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Form **990-PF**

Department of the Treasury

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

OMB No 1545-0052

IIICII	ilai iveve	Hote The location may be able	e to use a copy or this retur	II IO Salisiy Siz	ite reporting	requirements	<u> </u>	
For	calend	ar year 2009, or tax year beginning,	and ending					
G	Check a	all that apply Initial return Initial re	turn of a former public of	charity		Final return		
			lress change		change			
Hea	the IR				1	loyer identification num	her	
		ALLEN B. PUCKETT, JR. FAMI			-0732703			
	label.	TOTATO A TOTAL			-		0 -645	
	nerwise	· · · · · · · · · · · · · · · · · · ·				phone number (see page 1 2-328-4931	of the insti	ructions)
	print	Number and street (or P O box number if mail is not delivered	to street address)	Room/suite				
	r type. Specif	P O BOX 9630			1	emption application is pend	-	ere –
	•	ony or town, state, and 211 code	2000		D 1 F	oreign organizations, checl	< here	▶ _
	ruction	COHOLDOD	39705		2. F	oreign organizations meetii	ng the	
H (Check t	ype of organization $ \mathbf{X} $ Section 501(c)(3) exempt private	foundation		8:	5% test, check here and at	tach comput	ation 🕨 📘
	Section	4947(a)(1) nonexempt charitable trust Other taxable	le private foundation		E If pro	vate foundation status was	terminated i	under _ r
I F	aır marl	ket value of all assets at end	X Cash Acc	rual	secti	on 507(b)(1)(A), check her	е	▶ ∟
of	f year (f	from Part II, col (c), Uther (specify)			F If the	foundation is in a 60-moni	th terminatio	n _
lır	ne 16) I	\$ 155, 463 (Part I, column (d) must I	be on cash basis)		unde	r section 507(b)(1)(B), che	ck here	▶ _
P	art I	Analysis of Revenue and Expenses (The	(a) Revenue and				(d) Disb	ursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net in		(c) Adjusted net	1	naritable
		the amounts in column (a) (see page 11 of the instructions))	books	inco	ome	income		rposes pasis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	32,649				(000:1)	
	2	Check ▶ ☐ If the foundation is not required to attach Sch B						
	3	Interest on savings and temporary cash investments	122		122	122		
	4	Dividends and interest from securities	2,083		2,083			
$\overline{}$	1		2,083		2,003	2,003		
2010 Je	5a	Gross rents					 	
ne_	b	Net rental income or (loss)	10.006				 	
evenu	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	-12,806				ļ	
c×§.	b	Gross sales price for all assets on line 6a						
SEP Res	7	Capital gain net income (from Part IV, line 2)			0		ļ	
S	8	Net short-term capital gain				0		
\bigcirc	9	Income modifications					<u> </u>	
SCANNED	10a	Gross sales less returns & allowances						
Z,	b	Less Cost of goods sold						
8	C	Gross profit or (loss) (attach schedule)						
Q	11	Other income (attach schedule)						
က	12	Total. Add lines 1 through 11	22,048		2,205	2,205		
	13	Compensation of officers, directors, trustees, etc			•			
enses	14	Other employee salaries and wages						
SU	15	Pension plans, employee benefits						
þ	16a	Legal fees (attach schedule)						
ŭ	Ь	Accounting fees (attach schedule) STMT 2	3,484		3,484	3,484	<u> </u>	
Operating and Administrative Exp	C	Other professional fees (attach schedule)	3,404		J, 204		<u> </u>	
aţį	1	•	-			RECEIV		
ij	17	Interest Tara (sharp arbeids) (see any 14 of the automore) STIMT 3	50		50	F0	ļ	
Ę.	18	Taxes (attach schedule) (see page 14 of the instructions) STMT 3	30		50	0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	f1#1#	
Ē	19	Depreciation (attach schedule) and depletion				SEP 13 Z	UIU	<u> </u>
βq	20	Occupancy					<u> </u>	<u> </u>
þ	21	Travel, conferences, and meetings	<u></u>			OGDEN,	HIT	
an	22	Printing and publications						
ğ	23	Other expenses (att sch.) STMT 4	2,170		2,170	2,170		
녍	24	Total operating and administrative expenses.						
Fa		Add lines 13 through 23	5,704		5,704	5,704		0
þé	25	Contributions, gifts, grants paid	49,214					49,214
J	26	Total expenses and disbursements. Add lines 24 and 25	54,918		5,704	5,704		49,214
	27	Subtract line 26 from line 12	•			, , , , , , , , , , , , , , , , , , ,		
	a	Excess of revenue over expenses and disbursements	-32,870				ł	
	Ь	Net investment income (if negative, enter -0-)	= = = = = = = = = = = = = = = = = = = =		0			
	c	Adjusted net income (if negative, enter -0-)				0	 	
	1	riajastea net moome (n negative, GNCF "V")	t	Г		, 0	F	

