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Form 990-PF

Department of the Treasury

Internal Revenue Service

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.

2010

OMB No 1545-0052

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 Reader Mood McClary Foundation Inc 20–1486711	
Name of foundation - A Employer identification number	
Pondor Mood McClary Foundation Inc. 20-1486711	
Dondon Mood McClary Foundation Inc 20-1486/11	
Model Mode Modeling Towns and The Modeling To	
Number and street (or P O box number if mail is not delivered to street address) 8 Telephone number	
1018 Fort Sumter Dr (843)795-0643	
City or town, state, and ZIP code Charleston, SC 29412 D 1 Foreign organizations, check here	
CHAIL TO DO 23 12 1	
Control 40.47(2)/41 and control to the state of the state	
Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at end of year J Accounting method: X Cash Accrual under section 507(b)(1)(A), check here	
	00
(from Part II, col. (c), line 16) \$\Bigsim \text{9,856}. \text{ (Part I, column (d) must be on cash basis)} \text{F If the foundation is in a 60-month terminal under section 507(b)(1)(B), check here.} \$\Bigsim \text{1, column (d) must be on cash basis} \text{ under section 507(b)(1)(B), check here.}	
Part Analysis of Revenue and Expenses (a) Poyonus and (b) Not investment (c) Adjusted not (d) Disbursem	ents
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) (a) Revenue and (b) Not investment (v) Adjusted not necessarily equal the amounts in column (a)) (a) Revenue and (b) Not investment (v) Adjusted not (c) Ad	
1 Contributions, gifts, grants, etc., received 33. N/A	
2 Check X If the foundation is not required to attach Sch B	
3 Interest on savings and temporary cash investments 237. Statemen	t 1
4 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	
Gross sales price for all assets on line 6a	
7 Capital gain net income (from Part IV, line 2)	
8 Net short-term capital gain	
9 Income modifications Gross sales less returns	
10a and allowances	
b Less Cost of goods sold	۸.
c Gross profit or (loss)	
11 Other income 12 Total, Add lines 1 through 11 270. 237.	,
12 Total. Add lines 1 through 11 2/0 23/ • 13 Compensation of officers, directors, trustees, etc 0 • 0 •	0.
14 Other employee salaries and wages	
15 Pension plans, employee benefits	
9 16a Legal fees	
b Accounting fees Stmt 2 1,200. 0.	0.
c Other professional fees	
9 17 Interest	
18 Taxes Stmt 3 72. 0.	0.
b Accounting fees Stmt 2 c Other professional fees 17 Interest 18 Taxes Stmt 3 72. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 Occupancy 21 Total operating and administrative expenses Add lines 13 through 23	
20 Occupancy	
Ž 21 Travel, conferences, and meetings	
22 Printing and publications	
23 Other expenses	
24 Total operating and administrative	•
expenses Add lines 13 through 23 1, 272. 0.	0.
25 Contributions, gins, grants paid 4, 000	<u>600.</u>
26 Total expenses and disbursements. Add lines 24 and 25 5 , 872 . 0 . 4 ,	600.
	000.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements <5,602.>	
024	
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	
223501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions Form 990-P	(2010)

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For	т 99	0-PF(2010) Reader Mood McClary Fou			1486711 Page 2
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			Beginning of year	End of	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	85,480.	79,856.	79,856.
	i	Savings and temporary cash investments Accounts receivable ►	03,400.	17,030.	17,030.
	3	Less; allowance for doubtful accounts			
	4	Pledges receivable			
	"	Less; allowance for doubtful accounts		-	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	"	disqualified persons			
	7	Other notes and loans receivable			
	'	Less: allowance for doubtful accounts ▶	n r=		w P
s	8	Inventories for sale or use			······································
Assets	1 -	Prepaid expenses and deferred charges			
As	1	Investments - U.S. and state government obligations			
	I	Investments - corporate stock			
		Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			•
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
			Ì		
	16	Total assets (to be completed by all filers)	85,480.	79,856.	<u>79,856.</u>
	17	Accounts payable and accrued expenses			* .
	18	Grants payable			
es	19	Deferred revenue			,
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			* 4 ×
iab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)	22.	0.	*
			00		\$ \$8.8 \$ \
	23	Total liabilities (add lines 17 through 22)	22.	0.	Ž.
		Foundations that follow SFAS 117, check here			
S	0.4	and complete lines 24 through 26 and lines 30 and 31			·,
Š	24	Unrestricted Temporershy restricted			
3ala	25 26	Temporarily restricted Permanently restricted			
ă	20	Foundations that do not follow SFAS 117, check here			
ᆵ		and complete lines 27 through 31			
þ	27	Capital stock, trust principal, or current funds	0.	0.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	85,458.	79,856.	
je	30	Total net assets or fund balances	85,458.	79,856.	
_					
	31	Total liabilities and net assets/fund balances	85,480.	79,856.	
P	art		alances		
_					
1		I net assets or fund balances at beginning of year - Part II, column (a), line	ა		05 450
		st agree with end-of-year figure reported on prior year's return)		1	85,458.
		r amount from Part I, line 27a		2	<5,602.> 0.
		r increases not included in line 2 (itemize) lines 1, 2, and 3		3	79,856.
		eases not included in line 2 (Itemize)		4 5	79,830.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	79,856.
_			, , ,	· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2010)

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8

4,169.

