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Form **990-PF**

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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2010, or tax year beginning , 2010, and ending G Check all that apply Initial return | Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number MICHAEL AND BECKY COLEMAN CHRISTIAN 20-0511848 FAMILY FOUNDATION, INCORPORATED Telephone number (see the instructions) 2005 HIGHWAY 82 WEST 662-455-4523 GREENWOOD, MS 38930 If exemption application is pending, check here D 1 Foreign organizations, check here Н |X| Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Check type of organization: here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated J Accounting method X Cash Fair market value of all assets at end of year under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 1,780,138. (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income income for charitable columns (b), (c), and (d) may not neces purposes sarily equal the amounts in column (a) (cash basis only) (see the instructions).) Contributions, gifts, grants, etc, received (att sch) Ck ► X if the foundn is not req to att Sch B Interest on savings and temporary 12,262 12,262 12,262 cash investments Dividends and interest from securities 22 22 22 5a Gross rents . b Net rental income or (loss) .2 198 6a Net gain/(loss) from sale of assets not on line 10 REVENUE **b** Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) à. Net short-term capital gain Bac il Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit/(loss) (att sch) . . Other income (attach schedule) . 1.48 uÀ 12,284 12 Total, Add lines 1 through 11 12,284 12,284 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) ADMINISTRATIVE **b** Accounting fees (attach sch). RECEIVED c Other prof fees (attach sch) . OPERATING 18 Taxes (attach schedule) see instr.)..... 20 2011 19 Depreciation (attach Ø sch) and depletion . . . 20 Occupancy **GGDEN** Travel, conferences, and meetings 21 22 Printing and publications EXPENSES 23 Other expenses (attach schedule) 92 80 80 See Statement 24 Total operating and administrative expenses. Add lines 13 through 23. 92 80 80 Contributions, gifts, grants paid Stmt 2 Ċ 98,200 98,200. 80 80 98,200. 98,292 -86,008 12,204

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12. 204.

TEEA0504L 07/23/10

Par	tgli	Ralance Sheets	column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	_	Cash - non-interest		(a) Book Value	(b) Book Value	(c) rail Warket Value
	2		rary cash investments	1,354,921.	1,769,990.	1,769,990.
	3		-	1,554,521.	1,705,550.	2. 3
	"	Less: allowance for				
	4	Pledges receivable		*** * ** * * * * * * * * * * * * * * *		.7 ***
	-	Less: allowance for		***************************************		
	5	Grants receivable				
	6		cers, directors, trustees, and other			
	١	disqualified persons (atta	ich schedule) (see the instructions)			
	7	Other notes and loans rec	ceivable (attach sch) .	₹ 1 % 1	海	28.0
Ą	-	Less: allowance for	doubtful accounts			
Š	8	Inventories for sale	or use			
A S E T	9	Prepaid expenses a	nd deferred charges			_
s	10	a Investments - U.S.	and state government			
		obligations (attach s	-			
	1	•	stock (attach schedule)	511,225.	10,148.	10,148.
	'	c Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment: basis	, buildings, and			
		Less: accumulated deprec (attach schedule)	ciation •			
	12	Investments - mort	gage loans.			
	13	Investments - other	r (attach schedule)			
	14	Land, buildings, and e	equipment. basis	. \$5 \$500 \ \text{25 }		
		Less: accumulated deprec (attach schedule)	ciation •			
		Other assets (descri				
	16	Total assets (to be see instructions Als	completed by all filers – so, see page 1, item I)	1,866,146.	1,780,138.	1,780,138.
Ļ	17	Accounts payable ar	nd accrued expenses			
Å	18	Grants payable				
В	19	Deferred revenue				[6]
Ĺ	20		ctors, trustees, & other disqualified persons			
Ţ	21		s payable (attach schedule) .	, , , , , , , , , , , , , , , , , , ,		
i	22	Other liabilities (descr	ribe)		
E S	23	Total liabilities (add	I lines 17 through 22)	0.	0.	
		Foundations that fo	llow SFAS 117. check here ► X		<u></u>	
		and complete lines	24 through 26 and lines 30 and 31.	1		
NF	24	Unrestricted	, ,	1,866,146.	1,780,138.	
N F E U T N	25	Temporarily restricted	ed ,			
D	26					
A B A L A		Foundations that do and complete lines	o not follow SFAS 117, check here P			
SAELTA	27	Capital stock, trust r	principal, or current funds			
SN	28		, or land, building, and equipment fund			
O E	29		ulated income, endowment, or other funds			
RS	30		fund balances (see the instructions)	1,866,146.	1,780,138.	
	31	Total liabilities and	net assets/fund balances			
P 400	<u> </u> = '443	(see the instructions	<u> </u>	1,866,146.	1,780,138.	
rar	τΙΙΙ	Analysis of Chan	nges in Net Assets or Fund Baland	ces		
1	Tota end-	I net assets or fund b	alances at beginning of year - Part II, cold on prior year's return).	umn (a), line 30 (must a	gree with	1,866,146.
2		er amount from Part I,				-86,008.
3		increases not included in li		• ••••	3	33,330.
4		lines 1, 2, and 3.			4	1,780,138.
5		eases not included in line 2	(itemize)		5	,
6			alances at end of year (line 4 minus line 5	5) – Part II, column (b),		1,780,138.