	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	End of year				
_	ran i	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value				
	11	Cash—non-interest-bearing	13,391	2,524	2,524				
	2	Savings and temporary cash investments	10,379	1,740	1,740				
	3	Accounts receivable ▶							
i		Less. allowance for doubtful accounts ▶							
i	4	Pledges receivable ▶			, ,,				
		Less: allowance for doubtful accounts]						
	5	Grants receivable							
	6	Receivables due from officers, directors, trustees, and other		_					
		disqualified persons (attach schedule) (see page 16 of the							
		instructions)							
	7	Other notes and loans receivable (att. schedule)							
		Less allowance for doubtful accounts ▶	Ì						
ß	8	Inventories for sale or use							
se	9	Prepaid expenses and deferred charges							
Assets	10a	Investments—U S and state government obligations (attach schedule)							
	b	Investments—corporate stock (attach schedule) SEE STMT 5	1,557	1,557	1,557				
	C	Investments—corporate bonds (attach schedule)							
	11	Investments—land, buildings, and equipment basis							
		Less accumulated depreciation (attach sch.)	ĺ						
	12	Investments—mortgage loans							
	13	Investments—other (attach schedule) SEE STATEMENT 6	174,840	161,476	149,642				
	14	Land, buildings, and equipment basis							
		Less accumulated depreciation (attach sch.)	Ì	ľ					
	15	Other assets (describe ►)							
ı	16	Total assets (to be completed by all filers—see the							
		instructions. Also, see page 1, item I)	200,167	167,297	155,463				
┨	17	Accounts payable and accrued expenses			,				
	18	Grants payable							
<u> e</u>	19	Deferred revenue							
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons							
용	21	Mortgages and other notes payable (attach schedule)							
	22	Other liabilities (describe ▶)							
	23	Total liabilities (add lines 17 through 22)	0	0					
٦		Foundations that follow SFAS 117, check here ▶							
Ses		and complete lines 24 through 26 and lines 30 and 31.							
ည	24	Unrestricted							
ā	25	Temporarily restricted							
Ba	26	Permanently restricted							
힏		Foundations that do not follow SFAS 117, check here ▶ X							
⋽		and complete lines 27 through 31.							
Net Assets or Fund Baland	27	Capital stock, trust principal, or current funds							
S	28	Paid-in or capital surplus, or land, bldg, and equipment fund							
set	29	Retained earnings, accumulated income, endowment, or other funds	200,167	167,297					
AS	30	Total net assets or fund balances (see page 17 of the							
늉		instructions)	200,167	167,297					
Ź	31	Total liabilities and net assets/fund balances (see page 17							
		of the instructions)	200,167	167,297					
	Part I	Analysis of Changes in Net Assets or Fund Balances							
1	Total	net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	gree with						
	end-o	f-year figure reported on prior year's return)		1	200,167				
2	Enter	amount from Part I, line 27a		2	-32,870				
3	Other	increases not included in line 2 (itemize) ▶		3					
4		nes 1, 2, and 3		4	167,297				
5		ases not included in line 2 (itemize)		5					
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), I	ine 30		167,297				

Part IV · Capital Gains a	<u>nd Losses for Tax on Investmer</u>	nt Income				
	be the kind(s) of property sold (e.g., real estate, whouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date ad (mo , day		(d) Date sold (mo , day, yr)
1a N/A			-			
_ b						
c						
d						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	or other basis ense of sale		(h) Gain (e) plus (f)	or (loss) minus (g)
a						
b						
C	-					
d e						
	gain in column (h) and owned by the found	dation on 12/31/69				
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ess of col (i)	col (k), but not	(h) gain minus less than -0-) or om col (h))
a						
b						
С			·			<u></u>
d					-	
e						
2 Capital gain net income or (net ca	2					
3 Net short-term capital gain or (loss	If (loss), enter -0- in P s) as defined in sections 1222(5) and (6)					
If gain, also enter in Part I, line 8,	column (c) (see pages 13 and 17 of the ins	structions)				
If (loss), enter -0- in Part I, line 8			<u> </u>	3		
Part V Qualification Ur	der Section 4940(e) for Reduce	d Tax on Net	Investment Incon	ne		· ·
(For optional use by domestic private t	foundations subject to the section 4940(a)	tax on net investm	ent income)			
If section 4940(d)(2) applies, leave this	s part blank					
Mas the foundation liable for the costs	on 4042 tax on the distributable amount of	any year in the hai	no normada 🔲 Vo	s X No		
	on 4942 tax on the distributable amount of y under section 4940(e) Do not complete		se period / Te	5 21 140		
<u></u>	ach column for each year, see page 18 of	·	fore making any entries			
(a)		ine manacaona ber		<u> </u>		(d)
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distributions	Net value	(c) e of nonchantable-use assi	ets	Distr	bution ratio
2008	144,	029	129,5	535	(0) (0)	1.111893
2007	174,		273,			0.637306
2006	163,		295,3			0.553533
2005	100,		245,5		•	0.409959
2004	53,	109	230,4	415	_	0.230493
2 Total of line 1, column (d)				2		2.943184
3 Average distribution ratio for the 5	-year base period—divide the total on line	2 by 5, or by the				
number of years the foundation ha	is been in existence if less than 5 years			3		0.588637
4 Enter the net value of noncharitab	le-use assets for 2009 from Part X, line 5			4		151,417
5 Multiply line 4 by line 3				5		89,130
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6		
						00 100
7 Add lines 5 and 6				7	<u> </u>	89,130
O Established	Dad VIII has 4					40 014
8 Enter qualifying distributions from		d complete 45-21	and common at 407 Acres at 4	<u>_8_</u>	L	49,214
Part VI instructions on page 18	line 7, check the box in Part VI, line 1b, an	a complete that pa	iit usiiiy a 1% tax rate	oee ine		

