

## 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



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Form	9	9	n		P	F
Form	J	J	u	_		•

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

De	partme emal R	nt of the Tr	easury rvice	Note:	The foundate	ion may be	Treated a	s a Priva	te Foundations return to sai	on tisfy state re	enortin	o requirer	ments	20	<b>909</b>
For calendar year 2009, or tax year beginning					be able to use a copy of this return to satisfy state report , 2009, and ending							·	. 20		
G Check all that apply Initial return  Amended return				Initial return of a former public charity							Final reti				
					1	ss change	]	<u> </u>	lame cha	ınge L		<b></b>			
_			Name of fo	undati				1_ /	o onange		<del>- 'i</del>			fication numb	er
	lse ti	ne iRS									Į	p.	,		
		el.	THE NAF	RERS	СНАВІТЛ	BLE FO	UNDATION						63-	-1189714	
	Other	wise,					nail is not delivere	ed to street :	address)	Room/su	uto	D Telephon		page 10 of the instr	
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		ype.	1901 61	ז א נוי	VENUE NO	ס ינויים	UITE 2400	1		1			121	05) 868-	2100
		pecific			e. and ZIP co		0116 2400	<del></del>				C If exemp			-3100
'	nstru	ctions	l only or town	ii, State	o, and zir oo	ue .						pending	, check here	• • • • • •	· · [H
			BIRMING	МДН	, AL 352	n3					- 1			tions check here	
Н	Che	ck type	of organiz				:)(3) exempt p	ruata fai	undation					tions meeting the here and attach	` <b>.</b> _
Ϊ	$\neg$	• •	•		npt chantable				vate foundat	ıon	- 1	comp	outation •	• • • • • •	▶∟
1			t value of a				unting method			crual	$\dashv$			status was termi	- I I
•			m Part II, c				ther (specify)		asii Ac	Cruai			-	)(1)(A) check he	
		► \$		393,			column (d) m		cash hasis					n a 60-month terr	
T:	/-				and Expen					<u>/</u>	<del></del>	under St	500011 307 (D	(d) Dish	ursements
		total o	f amounts in	colum	nns (b), (c), a	nd (d)	(a) Revenu		(b) Net inv		(	c) Adjuste			aritable
		may n	ot necessan	ly equa	al the amoun of the instruc	ts in	expenses books		incor	ne		income	Э		ooses
_	1			•		- ' '	72	0,000.						(cash b	asis only)
	2	Check	_   If the	e founda	ceived (attach so ation is <b>not</b> re	guired to	, 2	-, 550.						+	<del></del>
	3		— апас		B										
	4				m secunties		63	2,020.	5.	34,959.				ATCH	1
	`									3.,, 3.03.	<del> </del>		_	AICH	_ <del></del>
	Ι.										-			<del> </del>	
4	l .				assets not on		11	8,787.		HE(		VED	<del></del>		<del> </del>
Revenue	Б	Gross sa	ales price for a			7,116.		0,.0							<del></del>
ě	7		n line 6a gain net inc	ome (fi	rom Part IV,	)			19	14111	0 9	2010	161	1	
ř	8		ort-term capi					-	ŏ	<del></del>	WI 201	JE 64 167	S	·	
	9		•	_	· · · · · · ·						-		18	· · · · · ·	
		Gross sa	ales less return	ns I		1				_9GE	FR	LUT			
	ь		ost of goods so	- 1			·								<del></del>
	l .		•		ch schedule)						<del> </del>				<del>-</del>
	11				edule)			184.		-				ATCH	2
	12				11	1	1,47	0,991.	5.	34,959.				111011	
_	13				ectors, trustees			0.							
	14				and wages						1				
es	15				benefits									1	
ŠUŠ					le)									1	
and Administrative Expenses	ь	Accoun	iting fees (at	tach so	chedule) AT	СН 3		2,200.		0.			0		2,200.
E	c				ittach schedu										
Ę	17				ENT. 4		4	4,001.		35,510.					
stra	18	Taxes (a	attach schedul	e) (see p	page 14 of the ins	tructions)									
Ë	19				dule) and de										
Ē	20	Occupa	ancy			[									
¥	21	Travel,	conferences	s, and r	meetings	[	_								
an	22		and publica											1	
ng	23	Other e	expenses (att		hedule) AT			8,288.				**************************************			8,288.
Operating	24	Total o	perating and	d admi	nistrative ex	penses.									
þe			es 13 throug				5	4,489.		35,510.			0		10,488.
O	25	Contrib	utions, gifts,	grants	paid	[	18:	2,251.							182,251.
_	26	Total exp	enses and disb	ursemer	nts Add lines 2	4 and 25	23	6,740.		35,510.			0		192,739.
	27	Subtrac	t line 26 fror	n line '	12										
	а	Excess o	f revenue over	expense	s and disburser	nents	1,23	4,251.			1.		_		
	b	Net inv	estment inc	ome (	(if negative, e	nter -0-)			4.9	9,449.	L				
	С	Adjuste	ed net incom	ne (ıf n	negative, ente	er -0-)							-0-		

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

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Form **990-PF** (2009)

