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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service Treated as a Private Foundation

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

2009

For calendar year 2009, or tax year beginning and ending G Check all that apply: Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS label. COX FAMILY CHARITABLE FOUNDATION 72-1344410 Otherwise. Number and street (or P O box number if mail is not delivered to street address) print B Telephone number or type. 9811 MILLWOOD CIRCLE 251-621-1194 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions. DAPHNE, AL 36527 D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation H Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated J Accounting method: I Fair market value of all assets at end of year X Cash Accrual under section 507(b)(1)(A), check here (from Part II, col (c), line 16) Other (specify) F If the foundation is in a 60-month termination 2,041,600. (Part I, column (d) must be on cash basis.) ▶\$ under section 507(b)(1)(B), check here Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) (b) Net investment (c) Adjusted net expenses per books income income Contributions, gifts, grants, etc., received N/A 2 Check X if the foundation is not required to attach Sch B Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications b Less Cost of go $\overline{\mathsf{O}}$ c Gross profit or (loss) 11 Other income^{L1} 125,636 125,636 STATEMENT 125,636 125,636 Total Add lines 1fth ough 0 0. 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits and Administrative Expenses 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest .18 Taxes STMT 2 4,645. 4,645. 0. 119 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Other expenses STMT 3 181,112 181,112 0. 24 Total operating and administrative 185,757 expenses. Add lines 13 through 23 185,757 0. Contributions, gifts, grants paid 106,608 106,608. Total expenses and disbursements. Add lines 24 and 25 <u>292,365</u> 185,757 106,608. Subtract line 26 from line 12: & Excess of revenue over expenses and disbursements -166,729 0. b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions. Form **990-PF** (2009)

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1a b NON c d e (e) Gross sales price a b	(f) Depreciation allo	wed (a) Cos					
c d e (e) Gross sales price	(f) Depreciation allo	wed (a) Cos					
d e (e) Gross sales price		wed (a) Cos					
e (e) Gross sales price		wed (a) Cos			_		1
(e) Gross sales price		wed (a) Cos					
a .		weu (a) Co:	at ar athar baasa			(h) Com as (las	
			st or other basis expense of sale	ļ	(6	(h) Gain or (lose) e) plus (f) minus	
.b				 			
				 	.		
c d							
e	-						
Complete only for assets showing	gain in column (h) and	owned by the foundatior	n on 12/31/69		(I) Ga	ıns (Col. (h) gan	n minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	s (k) E>	ccess of col. (I)		còl. (k)	, but not less that osses (from col.	an -0-) o r
a							
b							
С							
d							
e							
Capital gain net income or (net cap	oital loss) { If gain,	, also enter in Part I, line s), enter -0- in Part I, line	7	2			
Net short-term capital gain or (loss	•		,				
If gain, also enter in Part I, line 8, c		1222(0) and (0).	J				
If (loss), enter -0- in Part I, line 8	nder Section 494			3			
Vas the foundation liable for the section "Yes," the foundation does not qualify Enter the appropriate amount in ea	fy under section 4940(e).	. Do not complete this pa	art.	,			Yes X N
(a) Base period years	ten column for each year	(b)	(c	·1			(d)
Base periód years Calendar year (or tax year beginning	a in) Adjusted qua	alifying distributions	Net value of nonch	' <i>'</i> arıtable-use a	ssets		ibùtión ratio ivided by col. (c))
2008	5	218,573.	2	2,174,0	63.	,	.10053
2007		152,601.		2,204,3			.06922
2006		118,357.	1	754,8	309.		.06744
2005		181,055.]	L,297,8			.13949
2004		36,929.		793,4	160.		.04654
? Total of line 1, column (d)						2	.42325
Average distribution ratio for the 5- the foundation has been in existence	•	the total on line 2 by 5,	or by the number of y	rears		3	.08465
Enter the net value of noncharitable	e-use assets for 2009 fro	om Part X, line 5				4	1,945,623
6 Multiply line 4 by line 3						5	164,699
Multiply line 4 by line 3						1	
	(1% of Part I, line 27b)					6	0
Enter 1% of net investment income	e (1% of Part I, line 27b)					7	
Multiply line 4 by line 3 Enter 1% of net investment income Add lines 5 and 6 Enter qualifying distributions from					-		164,699 106,608