FOITI	990-PF (2009) ALLEN B. FOCKEII, DR. FAMILI 64-0/32/03			P	age 4
Pa	art VI • Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	tructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	I			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			
	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			0
3	Add lines 1 and 2	3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0
6	Credits/Payments	1			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 999				
b	Exempt foreign organizations—tax withheld at source 6b	-			
С	Tax paid with application for extension of time to file (Form 8868) 6c				
ď	Backup withholding erroneously withheld 6d 6d	1			
7	Total credits and payments Add lines 6a through 6d	7			999
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			999
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 999 Refunded ▶	11			
Pa	art 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		X
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		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers 🕨 💲				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		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 instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		_X_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		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 either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	Х	
0-				1	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		J	- 1	
oa	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ► MS				
оа b					
	instructions) ► MS		8b	x	
	Instructions) ► MS If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		8b	х	
b	Instructions) ► MS If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	x	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		8b 9	x	x
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			х	x

orm	990-PF (2009) ALLEN B. PUCKETT, JR. FAMILY 64-07327	03			P	age 5
Pa	rt 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
2	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	X	L
	Website address ► N/A					
4		elephone no 🕨	•			
	P O BOX 9630					
	Located at ► COLUMBUS, MS	ZIP+4	39705	5		
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	,				▶ _
	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	15			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Require	<u>d</u>				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for					
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					
	foundation agreed to make a grant to or to employ the official for a period after				+	
	termination of government service, if terminating within 90 days)	Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	ons	/-		1	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ ∐		1	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		/-		1	
	were not corrected before the first day of the tax year beginning in 2009?		N/A	1c		
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	П.,	₩		1	
	6e, Part XIII) for tax year(s) beginning before 2009?	∐ Yes	X No		1	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		N/A	2.		
С	all years listed, answer "No" and attach statement—see page 20 of the instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		и/ д	2b		
·	► 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				1	
	at any time during the year?	Yes	X No		1	
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or		٠٠		1	
-	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the				1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of				I	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the				1	
	foundation had excess business holdings in 2009)		N/A	3ь	1	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	,?	.,	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20	109?		4b	1	X
					<u> </u>	