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Part I		Balance Sheets description column should be for end-of-year	Beginning of year	End of y	ear
	:II ( II	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	-1,032,278.	-1,667,665.	-1,667,665.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
		Grants receivable			
- 1	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
	•	Less allowance for doubtful accounts			
l					
श्च		Inventones for sale or use		<del></del>	<del></del>
Assets	9	Prepaid expenses and deferred charges			
4		Investments - U S and state government obligations (attach schedule)	7 050 001	0.207.410	11 5(1 005
-		Investments - corporate stock (attach schedule) ATCH 6.	7,050,981.		11,561,085.
ł	11 C	Investments - corporate bonds (attach schedule) ATCH .7 . Investments - land, buildings,	375,791.	0.	0.
-	••	and equipment basis			
ĺ		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	6,394,494.	7,629,745.	9,893,420.
$\neg$	17	Accounts payable and accrued expenses			
	18	Grants payable			
- 1	19	Deferred revenue			
.=1	20	Loans from officers, directors, trustees, and other disqualified persons			
賣	21	Mortgages and other notes payable (attach schedule)			
삅	22	Other liabilities (describe	****		
	~~	Other habitates (describe P			
	23	Total liabilities (add lines 17 through 22)			
$\dashv$		Foundations that follow SFAS 117, check here	" "		
ı		and complete lines 24 through 26 and lines 30 and 31.			
S	•	-			
O	24	Unrestricted			
횰	25	Temporanly restricted			
8	26	Permanently restricted			
핃		Foundations that do not follow SFAS 117,			
or Fund		check here and complete lines 27 through 31. ► X			
6	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg , and equipment fund		7 600 745	
SS	29	Retained earnings, accumulated income, endowment, or other funds	6,394,494.	7,628,745.	
Net Assets	30	Total net assets or fund balances (see page 17 of the		-	
ž		instructions)	6,394,494.	7,628,745.	
- 1	31	Total liabilities and net assets/fund balances (see page 17			
$\perp$		of the instructions)	6,394,494.	7,628,745.	
P	art II	Analysis of Changes in Net Assets or Fund	Balances	·	
1	Total	net assets or fund balances at beginning of year - Part II, co	lumn (a), line 30 (must ag	gree with	_
		of-year figure reported on prior year's return)			6,394,494.
					1,234,251.
					·
		4 0 4 0	- <b></b>		7,628,745.
		eases not included in line 2 (itemize)	• • • • • • • • • • • •	5	<u>, , , , , , , , , , , , , , , , , , , </u>
		net assets or fund balances at end of year (line 4 minus line	5) - Part II. column (b) III		7,628,745.
<u>-</u>	i otal	The assets of fund palatices at end of year fille 4 fillings line	o, raitin, column (b), in		7,020,749.

1.1.

Form 990-PF (2009)		63-11897	14		Page 3
Part IV Capital Gains	s and Losses for Tax on Inv	estment Income	(b) How	T (3) Date	
	d describe the kind(s) of property sold (e	_	acquired P-Purchase	(c) Date acquired	(d) Date sold (mo , day, yr )
	nck warehouse, or common stock, 200 s	sns MLC Co )	D-Donation	(mo , day, yr )	, , , , ,
<u>1a</u> b			<del>                                     </del>		
<u> </u>					-
d			<del>                                     </del>		
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a					
b					
С					
_d				•	
е					_
Complete only for assets sho	wing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
a			ļ <u>.</u>		
<u>b</u>		-	1		
С					<del>.</del>
_d			-		
е	- 10		<del>   </del>		
2 Capital gain net income or (		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
3. Net short-term capital gain	۱۱ ) or (loss) as defined in sections 1222				
	line 8, column (c) (see pages 13 and				
	ine 8		,		
Part V Qualification Un	der Section 4940(e) for Reduc	ed Tax on Net Investment Inc	ome		
	· · · · · · · · · · · · · · · · · · ·	ection 4940(a) tax on net investmen		\	
	he section 4942 tax on the distributa	able amount of any year in the base	period?	🗆	] Yes∑X No
	ot qualify under section 4940(e) Do	, <u> </u>			
1 Enter the appropriate amo		ee page 18 of the instructions before	e making i	any entries (d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	col (c))
2008	262,647.	5,016,171.	<u> </u>		0.052360
2007	434,930.	7,091,563.			0.061331
2006	203,017. 96,167.	6,547,711. 6,078,204.	<del> </del>		0.031006
2005 2004	119,931.	4,994,469.	<del> </del>		0.015822
2004	119,931.	4,994,409.	<del>                                     </del>		0.024013
2 Total of line 1, column (d)			2		0.184532
	or the 5-year base period - divide th ation has been in existence if less t		3		0.036906
number or years the lound	ation has been in existence in less t	han 5 years	-		0.030900
4 Enter the net value of nonc	chantable-use assets for 2009 from	Part X, line 5	4	7,	115,082.
5 Multiply line 4 by line 3			5		262,589.
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		4,994.
7 Add lines 5 and 6	· · · · · · · · · · · · · · · · · · ·		7		267,583.
8 Enter qualifying distribution	ns from Part XII, line 4	in Part VI, line 1b, and complete	8 that part		192,739. x rate See the
Part VI instructions on pag			F · •		

Form **990-PF** (2009)