1 41 (1,0	(a) List and describ	e the kind(s) of property sold (e g , re se, or common stock, 200 shares ML(al estate,	b) How acquired P — Purchase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A		<u></u>	- ' - '	D — Donation		
b						
d						
	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	3	(h) Gain or (e) plus (f) m	
a						
b						
С						
<u>d</u>						
е						
		ring gain in column (h) and owned by			(I) Gains (Colu	
	air Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i over column (j), if any		pain minus column (k an -0-) or Losses (fr	om column (h))
a						
<u> </u>						
<u>c</u>						
d						
е	 				[
•	Il gain net income or (ne	If (loss), ente	enter in Part I, line 7 er -0- in Part I, line 7	2		
If gain	, also enter in Part I, line	(loss) as defined in sections 1222(5) are 8, column (c) (see the instructions)	·· ¬			
	t I, line 8	0 - 1' - 40 40 () (P)		3		
		r Section 4940(e) for Reduced e foundations subject to the section 4				
If 'Yes,' the	foundation does not qua	ction 4942 tax on the distributable ame lify under section 4940(e). Do not con in each column for each year; see the	nplete this part.		Yes	X No
Calend	(a) se period years lar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ts (col	(d) Distribution umn (b) divided	
	2009	103,975.	1,963,	097.		0.052965
	2008	90,739.	2,048,			0.044302
	2007	65,007.	1,741,	356.		0.037331
	2006	42,102.	810,	672.		0.051935
	2005	31,882.	1,192,	739.		0.026730
2 Total	of line 1, column (d)			2		0.213263
3 Averag	ge distribution ratio for the er of years the foundation	ne 5-year base period — divide the tot n has been in existence if less than 5	al on line 2 by 5, or by the years	3		0.042653
4 Enter	the net value of nonchar	itable-use assets for 2010 from Part)	C, line 5	4	:	L,831,094.
5 Multip	ly line 4 by line 3			5		78,102.
6 Enter	1% of net investment inc	come (1% of Part I, line 27b)		6		122.
7 Add lii	nes 5 and 6	·		7		78,224.
	qualifying distributions fr	rom Part XII. line 4		8		98,200.
If line		than line 7, check the box in Part VI, I	ine 1b, and complete that pa		6 tax rate. See th	
	1 111311 111111113	,			Form	1 990-PF (2010)

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494					
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	7				£ .
Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)					
b Domestic foundations that meet the section 4940(e) requirements in Part V,	F	1		1	L22.
check here ► X 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, column (b)			33	4	٧.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			**	• • • • • • • • • • • • • • • • • • • •	4 *
foundations only. Others enter -0-)		2			0.
3 Add lines 1 and 2		3	_	1	<u> 122.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others ente	-0-)	4	_		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		1	<u> 122.</u>
6 Credits/Payments:			1	E 🕸	e. 13. /
a 2010 estimated tax pmts and 2009 overpayment credited to 2010			* ****		
b Exempt foreign organizations — tax withheld at source 6b			. 3	àe	Ĉ.
c Tax paid with application for extension of time to file (Form 8868)			÷ 7%	agen.	Ä.
d Backup withholding erroneously withheld .			<u> </u>		
7 Total credits and payments. Add lines 6a through 6d	•	7			<u>0.</u>
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		1	L22.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-	10			
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Refunded		11			
Rart: VII-A Statements Regarding Activities			[- %	1 1	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or participate or intervene in any political campaign?	did it		1a	Yes	No X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			. 1b		Х
If the answer is 'Yes' to <i>1a</i> or <i>1b</i> , attach a detailed description of the activities and copies of any mate or distributed by the foundation in connection with the activities.	rials pu	ıblıshe	ed .	· 349	**
c 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:					· 6.
(1) On the foundation \Rightarrow 0. (2) On foundation managers \Rightarrow 5			0. ∞∽ೣ		·
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in	nposed	on	7 .41		
foundation managers > \$ 0.			2		X
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the charge.	, article: nges	S	. 3		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	• •	• • • • •			X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
If 'Yes,' attach the statement required by General Instruction T.			3		- 4
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:]
● By language in the governing instrument, or			*		3
 By state legislation that effectively amends the governing instrument so that no mandatory direction 	s that c	onflict	<u> </u>		
3 3	• • • • •	•	6	١,,	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	Х	
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)	_		- 🔏	*	
MS			- 🕺		
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			8b	X	

