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### **Return of Private Foundation**

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

2009

OMB No 1545-0052

For calendary year 2000, or tax year beginning  G Check althritta apply   Instituted in Instituted a former public charge   Amended return   Address change   Name of foundation   Amended return   Address change   Name of foundation	Department	of the Treasury		reated as a Privation able to use a copy of this		e reporting requirements	2009
India ferturn   India fertur							
Use the IRB   Name of foundation   Name of foundation   Name of foundation   THE   ANN WASHINGTON HILLYER FOUNDATION   63-6206357   Telephote number of type.   ICD   LEE   ROAD   21   3   34   7 49-5568   Telephote number of type.   ICD   LEE   ROAD   21   3   36804-8286   Class specific project pr				Initial return of a f	ormer public charity	Final return	
THE ANN WASHINGTON HILLYER FOUNDATION  THE ANN WASHINGTON			Amended return	Address char	ge	Name change	
Otherwise THE ANN WASHINGTON HILLYER FOUNDATION pirit pirit port year 160 LEE ROAD 413 See Specified OPELIKA, AL 36804-8286  If Concert year of the control	Use the IF	RS Name of foundation				A Employer identification	number
print on type. If the processor of the p	label.			TIVED EQUIDA	m T O N	62 6206257	
of type. I GO LEE ROAD 413  See Specific City or from, stats, and 2IP code Instructions DPELTXR, AL 36804—8286  If Check type of organization IX Section 501(c)(3) exempt private foundation  I Fair market value of all specific and organization of the transition private foundation  I Fair market value of all specific and organization of the specific organization organiz		·,					- <del>-</del>
See Specific Cyd or Town, state, and ZIP code DPELTIXA, AL 36804—8286  H Check type of organization [X] Section 501(c)(3) exempt private foundation  Is section 4947(a)(1) nonexempt charitable trust  Settlend 4947(a)(1) nonexempt charitable trust  Other (seport)  See The Code of Organization [X] Section 501(c)(3) exempt private foundation  Is arm market value of all assets a not of year   Accounting method   Continue of the continue of year   Accounting method   Continue of the continue of year   Accounting method   Continue of the continue of year   Accounting the year   Accounting the continue of year   Accounting the year   Acco	•	1		livered to street address)	noonv	In telephone named	568
No. Check by per of organization   No. Check by p						<del></del>	
Note that the companies of the compan	Instruction			86			
Section 4947(a)(1) nonexempt charitable trust □ their taxable proate foundation  Fair market value of all assets at end of year   1 Accounting method   Cash   Accounting method   Accounting method   Accounting method   Cash   Accounting method   Accou	H Check !					Foreign organizations med check here and attach core	eting the 85% test,
Fair market value of all assets at end of year   J Accounting method   Cash   Accrual   Under section 507(b)(1)(A), check here   Under section 507(b)(1)(A), che					ation	1	
Part   Analysis of Revenue and Expenses (The botal of amounts in columns (b), (a), and (of may not expenses (The botal of amounts in columns (b), (a), and (of may not expenses (The botal of amounts in columns (b), (a), and (of may not expenses (The botal of amounts in columns (b), (a), and (of may not expenses per books (b) Net investment income (c) Adjusted may be characterise purposes (The botal of amounts in columns (b), (a), and (of may not expenses per books (c), not make the columns (c), and (c				ng method X Cash	Accrual		
Part     Analysis of Revenue and Expenses (sp. land (gl) may not expenses per books   (b) Net investment income   (c) Adjusted net income   (c) Ad	(from P					F If the foundation is in a 6	0-month termination
1   Contributions, grifs, grants, etc., received   2   Cheek				mn (d) must be on cash	basis.)	under section 507(b)(1)	
1   Contributions, grifs, grants, etc., received   2   Cheek	Part I	(The total of amounts in colu	Id Expenses imns (b), (c), and (d) may not				for charitable purposes
2 Check ▶ X   First foundation on of required to stanch Sch B 3 continued to temporary costs in restrictions and interest from securities    5a Gross rents	$\overline{}$	-					(casii basis only)
Interest on savings and temporary   Secretary   Statement   Stat					<u></u>	****	
4 Dividends and interest from securities 5 Gross rents b Net rental income or (poss) 6 Net gain or (loss) from said of assets not on line 10 0 Gross profit or (loss) 10 and advances 10 and advances 10 and advances 11 Other modifications 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, fusites, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees 16 Accounting fees 17 Interest 18 Depreciation and depletion 19 Depreciation and depletion 20 Couplancy 21 Travel, conferences, and meetings 22 Pinting and publications 23 Other expenses 24 Total operating and administrative expenses and disbursements. 25 Add lines 24 and 25 26 Total expenses and disbursements. 26 Add lines 24 and 25 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 29 Details (renework) 20 Cetter of the content of the con						" " "	**************************************
D   Net rental income or (bess)   S   Net gain or (loss) from saile of assests not on line 10   10   10   10   10   10   10   10				2,509.	2,5	09.	STATEMENT 1
Ba Net gas or flood from sale of assets not on line 10 20 , 846 .  7 Capter game in consider with 20 , 846 .  8 Net short-term capital gain 9 Income modifications 10 Gross scale isses returns 10 Gross scale isses returns 10 Lease scale isses returns 10 Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 <88,485 > 2,509 .  13 Compensation of officiary, directors, fusites, etc 15 Package in the first scale and wages 15 Pension plans, employee benefits 16a Legal fees STMT 2 537 . 0 . 0 .  16 Legal fees STMT 3 993 . 993 . 0 .  17 Interest 18 Taxes 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Travel, conferences, and meetings 23 Other expenses 24 Total operating and administrative expenses and disbursements. Add lines 24 and 25 15 flood in 12 a Excess of revenue over expenses and disbursements bit in the first state of the first scale and the substratements of the first scale and the substratements bit interest in 16 floor in	5a	Gross rents					