Forn	n 990-PF (2009)	ALLEN	В.	PUCKETI	', JR	. FAMILY	Z .	64-0	732703				Р	age 6
P	art VII-B	Statement	s Re	garding Act	tivities	for Which F	orm 4720 May	Be R	equired (cor	ntinue	ed)			
5a	During the year	ar did the found	dation	pay or incur any	y amount	to								
	(1) Carry on p	oropaganda, or	r other	wise attempt to	influence	legislation (sec	ction 4945(e))?			Yes	X No			ĺ
	(2) Influence	the outcome of	of any s	pecific public e	lection (se	ee section 4955), or to carry on,							
	directly or	indirectly, any	voter	registration driv	re?					Yes	X No			
	(3) Provide a	grant to an ind	dıvıdua	I for travel, stud	ly, or othe	r sımılar purpos	ses?			Yes	X No			Į.
	(4) Provide a	grant to an org	ganızal	ion other than	a charitab	le, etc , organiz	ation described in							ł
	section 50	9(a)(1), (2), or	r (3), o	r section 4940(d)(2)? (se	e page 22 of th	e instructions)			Yes	X No			
	(5) Provide fo	r any purpose	other	than religious, o	charitable,	scientific, litera	ary, or educational							l
	purposes,	or for the prev	vention	of cruelty to ch	uldren or a	anımals?				Yes	X No			ĺ
b	If any answer	is "Yes" to 5a((1)-(5),	did any of the t	transaction	ns fail to qualify	under the exception	ons desc	ribed in					
	Regulations se	ection 53 4945	or in a	a current notice	regarding	disaster assis	tance (see page 22	of the in	nstructions)?		N/A	5b		
	Organizations	relying on a cu	urrent	notice regarding	g disaster	assistance che	ck here)	• 🗌			
С	If the answer i	s "Yes" to ques	stion 5	a(4), does the t	foundation	ı claım exemptı	on from the tax				_		:	•
	because it ma	intained expen	nditure	responsibility fo	or the gran	nt?			N/A	Yes	No		-	ĺ
	If "Yes," attach	the statemen	nt requi	red by Regulati	ons section	on 53 4945-5(d))				_			ŧ
6a	Did the founda	ation, during the	e year	receive any fu	nds, direc	tly or indirectly,	to pay premiums							ĺ
	on a personal	benefit contrac	ct?							Yes	X No			
b	Did the founda	ation, during the	e year	, pay premiums	, directly o	or indirectly, on	a personal benefit	contract	?			6b		X
	If "Yes" to 6b,	file Form 8870)											
7a	At any time du	iring the tax ye	ear, wa	s the foundation	n a party t	o a prohibited to	ax shelter transacti	on?		Yes	X No			Ĺ
b	If yes, did the	foundation rece	eive ar	ny proceeds or	have any	net income attr	butable to the tran	saction?			N/A	7b		
Pa	art VIII Ir	nformation	Abo	ut Officers,	Directo	ors, Trustee	s, Foundation	Mana	gers, Highly	/ Paid	Employe	es,		
	а	nd Contrac	ctors											
1	List all officers,	, directors, tru	ustees	, foundation n	nanagers	and their com	pensation (see pa	ige 22 o	f the instruction	ns).				
							(b) Title, and	d average	(c) Compensation) Contributions to	1,,,		
			(a) Nar	ne and address			hours pe	r week	(if not paid, ente	, e	employee benefit ans and deferred		pense ad r allowar	
							devoted to	position	-0-)		compensation			
AI	LEN B PUCKE	TT, III			COLUMBU	ıs	TRUSTEE							
10	84 JOLLY RO	AD			MS 397	05	0 00			0		0		0
L	CY ANNE PUC	KETT WALKER	₹.		COLUMBI	JS	TRUSTEE							
14	118 JOLLY RO	AD			MS 397	05	1 00			0		0		0
M	ARY PUCKETT	PANNELL			COLUMBU	JS	TRUSTEE							
13	326 JOLLY RO	AD			MS 397	05	0.00			0		0		0
st	SAN PUCKETT	JONES			CALGARY	, AB	TRUSTEE							
#1	4-27 SILVER	SPRINGS DR	RNW		CA		0.00			0		0		0
2	Compensatio	n of five high	rest-pa	id employees	(other th	an those inclu	ded on line 1—se	e page 2	23 of the instru	ctions).			
	If none, enter	"NONE."					,					.,.		
							(b) Title, and	d average			Contributions to employee benefit	(a) E	50000 0	noount
	(a) Na	ame and address	s of eac	h employee paid i	more than \$	550,000	hours pe devoted to		(c) Compensation		ans and deferred		pense ad r allowai	
							devoted to	position			compensation	<u> </u>		
N	ONE													
												1		
										Щ_				
										\perp		<u> </u>		
												<u> </u>		
													ı.	
Tota	I number of other	er employees p	paid ov	er \$50,000								▶	1	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE" (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Compensation	Form 990-PF (2009) ALLEN B. PUCKETT, JR. FAMILY	64-0732703	Page 7
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 N/A 2 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See page 24 of the instructions See page 24 of the instructions of the program-related investments See page 24 of the instructions See page 24 of the instru		oundation Managers, Highly Paid Emplo	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences converied, research papers produced, etc 1 N/A 2 3 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See page 24 of the instructions	3 Five highest-paid independent contractors for professional services (see p	age 23 of the instructions). If none, enter "NONE."	
Fotal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chanitable 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. 1 N/A 2 3 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments. See page 24 of the instructions	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 N/A 2 3 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See page 24 of the instructions	NONE		
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 N/A 2 3 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See page 24 of the instructions			
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Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chanitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 N/A 2 3 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See page 24 of the instructions			
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 N/A 2 3 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See page 24 of the instructions	Total number of others receiving over \$50,000 for professional services		
The state of the second conferences convened, research papers produced, etc Expenses N/A Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See page 24 of the instructions		19800-12	
2 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See page 24 of the instructions			Expenses
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See page 24 of the instructions	1 N/A		
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See page 24 of the instructions	2		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 N/A Amount All other program-related investments. See page 24 of the instructions	3		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 N/A Amount All other program-related investments. See page 24 of the instructions	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 N/A Amount All other program-related investments See page 24 of the instructions			
1 N/A 2 All other program-related investments See page 24 of the instructions	<u> </u>		
All other program-related investments. See page 24 of the instructions		on lines 1 and 2	Amount
All other program-related investments. See page 24 of the instructions	1 N/A		
	2		
3	All other program-related investments See page 24 of the instructions		
	3		

•

Total. Add lines 1 through 3

Pá	art X · Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	oundations,
	see page 24 of the instructions.)		<u> </u>
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	151,199
b	Average of monthly cash balances	1b	2,524
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	153,723
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	153,723
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	2,306
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	151,417
6	Minimum investment return. Enter 5% of line 5	_6	7,571
Pá	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private open	erating	
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	7,571
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)]	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	7,571
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	7,571
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	7,571
D	art XII Qualifying Distributions (see page 25 of the instructions)		
	att All Qualifying distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	49,214
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	49,214
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,214
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation)	
	qualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2009)

