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Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052 2009

F	or cal	lendar	year 2009, o	r tax year begin	ning		, 2009,	and endin	ng		, 20
G Check all that apply Initial return			Initial return of a former public chanty			<u>/</u>		Final return			
				Amended r	eturn	Addres	ss change		Nan	ne change	
			Name of four	ndation					А	Employer ident	fication number
ι	Jse th	ne IRS									
label. AYERS FOUNDATION									62	-1773033	
(Other	wise,	Number and	street (or P O box r	number if i	mail is not delivered to street	address)	Room/sui	te B	Telephone number (se	e page 10 of the instructions)
	pri	int	450 TENN	ESSEE AVE.	SUIT	TE 101					
_	or ty		P.O. BOX	217						(7	31) 847-4962
	-	pecific	City or town.	state, and ZIP cod	e				С	If exemption applic	ation is
"	ISTUC	ctions.	 	•						pending, check her	▶
			PARSONS.	TN 38363					٦	Foreign organiza	
н	Che	ck type	of organizat		on 501/	c)(3) exempt private for	undation		7	85% test, check	here and attach
Ϊ	\neg	,	•	exempt chantable t		Other taxable pri		on.	-	computation •	
+				assets at end		unting method: X C			E	•	status was terminated
•			m Part II, col			ther (specify)	2311	a dat	_	•	b)(1)(A), check here
			10,50			column (d) must be or	cash basis)		F		in a 60-month termination b)(1)(B), check here
:				nue and Expens		()	<u> </u>	I			(d) Disbursements
لله		total o	f amounts in o	olumns (b), (c), and	d (d)	(a) Revenue and expenses per	(b) Net inve			Adjusted net	for chantable
				equal the amounts e 11 of the instruct		books	incom	ie		ıncome	purposes (cash basis only)
٦	4					1,694,930.					Todaii naala nilik)
	1 2	Check I	If the fo	tc., received (attach scho pundation is not requ	ured to	,					
	_	-		Sch B		97,409.	q	7,409.			ATCH 1
	3 4		•	emporary cash invest at from securities		25.		25.			ATCH 2
ı	_										MIOII Z
											
		b Net rental income or (loss)			14,873.					1	
ine			i or (loss) from si ales price for all	ale of assets not on lo 1,628		11,073.				· · · · · · · · · · · · · · · · · · ·	
Revenue	_		n line 6a				1	4,873.			+
Re				ne (from Part IV, lir				1,075.		·	-
	8			gain	• • • •			- +			
	9 10 a		modifications ales less returns						-		<u> </u>
		and allow	wances · · ·	1						•••	
			ost of goods sold							<u> </u>	
				(attach schedule)		7,500.			-		ATCH 3
	11			schedule)		1,814,737.		2,307.			+ AICH 3
_	12			ough 11		1,014,737.		2,307.			
	13			s, directors, trustees,		· · ·					
	14			ies and wages .		 -					+
	15			yee benefits		2,166.			-		· ·
			ees (attach sch			6,951.		0.		0	. 0
X				ch schedule) ATC		365,289.	1	4,461.			+
Operating and Administrative Expens		1		s (attach schedule	e) .^	363,269.		7,701.			
ם	17	Interest				2,432.					-
st	18	Taxes (a	attach schedule)	(see page 14 of the man	uctions)						
딁	19			chedule) and dedi	etion .	2,300.					+
ᅙ	20	Occupa	_	<u></u>		4,511.					-
اع	21		.conferences			6,631. 402.					
ā	22	Printing	and publicate	705	 7 טי		<u> </u>	126.			578
Ē	23		•	ch schedule) ATC		41,758.	<u> </u>	120.		 	378
E a	24			administrative exp	enses.	מו מבו	1	4 507		^	E 70
õ			es 13 through :			432,440.		4,587.		0	
-	25		utions, gifts, gi	•	• • • •	1,243,909.		4 E03			1,243,909.
4	26			sements. Add lines 24	and 25	1,676,349.		4,587.		0	. 1,244,487.
	27		t line 26 from			100 000					
				penses and disburseme		138,388.	<u>-</u>	7.7.			
				ne (if negative, er	•		<u> </u>	7,720.			
	C	Adjust	ed net income	(if negative, enter	-0-)		<u> </u>	OU E		-0-	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. * ATCH 5 JSA ** ATCH 6 09206G 702C 5/10/2010 3:32:57 PM V 09-6.1

Form 990-PF (2009)