 $(x_1,x_2,\dots,x_n)$ 

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the in	struct	ions)	
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		9,9	89.
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%  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		9,9	89.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		9,9	89.
6	Credits/Payments .			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 4,896.			
	Exempt foreign organizations-tax withheld at source 6b 0.			
c	Tax paid with application for extension of time to file (Form 8868)  6c 20,000.			
d	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d		24,8	96.
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		14,9	07.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax   14,907. 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			
	of the instructions for definition)?	. 1b		Х
	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			
	Did the foundation file Form 1120-POL for this year?	. <u>1c</u>	<u> </u>	Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation S (2) On foundation managers S	1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1		
	on foundation managers   \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2	ļ	X
	If "Yes," attach a detailed description of the activities		-	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			.,
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	1	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	-	N/	Χ
þ	If "Yes," has it filed a tax return on Form 990-T for this year?		<del>                                     </del>	Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5	ļ	
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		-	
	By language in the governing instrument, or		,	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		x	
_	conflict with the state law remain in the governing instrument?		$\frac{x}{x}$	
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.	· -	+	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		l	
	instructions) AL,	-		
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	0.	x	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	·   8b	<del>-                                    </del>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		1	
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	. 9		x
40	27)? If "Yes," complete Part XIV	.	<del>                                     </del>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	. 10		х
	names and addresses			Ь

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Par	t 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		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ DRAYTON NABERS, JR Telephone no ▶ 205-488	3-351	4	
	Located at ▶1901 SIXTH AVENUE, SUITE 2400 BIRMINGHAM, AL ZIP+4 ▶ 35203		<b>-</b>	
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here	N/	A .	TT
13	and enter the amount of tax-exempt interest received or accrued during the year	• • •	• • •	
Par	t 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
4-	•			
18	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
	(1) Engage in the sale of exemplify, or leasing of property was a dequation of person.			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	disqualified person?			1
	(3) Turnish goods, services, or radines to (or accept them norm) a disqualined person.			1
	(4) Pay Compensation to, or pay or reimburse the expenses of, a disqualined person?			l
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	İ		
	the benefit of use of a disqualified person/?			l
	(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, in terminating within 66 days / 11111111111111111			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1	N/	_
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	IN/	<del>^</del> _
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			x
	were not corrected before the first day of the tax year beginning in 2009?	1c	1	<u> </u>
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 20092			
	de, Fait Alli) for tax year(s) beginning before 2003. The first transfer and transf	1		
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)		1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	1	l N	) <sub>7</sub>
	to all years listed, answer "No" and attach statement - see page 20 of the instructions )	2b_	IN,	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	ŀ		
	D			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
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			L
	foundation had excess business holdings in 2009 )	3b	N/	<del>                                     </del>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<del> </del>	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?		<u> </u>	X
		Form <b>9</b> 9	90-PF	(2009)

Pai	t VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requir	red (contin	ued)			
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 X No							
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
	directly or indirectly, any voter registration drive?							
	(3) Provide a grant to an individual for travel, study, or other			• 🛏 🗀	X No			
	(4) Provide a grant to an organization other than a chantab				,,,,		1 1	
		•		Yes	X No		1 1	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (se	· -		. Lites	LA NO	ŀ		
	(5) Provide for any purpose other than religious, chantable	•		$\Box$ .	X No	i		
	purposes, or for the prevention of cruelty to children or					İ		
þ	If any answer is "Yes" to 5a(1)-(5), did any of the transa	• •	•			l	N/A	
	Regulations section 53 4945 or in a current notice regard	=		•	·	· ·   5b	N/E	
	Organizations relying on a current notice regarding disaster	assistance check he	e		• 🗀		1 1	
С	If the answer is "Yes" to question 5a(4), does the foundation	n claim exemption from	n the tax		$\Box$		1 1	
	because it maintained expenditure responsibility for the gra	nt?		. L Yes	No			
	If "Yes," attach the statement required by Regulations section	on 53 4945-5(d)						
6 a	Did the foundation, during the year, receive any funds, direct	ctly or indirectly, to pa	y premiums	_				
	on a personal benefit contract?			Yes	X No			
þ	Did the foundation, during the year, pay premiums, directly	or indirectly, on a per-	sonal benefit contract?			6b	X	
	If "Yes" to 6b, file Form 8870			_				
7 a	At any time during the tax year, was the foundation a party	to a prohibited tax she	elter transaction?	. Yes	X No			
b	If yes, did the foundation receive any proceeds or have any					7b	N/A	
Pai	t VIII Information About Officers, Directors	, Trustees, Four	idation Managers	, Highly Pa	id Empl	loyees,		
1	and Contractors List all officers, directors, trustees, foundation man	agers and their co	mnensation (see pa	ge 22 of the	instruction	ons)		
<u> </u>	(a) Name and address	(b) Title, and average	(c) Compensation (If not paid, enter	(d) Contributi	ons to		se account,	
	(a) Name and address	hours per week devoted to position	(If not paid, enter	employee bene and deferred com	fit plans pensation	other all	owances	
		:			- 1			
ΑT	TACHMENT 8		0.		0.		0	
				İ				
		-						
	Compensation of five highest-paid employees (other	r than those inclu	ded on line 1 - see p	age 23 of the	e instruct	tions).		
	If none, enter "NONE."			(d) Contribut	ione to			
(a	) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee b	enefit	(e) Expen	se account,	
	, , ,	devoted to position		plans and de compensa		outer an	owances	
N/I	A		,					
		·						
							<del></del>	
					ļ			
Tota	Il number of other employees paid over \$50,000 .						<b>▶</b>	

Form 990-PF (2009)

1.1

Five highest-paid independent contractors for professional services (see page 23 of the instructions). If no	ne, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
New	
NONE	
otal number of others receiving over \$50,000 for professional services	▶ NON
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable 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 NONE	
2	
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	Amount
1 NONE	
2	
All other program-related investments. See page 24 of the instructions	
3 NONE	
	:

Form **990-PF** (2009)