Base of the control o	b	Net rental income or (loss)					
9 Net short-refirm capital gain 9 Income modifications 10a and allowances 10a and allowances 10a and allowances 10b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Pension plans, employee benefits 16a Legal fees 15 Cother professional fees 15 STMT 2 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 25 expenses. Add lines 13 through 23 26 Contributions, gifts, grants paid 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 29 Add lines 24 and 25 29 Subtract line 26 from line 12 20 Excess of revenue over expenses and disbursements 21 Note of the profession of the control of registers, enter -0-) 28 Excess of revenue over expenses and disbursements 29 Note of the profession of the control of registers, enter -0-) 20 Add lines 24 and 25 21 Subtract line 26 from line 12 22 Excess of revenue over expenses and disbursements 23 Note of the profession of the control of registers, enter -0-) 24 Excess of revenue over expenses and disbursements 30 Note of the control of registers, enter -0-) 31 Expense of the control of registers, enter -0-) 32 Excess of revenue over expenses and disbursements 33 Note of the control of registers, enter -0-) 34 Excess of revenue over expenses and disbursements 35 Note of the control of registers, enter -0-) 35 Excess of revenue over expenses and disbursements 36 Description of the control of registers, enter -0-) 36 Excess of revenue over expenses and disbursements 36 Description of the control o	<u>o</u> 6a ∣			<10,994.	>		
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14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Accounting fees 15 Accounting fees 15 Accounting fees 16a Legal fees 15 Accounting fees 15 Accounting fees 15 STMT 2 16a Legal fees 16a Legal fees 17 Accounting fees 18 STMT 3 18 STMT 3 19 STMT 3 19 STMT 3 19 STMT 3 19 STMT 3 10 STMT 3	12	Total. Add lines 1 throug	ıh 11		> 2,5		
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25 Contributions, gifts, grants paid  26 Total expenses and disbursements.  Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	:돌 19	Depreciation and depletion	on				
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25 Contributions, gifts, grants paid  26 Total expenses and disbursements.  Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	Ž 21			-			
25 Contributions, gifts, grants paid  26 Total expenses and disbursements.  Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	E 22	· ·	<b>;</b>				
25 Contributions, gifts, grants paid  26 Total expenses and disbursements.  Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	E 23	•	ainintrativa				
25 Contributions, gifts, grants paid  26 Total expenses and disbursements.  Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	E   24	• •		1.530.	9	93.	0.
26 Total expenses and disbursements.  Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	ဝီ <sub>25</sub>	•	-	14,160.			
Add lines 24 and 25  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)				, =			
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		-		15,690.	9	93.	14,160.
b Net investment income (if negative, enter -0-)  c Adjusted net income (if negative, enter -0-)  N/A	27	Subtract line 26 from line	12				
c Adjusted net income (if negative, enter -0-)		•		<24,175.	<u> </u>	<u> </u>	
	1				1,5		
				Ast Notice and the instance	L		Form 000-DE (2000)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	beginning of year	Ellu oi y	- Ca1
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments		<del></del>	<del></del>
3 Accounts receivable ►			
Less. allowance for doubtful accounts		····	· ······
4 Pledges receivable ►			
Less allowance for doubtful accounts			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
7 Other notes and loans receivable			··········
Less allowance for doubtful accounts		1	
			<del>.</del>
T			
9 Prepaid expenses and deferred charges			
10a investments - 0.5 and state government obligations	105 516	139,181.	120 021
b Investments - corporate stock STMT 4	185,516.	139,181.	129,021.
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis			
Less. accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment basis			
Less. accumulated depreciation			•
15 Other assets (describe ► )			
16 Total assets (to be completed by all filers)	185,516.	139,181.	129,021.
17 Accounts payable and accrued expenses			
140 D-4			
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
21 Mortgages and other notes payable			
22 Other liabilities (describe)			
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			,
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted	185,516.	139,181.	
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds			
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances			
29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	185,516.	139,181.	
		200/2020	
31 Total liabilities and net assets/fund balances	185,516.	139,181.	
Part III Analysis of Changes in Net Assets or Fund Ba	lances		
Total net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
(must agree with end-of-year figure reported on prior year's return)		1	185,516 <24,175
Enter amount from Part I, line 27a		2	<24,175
Other increases not included in line 2 (itemize)		3	0
Add lines 1, 2, and 3	·	4	161,341
Decreases not included in line 2 (itemize)		5	0
Decreases not included in line 2 (itemize)  Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	umn (b), line 30	6	161,341
Tale in the second seco	. 1-7,		Form <b>990-PF</b> (2009)