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	rt VI Excise Tax Based on Investment Income (Section 49			or 494	18 -	see ins	stru	ctior	<u>15)</u>
	Exempt operating foundations described in section 4940(d)(2), check here and								
	Date of ruling or determination letter: (attach copy of letter if n			1					_
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		and enter 1%		1				0.
	of Part I, line 27b				-				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4								•
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others er	nter -0-)		2				0.
-	Add lines 1 and 2	0.1			3			·	0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	. Otners e	nter -u-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			-	5				0.
	Credits/Payments:	1 6-	1,3	3 5					
	2009 estimated tax payments and 2008 overpayment credited to 2009	6a 6b	1,3	33.	1				
	Exempt foreign organizations - tax withheld at source	6c		-					
	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld	6d							
	Total credits and payments. Add lines 6a through 6d	_ ou			7			1 3	35.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	ttached			8	-		<u> </u>	<u> </u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	itaonea		<u> </u>	9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10			1.3	35.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax		1,335. Refunde		11			_,_	0.
	rt VII-A Statements Regarding Activities		270001111111111	<u> </u>	·· ·				
1a	During the tax year, did the foundation attempt to influence any national, state, or local lea	aislation o	or did it participate or inte	ervene in				Yes	No
•	any political campaign?						1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purp	poses (se	e instructions for definiti	on)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a				or				
	distributed by the foundation in connection with the activities.	-	•						
C	Did the foundation file Form 1120-POL for this year?					L	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	the year:							5.4
	(1) On the foundation. \blacktriangleright \$ (2) On foundation manage	ers.▶ \$	S	0.			j		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expe	ndıture ta:	x imposed on foundation	l					
	managers. ► \$0.								
2	Has the foundation engaged in any activities that have not previously been reported to the	e IRS?				L	2		<u>X</u>
	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	_	nent, articles of incorpora	ition, or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the char	_					3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the y	year?				<u> </u>	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	•			N/	′ A -	4b		77
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	arv				⊢	5		X
	If "Yes," attach the statement required by General Instruction T								
ь	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	a eilher:				ŀ			;
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no manda 	tony dyran	tions that conflict with th	a etata la	114/				
	remain in the governing instrument?	iory unec	dons that conflict with th	c state ia	,**		6		x
7	Did the foundation have at least \$5,000 in assets at any time during the year?					-	7	X	
•	If "Yes," complete Part II, col (c), and Part XV.					F	•		-
8a	Enter the states to which the foundation reports or with which it is registered (see instruc	etions)	•						
	AL								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	e Attornev	v General (or designate)						
,	of each state as required by General Instruction G? If "No," attach explanation		,			-	8b	X	
9	is the foundation claiming status as a private operating foundation within the meaning of	section 4	1942(j)(3) or 4942(j)(5) 1	or calend	lar				
-	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes,						9		X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a sch	-					10		X
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had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Part VII-B Statements Regarding Activities for Whice 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (see (2) Influence the outcome of any specific public election (see section 495)	ection 4945(e))?		ued)		
(1) Carry on propaganda, or otherwise attempt to influence legislation (se				- 1	
			s X No		
(2) Influence the outcome of any specific public election (see section 49)	E \+ a= 4a aa== . aa al; = a4b . a= . aal; =		S LALINO		
`	55); or to carry on, directly or indire		s X No		
any voter registration drive?	2000		s X No		
(3) Provide a grant to an individual for travel, study, or other similar purp			א נאם צ		ļ
(4) Provide a grant to an organization other than a charitable, etc., organi	zation described in Section		s X No		Ì
509(a)(1), (2), or (3), or section 4940(d)(2)?	rom, or advertised averages or t	- -	S LAL NO	İ	1
(5) Provide for any purpose other than religious, charitable, scientific, lite	rary, or educational purposes, or		s X No		
the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualif	by under the eventions described		S LALINU		
		iii negulalions	N/A	5b	İ
section 53.4945 or in a current notice regarding disaster assistance (see in Organizations relying on a current notice regarding disaster assistance chi	·			30	
c If the answer is "Yes" to question 5a(4), does the foundation claim exempt		ınad			
expenditure responsibility for the grant?		. —	s 🔲 No		
If "Yes," attach the statement required by Regulations section 53		1/A16	3 100		
6a Did the foundation, during the year, receive any funds, directly or indirectly					
a personal benefit contract?	,, to put promining on		s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, or	on a personal benefit contract?			6b	x
If "Yes" to 6b, file Form 8870	a personal senont contract.		<u> </u>		
7a At any time during the tax year, was the foundation a party to a prohibited	tax shelter transaction?	☐ Ye	s X No		
b If yes, did the foundation receive any proceeds or have any net income att				7b	
Information About Officers, Directors, Tr		nagers, Highly			
Paid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and t		T	4.85		
(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 ount, other
(a) Name and address	to position	enter -0-)	compensation	allo	owances
N. ALLEN COX	TRUSTEE				
9811 MILLWOOD CIRCLE					
DAPHNE, AL 36527	0.00	0.	0.		0
N. ALLEN COX, JR.	TRUSTEE				
9811 MILLWOOD CIRCLE					
DAPHNE, AL 36527	0.00	0.	0.		0
STEPHEN R. WINDOM	TRUSTEE				
ONE ST. LOUIS CENTRE, STE. 1000		_	_		
MOBILE, AL 36602	0.00	0.	0.	ļ	0
2 Compensation of five highest-paid employees (other than thos	e included on line 1) If none	enter "NONE "	L 	<u> </u>	
. Compensation of five nighest-paid employees (other than those	(b) Title, and average	enter HONE.	(d) Contributions to	اما	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	acco	ount, othe
NONE	devoted to position		compensation	alle	owances
NONE					
	- 	 	· · · · -		
	 				
