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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 2009

F	or cal	lendar	year 2009, c	r tax year begi	nningSE	EPTEMBER	1	, 2009	, and endi	ing	AUGUST 31	, 20 10
G	Che	ck all t	hat apply	Initial retur	'n	Initia	al return	of a former p	ublic char	ıty		Final return
				Amended	return		Addre	ss change		1	Name change	_
_			Name of four	ndation	-		· · · ·				A Employer identifi	cation number
	Use the IRS JOSEPHINE E. & H. BRAN					DT AYERS	FOUND	ATION			63-09435	647
·	lab										1	
	Other		Number and	street (or P O box	number if	mail is not deliver	red to street	t address)	Room/su	ıte	B Telephone number (see	e page 10 of the instructions)
	pri	int		R HOLLOW				,	*************************************		256-237-	
	or ty	pe.	l Boogs.	. HOLLOW								,021
	•	pecific	City or town	state, and ZIP cod	10		 -		l		C If exemption applica	ation is
ı	nstru	ctions.		N, AL 362							pending, check here	· · · · · · · . [
			ANNISTO	N, AL 302	0 /						D 1 Foreign organiza	· · · · · · · · · · · · · · · · · · ·
			L	1 1 -							2 Foreign organiza 85% test, check i	
H	_	• •	-	tion X Secti							computation .	
1				nexempt charitable				rivate foundat			E If private foundation	n status was terminated
I	Fair	marke	et value of all	assets at end		unting metho		ash 💹 Acc	rual		under section 507(b)(1)(A), check here . 🕨
	•	-	m Part II, col			ther (specify)			- -		F If the foundation is	in a 60-month termination
_		▶ \$				column (d) m	ust be or	cash basis)			under section 507(b)(1)(B), check here
j	Part I			nue and Expens		(a) Revenu	e and	(b) Net inve	notmont		a) Adjusted not	(d) Disbursements
		total o	f amounts in co not necessarily	olumns (b), (c), an equal the amount	d (d)	expenses		incom		'	c) Adjusted net income	for charitable purposes
				e 11 of the instruct		books	<u> </u>					(cash basis only)
	1	Contribut	tions, gifts, grants.	etc , received (attach sch	nedule)	1,5	00.00					
	2	Check	If the fo	oundation is not request.	uired to				-			
	3	Interest		temporary cash inves								
	4		•	st from securities								
2011	1											
	۱ ۲			ss)		j						
Leg.				sale of assets not on					<u>ا</u> خ ا			
APR 2 5 Revenue	b	Gross s	ales price for all	sale of assets flot off	illie 10	<u> </u>	ξ. AI	14 - 1 -				
چ چې			on line 6a -	ma (from Dort N.)		i	•		1~~			
AP	7	•	•	me (from Part IV, I					l í			
				ıl gaın		1		a warming and the contract				
SCANNED	9 10 a		e mounications ales less retums									
200	١.		wances								·	
E	1		ost of goods sold	•								
Ų.				(attach schedule)								
7)	1			schedule)		1 5	00.00					
_				ough 11		1,5	00.00					
	1			s, directors, trustees,								· · · ·
ģ	1			ries and wages .								
nse	15			yee benefits								
Administrative Expenses				nedule)								
ű				ach schedule)			_	·				-
ě.	C			es (attach schedu	•	.=	_					-
Tat	17	Interes	t									
nist	18	Taxes (a	attach schedule)	(see page 14 of the ins	tructions)						_	
Ē	19	Depre	ciation (attach	schedule) and de	pletion.							
Adj	20	-	-									
and /	21			and meetings			<u> </u>					ļ
ā	22	Printin	g and publicat	ions				<u> </u>				ļ
ing	23	Other	expenses (atta	ch schedule)				 				
rat	24	Total	perating and	administrative ex	penses.							
Operating	.	Add lin	es 13 through	23		-					="	
0	25	Contrib	outions, gifts, g	grants paid			50.00					
_	26	Total exp	enses and disburn	sements Add lines 2	4 and 25	1,4	50.00					
	27	Subtra	ct line 26 from	line 12				_				
	a	Excess o	of revenue over exp	enses and disbursem	ents		50.00					
				me (if negative, er								
	1			(if negative, ente								

Form 990-PF (2009)