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses BAA

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10

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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

BAA

charitable purposes? .. .

the tax year beginning in 2010?

3b

N/A

b If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.)

4a Did the foundation invest during the year any amount in a manner that would jeopardize its

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

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Part VII-B Statements Regarding Activiti	es for Which Forn	n 4720 May Be Req	uired (continued)	
5a During the year did the foundation pay or incu	r any amount to:			
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	on (section 4945(e))?	Yes X	[] No 1 1
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section	n 4955), or to carry		.
				No S
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	∐ Yes ⊠	No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, o 4940(d)(2)? (see instr	rganization described uctions)	Yes X	No P
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No Distriction
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?.	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respons	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No
If 'Yes,' attach the statement required by Regi	ulations section 53 494	5-5(d)		
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	lirectly, to pay premium	s Yes X	K No
b Did the foundation, during the year, pay premi	iums, directly or indirec	tly, on a personal bene	fit contract?	6b X
If 'Yes' to 6b, file Form 8870				
7a At any time during the tax year, was the found				No B. C. S.
b If yes, did the foundation receive any proceed Part VIII Information About Officers, D				Toployees
and Contractors	rectors, Trustees,	roundation Manag	gers, nignly Pald	Employees,
1 List all officers, directors, trustees, foundatio	n managers and their	compensation (see inst	ructions)	
I Elist all officers, affectors, trastices, fouridation	(b) Title and average	<u> </u>	(d) Contributions to	(e) Expense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
MICHAEL W. COLEMAN, MD	President	0.	0.	0
2005 HIGHWAY 82 WEST	0			
GREENWOOD, MS 38930				
_ LEE_W COLEMAN	Vice Preside	0.	0.	0
2005 HIGHWAY 82 WEST	0			
GREENWOOD, MS 38930	Cocretery			0
BECKY W. COLEMAN 2005 HIGHWAY 82 WEST	Secretary 0	0.	0.	0
GREENWOOD, MS 38930	0			
GREENWOOD, MS 38930				
	,			
2 Compensation of five highest-paid employee	s (other than those in	luded on line 1— see in	nstructions). If none, o	enter 'NONE.'
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense account.
paid more than \$50,000	hours per week devoted to position		employee benefit plans and deferred	other allowances
-22 - 10 120	Total to position		compensation	
None				
		_		
Total number of other employees paid over \$50,000	<u> </u>		<u> </u>	<u> </u>
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3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	
	
otal number of others receiving over \$50,000 for professional services	•
PartilX-A: Summary of Direct Charitable Activities	
st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N/A</u>	
2	
3	
4	
art X-B Summary of Program-Related Investments (see instructions)	
escribe the two largest program-related investments made by the foundation during the tax year on lines 1 a	and 2. Amount
1 <u>N/A</u>	
2	
All other program-related investments. See instructions.	
3	
	<u>-</u>

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4 98,200 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 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 instructions). 5 98,078. 6 6 Adjusted qualifying distributions. Subtract line 5 from line 4

a Suitability test (prior IRS approval required)

b Cash distribution test (attach the required schedule)

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.