Part IV Capital Gains an	d Losses for Tax on Ir	vestmen	t Income						
	e the kind(s) of property sold (e g nouse, or common stock, 200 shs			(b) ł P D	How ac - Purcl - Dona	quired nase ition	(c) Date a (mo , d		(d) Date sold (mo , day, yr )
1a				<u> </u>					
	STATEMENT	•		<u> </u>					
<u>c</u>	<del></del>			<u> </u>					
<u>d</u>			<u> </u>	-	<del>-</del>	<del>-</del> -			<del></del>
8	(f) Depreciation allowed	(n) Cos	st or other basis	<u> </u>			(h) G:	ain or (loss)	
(e) Gross sales price	(or allowable)		expense of sale	İ				(f) minus (	
a								-	
b									
С									
d	<del></del>		21 04	_					
e 20,846.		15	31,84	0.					<10,994.
Complete only for assets showing of	<del></del>			$\dashv$				ol (h) gain not less thar	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any					(from col (	
<u>a</u>		ļ							
<u>b</u>									
<u>c</u>	<del></del>								
d e	· · · · · · · · · · · · · · · · ·	-				_			<10,994.
		Dort Live	<del> </del>	7					
2 Capital gain net income or (net capit	If gain, also enter al loss) { If (loss), enter -0			<u>}</u>	2				<10,994.
3 Net short-term capital gain or (loss)	as defined in sections 1222(5) ar	nd (6) <sup>.</sup>							
If gain, also enter in Part I, line 8, co		(-)		}				/-	
If (loss), enter -0- in Part I, line 8	1040()	5 .	· - · · · · · · · · · · · · · · · · · ·	لإ	_3_			N/A	
Part V Qualification Und	<u></u>					ient inc	ome		<del></del>
(For optional use by domestic private fo	undations subject to the section (	4940(a) tax on	net investment ir	icome	<del>)</del>				
If section 4940(d)(2) applies, leave this	part blank								
Was the foundation liable for the section	a 4042 tay on the distributable am	nount of any ve	aar in the hace ne	rınd?					Yes X No
If "Yes," the foundation does not qualify			•	1100					103 [25] 140
1 Enter the appropriate amount in each				es				<del></del> -	
(a)	(b)			(c)			ĺ	Dietrib	(d) ution ratio
Base period years  Calendar year (or tax year beginning			Net value of no	ncha	_				ided by col (c))
2008		6,890.				8,376		-	.085141
2007		5,800.				5,813			.073212
2006		4,229.				4,525			.118465
2005		9,338.				$\frac{2,728}{9,694}$			.278938
2004	4	4,723.		-	25	8,684	•		.172887
2. Total of line 1. solumn (d)									.728643
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the 5-y</li></ul>	ear hase period - divide the total	on line 2 by 5	or by the number	nf va	216		2		. 720043
the foundation has been in existence		on mie z by J,	or by the number	UI ye	ais		3		.145729
the foundation has been in existence	, in 1000 than o youro								
4 Enter the net value of noncharitable-	use assets for 2009 from Part X,	line 5					4		120,161.
5 Multiply line 4 by line 3							5		17,511.
6 Enter 1% of net investment income	(1% of Part I, line 27b)						6		15.
7 Add lines 5 and 6	·						7		17,526.
8 Enter qualifying distributions from P							8		14,160.
If line 8 is equal to or greater than lin See the Part VI instructions	ne 7, check the box in Part VI, line	1b, and comp	olete that part usin	ıg a 1'	% tax r	ate			