PAGE 4

62-1773033

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year		Attached schedules and amounts in the	Beginning of year	End of	End of year	
L	aiti	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments	10,422,060.	10,500,961.	10,500,961	
	3	Accounts receivable				
		Less allowance for doubtful accounts				
	4	Pledges receivable				
		Less allowance for doubtful accounts				
	5	Grants receivable			<u> </u>	
	6	Receivables due from officers, directors, trustees, and other	"			
	Ĭ	disqualified persons (attach schedule) (see page 16 of the instructions)				
	7	Other notes and loans receivable (attach schedule)				
	•	Less allowance for doubtful accounts				
		Inventones for sale or use				
ets	8	Prepaid expenses and deferred charges				
Assets	9	• • • • • • • • • • • • • • • • • • • •			· · · · · · · · · · · · · · · · · · ·	
⋖		Investments - U S and state government obligations (attach schedule)			 	
		Investments - corporate stock (attach schedule)			 	
	11	Investments - corporate bonds (attach schedule)			 	
	••	and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans				
	13	Investments - other (attach schedule) Land, buildings, and equipment basis				
	14	equipment basis				
		equipment basis Less accumulated depreciation 6,366. (attach schedule)	4,020.	3,251.	3,251	
	15	Other assets (describe)				
	16	Total assets (to be completed by all filers - see the	•			
		instructions Also, see page 1, item I)		10,504,212.	10,504,212	
	17	Accounts payable and accrued expenses	60,256.			
	18	Grants payable				
ø	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Įq.	21	Mortgages and other notes payable (attach schedule)				
تّ	22	Other liabilities (describe				
		,				
	23	Total liabilities (add lines 17 through 22)	60,256.			
_		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.				
ø	24	Unrestricted				
ances	i		-			
	25	Temporanly restricted				
ä	26	Permanently restricted				
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
Ţ						
ō	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	10 205 024	10 504 212		
88	29	Retained earnings, accumulated income, endowment, or other funds	10,365,824.	10,504,212.		
ž	30	Total net assets or fund balances (see page 17 of the	40.055.004			
ž		Instructions)	10,365,824.	10,504,212.		
	31	Total liabilities and net assets/fund balances (see page 17				
_		of the instructions)	10,426,080.	10,504,212.		
		Analysis of Changes in Net Assets or Fund				
1	Tota	al net assets or fund balances at beginning of year - Part II, $lpha$	olumn (a), line 30 (must ag	gree with		
	end-	-of-year figure reported on prior year's return)		1	10,365,824	
2					138,388	
		lines 1, 2, and 3			10,504,212	
5		mases not included in line 2 (itemize)				
6		al net assets or fund balances at end of year (line 4 minus line	5) - Part II. column (b). li		10,504,212	
<u>~</u>		action of faile beloness at one of your time it fillings inte			Form 990-PF (2009)	

Form 990-PF (2009)		62-17730	33	_	Page 3
Part IV Capital Gain	s and Losses for Tax on Inv	estment Income			
(a) List an	d describe the kind(s) of property sold (e	g , real estate,	(b) How	(c) Date acquired	(d) Date sold
2-story b	onck warehouse, or common stock, 200 s	shs MLC Co)	P-Purchase D-Donation	(mo, day, yr)	(mo, day, yr)
1a SEE PART IV SCHE	DULE				
b					
c					
_d					
e					
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a					
b					
C					
d	1 1	" - "			
e		" ' " ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
	owing gain in column (h) and owned	by the foundation on 12/31/69	//\	Gains (Col. (b) a	ain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of coi (i) over col (j), if any		Gains (Col. (h) g (k), but not less t Losses (from co	han -0-) or
9					
<u>a</u> b			 	===	
С					
d					
е					
	c If	gain, also enter in Part I, line 7			
2 Capital gain net income or	(net capital loss)	(loss), enter -0- in Part I, line 7	2		14,873.
If (loss), enter -0- in Part I,	line 8, column (c) (see pages 13 and line 8	<u> </u>	3		
Part V Qualification U	nder Section 4940(e) for Reduc	ced Tax on Net Investment Inc	ome		
	the section 4942 tax on the distribute not qualify under section 4940(e). Do		репоd?	□	Yes X No
1 Enter the appropriate amo	ount in each column for each year, se	ee page 18 of 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 ra (col (b) divided by	
2008	1,113,931.	9,799,194.	 	` 	0.113676
2007	436,404.	5,316,602.			0.082083
2006	219,366.	247,252.	 		0.887216
2005	749,859.	62,529.			1.992180
2004	183,526.	56,639.			3.240276
	103/320.	30,033.			J.240270
C. Tatal of line 4 column (d)			,	1	6.315431
2 Total of line 1, column (d)			2	- · · · · · · · · · · · · · · · · · · ·	6.313431
	for the 5-year base period - divide th		_		2 062006
number of years the found	dation has been in existence if less t	han 5 years	3		3.263086
4 Enter the net value of non	charitable-use assets for 2009 from	Part X, line 5	4	10,	265,786.
5 Multiply line 4 by line 3			5	33,	498,143.
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		977.
7 Add lines 5 and 6			7	33,	499,120.
8 Enter qualifying distribution			8		244,487.
If line 8 is equal to or go Part VI instructions on pa	reater than line 7, check the box i ge 18	in Part VI, line 1b, and complete t	nat part	using a 1% tax	x rate. See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the in-	structi	ons)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,9	954.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% $\mathcal J$ 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			-
3	Add lines 1 and 2		1,5	954.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		1 ($\frac{0.}{954.}$
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			954.
6	Credits/Payments 2009 estimated tax payments and 2008 overnayment credited to 2009 6a 3, 632.			
_	2005 Commence and payments and 2005 Sverbayment deduced to 2005			
b	Exempt foreign organizations-tax withheir at source			
C	Tax paid with application of extension of time to line (1 of the obto)			
d 7	Backup withholding erroneously withheld 6d Total credits and payments Add lines 6a through 6d 7		3.6	532.
7 8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,6	578.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax 1,678 Refunded 11			
Par	t 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		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		l	
	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		l	İ
	published or distributed by the foundation in connection with the activities		l	ļ
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 \$\$\sum_{\text{section}}\$\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			1
·	on foundation managers > \$		l	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
_	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		l	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	L	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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			1
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			١.,
	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		
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) $ ightharpoonup TN$,			
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	8b	Х	<u> </u>
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 on page			
	27)? If "Yes,"complete Part XIV	9		X_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses ATTACHMENT 8	10	<u> </u>	Щ.
		om 99	0-PF	(2009)