				 -	
		 		<u> </u>	
]	
Fotal number of other employees paid over \$50,000			•		

Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
	-	
		
	-	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities	·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the iced, etc.	Expenses
1 N/A		
2		
3		
4		
D. J.W.D.		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line.	110	
1 N/A	nes i and 2.	Amount
1N/R		
2		
An d	· · · · · · · · · · · · · · · · · · ·	
All other program-related investments. See instructions.		
Total, Add lines 1 through 3		0.

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	idations,	see instructions.)
1 8	air market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b /	Average of monthly cash balances	1b	70,547.
c i	air market value of all other assets	1c	1,904,705.
ď.	Total (add lines 1a, b, and c)	1d	1,975,252.
e l	Reduction claimed for blockage or other factors reported on lines 1a and		
	Ic (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	<u> </u>
3	Subtract line 2 from line 1d	3	1,975,252.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	29,629.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,945,623.
6	Minimum investment return. Enter 5% of line 5	6	97,281.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	97,281.
2a `	Fax on investment income for 2009 from Part VI, line 5		
b	ncome tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	97,281.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	97,281.
6	Deduction from distributable amount (see instructions)	6	0.
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	97,281.
	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	106,608.
b	Program-related investments - total from Part IX-B	1b	0.
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	
Ь	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	106,608.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ncome. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	106,608.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies fo	r the section

4940(e) reduction of tax in those years.