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3 a 3 b

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7	* ` ` `	1	, 5°	91,433.
2 Undistributed income, if any, as of the end of 2010:		· · · · · · · · · · · · · · · · · · ·		
a Enter amount for 2009 only .			0.	
b Total for prior years: 20, 20, 20		0.	***	*
3 Excess distributions carryover, if any, to 2010:			71 4	
a From 2005	, , , , , , , , , , , , , , , , , , ,			
b From 2006	, ' * 			
c From 2007 d From 2008			, , , , , , , , , , , , , , , , , , ,	
e From 2009 88,528.				
f Total of lines 3a through e	88,528.			
4 Qualifying distributions for 2010 from Part	· 40.7	3, 3	<u> </u>	, , , , , , , , , , , , , , , , , , ,
XII, line 4 ► \$ 98,200.	3			
a Applied to 2009, but not more than line 2a			0.	/ 27
b Applied to undistributed income of prior years				* ***
(Election required — see instructions)		0.		·
c Treated as distributions out of corpus	_			
(Election required – see instructions)	<u> </u>	<u> </u>	. Z 30x	91 433
d Applied to 2010 distributable amount	6 767	(a) , 7. / (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	73212778	91,433.
e Remaining amount distributed out of corpus	6,767.	\$ \% \% \% \% \% \% \% \% \% \% \% \% \%		0
5 Excess distributions carryover applied to 2010 . (If an amount appears in column (d), the	0.	95%R.)	\$###*; **	U.
same amount must be shown in column (a).)	Ć,	` 1.		7,60
6 Enter the net total of each column as indicated below:			, i, j	
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .	95,295.			* ' , "!
•		***	¥.	
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		a parti
c Enter the amount of prior years' undistribut-			1.7	
ed income for which a notice of deficiency has been issued, or on which the section			. %.	
4942(a) tax has been previously assessed		0.	, 3	**
d Subtract line 6c from line 6b. Taxable		_		· 🔐
amount - see instructions		0.	<u>* </u>	
e Undistributed income for 2009. Subtract line 4a from			_	
line 2a Taxable amount — see instructions	<u> </u>		<u> </u>	
f Undistributed income for 2010. Subtract lines		12 a		
4d and 5 from line 1. This amount must be distributed in 2011.	l:	la a Maria	a distribution	0.
7 Amounts treated as distributions out of				\$44 BE 148 343
corpus to satisfy requirements imposed			\	
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.	· ·		.85 "37" },
8 Excess distributions carryover from 2005 not			٧.	_4
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011.		* *		*
Subtract lines 7 and 8 from line 6a	95,295.			
10 Analysis of line 9:				
a Excess from 2006				y. Airin
b Excess from 2007	<u> </u>	* * * *	*	
c Excess from 2008				
d Excess from 2009 88,528.	-			
e Excess from 2010 . 6,767.			<u> </u>	

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Part XIV Private Operating Foundation			-	<u> </u>	N/A
1 a If the foundation has received a ruling or c is effective for 2010, enter the date of the	ruling				
b Check box to indicate whether the foundat		erating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	41.0000	Prior 3 years	1	
investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e 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:					
a 'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test – enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalities)					
(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					
Part XV Supplementary Information (assets at any time during the	(Complete this	part only if the	organization ha	ad \$5,000 or moi	e in
		Structions.)			
1 Information Regarding Foundation Managers a List any managers of the foundation who holose of any tax year (but only if they have None	ave contributed m	ore than 2% of the t than \$5,000) (See	total contributions r section 507(d)(2).)	received by the found	dation before the
b List any managers of the foundation who o	wn 10% or more o	f the stock of a corr	poration (or an equ	ally large portion of	the ownership of
a partnership or other entity) of which the	foundation has a 1	0% or greater intere	est	any large portion of	the ownership of
2 Information Removeding Contribution Con-	d Citt Lean Caba	lavahin ata Buanna			
2 Information Regarding Contribution, Gran Check here X if the foundation only managed requests for funds. If the foundation makes	nakes contributions	to preselected char	ritable organization		
complete items 2a, b, c, and d. a The name, address, and telephone numbe	r of the nerces to	whom anniactions	bould be address-	d:	
a the name, address, and telephone number	of the person to	whom applications s	siloulu de auulesse	u.	
b The form in which applications should be s	submitted and infor	mation and materia	ls they should inclu	ude:	· · · · · · · · · · · · · · · · · · ·
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	such as by geograp	hıcal areas, charıtal	ble fields, kinds of	institutions, or other	factors.
BAA	TE	EA0310L 02/16/11		F	orm 990-PF (2010)