63-1189714 Form 990-PF (2009) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see page 24 of the instructions) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 7,725,889. а b Average of monthly cash balances 1b -502,455. Fair market value of all other assets (see page 24 of the instructions) Ō. 1c d Total (add lines 1a, b, and c) 1d 7,223,434. Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 0 Subtract line 2 from line 1d 3 7,223,434. Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 108,352. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 7,115,082. 5 Minimum investment return. Enter 5% of line 5 6 355,754. Distributable Amount (see page 25 of the instructions) (Section 4942(i)(3) and (i)(5) private operating Part XI foundations and certain foreign organizations check here > \_\_\_ and do not complete this part ) 355,754. Tax on investment income for 2009 from Part VI. line 5 Income tax for 2009 (This does not include the tax from Part VI) 2b Add lines 2a and 2b 9,989. Distributable amount before adjustments Subtract line 2c from line 1 3 345,765. Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 345,765. Deduction from distributable amount (see page 25 of the instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 345,765. Part XII Qualifying Distributions(see page 25 of the instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 192,739. 1a Program-related investments - total from Part IX-B 0. 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 0. Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 0. Cash distribution test (attach the required schedule) Ō. 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 192,739. 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) N/A

Form **990-PF** (2009)

192,739.

6

9JU0R9 3857

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Pa	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 prior to 2008	2008	2009
	line 7				345,765.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only				
	Total for pnor years 20 07 ,20 06 ,20 05		0.		
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
	From 2005				
	From 2006				
d	From 2007 0 .				
е	From 2008			ļ	
f	Total of lines 3a through e	0.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$192,739.				
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)				_
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				192,739.
е	Remaining amount distributed out of corpus	0.			
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:	0.			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b	Prior years' undistributed income Subtract		0.		
c	line 4b from line 2b  Enter the amount of prior years' undistributed		0.	·	
•	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
a	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions		0.		
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount - see page 27 of the instructions		·		
T	Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2010				153,026.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				·
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	0.			
	Analysis of line 9				
а	Excess from 2005				
þ	Excess from 2006				
C	Excess from 2007				
d	Excess from 2008				
е	Excess from 2009 0 .	1			

Form **990-PF** (2009)

	If the foundation has				operating	) NOT APPLICABLE		
	foundation, and the ruling	is effective for 2009, enter	the date of the ruling					
b	Check box to indicate whe	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 ad-	Tax year		Prior 3 year	s	(e) Total		
	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	(ь) 2008	(c) 2007	(d) 2006	(6) 10:21		
b	85% of line 2a							
С	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 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter							
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section</li></ul>							
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)							
	(4) Gross investment income							
Pa	rt XV Supplements at any time of	ary Information (C during the year - se	omplete this part e page 28 of the in	only if the fo	oundation had \$5,000	or more in assets		
1	Information Regarding	Foundation Manager	s:					
а					e total contributions recei 0) (See section 507(d)(2)			
	DRAYTON NAE	BERS, JR						
b	List any managers of ownership of a partner				corporation (or an equal reater interest	ly large portion of the		
	NONE							
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Program	s:			
	Check here ► X if the unsolicited requests for organizations under other contents.	or funds. If the found	dation makes gifts, g	grants, etc (see	charitable organizations page 28 of the instructi	and does not accept ons) to individuals or		
а	The name, address, an	d telephone number of	the person to whom a	pplications shoul	ld be addressed			
b	The form in which appli	cations should be subn	nitted and information	and materials the	ey should include			
С	Any submission deadlin	nes	·		······································			
d	Any restrictions or lift factors	mitations on awards,	such as by geogra	aphical areas, c	charitable fields, kinds of	institutions, or other		

. . . . . . . . .

Form 990-PF (2009)	63-1189714	Page 11		
Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid Durin	ng the Year or App	roved for I	Future Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 9				
		İ		
		ĺ		
				1
				1
	<u> </u>	<u> </u>	<u> </u>	100.051
Total	<u> </u>	· · · · · ·		182,251.
<b>b</b> Approved for future payment				
				ļ
			İ	
Total				

For	m 990-	-PF (2009)			63-	-1189714	Page <b>12</b>
P	art X	VI-A Analysis of Income-Prod	lucing Act	ivities		•	
En	ter gro	oss amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
		ram service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d)	function income (See page 28 of the instructions)
	a _						
	b						
	c _						
	ď.						
	e _						
	f						
•	-	Fees and contracts from government agencies					
		bership dues and assessments est on savings and temporary cash investments					
		dends and interest from securities	900000	97,061.	14	534,959.	
		rental income or (loss) from real estate					
		Debt-financed property					<u>-</u>
		Not debt-financed property					
	Net re	ental income or (loss) from personal property er investment income					
		or (loss) from sales of assets other than inventory	1 000000	244,973.	18	-126,186.	
		income or (loss) from special events		, , , , , , , , , , , , , , , , , , ,		,	
		ss profit or (loss) from sales of inventory	I				
		er revenue a					
	P G	OTHER INCOME				184.	
	c _						
	d _						
4-	е _			342 034	<del>                                     </del>	408,957.	
		total Add columns (b), (d), and (e)				•	750,991.
		<ul> <li>ii. Add line 12, columns (b), (d), and (e)</li> <li>rksheet in line 13 instructions on page 28 to</li> </ul>					,507,331.
		VI-B Relationship of Activities			empt Purp	ooses	
	ine No	o. Explain below how each active the accomplishment of the fi	ty for whi	ch income is reported	ın column	(e) of Part XVI-A con	
_		page 29 of the instructions )					
_		NOT APPLICABLE					
_							
_		· · · · · · · · · · · · · · · · · · ·				<u>-</u>	<del> </del>
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_							
_			<del></del>				<del></del>