Form	996-PF (2009) THE ANN WASHINGTON HILLYER FOU				6206			Page 4
Pa	t VI Excise Tax Based on Investment Income (Section 4940	0(a), 4940(b),	, 4940(e), or 4	948	- see ir	stru	ctior	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and er	nter "N/A" on line 1	)					
	Date of ruling or determination letter (attach copy of letter if nec	essary-see instru	ctions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter	1%	1				<u> 30.</u>
	of Part I, line 27b							
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	of Part I, line 12,	col (b) 丿					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers enter -0-)		2				<u>0.</u>
3	Add lines 1 and 2			3				<u>30.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only $$ Of	thers enter -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			5	ļ			<u>30.</u>
	Credits/Payments:	1 1						
	2009 estimated tax payments and 2008 overpayment credited to 2009	6a						
	Exempt foreign organizations - tax withheld at source	6b			-			
	Tax paid with application for extension of time to file (Form 8868)	6c						
	Backup withholding erroneously withheld	_6d		_				^
	Total credits and payments. Add lines 6a through 6d			7_	-			<u>0.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	ched	_	8	-			20
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9				30.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		ln a a a b	10				
	Enter the amount of line 10 to be Credited to 2010 estimated tax   **YII-A Statements Regarding Activities		Refunded -	11	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it and	troposto or interione		1		Yes	No
Ia	any political campaign?	iation of the it pan	iicipate of intervene	113		1a	.03	X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses /see instructio	ns for definition\2		•	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	•	· ·	d or		'5		···-
	distributed by the foundation in connection with the activities.	recopies or any r	naterials pablishe	0 01				
C	Did the foundation file Form 1120-POL for this year?					10		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear						
	(1) On the foundation ► \$ 0 • (2) On foundation managers		0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendi							
	managers ▶ \$O .	·						
2	Has the foundation engaged in any activities that have not previously been reported to the IF	357				2		X
	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing ii	nstrument, articles	s of incorporation, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es .			ļ	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ι <sub>δ</sub>				4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	1				5		X
	If "Yes," attach the statement required by General Instruction T.							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther						
	By language in the governing instrument, or		_					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory</li> </ul>	y directions that c	onflict with the state	law				.,
_	remain in the governing instrument?				-	6		X
	Did the foundation have at least \$5,000 in assets at any time during the year?				ŀ	7	Х	ļ
	If "Yes," complete Part II, col. (c), and Part XV.	NO	ar.					
ga	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) ► <u>NOI</u>	NE:					
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Al	Harney General (e	r decignate)					
U	of each state as required by General Instruction G? If "No," attach explanation	morney delleral (0	i uesignate)			8b	X	
۵	is the foundation claiming status as a private operating foundation within the meaning of se	ction 4942/i\/3\ a	r 4949(1\/5\ for cala	ndar		On	42	
•	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," c			iiual		9	:	х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	*			ŀ	10		X

X

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

orm 990-PF (2009) THE ANN WASHINGTON HILLY			<u>63-620635</u>	7 Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (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	on 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955),	or to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose	ş?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f			
the prevention of cruelty to children or animals?		Ye	s X No	
b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	nder the exceptions described (	ın Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instr	ructions)?		N/A 5	b
Organizations relying on a current notice regarding disaster assistance check	here			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	ined		
expenditure responsibility for the grant?	N	J/A 🔲 Ye	s No	
If "Yes," attach the statement required by Regulations section 53.494	45-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		6	b X
If "Yes" to 6b, file Form 8870			ļ	
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	es 🗶 No 📙	
b If yes, did the foundation receive any proceeds or have any net income attribu	table to the transaction?	<u> </u>	N/A 7	b
Part VIII Information About Officers, Directors, Trus	tees, Foundation Ma	nagers, Highly	/	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	Τ	(a) Componentian	(d) Contributions to	(.) [
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
ANN WASHINGTON HILLYER	DIRECTOR			
160 LEE ROAD 413	- 000	0.	ا م ا	0
OPELIKA, AL 368048286	0.00 DIRECTOR	0.	0.	<u> </u>
RONALD W. HILLYER	DIRECTOR			
160 LEE ROAD 413	- 000	0.	0.	0.
OPELIKA, AL 368048286	0.00	1 0.	0.	<u> </u>
	4			
	-			
	╡			
	1			
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."	<u> </u>	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(C) Compensation	and deferred compensation	account, other allowances
NONE				
	_			
<u>'</u>	4			
	4			
Total number of other employees and sum 650,000	<u> </u>	-l		0
Total number of other employees paid over \$50,000			Form C	9 <b>0-PF</b> (2009)
			កប់ពោ ទ	7 <b>3U-F</b> (2009)

Ō.