Par	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 page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address N/A			
14	Website address ► N/A The books are in care of ► THE ORGANIZATION Telephone no ► 731-845 The books are in care of ► TENNESSEE AVE. STE 101 PARSONS. TN 38363	-496	2	
	Located at ►450 TENNESSEE AVE., STE 101 PARSONS, TN ZIP+4 ► 38363			
15	Website address The books are in care of THE ORGANIZATION Telephone no Telephone no Telephone no ZIP + 4 38363 Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here Telephone no ZIP + 4 38363	• • •	▶	· []
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	T	I.,	
	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? Yes X No			
	(1) Engage in the sale of exchange, or leading of property with a dioqualined person.			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disquaimed person?			
	(3) Furnish goods, services, or ladmues to (or accept them from) a disqualified persons			
	(4) 1 by compensation to, or pay or reimbures the expenses of, a disqualities person.			
	(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)?			
	the benefit of use of a disqualified personly.	Ì		
	(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 50 days /			
Ь	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 page 20 of the instructions)?	16		х
	Organizations relying on a current notice regarding disaster assistance check here	1.5		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
٠	were not corrected before the first day of the tax year beginning in 2009?	1c		Х
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))			
а	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? Yes X No			
	If "Yes," list the years			
ь	Are there any years listed in 2a for which the foundation is not 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 page 20 of the instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year? Yes X 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	1		v
	foundation had excess business holdings in 2009)	3b	-	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4-		Х
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b orn 99	n_PE	
		AIII 22	→ -1 1	(2003)

(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 compensation	(e) Expense account, other allowances
NONE				
				· -
Total number of other employees hald over \$50,000	· · · · · · · · · · · · · · · · · · ·		•	

Form 990-PF (2009)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	yees,
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	257 000
ATTACHMENT 10	357,289
Total number of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A Summary of Direct Charitable Activities	
	 .
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 N/A	· ·
2	
3	
4	
	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 N/A	Amount
M/A	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
Total Add Inco 4 theory 2	

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	eign foundat	ions,
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 secunties	1a	107,787.
b	Average of monthly cash balances	. 1b	10,314,331.
C		1c	0.
d	d Total (add lines 1a, b, and c)	1d	10,422,118.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	10,422,118.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	156,332.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	10,265,786.
6	Minimum Investment return. Enter 5% of line 5	6	513,289.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privalent XI privalent XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privalent XI privale		
1	Minimum investment return from Part X, line 6	1	513,289.
2a	Tax on investment income for 2009 from Part VI, line 5	4.	
b	Income tax for 2009 (This does not include the tax from Part VI.) 2b		
C	: Add lines 2a and 2b	2c	1,954.
3	Distributable amount before adjustments Subtract line 2c from line 1		511,335.
4	Recoveries of amounts treated as qualifying distributions	. 4	
5	Add lines 3 and 4	5	511,335.
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	511,335.
Pa	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		1a	1,244,487.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific chantable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,244,487.
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	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,244,487.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating will qualifies for the section 4940(e) reduction of tax in those years.	hether the four	dation

Form **990-PF** (2009)

	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years pnor to 2008	2008	2009
•	line 7	· · · · · ·			511,335.
2	Undistributed income, if any, as of the end of 2009				
_	Enter amount for 2008 only				
	Total for prior years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009			<u>-</u> -	
а	From 2004 180,694.				
b	From 2005 746,733.				
С	From 2006 207, 003.				
d	From 2007 175,403.				
e	From 2008 627, 603.				
	Total of lines 3a through e	1,937,436.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 1,244,487.			-	
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election				
_	required - see page 26 of the instructions)	*.o-a			
c	Treated as distributions out of corpus (Election				
_	required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				511,335.
е	Remaining amount distributed out of corpus	733,152.	<u> </u>		
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,670,588.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b	· · · · · · · · · · · · · · · · · · ·			
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been		4		
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions				
•	4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be				
7	distributed in 2010				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				
	applied on line 5 or line 7 (see page 27 of the	180,694.			
	Excess distributions carryover to 2010.		<u> </u>	 	
9	Subtract lines 7 and 8 from line 6a	2,489,894.			
10	Analysis of line 9	,,			
.U	Excess from 2005				
h	Excess from 2006				
	Excess from 2007				
d	Excess from 2008 627,603.				
	Excess from 2009 733,152.				
<u> </u>					Form 990-PF (2009)