Pa	rt XIII Undistributed Income	(see page 26 of t	the instructions)							
			(a)	(b)	(c)	(d)				
1	Distributable amount for 2009 from Part XI	,	Corpus	Years prior to 2008	2008	2009				
	line 7					7,571				
2	Undistributed income, if any, as of the end	of 2009								
a	Enter amount for 2008 only									
b	Total for prior years 20 , 20	, 20								
3	Excess distributions carryover, if any, to 20	1								
а	From 2004	41,612								
b	From 2005	88,442								
С	From 2006	149,144								
d	From 2007	160,951								
е	From 2008	137,608	500 050							
f	Total of lines 3a through e		577,757							
4	Qualifying distributions for 2009 from Part	XII,								
	line 4 \$ 49,214									
	Applied to 2008, but not more than line 2a				······································	· 				
D	Applied to undistributed income of prior year									
	(Election required—see page 26 of the ins	,				: 				
С	Treated as distributions out of corpus (Elec									
_	required—see page 26 of the instructions)					7,571				
	Applied to 2009 distributable amount		41,643			7,371				
	Remaining amount distributed out of corpu		41,043			·				
5	Excess distributions carryover applied to 2					.,				
	(If an amount appears in column (d), the samount must be shown in column (a))	ante								
6	Enter the net total of each column as									
Ü	indicated below.				-					
а	Corpus Add lines 3f, 4c, and 4e Subtract	line 5	619,400							
	Prior years' undistributed income Subtract		0_0/ -00							
~	line 4b from line 2b									
С	Enter the amount of prior years' undistribut	ed								
	income for which a notice of deficiency has									
	been issued, or on which the section 4942		-							
	tax has been previously assessed	` '			-					
d	Subtract line 6c from line 6b Taxable									
	amount—see page 27 of the instructions									
е	Undistributed income for 2008 Subtract lin	ie								
	4a from line 2a Taxable amount—see pag	je								
	27 of the instructions									
f	Undistributed income for 2009 Subtract lin	ies]					
	4d and 5 from line 1 This amount must be									
	distributed in 2010					0				
7	Amounts treated as distributions out of cor	pus								
	to satisfy requirements imposed by section	1		1						
	170(b)(1)(F) or 4942(g)(3) (see page 27 of	the		1						
	instructions)									
8	Excess distributions carryover from 2004 r	l l								
	applied on line 5 or line 7 (see page 27 of t	he								
	instructions)		41,612							
9	Excess distributions carryover to 2010.									
	Subtract lines 7 and 8 from line 6a		577,788							
10	Analysis of line 9	00.440			į					
a	Excess from 2005	88,442								
b	Excess from 2006	149,144 160,951								
C C	Excess from 2007	137,608		1						
d	Excess from 2008	41,643		1	1					
е	Excess from 2009	41,043		<u></u>		·				

	III AIV FIIVALE OPERATING FOL				VII-A, question 9)	
1a	If the foundation has received a ruling or of			g		
	foundation, and the ruling is effective for 2	2009, enter the date of t	the ruling	_		
b	Check box to indicate whether the founda	tion is a private operati	ng foundation describe	ed in section 4	942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	T	(e) Total
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	investment return from Part X for					
	each year listed				<u> </u>	
b	85% of line 2a			<u> </u>		
С	Qualifying distributions from Part XII,					
	line 4 for each year listed				<u> </u>	
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities	<u></u>			<u></u>	
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"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			-		
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income	4: (01 - 4 -	Alada oranta analadis		1.65.000	<u> </u>
Pa	ort XV Supplementary Inform	• •	•		a \$5,000 or more	in assets at
4	any time during the ye		or the mstructio	ns.)	_	
1	Information Regarding Foundation Mar List any managers of the foundation who leads to the condition of the condition who leads to the condition of the conditio	-	than 29/ of the total co	atributions recoved by	the foundation	
а	before the close of any tax year (but only i			-	me roundation	
	N/A	r triey have contributed	more man \$5,000) (3	see section 507(d)(2))		
b	List any managers of the foundation who	own 10% or more of the	stock of a corporation	o (or an equally large of	ortion of the	
~	ownership of a partnership or other entity)		·		A GOLL OL THE	
	N/A	S. Almon the foundation				
2	Information Regarding Contribution, G	rant, Gift, Loan, Scho	larship, etc., Progran	ns:	-	
_	F-7 -	makes contributions to	-		es not accent	
	unsolicited requests for funds. If the found				•	
	organizations under other conditions, com			in the metadottone, to the		
<u>а</u>	The name, address, and telephone number	 		be addressed		
-	ALLEN B. PUCKETT III	•	• •			
	P. O. BOX 9630 COLUM					
b	The form in which applications should be			should include		
~	SEE STATEMENT 7		and materials troy			
c	Any submission deadlines					
	SEE STATEMENT 8			···		
d	Any restrictions or limitations on awards, s	such as by geographica	l areas, charitable field	ds, kinds of institutions,	or other factors	
	SEE STATEMENT 9					