All other program-related investments. See instructions

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations in	nust complete this part. Foreign for	ındatıons, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc., purposes		
а	Average monthly fair market value of securities		1a	121,991.
b	Average of monthly cash balances		1b	
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	121,991.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	1e 0		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	121,991.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	, see instructions)	4	1,830.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and or	n Part V, line 4	5	120,161.
6	Minimum investment return. Enter 5% of line 5		6	6,008.
P	Distributable Amount (see instructions) (Section 4942(j)(3) are foreign organizations check here and do not complete this part		ind certain	,
1	Minimum investment return from Part X, line 6		1 _	6,008.
2a	Tax on investment income for 2009 from Part VI, line 5	2a 30		
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	1 1	
C	Add lines 2a and 2b	-	2c	30.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	5,978.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	5,978.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part	XIII, line 1	7	5,978.
_	art XII Qualifying Distributions (see instructions)		<u> </u>	
1_	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes contributions giffs at a total from Part Legiums (d), line 26.	poses	1a	14,160.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26.  Program-related investments - total from Part IX-B		1b	14,100.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charital	ala ata auraacaa	2	<u> </u>
3		ole, etc., purposes	-	
	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)		3a	
	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, at	nd Bart VIII. line 4	4	14,160.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inve		-	11,100.
5	income Enter 1% of Part I, line 27b	SHIIGH	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	14,160.
U	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years w	then calculating whether the foundation	·	<b>_</b>
	4940(e) reduction of tax in those years	men calculating whether the loundation	quannes ivi tin	o 30000011

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

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				5,978.
2 Undistributed income, if any, as of the end of 2009	'HHH-1- million milendi - 10-10-1	-P' 111'11 111 11'1'		
a Enter amount for 2008 only			0.	
b Total for prior years			`	
3 Excess distributions carryover, if any, to 2009.		0.		**************************************
40.016				
b From 2005 48,816. c From 2006 14,645.				
d From 2007 5, 149.				
e From 2008 7,012.				
f Total of lines 3a through e	107,445.			
4 Qualifying distributions for 2009 from	107/1131			
Part XII, line 4. >\$ 14,160.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior	Hereland to the transfer of th		···· / ··· · · · · · · · · · · · · · ·	<del>1 ' '</del>
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			***************************************	+11
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount		**************************************	Henrica de la composición del composición de la	5,978.
e Remaining amount distributed out of corpus	8,182.	······		-,
5 Excess distributions carryover applied to 2009	0.	<del></del>		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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	115,627.			
b Prior years' undistributed income Subtract		_		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously		0.		
assessed d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line				······································
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract				<u></u>
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of	, ,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·		
corpus to satisfy requirements imposed by		•	`	
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	31,823.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	83,804.			
10 Analysis of line 9				
a Excess from 2005 48,816.				
b Excess from 2006 14,645.				
c Excess from 2007 5, 149.				
d Excess from 2008 7,012.				
e Excess from 2009 8, 182.		· · · · · · · · · · · · · · · · · · ·		
				Form <b>990-PF</b> (2009)

	WASHINGTON			63-62	0635 / Page 10
Part XIV Private Operating F	oundations (see ins	structions and Part VI	I·A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo			▶	· · · · · · · · · · · · · · · · · · ·	
<b>b</b> Check box to indicate whether the found	dation is a private operatin	g foundation described		4942(j)(3) or49	)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	T- 411 0000	
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed .					
<b>b</b> 85% of line 2a .					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				<del> </del>	
e Qualifying distributions made directly	1				
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the				<u> </u>	
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets	-				-
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				!	
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter				1	
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization				<del></del>	
(4) Gross investment income  Part XV Supplementary Info	wastion (Comple	to this part only	if the foundation	n had \$5 000 or m	oro in accete
Part XV Supplementary Info	the year-see the i	nstructions.)	ii tile foundation	11 Hau \$5,000 of 111	ore in assets
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	no have contributed more	than 2% of the total con	tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed i	more than \$5,000). (See s	ection 507(d)(2) )			
NONE					
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large port	tion of the ownership of a p	partnership or
NONE					
2 Information Regarding Contribut					<del></del>
Check here ► X if the foundation the foundation makes gifts, grants, etc					
a The name, address, and telephone num	<del>-i</del>				
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
b The form in which applications should	be submitted and informa	tion and materials they s	should include		
c Any submission deadlines:					
d Any restrictions or limitations on award	le euch se hu geographic	al areas charitable fields	kinde of inetitutions of	r other factors	
a Any restrictions of minitations on award	is, such as by geographic	वा बाच्वर, जावास्त्रमण्ड सहर्ष्य	), พมนอ ซา เมอนเนนเซมอ, Ul	י טעווטי ומטנטוס	