11

Pa	rt XIV Private Oper	rating Foundations	(see page 27 of the	instructions and Pa	art VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has			t it is a private ope	erating	
	foundation, and the ruling	is effective for 2009, ente	r the date of the ruling		▶[
b	Check box to indicate who	ether the foundation is a p	nvate operating foundation	n described in section	4942()(3) or 4942(j)(5)
2 =	Enter the lesser of the ad-	Tax year		Pnor 3 years		(e) Total
	justed net income from Part I or the minimum investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(6) 10(2)
ь	year listed					· · · · · · · · · · · · · · · · · · ·
c	Qualifying distributions from Part					
	XII, line 4 for each year listed					
đ	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	"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 sup- port from an exempt organization					
_	(4) Gross investment income .	<u> </u>				
Pa					dation had \$5,000	or more in assets
_	<u>-</u>	`	e page 28 of the in:	structions.)		
a a	Information Regarding List any managers of before the close of any	the foundation who I	nave contributed more	than 2% of the tot nore than \$5,000) (al contributions receiv See section 507(d)(2).)	ed by the foundation
	ATTACHME	ENT 11				
b	List any managers of ownership of a partner					large portion of the
	NONE					<u>. </u>
2	Information Regarding	•				
	Check here ▶ if tunsolicited requests forganizations under ot	or funds. If the foun	dation makes gifts, g	rants, etc. (see pag	itable organizations a e 28 of the instruction	and does not accept ins) to individuals or
а	The name, address, an ATTACHME	·	the person to whom a	pplications should be	addressed:	
b	The form in which appli		mitted and information a	and materials they sh	ould include	
	NO SPECIFIC	FORM IS REQUI	RED.			
С	Any submission deadling	nes.				
		NS ARE ACCEPTED				
đ	Any restrictions or li factors:		, such as by geogra	phical areas, charit	able fields, kinds of	institutions, or other
JSA	ATTACHME	ENT 13				50m 900 PE (2000)

Part XV Supplementary Information (c 3 Grants and Contributions Paid Duri	no the Year or App	roved for F	Future Payment	
Recipient	If reciprent is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year				
		1		
ATTACHMENT 14				
				1,243,909
Total	· · · · · · · · · · · · · · · · · · ·	1		1,243,909
b Approved for future payment				
Total			▶ 3b	<u> </u>

• • • • • • •

	Analysis of Income-Produ			Traduded Su		(e)
Enter gross amo	runts unless otherwise indicated	(a)	ted business income (b) Amount	(c) Exclusion code	section 512, 513, or 514 (d)	Related or exempt
1 Program ser	vice revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
_					<u>.</u> .	
						· · · · · · · · · · · · · · · · · · ·
d						
e						· · · · · · · · · · · · · · · · · · ·
f		-		+		
-	contracts from government agencies		<u> </u>	-		
	dues and assessments					
	rings and temporary cash investments and interest from securities			14	97,434.	
				1 1	57,434.	
	come or (loss) from real estate anced property					
				 		
	-financed property			-	<u> </u>	
	me or (loss) from personal property					
	ment income			18	14,873.	
• •	from sales of assets other than inventory			- 10	14,073.	
	or (loss) from special events			- 		
•	or (loss) from sales of inventory					
11 Other revenu	LTING INCOME		- "		7 500	
	LIING INCOME				7,500.	*
				-		
			· · · · · · · · · · · · · · · · · · ·			
е					110 007	
	d columns (b), (d), and (e)				119,807.	110.00
13 Total. Add in	ne 12, columns (b), (d), and (e)				13	119,807.
	In line 13 instructions on page 28 to Relationship of Activities			vomet Burn		
_ tf	explain below how each activing accomplishment of the following 29 of the instructions)	ty for which	ch income is reporte exempt purposes (ed in column other than b	(e) of Part XVI-A cont by providing funds for	inbuted importantly to such purposes) (Se
						
						
			 -			
						
						
			NOT ADDITION		·	
			NOT APPLICABI	.E		
			 			
	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		·- · - · · - · · · · · · · · · · · · ·
						·
						· · · · · · · · · · · · · · · · · · ·
					·	
						

.. .:

		Exempt Orga	anizations									
1	ın se	he organization directly ction 501(c) of the C	ode (other than	section 501(c)(3)	organizations)						Yes	No
а	organı Transi	zations? fers from the reporting fou	indation to a none	hantable exempt orga	anization of							
		ash								1a(1)		x
		ther assets								1a(2)		Х
b	Other	transactions										
	(1) Sa	ales of assets to a noncha	antable exempt or	ganization						1b(1)		x
		urchases of assets from a								1b(2)	-	Х
		ental of facilities, equipme								1b(3)		Х
		eimbursement arrangeme								1b(4)		X
		oans or loan guarantees								1b(5)		X
		erformance of services or										X
c	. ,	ng of facilities, equipment,	•	_		• • • •				1c		X
		answer to any of		•	• • • • •	hedule	Column (h) should alw	avs show		fair	market
_		of the goods, other		•	_		•	•	•			
		in any transaction or	•		, -							
			1									
(a)	ine no	(b) Amount involved	(c) Name of r	onchantable exempt org	anization		escription of tra	nsfers, transaction	ns, and shann	ід апап	gemer	ıts
		N/A		·		N/A						
			ļ									
		<u> </u>										
				····								
			ļ <u>-</u>									
							•					
2a	Is the	foundation directly or	indirectly affiliat	ted with, or related	to, one or me	ore tax	exempt org	anizations des	cnbed in			
		n 501(c) of the Code (oth	-	•	•					☐ Y€	es 🗀	No.
b		s," complete the following										_
		(a) Name of organization	•	(b) Type of	organization			(c) Description	n of relationsh	ip		
		-		-								
		•			-							
		•										
	-	· • • • • • • • • • • • • • • • • • • •						·				
\Box	Under	penalties of perjury, I deck	are that I have ex	amined this return, incl	uding accompany	ing sch	edules and st	atements, and to	the best of	my ku	nowled	ge and
	belief,	his true, correct, and com	plete. Declaration	of preparer (other than	taxpayer or fiduc	iary) is l	based on all i	nformation of wh	ich preparer	has ar	y kno	wledge
		-W-NU			1	1</td <td>בולג</td> <td>- UA</td> <td>RAMA</td> <td></td> <td></td> <td></td>	בולג	- UA	RAMA			
a	Si	porture of officer or trustee				Date	/// /	Title				
<u>e</u>		SOCIETY OF CHICAS OF EMERGE		 	Deta	50.0			Preparer's in	dentify	IDO.	
		/	0_	<u></u>	Date	1	Check if		number (Se	e Signa	iture o	n
Sign Here	교육	Preparer's	sen ST	one CPA	5/14	110	self-emp		page 30 of the P005372		cuons)	
S	Pald Preparer's Use Only	signature /	▶ BDO SE	IDMAN, LLP			l l	_	3-53815			
	Pald Preparer's Use Only	Firm's name (or yours if self-employed), address		POPLAR AVE, S	PF 630			EIN ▶ ⊥	2-23013			
		and ZIP code	MEMPHI		15 030	2	8119	Db	901-68	10-74	500	
			HEMENI	, IN			0113	Phone no				(2000)
									Fo	im 99	ソーアト	(2009)

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		Employer identification number
AYERS FOUNDATION		62-1773033
Organization type (check on	e)·	02 1773033
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private for	oundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private founda	tion
	501(c)(3) taxable private foundation	
	So NO/O/ taxable private loundation	
Note. Only a section 501(c)(7 instructions.	covered by the General Rule or a Special Rule . (), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule. See
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or one contributor. Complete Parts I and II	more (in money or
Special Rules		
sections 509(a)(1)	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support and 170(b)(1)(A)(vi), and received from any one contributor, during the year, 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line	a contribution of the greater
the year, aggregate	e)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from an econtributions of more than \$1,000 for use exclusively for religious, charitates, or the prevention of cruelty to children or animals. Complete Parts I, II, an	ble, scientific, literary, or
the year, contribution aggregate to more to year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from an ons for use exclusively for religious, charitable, etc., purposes, but these conthan \$1,000. If this box is checked, enter here the total contributions that werely religious, charitable, etc., purpose. Do not complete any of the parts unle nization because it received nonexclusively religious, charitable, etc., contributions.	tributions did not e received during the ss the General Rule utions of \$5,000 or more
990-EZ, or 990-PF), but it mu or on line 2 of its Form 990-Pf 990-PF).	us not covered by the General Rule and/or the Special Rules does not file Soust answer "No" on Part IV, line 2 of its Form 990, or check the box on line H. F., to certify that it does not meet the filing requirements of Schedule B (Form	of its Form 990-EZ, 990, 990-EZ, or
for Form 990, 990-EZ, or 990-PF.	luction Act Notice, see the instructions Schedu	le B (Form 990, 990-EZ, or 990-PF) (2009)

JSA

of	of	Part I

Name of organization	AYERS	FOUNDATION

Page	of	of
Employer Identifi	cation nu	mber
62-	177303	3

Part I	Contributors	(see instructions)
--------	--------------	--------------------

		T'=	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JAMES W. AYERS 200 4TH AVENUE N.	- \$ 1,613,741.	Person X Payroll X
	NASHVILLE, TN 37219	- 1,010,7,111	(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	SARAH K. GIVENS 314 WHITWORTH WAY	\$\$	Person X Payroll Noncash
	NASHVILLE, TN 37205	-	(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	TN HIGHER EDUCATION ASSOC DOUG CULLUM 404 JAMES ROBERTSON PKWY., STE. 1900 NASHVILLE, TN 37243	\$\$61,189.	Person X Pay roll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page of of Part II
Employer identification number

62-1773033

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	SEE ATTACHED SCHEDULE		-
1		\$	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			_
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	

JSA 9E1254 1 000

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

FORM 990-PF - PART IV

Kind of Property					or Date	Date sold	
Gross sale pnce less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	Gain or (loss)	
		UBS Y5 36926			,	VAR	VAR
528,614.		1,613,741.				14,873.	****
OTAL GAIN (L	OSS)					14,873.	
,	,						
							ŀ
						ŀ	I