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Purpose of grant or Amount contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 10 49,214 49,214 Total 3a Approved for future payment N/A Total **▶** 3b

Page **12**

	Part XVI-A	Analysis of Income-Producing Act	ivities				
En	Enter gross amounts unless otherwise indicated			ed business income	Exclude	d by section 512, 513, or 514	(e)
	•		(a)	(6)	(c)	(4)	Related or exempt
			(a) Business code	(b) Amount	Exclusion	(d) Amount	function income (See page 28 of
1	Program se	rvice revenue			code		the instructions)
	a						
				li .			
					i -		
	f						
	g Fees ar	nd contracts from government agencies			1		
2	_	dues and assessments					
	•	savings and temporary cash investments			14	122	
4		nd interest from securities		 	14	2,083	
		come or (loss) from real estate		•		2,005	
,		nanced property		'			· · · · · · · · · · · · · · · · · · ·
					-		
		ot-financed property		-	+		
		come or (loss) from personal property			 		· · · · · · · · · · · · · · · · · · ·
		tment income			 		10.000
		s) from sales of assets other than inventory			 		-12,806
		or (loss) from special events		 	 		
		or (loss) from sales of inventory					
11		ue a			<u> </u>		
	b				ļ		
	d						
	е						
12	Subtotal Ad	ld columns (b), (d), and (e)		<u> </u>		2,205	
13	Total. Add I	ine 12, columns (b), (d), and (e)				13	-10,601
		in line 13 instructions on page 28 to verify calculations					- .
	Part XVI-B	<u> </u>					
	Line No.	Explain below how each activity for which income is					
	▼	accomplishment of the foundation's exempt purpos	es (other than b	y providing funds for s	uch purpo	oses) (See page 29 of t	he
		instructions)					
	N/A						
						-	
	•						
							
_							
_	_	-	•		<u> </u>		
	_				· <u>-</u>		
		-				·	
						· · · · · · · · · · · · · · · · · · ·	
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DA	Ą						Form 990-PF (2009)

orn	n 990-PF (2009)_ALLEN B.	PUCKET	ГT,	JR.	FAM	ILY		64-0	732703			Pag	ge 13
P	art XVII	ı	nformation Rega	arding Tra	ansfe	ers To	and T	ransacti	ons an	d Relatio	nships With N	onchar	ritable		
			Exempt Organiza	ations									, .		
1	Did the d	organ	iization directly or indii	ectly engage	e in an	y of the	following	g with any o	her orga	ınızatıon des	cribed			Yes	No
	ın sectio	n 501	1(c) of the Code (other	r than section	n 501(c)(3) or	rganızatıo	ns) or in se	ction 527	, relating to	political				
	organiza	tions	?												
а	Transfer	s froi	m the reporting founda	ation to a nor	ncharit	table ex	cempt org	anization of							
	(1) Cas	h											<u>1a(1)</u>		X
	(2) Othe	er as	sets										1a(2)		X
b	Other tra	ansac	ctions												
	(1) Sale	es of a	assets to a noncharita	ble exempt of	organiz	zation							1b(1)		X
	(2) Puro	chase	es of assets from a no	ncharitable e	exemp	t organi	ızatıon						1b(2)		X
	(3) Ren	tal of	facilities, equipment,	or other asse	ets								1b(3)		X
	(4) Rein	nburs	sement arrangements										1b(4)		X
	(5) Loar	ns or	loan guarantees										1b(5)		X
			ince of services or me	•		•							1b(6)		X
С	_		cilities, equipment, ma	=			•	-					1c		X
d			to any of the above is				•			•					
			joods, other assets, or												
		any t	ransaction or sharing	1					the good						
	(a) Line no		(b) Amount involved	(c) Name	of non	charitab	le exempt o	organization		(d) Description	on of transfers, transa	ctions, and	sharing arrange	ments	
N/	A								+						
								.	-		- - ·				
									+						
		-							-						
		\dashv							+						
									+						
												_			
															