		Attached schedules and amounts in the	Beginning of year	End o	f year
۲	art II	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash - non-interest-bearing	933.98	983.98	983.98
	2	Savings and temporary cash investments			
		Accounts receivable			
		Less allowance for doubtful accounts ▶			
- 1		Pledges receivable			
		Less allowance for doubtful accounts ▶			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			-
	Ü	disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
	′ ′	Less allowance for doubtful accounts		•	
	_				
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
۷		Investments - U S and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule)			
	11	Investments - corporate bonds (attach schedule)			 -
		and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			<u> </u>
	13 14	Investments - other (attach schedule) Land, buildings, and equipment basis			
	' -	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
		(attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	000 00	000 00	000.00
_		instructions Also, see page 1, item I)	933.98	983.98	983.98
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue	·		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
	22	Other liabilities (describe			
_	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here ▶			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
aŭ	25	Temporarily restricted			
Bal	26	Permanently restricted	I .		
둳		Foundations that do not follow SFAS 117,			
Ē		check here and complete lines 27 through 31. ▶ X			
ö	24 25 26 27	Capital stock, trust principal, or current funds	00000	983.98	
ts	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SSe	29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets	30	Total net assets or fund balances (see page 17 of the			
Se		instructions)	933.98	983.98	
	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	933.98	983.98	
E	art l	Analysis of Changes in Net Assets or Fund	Balances		
		Il net assets or fund balances at beginning of year - Part I		st agree with	
-		of-year figure reported on prior year's return)		I	933.98
2		er amount from Part I, line 27a			50.00
3	Othe	er increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3			983.98
5	Dec	reases not included in line 2 (itemize) ▶		· · · · · · · · · · 	
6	Tota	reases not included in line 2 (itemize) ▶ al net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (t	o), line 30 6	983.98
<u>~</u>		The state of the s			- 000 DE (2000)

Part IV Capital Gains	and Losses for Tax on Inve	estment Income	(b) How						
	 (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) 								
1a			_						
b									
С									
d									
е				(h) Gain or (lo					
(e) Gross sales price	(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale								
a									
b		_							
С									
e									
Complete only for assets sh	nowing gain in column (h) and own			Gains (Col (h) g					
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co					
_a									
b									
С					<u> </u>				
d									
e									
2 Capital gain net income or	(net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2						
3 Net short-term capital gain	or (loss) as defined in sections 12	22(5) and (6)							
If gain, also enter in Part I,	line 8, column (c) (see pages 13 a	and 17 of the instructions)							
If (loss), enter -0- in Part I, I	ıne 8		3						
Part V Qualification Ur	nder Section 4940(e) for Redu	iced Tax on Net Investment Inc	ome	•					
	the section 4942 tax on the distrib		ase perio	d?	Yes X No				
	not qualify under section 4940(e)		· · · · · · · · · · · · · · · · · · ·						
1 Enter the appropriate amo	ount in each column for each year,	, see page 18 of the instructions be	etore mak	ing any entries (d)					
Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by					
2008	14,260.50	3,136.22		(++- (-,	4.5470				
2007	15,630.00				6.5291				
2006	15,140.00				1.8935				
2005	34,500.00				4.1839				
2004	41,565.00				2.3805				
2 Total of line 1, column (d)			2		19.5340				
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the							
	dation has been in existence if less		3		3.9068				
4 Enter the net value of non	charitable-use assets for 2009 from	m Part X, line 5	4		1,116.97				
5 Multiply line 4 by line 3			5		4,363.78				
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6						
7 Add lines 5 and 6			7	7 4,363.78					
			8		1,450.00				
If line 8 is equal to or gree Part VI instructions on pag	eater than line 7, check the box ii	n Part VI, line 1b, and complete t	hat part	using a 1% ta	x rate See the				
JSA				Forr	n 990-PF (2009)				

orm	990-PF (2009)		F	Page 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e ins	tructio	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
b	Domestic_foundations that meet the section 4940(e) requirements in Part V, check		0	.00
	here and enter 1% 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)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2		0	.00
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4		0	.00
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			
	Credits/Payments 2009 estimated tax payments and 2008 everpayment credited to 2009 6a 0.00			
	2009 estimated tax payments and 2000 overpayment credited to 2009			
	Exempt foreign organizations-tax withheld at source			
	Tax paid with application for extension of time to like (Form 8808).			
	Backup Withholding en oneodally Withheld			
7	Total credits and payments Add lines 6a through 6d	_		.00
8	Enter any penalty for underpayment of estimated tax officer need			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
.α	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)?	1 b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$ 0.00 (2) On foundation managers ▶\$ 0.00			
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
4 a	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?	4 b		X
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	X	ļ <u>.</u>
8 a	instructions) > ALABAMA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	ļ	37	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	<u> </u>	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			l "
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			.,
	names and addresses	10		Х