AYERS FOUNDATION 12/31/2009 Schedule B Part II Detail

Date	# of Shares	Securities Contributed	FMV
1/30/2009	7400	ADOBE SYSTEMS INC	142,894 00
1/30/2009	3300	EQUIFAX INC FM	81,576.00
1/30/2009	6000	WESTERN UNION CO	81,960 00
4/24/2009	3400	AMGEN INC FM	159,188 00
4/24/2009	9793	COMCST CORP NEW CL A	133,283.00
4/24/2009	3600	EMERSON ELECTRIC CO	117,936.00
4/24/2009	5000	EQUIFAX INC	142,400.00
7/20/2009	7300	QUALCOMM INC	314,338.00
10/28/2009	1500	CHEVRON CORP	113,190.00
10/28/2009	1400	EXXON MOBIL CORP	100,576.00
10/28/2009	5000	ILLINOIS TOOL WORKS INC	226,400.00
		Total Noncash Contributions	1,613,741.00

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	97,409.	97,409.
REVENUE AND EXPENSES PER BOOKS	97,409.	97,409.
		TOTAL
DESCRIPTION	INTEREST INCOME	

ATTACHMENT 1

PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

25.	25.
25.	25.
	TOTAL
INCOME	
INTEREST	
UBS DIVIDENDS &	
	& INTEREST INCOME

ATTACHMENT 2

• • • • • •

ATTACHMENT 3

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES PER BOOKS

<u>DESCRIPTION</u>
CONSULTING-SOUTHWEST TN DEV. DISTRICT

7,500.

TOTALS

7,500.

1
FEES
- ACCOUNTING
H
PART
990PF,
FORM

		REVENUE	T. G.N	ת מנוד המנוד	
		EXPENSES	INVESTMENT	NET NET	CHARITABLE
DESCRIPTION		PER BOOKS	INCOME	INCOME	PURPOSES
ACCOUNTING FEES		6,951.			
	TOTALS	6,951.	0	0	0

ATTACHMENT 5

- OTHER PROFESSIONAL FEES PART I FORM 990PF,

	NET	INVESTMENT	INCOME	14,461.		14,461.	
REVENUE	AND	EXPENSES	PER BOOKS	233,674.	131,615.	365,289.	
						TOTALS	
			DESCRIPTION	MANAGEMENT FEES	CONSULTING FEES		

ATTACHMENT 6

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

EXPENSES PER BOOKS

FEDERAL TAXES

2,432.

TOTALS

2,432.

CHARITABLE PURPOSES

- OTHER EXPENSES FORM 990PF, PART I

NET INVESTMENT INCOME
REVENUE AND EXPENSES PER BOOKS 1,359. 11,963. 123. 126. 20. 20. 27. 143. 467. 6,000. 3,253. 1,300. 1,696.
DESCRIPTION TELEPHONE POSTAGE & DELIVERY BANQUET EXPENSES MISCELLANEOUS MISCELLANEOUS MEALS SUPPLIES OVERAGE CHARGES TRANSCRIPT FEES BANK FEES LICENSES GRATUITIOUS GIFTS TRAINING AUTO EXPENSES MARKETING & PUBLIC RELATIONS EQUIPMENT EXPENSE WEBSITE DESIGN COLLEGE FAIRS OTHER EXPENSES

578.

41,758.

TOTALS

3:32:57 PM V 09-6.1 09206G 702C 5/10/2010

PAGE 27

ATTACHMENT 7

CONTRIBUTORS
SUBSTANTIAL
- NEW S
LINE 10
VII-A,
PART
990PF,
FORM

DIRECT PUBLIC SUPPORT

DATE

NAME AND ADDRESS

JAMES W. AYERS 200 4TH AVENUE N. NASHVILLE, TN 37219

1,613,741.

VARIOUS

TOTAL CONTRIBUTION AMOUNTS

1,613,741.

ω

ATTACHMENT

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES FORM 990PF, PART VIII

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

JAMES W. AYERS

CHAIRMAN

450 TENNESSEE AVE., SUITE 101

P.O. BOX 217 PARSONS, TN 38363

JON AYERS

DIRECTOR

450 TENNESSEE AVE., SUITE 101

P.O. BOX 217

PARSONS, TN 38363

450 TENNESSEE AVE., SUITE 101 CLAY PETREY

SECRETARY

P.O. BOX 217

PARSONS, TN 38363

PRESIDENT

450 TENNESSEE AVE., SUITE 101 P.O. BOX 217 JANET AYERS

PARSONS, TN 38363

450 TENNESSEE AVE., SUITE 101 JOANN LYNN

DIRECTOR

P.O. BOX 217 PARSONS, TN 38363

GRAND TOTALS

AYERS FOUNDATION 62-1773033

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

.

	ATTACHME	NT 10
NAME AND ADDRESS	TYPE OF SERVICE	COMPENSATION
AYERS ASSET MANAGEMENT 450 TENNESSEE AVE. S. PARSONS, TN 38363	MANAGEMENT	233,674.
OASIS CENTER INC 1221 16TH AVENUE S. NASHVILLE, TN 37212	CONSULTING	123,615.
	TOTAL COMPENSATION	357,289.