		-							+						
		-							+		·				
		-+				,			+		·				
									1						
									+						
									+		·				
22	le the for	undat	tion directly or indirect	ly affiliated w	uth or	related	l to one o	or more tay	L	organizations					
20			section 501(c) of the C	•					•	organization	•		Пу	s X	No
h			plete the following sch	•	nan se	CHOIL 2	01(0)(0))	or in section	1 327 .					3 44	j NO
	, , ,		Name of organization	000.0	I	(b) Ty	pe of organ	nization			(c) Description	of relations	hip		
	N/A	, ,			1	<u>, , , , , , , , , , , , , , , , , , , </u>	<u>. </u>				· · · · · · · · · · · · · · · · · · ·		·		
			·	***************************************											
			/							•			•		
	Under per	naltres	of penury, I declare that	I have examin	ed this	return, ii	ncluding ac	ccompanying	schedules	and statemen	its, and to the best of	my knowled	dge and		
			correct, and complete_D												
	Miller Sucley 111 Sept. 9 2010 Mesident										but				
9	Signa	ature	of officer or trustee					Date	,	_	Title				
휘			-							Date			Preparer's identif		
Sign Here	ν _{>}	Pre	eparer's								Check if self-employer	ı⊾⊓l	number (see Sig page 30 of the in:		
Sig	D re l	sıgı	nature MICHAE	L KERBY	<u> </u>					08/27	/10 Schreinploye		P00028		
	Paid Preparer's Use Only	Fırr	n's name (or yours if	THOMAS											
	ي ج	self	f-employed), address,	326 M	[LI]	<u> </u>	ROA	D (P.C	. BC	X 1404)	EIN ▶	64-058	<u>53</u> 6	1_
			I ZIP code	COLUN	ÆUS	S, M	IS 3	9703				Phone no	662-32	8-4	140
														<u> </u>	

Form 990-PF (2009)

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

Schedule of Contributors

OMB No 1545-0047

2009

or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization

ALLEN B. PUCKETT, JR. FAMILY

► Attach to Form 990, 990-EZ, or 990-PF.

Employer identification number

FOUNDATION 64-0732703 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule |X| For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and 11 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form

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

990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ,

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

Page 1 of 1 of Part I

Name of organization

ALLEN B. PUCKETT, JR. FAMILY

Employer identification number

64-0732703

Part I	Contributors (see instructions)		
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1	COLUMBUS BRICK COMPANY P O BOX 9630 COLUMBUS MS 39705	\$ 15,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2	OTHERS LESS THAN \$5,000	\$ 17,649	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
-		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
140.	Name, address, and En 1 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

-		
Page 2	Charitable Purpose \$	
	Adjusted Net Net 96 1,378 642 54 54 54 54 54 54 54	
Federal Statements	990-PF, Part I, Line 23 - Other Expenses Net Net Investment \$ 96 642 54 54 54 54 57 770 \$ 2,170 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
	Statement 4 - Form 990-PF, F Total \$ 1,378 642 54 \$ \$ 2,170	
FUCKETT FAMIL Allen B. Puckett, Jr. Family 64-0732703 FYE: 12/31/2009	S MANAGEMENT FEES PENSE	

PUCKETTFAMI Allen B. Puckett, Jr. Family

64-0732703

Federal Statements

FYE: 12/31/2009

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Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

	Description							
			Beginning of Year	_	End of Year	Basis of Valuation	_	Fair Market Value
COMMON STOCK								
		\$_	1,557	\$_	1,557	COST	\$_	1,557
TOTAL		\$_	1,557	\$	1,557		\$_	1,557

Statement 6 - Form 990-PF, Part II, Line 13 - Other Investments

Description							
	_	Beginning of Year	_	End of Year	Basis of Valuation	_	Fair Market Value
MUTUAL FUND - EQUITIES							
	\$_	174,840	\$_	161,476	COST	\$_	149,642
TOTAL	\$	174,840	\$_	161,476		\$_	149,642

PUCKETTFAMI Allen B. Puckett, Jr. Family

64-0732703

Federal Statements

FYE: 12/31/2009

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Statement 7 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

INDIVIDUAL APPLICATIONS SHOULD INCLUDE A SUMMARY OF THE APPLICANT'S QUALIFICATIONS FOR THE CHARITABLE AWARD AND CIRCUMSTANCES REGARDING FINANCIAL NEEDS.

Statement 8 - Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

APPLICATIONS ARE ACCEPTED BY MAIL ONLY. NOTICE APPROVAL, REJECTION, OR REQUESTS FOR INFORMATION ARE USUALLY SENT IN 90 DAYS.

Statement 9 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

PREFERENCE IS GIVEN TO CHARITABLE AND RELIGIOUS ORGANIZATIONS. MOST GIFTS ARE LIMITED TO RELIGIOUS/CHARITABLE PURPOSES, BUT GRANTS MAY BE MADE TO INDIVIDUALS DURING TIMES OF SPECIAL NEED.