 $(a_{i_1},a_{i_2},\dots,a_{i_m},a_{i_m})$ 

Form	990-PF	(2009)			_		63-118971	4		P	age 13
Pa	rt XVII	Information Exempt Orga		Transfers To a	nd Transa	ctions	and Relati	ionships With	Nonc		
1	in se	he organization directly ction 501(c) of the C zations?	ode (other than	section 501(c)(3)	organizations					Yes	No
а		fers from the reporting fou		. •					1a(1)		x
	_	ash							1		X
b		transactions							1-1-7		
	(1) Sa	ales of assets to a noncha	antable exempt o	rganization					1b(1)		Х
	(2) P	urchases of assets from a	nonchantable ex	cempt organization					1b(2)		X
	(3) R	ental of facilities, equipme	ent, or other asse	ts					1b(3)		X
		eimbursement arrangeme							1. 1		X
		oans or loan guarantees							1b(5)		X
_		erformance of services or ig of facilities, equipment,									$\frac{\hat{x}}{x}$
		e answer to any of	_							fair	Ь.
		of the goods, other		•	_			•			
		in any transaction or		•	, -						
		-	_								
_(a)	Line no	(b) Amount involved	(c) Name of	nonchantable exempt org	ganization	<del>- ` ´                                  </del>	cription of transfe	rs, transactions, and share	nng arran	gemer	nts
		N/A				N/A					
_		-							<u> </u>		
				<del></del>							
				·							
							<del></del>				
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								-			
				<del> </del>							
_		<del>-</del>				<del></del>					
								<del>_</del>			
	section	foundation directly or 501(c) of the Code (oth	ner than section	•	•		. •		Ye	es 🗀	No
<u></u> b	If "Yes	s," complete the following (a) Name of organization		(b) Type of	organization			c) Description of relation	chin		
		(a) Name of Organization		(b) Type of	organization			c) Description of Telation	si iib		
											-
	·										
								***************************************			
_				<u> </u>							
	Under belief,	penalties of perjury, I declarate true, correct, and comp	are that I have explete Declaration	amined this return, ind of preparer (other than	luding accompa taxpayer or fidi	uciarý) is ba	ased on all inform	nents, and to the best nation of which prepare	of my kr er has ar	nowled ny kno	ge and wledge
ø	<u>-</u>	gnature of officer or trustee	<del>- (                                   </del>	<del></del>		کن کی ا Date	1.10	Title			
Sign Here		1	All	1.11	Date 5 2	1.	Check if self-employe	Preparer's number (S	ee Signa	iture o	
S	aid Sare	signature /	- A			7/2010	2	P00952			
	Paid Preparer's Use Only	Firm's name (or yours if		NATERHOUSECOO		1.000		EIN ► 13-4008	324		
	_	self-employed), address and ZIP code		TH AVENUE NO	KTH/SUIT		203	Phono no			
		L	BIRMII	NGHAM, AL		33.	203	Phone no	om 99	n_PF	(2000)

## 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
THE NABERS CHARITABI	JE FOUNDATION	63-1189714
Organization type (check one	<del>,</del>	
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 foundate	tion
	501(c)(3) taxable private foundation	
, ,	overed 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) a	i(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% 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	o(7), (8), or (10) organization filing Form 990 or 990-EZ that received from an contributions of more than \$1,000 for use exclusively for religious, charitaes, or the prevention of cruelty to children or animals. Complete Parts I, II, an	ible, scientific, literary, or
the year, contributio aggregate to more to year for an exclusive applies to this organ	n(7), (8), or (10) organization filing Form 990 or 990-EZ that received from an insight for use exclusively for religious, charitable, etc., purposes, but these contains \$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 inization 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	is not covered by the General Rule and/or the Special Rules does not file So st answer "No" on Part IV, line 2 of its Form 990, or check the box on line H , to certify that it does not meet the filing requirements of Schedule B (Form	of its Form 990-EZ,
For Privacy Act and Paperwork Redu for Form 990, 990-EZ, or 990-PF	uction Act Notice, see the Instructions Schedu	le B (Form 990, 990-EZ, or 990-PF) (2009)

JSA

Name of organization THE NABERS CHARITABLE FOUNDATION Employer identification number 63-1189714 Part I Contributors (see instructions) (d) (a) (b) (c) Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution No. 1 DRAYTON NABERS, JR Person Pavroll 2801 HIGHWAY 280 SOUTH 300,000. Noncash (Complete Part II if there is BIRMINGHAM, AL 35223 a noncash contribution ) (a) (b) (c) (d) Type of contribution Name, address, and ZIP + 4 Aggregate contributions No. 2 DRAYTON NABERS, JR Person Payroli 2801 HIGHWAY 280 SOUTH 420,000. Noncash (Complete Part II if there is BIRMINGHAM, AL 35223 a noncash contribution) (c) (d) (a) (b) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) (b) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll Noncash (Complete Part II if there is a noncash contribution) (c) (a) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) **Aggregate contributions** Type of contribution Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II if there is a noncash contribution)

of Part II

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

Name of organization THE NABERS CHARITABLE FOUNDATION

Employer identification number

63-1189714

\_ of \_\_\_

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	LOAN REPAYMENT	_	
		<u></u>	
-		\$\$	04/30/2009
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
-			
-		<b>\$</b>	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
-		<del>-</del>	
-		<u> </u>	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
-		_	
-		\$	
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
		<u> </u>	
-			
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
		_	
-		<u> </u>	

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ATTACHMENT 1

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

NET INVESTMENT INCOME	445,572.	534,959.
REVENUE AND EXPENSES PER BOOKS	542,633. 89,387.	632,020.
		TOTAL
DESCRIPTION	NBC SECURITIES VANGUARD INVESTMENTS	

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63-1189714

ATTACHMENT 2

FORM 990PF, PART I - OTHER INCOME

REVENUE AND **EXPENSES** EXPENSE: PER BOOKS 184.