3 Grants and Contributions Paid During the Y	If recipient is an individual			
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year THE WAY MINISTRIES	NONE		ADDITIONAL FUNDING	3,000
AUBURN UNIVERSITY TIGERS UNLIMITED FUND	NONE	TAX EXEMPT ORGANIZATI	ADDITIONAL FUNDING	6,160
COMMUNITY BIBLE STUDY	NONE	TAX EXEMPT ORGANIZATI	ADDITIONAL FUNDING	5,000
				1. 16
b Approved for future payment			<b>▶</b> 3a	14,160
NONE				

RTS My 🚊

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

s otherwise indicated	i i			ded by section 512, 513, or 514	(e)
<b>e</b> .	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
<del></del>					
	i				
om government agencies					
ssessments					
temporary cash					
rom securities			14	2,509.	
ss) from real estate					
rty <u>.</u>					
operty				_	
ss) from personal					
	-				
е .		ļ			
of assets other		1		.10 004	
			18	<10,994.	<u> </u>
				<del></del>	
m sales of inventory			<u> </u>		
<del></del>					
		-			_
(h) (d) and (a)			0	<8 485	> 0
	<u></u>	<u> </u>	0 • 1		<8,485
	tions \			13_	10/103
		omnlishment	of Evemn	t Purnosas	
	<del></del> -				
				outed importantly to the accor	nplishment of
				ZATIONS	
ENTS NEEDED	TO FUND CH	HARITABLE	ORGANI	ZATIONS	
	<del></del>				
					·
W					
	rom government agencies issessments temporary cash rom securities iss) from real estate rty roperty iss) from personal estate soft assets other improved in special events from sales of inventory in structions to verify calculationship of Activity for which is exempt purposes (of ENTS NEEDED	rom securities rom securities rss) from real estate rity roperty rss) from personal e s of assets other rm special events rm sales of inventory  (b), (d), and (e) rms (b), (d), and (e) restructions to verify calculations )  lationship of Activities to the According security purposes (other than by providing filents NEEDED TO FUND CH	rom government agencies issessments temporary cash  rom securities iss) from real estate rity roperty iss) from personal  e is of assets other  m special events iom sales of inventory  (b), (d), and (e) instructions to verify calculations )  lationship of Activities to the Accomplishment  bow how each activity for which income is reported in column (e) of Pation's exempt purposes (other than by providing funds for such purpose)  ENTS NEEDED TO FUND CHARITABLE	rom government agencies assessments temporary cash  rom securities ass) from real estate rty operty ass) from personal  e s of assets other  I 8 m special events am special events am sales of inventory  (b), (d), and (e) mins (b), (d), and (e) astructions to verify calculations )  Lationship of Activities to the Accomplishment of Exemp and the Activity for which income is reported in column (e) of Part XVI-A contribution's exempt purposes (other than by providing funds for such purposes)  ENTS NEEDED TO FUND CHARITABLE ORGANI	rom government agencies ssessments temporary cash rom securities ss) from real estate rby operty ss) from personal e s of assets other  m special events rom sales of inventory  (b), (d), and (e) mns (b), (d), and (e) structions to verify calculations )  lationship of Activities to the Accomplishment of Exempt Purposes on how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the contr

	art X	<del></del>	egarding Tra		and Transactions			With Noncharita		aye 13
1	Did ti	ne organization directly or indi		ov of the followin	n with any other organiz	ation d	escribed in section 501	(c) of	Yes	No
•		ode (other than section 501(c		-				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1:00	1
9		sfers from the reporting found			· ·	gumzut				
٠	(1)		ation to a nonchan	itabic exempt on	guinzation of			1a	(1)	X
		Other assets		•	•			1a		X
		r transactions	••	•					15/	<del></del>
١			hla avamat araani	zation.				1,6	(4)	X
		Sales of assets to a noncharita	• •				••• •	1 <u>1b</u>	· · · · · · · · · · · · · · · · · · ·	X
	٠.	Purchases of assets from a no	·	it organization				16		X
		Rental of facilities, equipment,			•			1 <u>b</u>		X
		Reimbursement arrangements	ı					16		X
		Loans or loan guarantees						. <u>1b</u>		
		Performance of services or me	·	•				<u>  1b</u>		X
C		ing of facilities, equipment, ma						<u> </u>		<u> </u>
	or se colur	answer to any of the above is rvices given by the reporting from (d) the value of the goods,	oundation If the fo other assets, or se	oundation received	ed less than fair market v		any transaction or sha	ring arrangement, show	In	
(4)	Line no	(b) Amount involved	(c) Ivallie		exempt organization		(u) Description of trans	fers, transactions, and sharin	g arrangem	ents
			<del>                                     </del>	N/A			<del></del>	<del>.</del>		
			<del> </del>		· · · · · · · · · · · · · · · · · · ·		<del> </del>	<del></del>		<del></del>
			<del> </del>							
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			<u> </u>							
			ļ <u>.</u>							
_										
	•••									
	ın se	e foundation directly or indirection 501(c) of the Code (othe	r than section 501	-		janizatio	ons described		es 🔼	∑ No
	, ii t <u>e</u>	s," complete the following sch (a) Name of org			(b) Type of organization	n T	(r) Dac	cription of relationship		
		N/A	Jameulon		(B) Typo of Organizatio	***	(6) 063	onphon or relationally		
		IV/ A				_				
				<del></del>						
						+				
		<del> · · - · · · · · · · · · · · · · · ·</del>				-			-	
9	and coi	penalties of penury, I declare that I I mplete Declaration of preparer (oth  White State of the			all information of which prep	arer has			correct,	
Ë	F 3	i -	<b>/</b>	7 47	Date	Date	· · · · · · · · · · · · · · · · · · ·	Preparer's id	entifyina nu	mber
Sign Here	Paid Preparer's Use Only	Preparer's signature	He,	11		01/	18/12 self- employed	4011		446
	Paid spare		ELWRIGHT		EY & BOLES,	, LI	C EIN I	<u>63-121</u>	295	0
	Prep. Use		A YARBRO							
		address, and ZIP code OPEI	JIKA, AL	36801			Phon	eno (334)7 <u>4</u>	19-34	149