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Х

Х

Part VII-	<u> </u>	tivities fo	or Which Form 4	720 May Be Requi	ired (continued)		Page 6		
(1) C (2) Ir d (3) P (4) P s (5) P	ng the year did the foundation pay or incommentary on propaganda, or otherwise attemnation on the outcome of any specific publication of the outcome of any specific publication of the outcome of any specific publication of the outcome of any voter registration of the outcome	pt to influer ptic election drive? study, or oth han a chari 940(d)(2)? (pus, charital to children o	nce legislation (section in (see section 4955), o ther similar purposes? table, etc., organization (see page 22 of the installe, scientific, literary, for animals?	r to carry on, n described in structions)	Yes X No Yes X No Yes X No Yes X No				
	y answer is "Yes" to 5a(1)-(5), did any o ilations section 53 4945 or in a current no					5b			
c If the becau	Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d)								
on a	he foundation, during the year, receive a personal benefit contract?					,			
	b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870								
	a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No								
	b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?								
Part VIII	Information About Officers, I	Directors	, Trustees, Found	dation Managers,	Highly Paid Emplo	oyees,			
and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).									
	(a) Name and address		(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense a other allow			
JOSEPHI	(a) Name and address		(b) Title, and average hours per week devoted to position PRESIDENT	(c) Compensation (If not paid, enter -0-)	employee benefit plans				
JOSEPHI 1 BOOGE	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL	36207	(b) Title, and average hours per week devoted to position PRESIDENT	(c) Compensation (If not paid, enter	employee benefit plans				
JOSEPHI 1 BOOGE H. BRAN	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS		(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY	(c) Compensation (if not paid, enter -0-)	employee benefit plans and deferred compensation		0.00		
JOSEPHI 1 BOOGE H. BRAN 1 BOOGE	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS ER HOLLOW, ANNISTON, AL		(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY 1	(c) Compensation (If not paid, enter -0-)	employee benefit plans and deferred compensation		ances		
JOSEPHI 1 BOOGH H. BRAN 1 BOOGH WILLIAM	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS	36207	(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY	(c) Compensation (if not paid, enter -0-)	employee benefit plans and deferred compensation		0.00		
JOSEPHI 1 BOOGH H. BRAN 1 BOOGH WILLIAM	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS ER HOLLOW, ANNISTON, AL M A. JULIAN	36207	(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY 1 TREASURER	(c) Compensation (if not paid, enter -0-)	employee benefit plans and deferred compensation 0.00		0.00 0.00		
JOSEPHI 1 BOOGH H. BRAN 1 BOOGH WILLIAN P.O. BO	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS ER HOLLOW, ANNISTON, AL M A. JULIAN	36207 36202	(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY 1 TREASURER 1	(c) Compensation (if not paid, enter -0-) 0.00 0.00	employee benefit plans and deferred compensation 0.00 0.00	other allow	0.00 0.00		
JOSEPHI 1 BOOGH H. BRAN 1 BOOGH WILLIAM P.O. BO 2 Comp	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS ER HOLLOW, ANNISTON, AL M A. JULIAN DX 1710, ANNISTON, AL Deensation of five highest-paid empl	36207 36202 oyees (ot	(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY 1 TREASURER 1	(c) Compensation (if not paid, enter -0-) 0.00 0.00	employee benefit plans and deferred compensation 0.00 0.00	other allow	0.00 0.00 0.00		
JOSEPHI 1 BOOGH H. BRAN 1 BOOGH WILLIAM P.O. BO 2 Comp	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS ER HOLLOW, ANNISTON, AL M A. JULIAN DX 1710, ANNISTON, AL Deensation of five highest-paid employe, enter "NONE."	36207 36202 oyees (ot	(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY 1 TREASURER 1 her than those inc	(c) Compensation (if not paid, enter -0-) 0.00 0.00 0.00	employee benefit plans and deferred compensation 0.00 0.00 0.00 e page 23 of the inst (d) Contributions to employee benefit plans and deferred	ructions).	0.00 0.00 0.00		
JOSEPHI 1 BOOGH H. BRAN 1 BOOGH WILLIAM P.O. BO 2 Comp If non (a) Name	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS ER HOLLOW, ANNISTON, AL M A. JULIAN DX 1710, ANNISTON, AL Deensation of five highest-paid employe, enter "NONE."	36207 36202 oyees (ot	(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY 1 TREASURER 1 her than those inc	(c) Compensation (if not paid, enter -0-) 0.00 0.00 0.00	employee benefit plans and deferred compensation 0.00 0.00 0.00 e page 23 of the inst (d) Contributions to employee benefit plans and deferred	ructions).	0.00 0.00 0.00		
JOSEPHI 1 BOOGH H. BRAN 1 BOOGH WILLIAM P.O. BO 2 Comp If non (a) Name	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS ER HOLLOW, ANNISTON, AL M A. JULIAN DX 1710, ANNISTON, AL Deensation of five highest-paid employe, enter "NONE."	36207 36202 oyees (ot	(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY 1 TREASURER 1 her than those inc	(c) Compensation (if not paid, enter -0-) 0.00 0.00 0.00	employee benefit plans and deferred compensation 0.00 0.00 0.00 e page 23 of the inst (d) Contributions to employee benefit plans and deferred	ructions).	0.00 0.00 0.00		
JOSEPHI 1 BOOGH H. BRAN 1 BOOGH WILLIAM P.O. BO 2 Comp If non (a) Name	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS ER HOLLOW, ANNISTON, AL M A. JULIAN DX 1710, ANNISTON, AL Deensation of five highest-paid employe, enter "NONE."	36207 36202 oyees (ot	(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY 1 TREASURER 1 her than those inc	(c) Compensation (if not paid, enter -0-) 0.00 0.00 0.00	employee benefit plans and deferred compensation 0.00 0.00 0.00 e page 23 of the inst (d) Contributions to employee benefit plans and deferred	ructions).	0.00 0.00 0.00		
JOSEPHI 1 BOOGH H. BRAN 1 BOOGH WILLIAM P.O. BO 2 Comp If non (a) Name	(a) Name and address INE E. AYERS ER HOLLOW, ANNISTON, AL NDT AYERS ER HOLLOW, ANNISTON, AL M A. JULIAN DX 1710, ANNISTON, AL Deensation of five highest-paid employe, enter "NONE."	36207 36202 oyees (ot	(b) Title, and average hours per week devoted to position PRESIDENT 1 SECRETARY 1 TREASURER 1 her than those inc	(c) Compensation (if not paid, enter -0-) 0.00 0.00 0.00	employee benefit plans and deferred compensation 0.00 0.00 0.00 e page 23 of the inst (d) Contributions to employee benefit plans and deferred	ructions).	0.00 0.00 0.00		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	/ees,
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"	
	·
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 convened, research papers produced, etc.	Expenses
1	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See page 24 of the instructions	-
3	
Total. Add lines 1 through 3	