DESCRIPTION OTHER MISCELLANEOUS INCOME

TOTALS

184.

ATTACHMENT

2,200.

CHARITABLE PURPOSES

ADJUSTED NET INCOME

NET INVESTMENT INCOME

> EXPENSES PER BOOKS

REVENUE AND 2,200.

2,200.

TOTALS

PRICEWATERHOUSECOOPERS

DESCRIPTION

2,200.

FORM 990PF, PART I - ACCOUNTING FEES

## V 09-6.2

ATTACHMENT 4

## PART I - INTEREST EXPENSE FORM 990PF,

	NET	INVESTMENT	INCOME	35,510.		35,510.
REVENUE	AND	EXPENSES	PER BOOKS	41,896.	2,105.	44,001.
						TOTALS
			DESCRIPTION	MARGIN INTEREST	LOAN INTEREST	

PAGE 23

# FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION\_ADMINISTRATIVE FEES

REVENUE
AND
EXPENSES
PER BOOKS
6,000.

8,288.

TOTALS

CHARITABLE PURPOSES

<u>PURPOSES</u> 6,000.

8,288.

FORM 990PE, PART II - CORPORATE STOCK

ROYAL BANK OF SCOTLAND CITIGROUP CAP VII LEHMAN BROTHERS
--

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ENDING <u>FMV</u>	16 94 33	8,8	175,520 60,760 87,040	86,307 90,537 477,005 636,818	468,435 1,834,843 744,750 2,033,009	896,39 192,94	11,561,085
ENDING BOOK VALUE	112,240.	94,16 94,40	173,600. 69,735. 99,866.	102,431. 100,911. 534,952. 728,464.	518,383. 933,218. 848,161. 1,499,298.	410,61	9,297,410.

ATTACHMENT 6

V 09-6.2

	ATTACHMENT 7	ENDING BOOK VALUE FMV	.0	0 0
FORM 990PF, PART II - CORPORATE BONDS		DESCRIPTION	VANGUARD ST INVETEMENT FUND	TOTALS

PAGE 26

THE NABERS CHARITABLE FOUNDATION

IRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER  TO EMPLOYEE AND OTHER WEEK DEVOTED TO POSITION  COMPENSATION  BENEFIT PLANS  ALLOWANCES	PRESIDENT 0. 0.	SECRETARY 0.	TREASURER 0. 0.	
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	NAME AND ADDRESS WEEK	DRAYTON NABERS, JR 1901 6TH AVE. NORTH SUITE 2400 BIRMINGHAM, AL 35203	FAIRFAX SMATHERS NABERS 1901 6TH AVE. NORTH SUITE 2400 BIRMINGHAM, AL 35203	MARY NABERS DOYLE 1901 6TH AVE. NORTH SUITE 2400 BIRMINGHAM, AL 35203	

63-1189714

ATTACHMENT 9

9JJ0R9 3857

ATTACHMENT 9 (CONT'D)

FORM 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
CHRISTIAN UNION	NONE	CHARITABLE	10,000.
GRACE HOUSE	NONE	CHARITABLE	5,000.
FOOD FOR HUNGER	NONE	CHARITABLE	7,500.
TRINITY EPISCOPAL CHURCH	NONE	CHARITABLE	1,000
NEWCOMEN SOCIETY OF ALABAMA	NONE	CHARITABLE	09
MUSTARD SEED PROJECT	NONE	CHARITABLE	1,000.

V 09-6.2

ATTACHMENT 9 (CONT'D)

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHRISTIAN ASSISTANCE FUND	NONE	CHARITABLE	500.
ALABAMA POLICY INSTITUTE	NONE	CHARITABLE	5,000.
RWANDA REV. MIGISHA EMILE	NONE	CHARITABLE	200
UNITED WAY OF CENTRAL ALABAMA	NONE	CHARITABLE	1,171.

TOTAL CONTRIBUTIONS PAID

182,251

ATTACHMENT 9 PAGE 30

V 09-6.2

## SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

OMB No 1545-0092

Employer identification number

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

► 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).

7	THE NABERS CHARITABLE FOUNDATI	ON			63-11897	14	
Note	: Form 5227 filers need to complete onlyPa	rts I and II					
Par	Short-Term Capital Gains and Lo	sses - Assets	Held One Y	ear or Less	-		
	(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)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
							<u> </u>
		<u> </u>			<u>L.</u> .		
b	Enter the short-term gain or (loss), if any, fro	m Schedule D-1	, line 1b			1b	131,583.
2	Short-term capital gain or (loss) from Forms		2				
3 4	Net short-term gain or (loss) from partnership Short-term capital loss carryover. Enter the a		3				
5	Carryover Worksheet		4	()			
	column (3) on the back			<u></u>		5	131,583.
Par	Long-Term Capital Gains and Losses	- Assets Held I	nore Than One	e rear	(e) Cost or other	haere	(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	n Schedule D-1	line 6b		· · · · · · · · · · · · · · · · · · ·	6b	-12,796.
7	Long-term capital gain or (loss) from Forms			324		7	
						8	
8	Net long-term gain or (loss) from partnership	•					
9	Capital gain distributions					9	
10 11	Gain from Form 4797, Part I	imount, if any, fr	om line 14 of th	e 2008 Capital Loss		10	
12	Carryover Worksheet		n column (f) E			11	( )
	column (3) on the back	_				12	-12,796.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

