and attach a list with the names and ElNs of all members the extension will cover.					
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2010 , to file the exempt organization return for the organization named above. The extension					
	is for the organization's return for. ► X calendar year 2009 or				
tax year beginning, and ending					
, and enoung					
2 lf	this tax year is for less than 12 months, check reason: Initial return Final return		Change in accor	unting period	
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
_	onrefundable credits. See instructions.	За	\$		
	this application is for Form 990-PF or 990-T, enter any refundable credits and estimated				
_	x payments made. Include any prior year overpayment allowed as a credit	3ь	\$	<del></del>	
	plance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	1.54			
	eposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	N/2			
	ee instructions	3c	\$	N/A	
Cautio	n. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-E	O for payment i	nstructions	
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form 886	3 (Rev 4-2009)	