Part XIII. Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2008	2008	2009
1 Distributable amount for 2009 from Part XI,				07 001
line 7				97,281.
2 Undistributed income, if any, as of the end of 2009			0.	
a Enter amount for 2008 only b Total for prior years:	···-			
b Total for prior years.		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005 128,000.				
c From 2006 33,247.				
d From 2007 45, 364.				
e From 2008 113,424.				
f Total of lines 3a through e	320,035.			
4 Qualifying distributions for 2009 from				,
Part XII, line 4: ► \$ 106,608.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				-
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				97,281.
e Remaining amount distributed out of corpus	9,327.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	329,362.			
b Prior years' undistributed income. Subtract	323,302.			- -
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.		· <u> </u>	0.	
f Undistributed income for 2009. Subtract				
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	1			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	329,362.			
10 Analysis of line 9:	ļ			
a Excess from 2005 128,000.				
b Excess from 2006 33, 247.				
c Excess from 2007 45,364.				
d Excess from 2008 113, 424.				
e Excess from 2009 9,327.		_	<u>, </u>	

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3 Grants and Contributions Paid During th	ne Year or Approved for Future F	Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
		!		
				i
SEE STATEMENT 5				
Total		<u> </u>	▶ 3a	106,608
b Approved for future payment				
.,				
NONE				
Total			▶ 3b	0
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Part XVI-A	Analysis of Income-Producing	Activities
I WILLY	, manyolo of mooning i roddomy	,

Enter gross	amounts unless otherwise indicated.	Unrejate	o dusiness income		ded by section 512, 513, or 514	(e)
•	n service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a				<u> </u>		
b						
c				<u> </u>		
d						
е						
f						
g Fees	and contracts from government agencies					
2 Membe	rship dues and assessments					
3 Interest	on savings and temporary cash					
ınvestm						
4 Dividen	ds and interest from securities					
5 Net ren	al income or (loss) from real estate:					
a Deb	t-financed property					
b Not	debt-financed property					
6 Net ren	al income or (loss) from personal	1				
propert	y ,					
7 Other in	vestment income					125,636.
8 Gain or	(loss) from sales of assets other			İ		
than inv	ventory		·	ļ		
9 Net inco	ome or (loss) from special events					
10 Gross p	rofit or (loss) from sales of inventory					
I1 Other re	evenue:					
a	<u></u>					
c						
d				ļ		
e						
	ıl. Add columns (b), (d), and (e)		_0.		<u> </u>	125,636.
	Add line 12, columns (b), (d), and (e)				13 _	125,636.
See works	heet in line 13 instructions to verify calculations.)					
Part X	VI-B Relationship of Activities t	o the Acc	omplishment of Ex	emp	t Purposes	
	·					
Line No.	Explain below how each activity for which inco			contri	outed importantly to the accor	nplishment of
	the foundation's exempt purposes (other than					
<u>3</u> 3	THIS REPRESENTS INTERES	ST EARN	ED ON THE RE	GUL	<u>AR INTEREST-B</u>	EARING
	ACCOUNT USED BY THE ORG					
7	THIS REPRESENTS INTERES	ST RECE	IVED ON MORT	GAG	E LOAN RECEIV	ABLES
			<u> </u>			
			 _			
		. <u> </u>				
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	art XV	II Information Re			nd Relationships With Nonch		Pag	<u>je 13</u>
_		Exempt Organ					/aal	NI -
1	_	•	rectly engage in any of the follow		- ·		es	NO
		•	e)(3) organizations) or in section that is a common to a noncharitable exempt of the common to a commo		zalions			
•	(1) Ca	• •	ation to a nonchantable exempt t	organization of.		1a(1)		¥
		her assets				1a(2)	- +	
ŀ		ransactions:				14(2)	_	
٠		iles of assets to a noncharita	ible exempt organization			15(1)		х
			encharitable exempt organization			1b(2)		
		ental of facilities, equipment,				1b(3)		
		embursement arrangements				1b(4)		
	(5) Lo	ans or loan guarantees				1b(5)		X
	(6) Pe	rformance of services or me	embership or fundraising solicitat	tions		1b(6)		X
(c Sharin	g of facilities, equipment, ma	ailing lists, other assets, or paid e	mployees		1c		X
(d If the a	nswer to any of the above is	"Yes," complete the following sci	hedule. Column (b) should alw	ays show the fair market value of the good	s, other asset	s,	
		• •			e in any transaction or sharing arrangemen	t, show in		
	columi	 	other assets, or services received					
(a)	Line no	(b) Amount involved	(c) Name of noncharitat		(d) Description of transfers, transactions, a	nd sharing arran	gemer	ıts
			N/A	' -			_	
			<u></u>					
					_			
	-		 					
	-		+		+			
	-							
					<u> </u>			
					<u> </u>			
_								
				·	-			
2		=	etly affiliated with, or related to, or er than section 501(c)(3)) or in se	· · ·	rations described	Yes	X] No
ı		complete the following sch						
		(a) Name of org	janization	(b) Type of organization	(c) Description of relation	nship		
		N/A						
						<u> </u>		
_					<u> </u>			
			nave examined this return, including ac er than taxpayer or fiduciary) is based o		ents, and to the best of my knowledge and belief, i has any knowledge	is true, correct,	•	
	١,	1- Mola 9	, ,	15/17/10	Trustee			
Ð.	Gin	nature of officer or trustee		Date 1	Title			
Ē	J			Date		parer's identifyin	Yes No X X X X X X X X X X X X X	
Sign Here	Paid Preparer's Use Only	Preparer's signature	3 Struce	2	Self- employed ► □ 4	216012		
	Pai Se Si	Firm's name (or yours RUSS		UTLER & HOUST	ON, LLP EIN ►			
	ادّیّ	if self-employed), P • O •	BOX 70106				_	