Sched	dule D (Form 1041) 2009				Page 2
Par	Summary of Parts I and II Caution: Read the instructions before completing this pair	rt.	(1) Beneficiaries' (see page 5)	(2) Estate or trust's	1 (3) (6)
13	Net short-term gain or (loss)	13			131,583.
14	Net long-term gain or (loss):		- <del>-</del>		
а	<i>,</i> , , , , , , , , , , , , , , , , , ,	4a			-12,796.
	,	4b			
C		4c			
15		15			118,787.
	a: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 9 int V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part				
Pai	t IV Capital Loss Limitation				· · · · · · · · · · · · · · · · · · ·
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part	t I, lır	ie 4c, if a trust), the <b>sr</b>	naller of	
Note	The loss on line 15, column (3) or b \$3,000  If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1  YoveWorksheeton page 7 of the instructions to figure your capital loss carryover	 1, lın	e 22 (or Form 990-T, li	ne 34), is a loss	3 ( ) s, complete the Capital Loss
	t V Tax Computation Using Maximum Capital Gains Rates				
there Cause • Ei • Be	in 1041 filers. Complete this part only if both lines 14a and 15 in column is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more the tion: Skip this part and complete the worksheet on page 8 of the instruction ther line 14b, col (2) or line 14c, col (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero in 990-T trusts. Complete this part only if both lines 14a and 15 are	n (2 nan 2 ns if	zero		
of F	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part er 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)		. 17		
18	Enter the smaller of line 14a or 15 in column (2)				
	but not less than zero				
19	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)			ļ	
20	Add lines 18 and 19			ŀ	
21	If the estate or trust is filing Form 4952, enter the		1		
	amount from line 4g, otherwise, enter -0 ▶ 21		_		
22	Subtract line 21 from line 20 If zero or less, enter -0-		22		
23	Subtract line 22 from line 17 If zero or less, enter -0-		23		
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24?				
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24	• •	• •		
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	2	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% ( 15)				ا ه
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate	Scho	edule for Estates ar		<del>-  </del>
•	(see the Schedule Ginstructions in the instructions for Form 1041)				1
32	Add lines 30 and 31				2
33	Figure the tax on the amount on line 17. Use the 2009 Tax Rate 3	Sch	edule for Estates ar	nd Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041)		3		
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 he				
	G, line 1a (or Form 990-T, line 36)	• •	· <u></u>		<del></del>
				Sci	hedule D (Form 1041) 2009

## **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

2009

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

THE NABERS CHARITABLE FOUNDATION

Employer identification number 63-1189714

Port Form Copital Gains as		tes - Assets Held One Year or Less						
			(d) Sales price	(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 )	(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)			
1a MORGAN STANLEY CAP. TRUST								
III	11/25/2008	02/23/2009	13,752.	14,472.	-720.			
MORGAN STANLEY CAP. TRUST								
VII	VARIOUS	02/23/2009	37,391.	39,859.	-2,468.			
PROTECTIVE LIFE CORP	VARIOUS	VARIOUS	1,449,788.	586,476.	863,312.			
AMERICAN INTERNATIONAL					000,022			
GROUP	07/08/2008	01/01/2009	61,700.	50,500.	11,200.			
CITIGROUP CAP VII	07/08/2008	03/17/2009	79,189.	206,648.	-127,459.			
CITIGROUP CAP X	07/08/2008	03/20/2009	35,880.	95,160.	-59,280.			
FIFTH THIRD CAP TR V	07/08/2008	04/01/2009	39,775.	98,275.	-58,500.			
WACHOVIA CAP TRUST X	06/30/2008	01/01/2009	92,524.	87,500.	5,024.			
VANGUARD TOTAL STOCK								
MARKET INDEX	VARIOUS	03/02/2009	566,416.	1,042,608.	-476,192.			
VANGUARD ST INVESTMENT GRADE	09/02/2008	01/21/2009	352 <b>,</b> 457.	375,791.	-23,334.			
-	-		- <del>-</del>					
					,			
<del> </del>	-							
***************************************								
					<u> </u>			
					<u>.</u>			

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b .....

131,583.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

lame of estate or trust as shown on Form 1041 Do n				Employer identific	
Part II Long-Term Capital Gains					
(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 price (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)
a ENERGEN CORPORATION	06/30/2008	07/29/2009	228,244.	241,040.	-12,796
· · · · · · · · · · · · · · · · · · ·					
"					
-					
					L
			•		
			_		
<del></del>					
······································					
6b Total. Combine the amounts in colu	mn (f) Enter here and	on Schedule D. lin	e 6h		-12,796

THE NABERS CHARITABLE FOUNDATION
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON IN