62-1773033

ATTACHMENT 11

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

JAMES W. AYERS JON AYERS

.

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

JANET AYERS
450 TENNESSEE AVE, SUITE 101
PARSONS, TN
731-847-4962

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

DONATIONS ARE LIMITED TO ORGANIZATIONS PRIMARILY LOCATED IN DECATUR AND HENDERSON COUNTIES IN THE STATE OF TENNESSEE.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS MASTERS PROGRAM	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION GENERAL/OPERATING	AMOUNT
BOY SCOUTS OF AMERICA		GENERAL/OPERATING	25,000
DECATUR COUNTY BOARD OF EDUCATION		GENERAL/OPERATING	16,610
DECATUR COUNTY SHEPARD FUND		GENERAL/OPERATING	12,000.
FIRST BAPTIST CHURCH		GENERAL/OPERATING	25,000
MIDDLE TENNESSEE CHRISTIAN SCHOOL		GENERAL/OPERATING	5,000.

ATTACHMENT 14 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIRUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
TENNESSEE STATE MUSEUM		GENERAL/OPERATING	2,000.
UNIVERSITY OF MEMPHIS		GENERAL/OPERATING	200,000
UNIVERSITY OF TENNESSEE AT MARTIN		GENERAL/OPERATING	266,272
VANDERBILT-INGRAM CANCER CENTER		GENERAL/OPERATING	51,876
YOUTH BOOSTERS		GENERAL/OPERATING	172.
UNITED WAY OF WEST TENNESSEE		GENERAL/OPERATING	10,000.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR.

			ATTACHMENT 14 (CONT'D)
RELATI	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT, NAME, AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
UNICOI COUNTY FAMILY YMCA		GENERAL/OPERATING	43,000
UNICOI COUNTY CHAMBER OF COMMERCE		GENERAL/OPERATING	20,000
CHIPS		GENERAL/OPERATING	25,000.
CENTERSTONE		GENERAL/OPERATING	232, 000
UNICOI COUNTY UNITED WAY		GENERAL/OPERATING	10,000
POSSIBILITIES FUND-WEST TENNESSEE HEALTHCARE		GENERAL/OPERATING	10,000.

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ATTACHMENT 14 (CONT'D)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

£.	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
LIGHTHOUSE COUNSELING & LIFE SKILLS		GENERAL/OPERATING	5,000.
FRIENDS OF WARNER PARK		GENERAL/OPERATING	5,000.
UNICOI COUNTY TOWER FUND		GENERAL/OPERATING	5,000.
BOONEY VANCE MEMORIAL LECTURESHIP		GENERAL/OPERATING	2,000.
LANE COLLEGE		GENERAL/OPERATING	25,000.
UNICOI COUNTY KIWANIS PARK		GENERAL/OPERATING	2,500

ATTACHMENT 14 (CONT'D)

TOTAL TOTAL TOTAL

EORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GOVERNOR'S BOOKS FROM BIRTH	GENERAL/OPERATING	5,000.
VANDERBILT UNIVERSITY-NURSING SCHOLARSHIP	GENERAL/OPERATING	15,450.
JSCC FOUNDATION	GENERAL/OPERATING	2,000
TINA MONTGOMERY MEMORIAL 2009	GENERAL/OPERATING	100.
CENTER FOR LIVING AND LEARNING	GENERAL/OPERATING	250
CORDOVA COMMUNITY CENTER	GENERAL/OPERATING	5,000.

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AYERS FOUNDATION

RELATIONSHIP RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FAITH FAMILY MEMORIAL		GENERAL/OPERATING	156
TENNESSEE CHILDRENS HOME		GENERAL/OPERATING	200
VIRTUOSO SOCIETY		GENERAL/OPERATING	1,000
FREED HARDEMAN UNIVERSITY		GENERAL/OPERATING	200
NASHVILLE SYMPHONY ORCHESTA		GENERAL/OPERATING	10,500
UNION UNIVERSITY		GENERAL/OPERATING	10,000

ATTACHMENT 14 (CONT'D)

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ATTACHMENT 14 (CONT'D)

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	AMOUNT	25,000	1,000	1,000	100.
	PURPOSE OF GRANT OR CONTRIBUTION	GENERAL/OPERATING	GENERAL/OPERATING	GENERAL/OPERATING	GENERAL/OPERATING
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT				
	RECIPIENT NAME AND ADDRESS	TENNESSEE PUBLIC SCHOOL FORUM	DECATUR COUNTY CHAMBER OF COMMERCE	LAND TRUST FOR TENNESSEE ONCE	DECATUR COUNTY DIXIE SOFTBALL ORGANIZATION