(251)473-5550

of self-employed).

P.O. BOX 70106

MOBILE, AL 36670

Phone no.

FORM 990-PF	OTHER	INCOME		STATEMENT	1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCON	
MTG. RECEIVABLE INT. INCOME LATE FEES CHARGED	_	124,900. 736.	124,900		
TOTAL TO FORM 990-PF, PART I	- , LINE 11 =	125,636.	125,636	•	
FORM 990-PF	T?	AXES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI E PURPOSI	
TAXES PROPERTY TAXES	1,995 2,650				0.
TO FORM 990-PF, PG 1, LN 18 =	4,645	4,645			0.
FORM 990-PF	OTHER	EXPENSES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI E PURPOSI	
LEGAL & ACCOUNTING FEES OFFICE EXPENSE	1,664 825 546	825	•		0. 0. 0.
BUSINESS BAD DEBT EXPENSE (FORECLOSURE)	178,077	7. 178,077	•		0.
TO FORM 990-PF, PG 1, LN 23	181,112	2. 181,112	•		0.

FORM 990-PF	MORTGAGE LOANS		•	STATI	EMENT	4
DESCRIPTION		BOOK V	ALUE		MARKET ALUE	ŗ
MORTGAGE RECEIVABLES	_	1,664	1,705.	1	,664,70)5.
TOTAL TO FORM 990-PF, PART II,	LINE 12 =	1,664	1,705.	1	,664,70)5.
	TS AND CONTRIBUTIONS ID DURING THE YEAR	3		STATI	EMENT	5
RECIPIENT NAME AND ADDRESS	RECIPIENT RELAT			IENT TUS	IUOMA	1T
A NEW SEASON MOBILE, AL	NONE UNRESTRICTED CONTRIBUTION		N/A		70	00.
ACADEMY OF COUNTRY LIFTIN LIVE FND NASHVILLE, TN	S NONE UNRESTRICTED CONTRIBUTION		N/A		25,00	00.
ARTHRITIS FOUNDATION MOBILE, AL	NONE UNRESTRICTED CONTRIBUTION		N/A		2,00	00.
AMERICAN CANCER SOCIETY DAPHNE, AL	NONE UNRESTRICTED CONTRIBUTION		N/A		20	00.
BALDWIN COUNTY HUMANE SOCIETY FAIRHOPE, AL	NONE UNRESTRICTED CONTRIBUTION		N/A		30	00.
BIG OAK RANCH SPRINGVILLE, AL	NONE UNRESTRICTED CONTRIBUTION		N/A		1,50	00.