Pa	art X Minimum Investment Return (All domestic foundations must complete this part I see page 24 of the instructions.)	Foreign foundation	ins,
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	1,133.98
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see page 24 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,133.98
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3			1,133.98
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25	5	
			17.01
5	of the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	4 5	1,116.97
6	Minimum investment return. Enter 5% of line 5		55.85
Pa	Tart XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5 foundations and certain foreign organizations check here ► and do not complete) private operating	
1	Minimum investment return from Part X, line 6	1	55.85
2 a	Tax on investment income for 2009 from Part VI, line 5		
b			
C		2c	
3	Add lines 2a and 2b Distributable amount before adjustments Subtract line 2c from line 1	3	55.85
4	Recoveries of amounts treated as qualifying distributions		
5		l <u> </u>	55.85
6	Add lines 3 and 4 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	55.85
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	10	1,450.00
a			1,430.00
b			
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes Amounts set aside for specific charitable projects that satisfy the	2	
3	Amounts set aside for specific charitable projects that satisfy the	2-	
	a Suitability test (prior IRS approval required)	3a	
b		3b	1 450 00
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		1,450.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inco		
_	Enter 1% of Part I, line 27b (see page 26 of the instructions)		1 450 00
6	Adjusted qualifying distributions. Subtract line 5 from line 4		1,450.00
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calcula qualifies for the section 4940(e) reduction of tax in those years	iting whether the fo	undation