4,600.

Add lines 5 and 6

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

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Part VI Excise Tax Based on Investment Income (Secti			946 - See	instru	TCLIO	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ L						
Date of ruling or determination letter: (attach copy of lo						_
b Domestic foundations that meet the section 4940(e) requirements in Part V, chec	k here 🕨 🔀 and e	enter 1%	1			<u>2.</u>
of Part I, line 27b						
c All other domestic foundations enter 2% of line 27b. Exempt foreign organization			_			_
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ns only. Others enter -0	·-)	2			<u>0.</u>
3 Add lines 1 and 2			3_	 .		2.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation)-)	4			<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, ent	er -U-		5			2.
6 Credits/Payments:	1.1					
a 2010 estimated tax payments and 2009 overpayment credited to 2010	6a					
b Exempt foreign organizations - tax withheld at source	6b					
c Tax paid with application for extension of time to file (Form 8868)	6c					
d Backup withholding erroneously withheld	6d		-			•
7 Total credits and payments. Add lines 6a through 6d			7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2	220 is attached	_	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9			2.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount o	verpaid		10			
Part VII-A Statements Regarding Activities		Refunded ►	11			
1a During the tax year, did the foundation attempt to influence any national, state, or	local legislation or did i	t participate or intervene	ın		Yes	No
any political campaign?	•			1a		Х
b Did it spend more than \$100 during the year (either directly or indirectly) for political	ical purposes (see instr	uctions for definition)?		1b		Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the act			d or			
distributed by the foundation in connection with the activities.						
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:					
(1) On the foundation. > \$ 0 . (2) On foundation		0.				
e Enter the reimbursement (if any) paid by the foundation during the year for politic	cal expenditure tax impo	sed on foundation			1	
managers. ► \$ 0.				1 _	ł	
2 Has the foundation engaged in any activities that have not previously been report	ed 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 g	joverning instrument, a	rticles of incorporation, o	r			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of ti				3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more dur				4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	•		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during	g the year?			5		Х
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 t	hat conflict with the state	a 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?				7	Х	
If "Yes," complete Part II, col (c), and Part XV						
8a Enter the states to which the foundation reports or with which it is registered (see SC	e instructions) 🕨					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-	PE to the Attorney Gene	ral (or decionate)				
•		rai (Ur ucsiyilale)		OL	х	
of each state as required by General Instruction G? If "No," attach explanat		/2) or 4042(1)/5) for colo	ndar	8b	┼^-	+
9 Is the foundation claiming status as a private operating foundation within the me			iiuai	_	[x
year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? 10 Did any persons become substantial contributors during the tax year? If "Yes," atta				10	 -	$\frac{\Lambda}{X}$
TO THE BOX DELICOR DECIDIE SHOSIAHHAI COMMUNICIS ONNIO INC BAX VEAL (If "Yes " afta	acri a schequie listing their n	iarries and addresses		1 10		Ι Δ.

rm	990-PF (2010) Reader Mood McClary Foundation Inc 20-1486	<u>711 </u>	Р	age 5
	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u> _
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u>X</u> _
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Weberta address > D/a			
14	The books are in care of ▶ Doris M. Rollins Telephone no. ▶ (843) 7	<u>95-0</u>	643	3
	Located at ▶ 1018 Fort Sumter Drive, Charleston, SC ZIP+4 ▶29	412		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	ل ــــا
	and enter the amount of tax-exempt interest received or accrued during the year	N/		
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,	ı l	'es	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of	l		
	the foreign country	<u> </u>		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>	, 1	<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Y	es	No
1a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	for the beliefit of asc of a disqualified persony		3	
	(6) Agree to pay money or property to a government official? (Exception Check "No"		*.	
	If the foundation agreed to make a grant to or to employ the official for a period after		Ì	
	termination of government service, in terminating within or sayer,			
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? N/A	1b	ļ	
	Scotton Society (d) of the dentitie nested regularity electrics.			
	Organizations relying on a current notice regarding disaster assistance check here		1	
(c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1c	1	X
_	before the first day of the tax year beginning in 2010? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
2	defined in section 4942(j)(3) or 4942(j)(5)):			
	a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		*	
ì	before 2010?			
	If "Yes," list the years ,,,,	1 1		
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	*		
	•			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
	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)	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			\ <u></u>
	had and have recovered from recognity before the first day of the tay year beginning in 2010?	4b		Х