• COX FAMILY CHARITABLE FOUNDAT	TION		72-1344410
CHILD ADOVACY MOBILE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	250.
CYSTIC FIBROSIS MOBILE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	5,100.
ORUG EDUCATION COUNCIL MOBILE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	5,000.
EASTERN SHORE RECOVERY FUND DAPHNE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	300.
MARCH OF DIMES MOBILE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	2,000.
MCKEMIE PLACE MOBILE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	10,000.
MITCHELL CANCER INST MOBILE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	2,500.
THE SHOULDER DAPHNE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	1,000.
JNIVERSITY OF ALABAMA SAE TUSCALOOSA, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	4,000.
JSA RESEARCH AND TECH. CORP MOBILE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	28,706.

COX FAMILY CHARITABLE FOUNDATION			72-1344410
USS ALABAMA BATTLESHIP FOUNDATION DAPHNE, AL	NONE UNRESTRICTED CONTRIBUTION	N/A	317.
AUTISM SOCIETY OF ALABAMA BIRMINGHAM, AL	UNRESTRICTED CONTRIBUTION	N/A	2,000.
BROOKLYN DAVIDSON FOUNDATION MOBILE, AL	UNRESTRICTED CONTRIBUTION	N/A	1,000.
ANNA TODD CHENEY MEMORIAL FUND FAIRHOPE, AL	UNRESTRICTED CONTRIBUTION	N/A	100.
CSM PRODUCTIONS NASHVILLE, TN	UNRESTRICTED CONTRIBUTION	N/A	500.
CAMPUS CRUSADE FOR CHRIST MOBILE, AL	UNRESTRICTED CONTRIBUTION	N/A	1,800.
EDWARD C. GREENE JR SCHOLARSHIP MOBILE, AL	UNRESTRICTED CONTRIBUTION	N/A	100.
THE HAVEN FAIRHOPE, AL	UNRESTRICTED CONTRIBUTION	N/A	1,000.
HONOR FLIGHT - SOUTH ALABAMA MOBILE, AL	UNRESTRICTED CONTRIBUTION	N/A	485.
L'ARCHE MOBILE, AL	UNRESTRICTED CONTRIBUTION	N/A	1,000.

COX FAMILY CHARITABLE FOUND	ATION		72-1344410
MOBILE BAYKEEPER MOBILE, AL	UNRESTRICTED CONTRIBUTION	N/A	100.
NATIONAL MS SOCIETY BIRMINGHAM, AL	UNRESTRICTED CONTRIBUTION	N/A	250.
NICK'S KIDS TUSCALOOSA, AL	UNRESTRICTED CONTRIBUTION	N/A	1,900.
SALVATION ARMY ANGEL TREE MOBILE, AL	UNRESTRICTED CONTRIBUTION	N/A	200.
SERTOMA CLUB DAPHNE, AL	UNRESTRICTED CONTRIBUTION	N/A	500.
ST JUDE'S HOSPITAL MEMPHIS, TN	UNRESTRICTED CONTRIBUTION	N/A	300.
UMS-WRIGHT MOBILE, AL	UNRESTRICTED CONTRIBUTION	N/A	1,500.
WOUNDED WARRIOR PROJECT JACHSONVILLE, FL	UNRESTRICTED CONTRIBUTION	N/A	5,000.
TOTAL TO FORM 990-PF, PART XV	, LINE 3A	_	106,608.