1,243,909

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 14 PAGE 40

3.32:57 PM

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SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Name	e of estate or trust		_		Employer identi	ficatio	n number
	AYERS FOUNDATION				62-17730	33	
	: Form 5227 filers need to complete onlyPa						
Par	t I Short-Term Capital Gains and Lo	sses - Assets	Held One Y	ear or Less	T		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see page 4 of instructions)	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
			-		+		
							_
					-	<u>.</u>	
					<u> </u>	Ι	
b	Enter the short-term gain or (loss), if any, fro	m Schedule D-1	, line 1b			1b	14,873.
2	Short-term capital gain or (loss) from Forms	4684, 6252, 678	11, and 8824			2	
3	Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts						
4							
5	Net short-term gain or (loss). Combine line	s 1a through 4 i	 n column (f). E	nter here and on line	13,	4	<u>/</u>
	column (3) on the back	A 4- 11-1-1			.	5	14,873.
Par		(b) Date acquired	(c) Date sold	year	(e) Cost or other	haeir	(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	the	the entire year Subtract (e) from (d)				
6a							
					-		
							
			-				
	Enter the long-term gain or (loss) if any from	m Schedule D-1	line 6b	·		6b	
_	b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b						
7	7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824					7	
8	8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts					8	
9	9 Capital gain distributions						
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover Enter the a	mount, if any, fro	om line 14 of th	e 2008 Capital Loss			,
12	Carryover Worksheet	6a through 11 i	 n column (f). F			11	
	column (3) on the back					12	
For F	Paperwork Reduction Act Notice, see the Instructi	ons for Form 104	1.		Sc	hedule	D (Form 1041) 2009

AYERS FOUNDATION 12/31/2009 Schedule D Detail

Date Sold	**	# of Shares Securities	Proceeds	Cost Basis	Realized G	Realized Gain/(Loss)
	1/30/2009	7400 ADOBE SYSTEMS INC		142,965	142,894	71
	1/30/2009	3300 EQUIFAX INC FM		81,094	81,576	(482)
	1/30/2009	6000 WESTERN UNION CO		81,818	81,960	(142)
	4/24/2009	3400 AMGEN INC FM		154,729	159,188	(4,459)
	4/24/2009	9793 COMCST CORP NEW CL A		137,770	133,283	4,487
	4/24/2009	3600 EMERSON ELECTRIC CO		115,255	117,936	(2,681)
	4/24/2009	5000 EQUIFAX INC		131,219	142,400	(11,181)
	7/20/2009	7300 QUALCOMM INC		333,289	314,338	18,951
	10/28/2009	1500 CHEVRON CORP		113,802	113,190	612
	10/28/2009	1400 EXXON MOBIL CORP		103,580	100,576	3,004
	10/28/2009	5000 ILLINOIS TOOL WORKS INC		233,093	226,400	6,693
			မာ	1,628,614 \$	1,613,741 \$	14,873

Schedule D (Form 1041) 2009 Page 2 Summary of Parts I and II (1) Beneficiaries' (2) Estate's Part III (3) Total Caution: Read the instructions before completing this part. (see page 5) or trust's 14,873. Net short-term gain or (loss) 13 Net long-term gain or (loss): b Unrecaptured section 1250 gain (see line 18 of the wrksht.) 14b Total net gain or (loss). Combine lines 13 and 14a ▶ 15 Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Workshees necessary Part IV Capital Loss Limitation Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 15, column (3) or b \$3,000 16 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryove/Worksheeton page 7 of the instructions to figure your capital loss carryover Tax Computation Using Maximum Capital Gains Rates Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero. Caution: Skip this part and complete the worksheet on page 8 of the instructions if: • Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero. Form 990-T trusts. Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col (2) or line 14c, col. (2) is more than zero 17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) Enter the smaller of line 14a or 15 in column (2) but not less than zero 18 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) 19 20 20 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-22 22 Subtract line 21 from line 20 If zero or less, enter -0-Subtract line 22 from line 17. If zero or less, enter -0-23 Enter the smaller of the amount on line 17 or \$2,300 24 24 Is the amount on line 23 equal to or more than the amount on line 24? 25 Yes. Skip lines 25 and 26, go to line 27 and check the "No" box No. Enter the amount from line 23 Subtract line 25 from line 24 26 26 27 Are the amounts on lines 22 and 26 the same? Yes. Skip lines 27 thru 30, go to line 31 NO. Enter the smaller of line 17 or line 22

28

Schedule D (Form 1041) 2009

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33

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29

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32

Figure the tax on the amount on line 23. Use the 2009 Tax Rate Schedule for Estates and Trusts

Figure the tax on the amount on line 17 Use the 2009 Tax Rate Schedule for Estates and Trusts

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

(see the Schedule Ginstructions in the instructions for Form 1041)

(see the Schedule Ginstructions in the instructions for Form 1041)

Enter the amount from line 26 (If line 26 is blank, enter -0-)

G, line 1a (or Form 990-T, line 36)

Subtract line 28 from line 27

Multiply line 29 by 15% (.15)

Add lines 30 and 31

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D
(Form 1041)

▶ See instructions for Schedule D (Form 1041).

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

AYERS FOUNDATION

Employer identification number 62-1773033

	(h) Data		(d) Sales pres	(a) Cost or other basis	
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales pnce (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d
1			1	1 610 741	14 077
UBS Y5 36926 42	VAR	VAR	1,628,614.	1,613,741.	14,873
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For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

14,873.