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)				
5a During the year did the foundation pay or incur any amount to:							
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No				
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,					
any voter registration drive?			s X No				
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7	Ye	s X No				
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section						
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No				
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for						
the prevention of cruelty to children or animals?	Ye	s X No					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the exceptions described	ın Regulations					
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5 b			
Organizations relying on a current notice regarding disaster assistance check h							
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined					
expenditure responsibility for the grant?			s No				
If "Yes," attach the statement required by Regulations section 53 4945	5-5 <i>(d)</i>						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j							
a personal benefit contract?		Ye	s X No	1			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			Sb X			
If "Yes" to 6b, file Form 8870							
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No				
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b			
Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	<u></u>				
Faid Employees, and Contractors							
1 List all officers, directors, trustees, foundation managers and their			···				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other			
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deterred compensation	allowances			
See Statement 4		0.	0.	0.			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."					
(a) Name and address of each ample as and more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other			
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deferred compensation	allowances			
NONE				•			
			_				
	1						
		 					
	1						
Total number of other employees paid over \$50,000	<u> </u>	- 	<u> </u>	C			
- see	<u> </u>	:-	Form	990-PF (2010)			
				, ,			

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Part VIII Information About Officers, Directors, Trustees, Foundation I Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	E."	
(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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, e	ormation such as the tc.	Expenses
1 N/A		
2		
3		
A		
4		
Part IX-B Summary of Program-Related Investments		A
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a N/A	3110 2.	Amount
I N/A		
2	·- <u></u>	
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	-	0.
Total Add inter I through a		<u> </u>

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
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	0.
b	Average of monthly cash balances	1b	82,668.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	82,668.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	82,668.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,240.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	81,428.
6_	Minimum investment return. Enter 5% of line 5	6	4,071.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	4,071.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,069.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,069.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4,069.
P	art 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	4,600.
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:	.5	
a	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	4,600.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	
	income. Enter 1% of Part I, line 27b	5	2,
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,598.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	r the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
-	Corpus	Years prior to 2009	2009	2010
1 Distributable amount for 2010 from Part XI,				4 000
line 7				4,069.
2 Undistributed income, if any, as of the end of 2010		ĺ	0	
a Enter amount for 2009 only			0.	
ь Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006 927.				
c From 2007 432.				
d From 2008 201.				
e From 2009 281.				
f Total of lines 3a through e	1,841.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$4,600.				
a Applied to 2009, 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 2010 distributable amount				4,069.
e Remaining amount distributed out of corpus	531.			
Excess distributions carryover applied to 2010 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,372.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005			·	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	2,372.			
10 Analysis of line 9:		İ		
a Excess from 2006 927.				
b Excess from 2007 432.				
c Excess from 2008 201.				
d Excess from 2009 281.		}		
e Excess from 2010 531.	l			L

Form 990-PF (2010) Reader Part XIV Private Operating F	Mood McClar			20-14	86711 Page 10
<u> </u>			A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		=		4040(1)(2) 05 4(140(4)(E)
b Check box to indicate whether the foun		ng toundation described in		4942(j)(3) or49	942(j)(5) T
2 a Enter the lesser of the adjusted net	Tax year	(1.1.0000	Prior 3 years	(4) 2007	(a) Tatal
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
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)			J
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in		-			
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization]
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	ore in assets
at any time during	the year-see the	instructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi	-	than 2% of the total conti	ributions received by the	e foundation before the clo	se of any tay
year (but only if they have contributed in			indutions received by the	, roundation before the cio	SC OI ally tax
None					
			/or an acually lorge next	on of the average of a s	adacebra as
b List any managers of the foundation will other entity) of which the foundation has			or an equally large port	ion of the ownership of a p	artnership or
**	is a 1070 of greater interes	JI.			
None					
2 Information Regarding Contribut					
Check here 🕨 🔀 if the foundation					
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations u	nder other conditions, c	omplete items 2a, b, c, and	1 d.
a The name, address, and telephone nun	ber of the person to who	m applications should be	addressed:		
b The form in which applications should	be submitted and informa	tion and materials they sh	nould include:		
2 1110 15111 III Willott applications should	so soonmoo and informa	son and materials tirey of			
Any submission deadlines:					
c Any submission deadlines:					
1.0		alaras abacitable falle	loods of post-times	other feet	
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitable fields,	Kinds of institutions, or	other factors:	