Kind of Property	SAINS AND L	Des	P	Date acquired	Date sold		
Gross sale Depreciation price less allowed/ expenses of sale allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	<u></u>	Gain or (loss)	
13,752.	MORGAN STAN	LEY CAP. TE	RUST III			11/25/2008 -720.	02/23/2009
37,391.	MORGAN STAN	LEY CAP. TE	RUST VII			VAR -2,468.	02/23/2009
,449,788.	PROTECTIVE 586,476.	LIFE CORP			İ	VAR 863,312.	VAI
228,244.	ENERGEN COR 241,040.	PORATION				06/30/2008 -12,796.	07/29/2009
61,700.	AMERICAN IN 50,500.	TERNATIONAI	GROUP			07/08/2008 11,200.	01/01/2009
79,189.	CITIGROUP C 206,648.	AP VII				07/08/2008 -127,459.	03/17/2009
35,880.	CITIGROUP C 95,160.	AP X				07/08/2008 -59,280.	03/20/2009
39,775.	FIFTH THIRD 98,275.	CAP TR V				07/08/2008 -58,500.	04/01/2009
92,524.	WACHOVIA CA 87,500.	P TRUST X				06/30/2008 5,024.	01/01/2009
566,416.	VANGUARD TO 1,042,608.	TAL STOCK M	ARKET INDEX			VAR -476,192.	03/02/2009
352,457.	VANGUARD ST 375,791.	INVESTMENT	' GRADE			09/02/2008 -23,334.	01/21/2009
TOTAL GAIN (LOSS)							
				}			

## Form **8868**

1,1 . . . . 3

(Rev April 2009)

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

			_		J. 5			• • •			OWR	No. 15	45-1709	
Department of the T Internal Revenue Se				File a se	parate app	lication for	each retur	n.						
		Automatic 3-M	onth Ex										▶ X	
• If you are fil	ling for an	Additional (Not unlesson have a	t Autom	atic) 3-Mont	th Extens	ilon, comp	lete only	Part II (				68.		
Part I Auto	matic 3-	Month Extens	ion of 1	Time, Only	submit	original (n	o copies	needed'	).					
		file Form 990-T								nd comple	ete			
			-	•									▶ 🔲	
All other corpo		(including 1120- etums.	-C filers	s), partnersh	ips, REM	MICs, and	trusts mu	ıst use Fo	orm 70	04 to re	equest	an e	xtension of	
one of the ret electronically in returns, or a co	turns not if (1) you omposite	Generally, you ed below (6 mi want the additi or consolidated on the electronic	ionths fo ional (n From 9	or a corpora ot automatic 990-T. Instea	ation red c) 3-mon ad, you n	quired to f th extension nust submi	ile Form on or (2) t the fully	990-T) i you file ∕ complete	Howeve Forms ed and	er, you o 990-BL, signed p	cannot 6069, cage 2	file f or 88 (Part	Form 8868 370, group	
Type or		Exempt Organizati		-				·	Т				n number	
print		E NABERS CH		BLE FOUN	DATTON				l			189714		
` I						ructions	_	· · · · · · · · · · · · · · · · · · ·					<del></del>	
File by the due date for	Number, street, and room or suite no. If a P.O. box, see instructions  2801 HIGHWAY 280 SOUTH													
filing your return, See	Ch. Anna and Market 200 Booth													
instructions	i .	RMINGHAM, A				,,		_						
Check type of		be filed (file a			for each	return):							<del></del>	
Form 990		, , , , ,	<del></del>	m 990-T (corp		,			For	n 4720				
Form 990	-BL	-		m 990-T (sec	•	408(a) trust	)		For	n 5227				
Form 990	-EZ		<del></del>	m 990-T (trus			•		For	n 6069				
X Form 990	-PF	Ī	→	m 1041-A		•			<b>Г</b>	n 8870				
<ul> <li>If the organ</li> <li>If this is for</li> <li>for the whole gnames and EIN</li> <li>I reques</li> </ul>	ization do a Group I group, che Is of all m et an a	es not have an exercise this box. Pembers the externutomatic 3-mor	office or e organiz 	zation's four If it is for par Il cover. months	digit Grout of the ground to grow for a contract of the ground the ground term of the gro	up Exempti roup, check	States, chon Number this box	er (GEN) ►	an e Form	d attach	) exte	with ension	n of time	
until for the org		08/15 , 2010 's return for	, to	file the exe	emptorga	anization r	etum for	the organ	nization	named	above.	i ne	extension is	
► X ►		year 2009 or beginning	·		·	, and	ending _				_·			
2 If this tax	year is fo	r less than 12 mo	onths, ch	neck reason:	: 🗆	Initial retur	n 🗌	Final retu	ım 🗀	Chang	e in acc	counti	ing period	
=	•	is for Form 990 dits. See instruct		90-PF, 990-	T, 4720,	or 6069,	enter th	e tentativ	e tax,	less any	3a	\$	20,000.	
		is for Form 990-		990-T. enter	anv refi	ındable cri	edits and	estimated	d tax n	avments		Ť	-,	
	-	prior year overp			-			35	P	_,	3ь	\$		
		tract line 3b fro				ment with	this form	n. or. if re	equired	deposit	- 133	Ť		
		or, if require							-	-				
instruction		. 31, 11 TOQUITO	_, _,	E ! !	- 1-1001		Tun	. 451110111	,0.0	,. 000	3c	s	20,000.	
		to make an elec	ctronic fi	and withdraw	val with th	is Form 88	68 see F	orm 8452	-FO and	l Form 8				
for payment ins		, mans an elec	J. J. 110 10	WILIGIAN			, 566 1	J.III J-100	and	_ , 0,,,, 0,	J, J - L O			
		erwork Reducti	ion Act I	Notice, see I	Instruction	ons.					Form 8	3868	(Rev 4-2009)	