4,850 2 500 189 700 2,130 5,000 130 800 200 200 500 500 200 1,809 417 2,200 1,249 1,200 , Àage 9 Amount COBRA PAYMENT MEDICAL INSURANCE COBRA PAYMENT MEDICAL INSURANCE Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the CHRISTMAN BASKETS FOR NEEDY Purpose AFRICAN MISSION TRIP DONATION DONATION DONATION Federal Statements BURIAL NEEDY Status BUSH QUARTERS ROAD SISTER ORGANIZA \mathbf{z} 2027 17TH STREET N 3415 VISION DRIVE 1847 MT ZION ROAD Z ഗ Relationship 1614 22ND STREET PEEBLE BEACH Address 14TH STREET 16TH STREET MAIN STREET BRICKYARD ROAD 1423 MAIN ST BOX 5327 BOX 9630 5257 HWY 46 BOX 623 14TH AVE. PUCKETTFAMI Allen B. Puckett, Jr. Family ROAD BOX 4 NONE WREN 143 РО 901 185 602 512 0 0 0 Д Д Д MS STATE UNIV MS 39762 FAYETTEVILLE GA 30215 COLUMBUS MS 39701 COMMUNITY COUNSELING SERV FELLOWSHIP OF CHRISTIAN A BROOKSVILLE MS 39739 39739 CEDAR BLUFF MS 39741 43219 39702 39701 39701 39701 COLUMBUS MS 39701 COLUMBUS MS 39701 COLUMBUS MS 39705 39701 COLUMBUS MA 39701 COLUMBUS MS 39701 CARTERS FUNERAL HOME ODESSA FL 33556 BROOKSVILLE MS GLOBAL CONNECTIONS COLUMBUS MS COLUMBUS MS COLUMBUS MS COLUMBUS MS COLUMBUS MS COLUMBUS OH Name EUGENE CHAPMAN ANNIE HARRISON FYE: 12/31/2009 CLAUDIA BAKER BAKER TILLMAN JAMES EDWARDS DANNY COLVIN ANDREW BAKER CARE OF AIDS SAMMIE BEARD ATMOS ENERGY ALBERT BUSH DAVID CROFT BROOKS 64-0732703 BROWN > Ö ĸ

PUCKETTFAMI Allen B. Puckett, Jr. Family 64-0732703 FYE: 12/31/2009	tt, Jr. Family Federal Statements	ements	Page 6
Stateme	Statement 10 - Form 990-PF, Part XV, Line 3a - Grant <u>Year (continued)</u>	Line 3a - Grants and Contributions Paid During the ear (continued)	
Name	Address		
Address	Relationship Status	Purpose	Amount
TOMMY HARRISON	396 PIERCE ROAD		
	309 22ND STREET N	COBKA FAIMENI MEDICAL INSUKANCE	7 7 7
COLUMBUS MS 39701	NONE	NEEDY	1,502
COLUMBUS MS 39701	NONE	NEEDY	150
COLUMBUS MS 39701	NONE	EVANGELIST DONATION	10,175
JARED JONES COLUMBUS MS 39701	HWY 45 NORTH NONE	TRAVEL EXPENSE FOR AFRICA	300
ARLEE JORDAN	306 FORREST BLVD APT 14	COBDA DAVMENT MEDICAL INCHIDANCE	0,000
2	HWY 45 NORTH	FAIMENI MEDICAL	7,749 7,1
COLUMBUS MS 39701 KIDS GROWING IN CHRIST	NONE 3RD AVE NORTH	WHITE FAMILY CHRISTMAS	285
COLUMBUS MS	NONE CENTRE	DONATION	200
COLUMBUS MS 39701	NONE	DONATION	200
HATTIE MITCHELL COLUMBUS MS 39701	H STREET S NONE	NEEDY	300
MAQUALIN MOODY COLUMBUS MS 39701	315 FORREST BLVD NONE	COBRA PAYMENT MEDICAL INSURANCE	417
CASSANDRA NEAL COLUMBUS MS 39702	145 LELLA LANE NONE	NEEDY	150
ODESSA PERKINS	1831 10TH AVE. N	\ \ \ \	111
H ()	2201 22ND STREET N		-i -i !"
COLUMBUS MS 39701 ST JOHNS CHURCH	NONE 3477 MOTLEY RD	NEEDY	200
	NONE	DONATION	2,169
5	NONE	DONATION	200
MS 39701	NONE	COBRA PAYMENT MEDICAL INSURANCE	1,249
SIDNEY WALLS COLUMBUS MS 39701	1913 /TH AVE. NOKTH NONE	COBRA PAYMENT MEDICAL INSURANCE	417
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PUCKETTFAMI Allen B. Puckett, Jr. Family 64-0732703 FYE: 12/31/2009	_	Federal Statements	ments	Page 7
State	ment 10 - Form 990-PF, Part XV	', Line 3a - Gra Year (continue	Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)	
Name	Address			
Address		Status	Purpose	Amount
VIOLET WEATHERBY COLUMBUS MS 39701	WARPATH ROAD NONE		NEEDY	150
WILLIE WILLIAMS COLUMBUS MS 39701	ZI4 ZUTH STREET SOUTH NONE		COBRA PAYMENT MEDICAL INSURANCE	1,249
SAMANINA WRENCH COLUMBUS MS 39701	NONE COURSE		NEEDY	400
TOOTH WITH BEOSTON			DONATION	4,350
TOTAL				49,214
				-
				10

• คยCKETTFAMI Allen B. Puckett, Jr. Family **Federal Statements** 64-0732703 Page 1 FYE: 12/31/2009 **Taxable Interest on Investments** Unrelated Exclusion Postal Business Code Description Code Amount Code VARIOUS 122 14 122 TOTAL **Taxable Dividends from Securities** Unrelated Exclusion Postal Business Code Description Code Amount Code VARIOUS 2,083 14 2,083 TOTAL