Рa	Part XIII . Undistributed Income (see page 26 of the instructions)									
1	Distributable amount for 2000 from Part VI	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009					
•	Distributable amount for 2009 from Part XI,	00.000	Tours pine and a series	-	55.85					
	line 7			.	- 33.03					
2	Undistributed income, if any, as of the end of 2009									
	Enter amount for 2008 only									
	Total for prior years 20,20,20									
3	Excess distributions carryover, if any, to 2009				•					
	From 2004									
	From 2006									
	14 102 60									
	From 2008 14,103.69	110 124 45								
f	Total of lines 3a through e	119,134.45		· <u> </u>						
4	Qualifying distributions for 2009 from Part XII,									
	line 4 ▶ \$1, 450.00									
а	Applied to 2008, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·								
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)									
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)									
d	Applied to 2009 distributable amount				55.85					
	Remaining amount distributed out of corpus	1,394.15								
5	Excess distributions carryover applied to 2009									
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:									
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	120,528.60		····						
b	Prior years' undistributed income Subtract									
С	Inne 4b from line 2b 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									
d	Subtract line 6c from line 6b Taxable									
	amount - see page 27 of the instructions				ļ					
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page									
	27 of the instructions			:						
f	Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010.									
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the									
	instructions)									
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	40,692.53								
9	Excess distributions carryover to 2010.									
	Subtract lines 7 and 8 from line 6a	79,836.07								
10	Analysis of line 9									
а	Excess from 2005 34,087.71									
b	Excess from 2006 14,740.21									
C	Excess from 2007 15,510.31									
d	Excess from 2008 14,103.69									
e	Excess from 2009 1,394.15				5 990 BE (2000)					

1 a	If the foundation has refoundation, and the ruling	•			-			
b	Check box to indicate who							
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years			(e) T	otal
	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 200	06	.,,	
ь	85% of line 2a							
С	Qualifying distributions from Part							
4	XII, line 4 for each year tisted . Amounts included in line 2c not				-			
đ	used directly for active conduct of exempt activities							
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					_		
3	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							
b	4942(j)(3)(B)(i) "Endowment" alternative test-							
	enter 2/3 of minimum invest- ment return shown in Part X,							
	line 6 for each year listed							
С	"Support" alternative test - enter (1) Total support other than							
	gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)).							
	or royalties) (2) Support from general			 				
	public and 5 or more exempt organizations as provided in section 4942							
	(j)(3)(B)(iii)							
	(4) Gross investment income_							
Pa	art XV Supplements at any time of	ary Information (Cluring the year - se	complete this part e page 28 of the in	t only if the foun nstructions.)	dation had	55,000 or	more	in asset
1	Information Regarding List any managers of			re than 2% of the to	ital contribution	ns received	by the f	oundation
	before the close of any	tax year (but only if t	hey have contributed	more than \$5,000)	(See section 50	7(d)(2))		•
	SEPHINE E. & H.							
b	List any managers of ownership of a partner	the foundation who ship or other entity) o	own 10% or more of which the foundation	of the stock of a cor on has a 10% or great	rporation (or ai er interest	n equally lai	ge port	ion of the
N/	Α							
2	Information Regarding	g Contribution, Gran	t, Gift, Loan, Scholars	ship, etc., Programs:	· · · · · · · · · · · · · · · · · · ·			
	Check here ► X if t unsolicited requests f organizations under ot	or funds If the four	ndation makes gifts,	grants, etc (see page	aritable organiz ge 28 of the	zations and instructions)	does no	ot accep viduals o
a	The name, address, a	nd telephone number	of the person to who	om applications should	be addressed			
b	The form in which app	lications should be su	ibmitted and informat	tion and materials the	ey should includ	e		
	Any submission deadli	nes						
	Any restrictions or li	mitations on awards	s such as by deco	ranhical areas char	itable fields k	inds of inst	itutions	or othe
u	factors		., us s, goog	5.050, 0.1011			,	2

Part XV Supplementary Information (c 3 Grants and Contributions Paid Dur	ing the Year or App		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	, <u>-</u>
a Paid during the year SEE ATTACHED SCHEDULE				1,450.00
Total		· · · · · ·	<u></u> ≥ 3a	1,450.0
b Approved for future payment .				
·				
		1		

▶ 3b

Total.