Phone no

•		describe the kind(s) of property solutes the describe the kind(s) of property solutes (s) and stock, 20			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )				
1a	ASTON FDS SMAL	L/MIDCAP		P	VARIOUS	01/26/09					
_	FAIRHOLME FUND				09/05/08						
	PIMCO COMMODIT				09/05/08						
		SEIX FLT HIGH IN		P	01/26/09						
6 UNIFIED SER TR- AUER GROWTH FD						09/05/08					
f ARTISIAN FDS INC INTL SMALL CAP FD						VARIOUS	01/26/09				
Q ARTISIAN FDS INC INTL VALUE FUND INV							01/26/09				
h PIMCO COMMODITY REALRTN STRATEGY USA							01/26/09				
	SCHWAB HEDGED			P P	12/22/06						
ī	CAPITAL GAINS	DIVIDENDS									
k											
ı											
m											
ก											
0											
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			Gain or (loss) lus (f) minus (g)					
a	1,250.		1,875.	-	.,,,		<625.>				
b b	1,850.		2,680.				<830.>				
c c	646.		1,600.				<954.>				
<del>ŭ</del> d	6,359.	· · · · · · · · · · · · · · · · · · ·	5,500.				859.				
e e	3,300.		5,995.				<2,695.>				
f	1,250.		3,076.				<1,826.>				
<u>·</u>	3,350.		5,793.				<2,443.>				
h	1,654.		3,818.		<del>.</del>		<2,164.>				
ı	1,150.		1,503.	-			<353.>				
ı	37.					<del></del>	37.				
k											
ı											
m							······				
n							•				
0											
	Complete only for assets showing	ig gain in column (h) and owned by t		(I) Losses (from col (h))							
	(i) F.M V as of 12/31/69	i) F.M V as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) over col (j), if any				Gains (excess of col (h) gain over col (k), but not less than "-0-")					
a							<625.>				
b						_	<830.>				
С							<954.>				
d	,					-	859.				
е					· · · · · · · · · · · · · · · · · · ·		<2,695.>				
f							<1,826.>				
g							<2,443.>				
h							<2,164.>				
							<353.>				
L							37.				
k											
1											
m				_							
ņ											
0_											
2	Capital gain net income or (net ca	pital loss) { If gain, also enter "-0	in Part I, line 7	2			<10,994.>				
	Net short-term capital gain or (los If gain, also enter in Part I, line 8,	s) as defined in sections 1222(5) an	, I	,			·				
	If (loss), enter "-0-" in Part I, line 8		J	3		N/A					