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	-	
Paid during the year				
			,	
		1		
				ļ
		1		
		1		
		<u> </u>		
Total		: 	<u>► 3a</u>	1
Approved for future payment				
	1			
	1	1		1

	s amounts unless otherwise indicated.	Unrelat	ed business income	Exclude	d by section 512, 513, or 514	(e)
• B		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (see the instructions
_	ram service revenue:			code		
						_
	· · · · · · · · · · · · · · · · · · ·					
_						
f						
-	and contracts from government agencies					
	bership dues and assessments					12,262
	st on savings and temporary cash investments ends and interest from securities					22
	ental income or (loss) from real estate:			3 / 👹		
	-financed property	~ 00000 % ~00000000 A0~0000	(* ******		Accessoration to the contract of the contract	MANUFACTURE OF ST.
	lebt-financed property					
6 Net rer	ntal income or (loss) from personal property					
7 Other	r investment income					
	r (loss) from sales of assets other than inventory					
	ncome or (loss) from special events.					
	s profit or (loss) from sales of inventory revenue:	S VARIA				L A CONTRACTOR
	. , 5 , 5 , 6 , 6 , 6 , 6 , 6 , 6 , 6 , 6	-	office a commence and monthly	*******		* of Land and Property
		+				
_		1	- "			
е		j				
	otal. Add columns (b), (d), and (e)	*:		- 7 13	1	12,284
	l. Add line 12, columns (b), (d), and (e)				13	12,284
ee works	sheet in line 13 instructions to verify calculat	ions.)				
art XVI	B Relationship of Activities to th	e Accompl	ishment of Exempt	t Purp	oses	
	Explain below how each activity for which	IDCOME IS TEN	orted in column (e) of P	art Y\/I	A contributed important	ly to the
		t purposes (o	ther than by providing for	unds for	such purposes) (See t	he instructions)
	Explain below how each activity for which accomplishment of the foundation's exemp	- F /-				
ine No.	accomplishment of the foundation's exemp					
_ine No. ▼	accomplishment of the foundation's exemp					
_ine No. ▼	accomplishment of the foundation's exemp					
_ine No. ▼	accomplishment of the foundation's exemp					
_ine No. ▼	accomplishment of the foundation's exemp					
_ine No. ▼	accomplishment of the foundation's exemp					
Line No. ▼	accomplishment of the foundation's exemp					
Line No. ▼	accomplishment of the foundation's exemp					
_ine No. ▼	accomplishment of the foundation's exemp					
ine No. ▼	accomplishment of the foundation's exemp					
ine No. ▼	accomplishment of the foundation's exemp					

Form 990-PF (2010) MICHAEL AND BECKY COLEMAN CHRISTIAN 20-0511848 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		 					(4) W S .	1	
describe relating	ed în section 501(c) (i to political organiza	of the Code (other tions?	ge in any of the following w than section 501(c)(3) orga	nizations) o	r organization r in section 527,			Yes	No
a Transfe	ers from the reporting	foundation to a ne	oncharitable exempt organiz	ation of.			100	<u> </u>	<u>` · ˈ</u>
(1) Cas	sh						1 a (1)		<u>X</u>
(2) Oth	er assets						1 a (2)		X
b Other tr	ransactions [,]							<u> </u>	
(1) Sal	es of assets to a nor	ncharitable exempt	organization				1 b (1)	/	X
(2) Pur	chases of assets from	m a noncharitable	exempt organization			•	1 b (2)		X
(3) Rer	ntal of facilities, equip	pment, or other as:	sets				1 b (3)		X
(4) Reii	mbursement arrange	ments					1 b (4)		X
(5) Loa	ns or loan guarantee	es .					1 b (5)		X
(6) Per	formance of services	or membership or	fundraising solicitations				1 b (6)		X
c Sharing	of facilities, equipm	ent, mailing lists, o	other assets, or paid employ	ees.			1 c		X
	, , ,	, 5 .	, , , , , , , , , , , , , , , , , , ,			,	l		
the ago	ds, other assets, or s	services aiven by t	plete the following schedule he reporting foundation. If the in column (d) the value of the	ne foundatio	on received less th	an fair marke	t value in	ue of	
(a) Line no.	(b) Amount involved	 · _ · · _	charitable exempt organization	, 	scription of transfers, tr			gements	
N/A	(B) Fundant involved	(c) Name of hom	onarrabio oxompt organización	(4) 50	compact of authorard, a	anduotiono, and t	maring arran	gomona	
				· · · · · · · · · · · · · · · · · · ·					
		 	·						
			 	 	<u> </u>				
				 					