Part XVI	-A Analysis of Income-Produ	cing Activ	vities			
Enter gross	amounts unless otherwise indicated	Unrel (a)	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	function income
1 Program	n service revenue	Business code	Amount	Exclusion code		(See page 28 of the instructions)
a		_	_			
b				<u> </u>		
c						
d			<u> </u>			
е		_			<u> </u>	
f				<u> </u>		
_	s and contracts from government agencies			-		
	ship dues and assessments			-		
	on savings and temporary cash investments				<u> </u>	
	ds and interest from securities					
	al income or (loss) from real estate					-
	t-financed property					
	debt-financed property		-		_	
	al income or (loss) from personal property					
	vestment income					
•	loss) from sales of assets other than inventory					
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory			-		
	evenue a					
		<u> </u>				
		<u> </u>				
e	1. A data a damana (fr.) (d) and (a)					
	I Add columns (b), (d), and (e)		<u> </u>		42	
	dd line 12, columns (b), (d), and (e) heet in line 13 instructions on page 28					
Part XVI				xempt Purc	oses	
Line No. ▼	Explain below how each active the accomplishment of the for page 29 of the instructions.)	oundation's	exempt purposes (ed in column (other than	by providing funds for	such purposes) (Se
			·			
						<u> </u>
_						
				 		
	 					·

Pa	rt XVII	Information I Exempt Orga		Transfers To a	and Transa	ctions	and Relat	ionships	With N	lonc	harit	able
1	in sec	ne organization directly stion 501(c) of the Co zations? ers from the reporting for	ode (other thai	n section 501(c)(3) organization	s) or in	any other or section 527,	ganization de relating to	escribed political		Yes	No
а		sh								1a(1)		х
		her assets								1a(2)		X
h		transactions								15757		
_		les of assets to a nonch	naritable exempt	organization						1b(1)		Х
		rchases of assets from								1b(2)		Х
		ental of facilities, equipm								1b(3)		Х
		eimbursement arrangeme								1b(4)		X
		ans or loan guarantees								1b(5)		X
	(6) Pe	rformance of services of	or membership o	r fundraising solicitati	ions					1b(6)		X
		g of facilities, equipmen	_	-								
d	If the	answer to any of t	the above is	"Yes," complete th	ne following	schedule	Column (b)	should alwa	ays show	the	fair r	narket
		of the goods, other		* .	-							
	value	in any transaction or	sharing arrar	ngement, show in	column (d)	the value	of the good	ds, other as	sets, or	service	es rec	ceived
(a)	Line no	(b) Amount involved	(c) Name of	noncharitable exempt	organization	(d) Des	scription of trans	sfers, transaction	ns, and shar	ing arra	ngeme	nts
						+		– . –				
				-	·	+						
							-					
	-	 -				 						

								· · · · · · · · · · · · · · · · · · ·			·	
				•			-				_	
						1						
		· · · · · · · · · · · · · · · · · · ·				ļ						
	section	foundation directly or n 501(c) of the Code (oth s," complete the following	ner than section			more tax-	exempt organ	ızatıons desc	ribed in	Ye	es [] No
	11 163	(a) Name of organization		(b) Type	of organization			(c) Description	of relations	hip		
				,,,,	 -							
					<u>. </u>							
											_	
	Under	penalties of perjury, I decl	are that I have explete Declaration	xamined this return, in	ncluding accomp	anying sche	edules and state pased on all info	ments, and to	the best o	f my kı r has ar	nowled	ge and wledge
	Deliei,	X Y	11000	1	tunpujo. o	111	6 11	DOF	117	= 4 6	-	0 -
	_		Megica			1911	211	1 100	4177		6	
e.	Sı	gnature of officer or trustee)U		 +	Dáte		Title)rono!-	, el n = 1, E		
Ĭ					Date		Check if	- Forlin	Preparer's Jumber (Se	e Signa	iture o	n
Sign Here	Paid Preparer's Use Only	Preparer's signature	ion a	· U		18-1	self-employ	yed ► p	age 30 of t	he instr 684	uctions)
-	Pa Prepa Use	Firm's name (or yours if self-employed), address		am A. Julian Box 1710	,CPA			EIN ▶ 7	72-135	9102		

Phone no 256-236-3456

and ZIP code

Anniston, AL

36202

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JOSEPHINE E. & H. BRANDT AYERS FOU FORM XV	August 31, 2010		
PAID DURING YEAR	STATUS	PURPOSE	AMOUNT
CHILDREN'S SERVICES ANNISTON, AL	501-C3	GENERAL FUND	\$200 00
CHRISTMAS CLEARING HOUSE ANNISTON, AL	501-C3	GENERAL FUND	\$1,000 00
CENTER OF CONCERN ANNISTON, AL	501-C3	GENERAL FUND	\$50 00
			\$1,250 00