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUR	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A) AMOUNT	
SUNTRUST BANK	-	2,546.		37.		2,509. 2,509.	
TOTAL TO FM 990-PF, PART I, L	N 4						
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS					
ACCOUNTING FEES		537.		0.		0.	
	537.		0.				0.
TO FORM 990-PF, PG 1, LN 16B		337.			<del></del>	<del></del>	
<u> </u>	THER		SIONAL FI			STATEMENT	3
=	() EXPE	PROFES	(B) NET INVI	EES	(C) ADJUSTED NET INCOM	(D) CHARITA	BLE
FORM 990-PF O	() EXPE	PROFES A) NSES	(B) NET INVI	EES	ADJUSTED	(D) CHARITA	BLE ES
FORM 990-PF O	() EXPE	PROFES A) NSES BOOKS	(B) NET INVI	EES EST- COME	ADJUSTED	(D) CHARITA	BLE
FORM 990-PF O  DESCRIPTION  MISCELLANEOUS EXPENSES	EXPE PER	PROFES A) NSES BOOKS 993.	(B) NET INVI	EES EST- COME 993.	ADJUSTED	(D) CHARITA	BLE ES 0.
FORM 990-PF O  DESCRIPTION  MISCELLANEOUS EXPENSES  TO FORM 990-PF, PG 1, LN 16C	EXPE PER	PROFES A) NSES BOOKS 993.	(B) NET INVI MENT INC	EES  EST-  COME  993.	ADJUSTED	(D) CHARITA E PURPOS	BLE ES 0.
FORM 990-PF O  DESCRIPTION  MISCELLANEOUS EXPENSES  TO FORM 990-PF, PG 1, LN 16C  FORM 990-PF	EXPE PER	PROFES A) NSES BOOKS 993.	(B) NET INVI MENT INC	EES  EST-  COME  993.	ADJUSTED NET INCOM	(D) CHARITA E PURPOS STATEMENT FAIR MARKE	BLE ES 0. 0.

## Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No. 1545-1709

 $\triangleright$   $\boxed{X}$ 

olete only Pa	rt I and check this box		•	(X)					
Extension, o	omplete only Part II (on page 2 of this	form).							
d an automa	tic 3-month extension on a previously fi	led For	m 8868.						
If you need a	a 3-month automatic extension of time t	o file (6	months for a corpo	oration					
month extens	ion of time. You can electronically file F	orm 88	68 to request an ex	dension					
exception of	Form 8870, Information Return for Trans	sfers A	ssociated With Cer	taın					
	bmit original (no copies needed).								
tomatic 6-mo	onth extension - check this box and con	nplete							
			<b>&gt;</b>						
EMICs, and to	rusts must use Form 7004 to request ar	exten:	sion of time						
or Name of exempt organization Employer is									
THE ANN WASHINGTON HILLYER FOUNDATION									
Number, street, and room or suite no. If a P.O. box, see instructions.  160 LEE ROAD 413									
City, town or post office, state, and ZIP code. For a foreign address, see instructions.  OPELIKA, AL 36804-8286									
(file a separa	te application for each return)			0 4					
Return	Application	*	· <del></del>	Return					
	1 ''			Code					
			07						
			08						
		09							
<del></del>		10							
		11							
	T OILL GOVE			12					
	ELIKA. AL 36804-8286	5							
- ness in the Ur									
		is is fo	r the whole group, o	check this					
	· · · · · · · · · · · · · · · · · · ·								
			The extension						
AUGUST 15, 2010 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:									
► X calendar year 2009 or									
. ar	nd endina		•						
			<del></del>						
2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return									
,									
20, or 6069. e	enter the tentative tax, less any		-						
nonrefundable credits. See instructions.									
If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and									
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,									
by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c \$									
		•	EO for payment ins	0. tructions.					
ons.									
	Extension, of an automatify ou need at an automatify ou need at anonth extens exception of paper formatifits.  The Only substitution of the EMICs, and attact the EMICs, and	and an automatic 3-month extension on a previously fif you need a 3-month automatic extension of time to month extension of time. You can electronically file Fexception of Form 8870, Information Return for Transpaper format (see instructions). For more details on the fits.  The Conly submit original (no copies needed). It is is interested for the extension of t	Extension, complete only Part II (on page 2 of this form).  Id an automatic 3-month extension on a previously filed For  If you need a 3-month automatic extension of time to file (6 month extension of time. You can electronically file Form 88 exception of Form 8870, Information Return for Transfers A paper format (see instructions). For more details on the elec-  Interpretation of Form 8870, Information Return for Transfers A paper format (see instructions). For more details on the elec-  Interpretation of time.  Interpretation of the electric of the e	Extension, complete only Part II (on page 2 of this form).  did an automatic 3-month extension on a previously filed Form 8868. If you need a 3-month extension of time to file (6 months for a corporation of time. You can electronically file Form 8868 to request an exexception of Form 8870, Information Return for Transfers Associated With Ceraper format (see instructions). For more details on the electronic filing of this for this.  Me. Only submit original (no copies needed).  Itomatic 6-month extension - check this box and complete  EMICs, and trusts must use Form 7004 to request an extension of time  Employer identification  RE FOUNDATION 63-6206357  K, see instructions.  a foreign address, see instructions.  (file a separate application for each return)  Return Application  Code Is For  01 Form 990-T (corporation)  02 Form 1041-A  03 Form 4720  04 Form 5227  05 Form 6669  06 Form 8870  LIYER  3 - OPELIKA, AL 36804-8286  FAX No. Fax N					