				<u> </u>					
2a Is the fo	oundation directly or ed in section 501(c)	indirectly affiliated of the Code (other	with, or related to, one or ithan section 501(c)(3)) or ii	nore tax-ex n section 52	empt organizations 7?	i	Yes	X	No
b If 'Yes,'	complete the follow	ıng schedule.							
	a) Name of organizat	ion	(b) Type of organization	1	(c) Desc	ription of rela	tionship		
N/A									
								_	
								_	
								_	
Under	penalties of perjury, I declar	re that I have examined to	his return, including accompanying s axpayer or fiduciary) is based on all	chedules and st	atements, and to the bes	of my knowledge	and belief, if	t is true,	
	, and complete Declaration	or preparer (other train	axpayer or iluuciary) is based on all	illioimadoil oi v	milat preparer has any ki	lowledge.			
Sign		0 (10		١٣	1/ 11 . 5				
Here	nuevae	1 Collins	<u>~</u>	12-		resident	.		
Sı	gnature of officer or trustee		Prenarer's signature	Date	Tit		DTIN		
	Print/Type preparer's na		Preparer's signature		5-16-11 se	eck ifif	PTIN		
Paid	ROBERT A HEA		- Collet to			f-employed	N/A		
Preparer	_		y & Co.		Firm's	EIN ► N/A			
Jse Only	Firm's address -	105 W. Presi							
	G	reenwood, M	S 38930		Phone	no (662	453-	7112	
ВАА							Form 99	0-PF (2010)

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Federal Statements

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MICHAEL AND BECKY COLEMAN CHRISTIAN **FAMILY FOUNDATION, INCORPORATED**

20-0511848

Statement 1 Form 990-PF, Part I, Line 23 Other Expenses

		(a) Expenses per Books	(b) Net Investment <u>Income</u>	(c) Adjusted <u>Net Income</u>	(d) Charitable <u>Purposes</u>
BANK FEES EXCISE TAX		\$ 80. 12.	\$ 80.	\$ 80.	
	Total		\$ 80.	\$ 80.	\$ 0.

Statement 2 Form 990-PF, Part I, Line 25 **Contributions, Gifts, and Grants**

Cash Grants and Allocations

Class of Activity:

Donee's Name:

Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name:

Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Class of Activity: Donee's Name: Donee's Address:

Relationship of Donee: Organizational Status of Donee:

Amount Given:

Class of Activity: Donee's Name:

Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Class of Activity: Donee's Name:

MEDICAL MISSIONS

HEALTH TALENTS INTERATIONAL

P O BOX 59871

BIRMINGHAM, AL 35259

PUBLIC CHARITY

MISSION ACTIVITIES

W PRESIDENT CHURCH OF CHRIST

1002 W PRESIDENT AVE GREENWOOD, MS 38935

PUBLIC CHARITY

UNIVERSITY

LIPSCOMB UNIVERSITY 3901 GRANNY WHITE PIKE

NASHVILLE, MS 37204

MISSION ACTIVITIES MDCC CHRISTIAN CENTER

411 OLIVE STREET MOORHEAD, MS 38761

PUBLIC CHARITY

MISSION ACTIVITIES

WORLD CHRISTIAN BROADCASTING

605 Bradley Court FRANKLIN, TN 37067

MISSION ACTIVITIES

WORLD EVANGELISM

2,000.

5,000.

10,700.

48,500.

5,000.

2010

Federal Statements

Page 2

MICHAEL AND BECKY COLEMAN CHRISTIAN **FAMILY FOUNDATION, INCORPORATED**

20-0511848

Statement 2 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants

Donee's Address:

PO BOX 72

WINONA, MS 38967

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

5,000.

Class of Activity:

MEDICAL MISSIONS

HEALING HANDS INTERNATIONAL

Donee's Name: Donee's Address:

455 MCNALLY DRIVE NASHVILLE, TN 37211

Relationship of Donee:

Organizational Status of Donee: Amount Given:

PUBLIC CHARITY

10,000.

Class of Activity:

Donee's Name:

Donee's Address:

MISSION ACTIVITIES

21ST CENTURY GLOBAL MISSIONS

254 SEVILLE ST

FLORENCE, AL 35630

Relationship of Donee: Organizational Status of Donee:

Amount Given:

PUBLIC CHARITY

10,000.

Class of Activity:

Donee's Name:

Donee's Address:

UNIVERSITY

FREED-HARDEMAN UNIVERSITY

158 E MAIN ST HENDERSON, TN 38340

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

2,000.

98,200. Total \$