3 Granta and Contributions Baid During the Ve		Povmont		
3 Grants and Contributions Paid During the You Recipient	If recipient is an individual		T	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year Summerton Downtown	N/A		Fence Improvement	4,600.
	N/A			4,000.
Development Association			Project	İ
P.O. Box 1318 Summerton,			ĺ	
SC 29148				
				İ
			ł	
				}
			ţ	
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		ļ		
				}
	,		1	
		ļ	1	
			1	
Total	<u> </u>	L	▶ 3a	4,600.
b Approved for future payment				1,000.
			1	
				İ
None			1	
	l.		ſ	İ
		ĺ	į	
]
				1
				1
		\		<u> </u>
		<u> </u>	<u> </u>	
Total			▶ 3b	0.

Unrelated business income

(e) Related or exempt

Excluded by section 512, 513, or 514

Page 12

Enter gross amounts unless otherwise indicated.

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

Program service revenue: a	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
b		.	 -		
C			 		
d	1		 		
e			 -		
g Fees and contracts from government agencies			1		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	237.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					·
a Debt-financed property					
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal			1 1		
property			 		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	ļ		 		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory 11 Other revenue:			┼┼-		
a	ľ				
b			<u>†</u>		
cd	l l				
e	- 				
12 Subtotal. Add columns (b), (d), and (e)	_	0.	1	237.	0.
13 Total Add line 12, columns (b), (d), and (e)	·			13	237.
(See worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities	s to the Accom	plishment of Ex	cempt	Purposes	
Line No. Explain below how each activity for which in			contribu	ted importantly to the accom	plishment of
the foundation's exempt purposes (other th	an by providing lunds	s for such purposes).			
					
					
				 	
					
					
	 -				
		·			
			·	_	
023621 12-07-10					Form 990-PF (2010)

		er Mood M						486711		age 13
Part X			ansfers To a	and Transa	ctions ar	nd Rela	tionships With Non	charitable	В	
1 Did:	Exempt Organ he organization directly or ind		ay of the follows	a with any other		dacombod	un caction 501/c) of		Ves	No
							in section 50 i(c) or		163	140
	Code (other than section 501(iilicai organiz	alions				[
	sfers from the reporting found	sation to a nonchar	ritable exempt or	ganization of.				10/41	1	.
	Cash							1a(1)		X
	Other assets							1a(2)	 -	X
	r transactions:							4, 4,		<u>.</u>
	Sales of assets to a noncharit							16(1)	-	X
	Purchases of assets from a no		pt organization					1b(2)	├	X
	Rental of facilities, equipment							1b(3)	 	X
	Reimbursement arrangements	S						1b(4)		X
	Loans or loan guarantees							1b(5)	-	X
	Performance of services or m							<u>1b(6)</u>	-	X
	ing of facilities, equipment, m							1c	<u>L</u>	X
	answer to any of the above is		-				_		sets,	
	rvices given by the reporting			ed less than fair	market value	in any trar	isaction or sharing arrangem	ent, show in		
	nn (d) the value of the goods,	·				T				
(a) Line no	(b) Amount involved	(c) Name	of noncharitable	e exempt organiz	ation	(d) De	scription of transfers, transactions	s, and sharing ai	rangeme	ents
	<u></u>		N/A_			ļ				
						 				
						 				
					<u> </u>		_			
									_	
				··-				·		
						<u> </u>				
					,					
 -						1				
		T								
-						1				
2a Is th	e foundation directly or indire	ctly affiliated with, o	or related to, one	or more tax-exe	empt organiza	ations desc	ribed			
	ction 501(c) of the Code (other		•					Yes	X	∃ No
	es," complete the following sci		, (c),(c), c: ccc.							
	(a) Name of or			(b) Type of or	ganization		(c) Description of rela	tionship		
	N/A	<u> </u>	<u></u>							
				-						
					——————————————————————————————————————					
										
	Under penalties of perjury, I decla	re that I have examine	ed this return, include	Ing accompanying	schedules and	statements,	and to the best of my knowledge a	and belief, it is tr	ue, corre	ect,
Sign	and complete Declaration of prep									
Here	Nosi So	2 Pall	1	1	8-12	. 12 1	Pugalifa			
	Signature of officer or tr	rustee	<u></u>		Date	· /소	Title Title			
	Print/Type preparer's n		Preparer's si	ionature		Date '		PTIN		
			i Toparci s si	//	. ,	Late	self- employed			
Paid	Bobby R. (reecn,	Enth.		1/1/1/2	8-10	, John Ollipioyou			
	Jr., CPA	20	111/13		INF	0/0				
Prepa Use O		osterkoge	ers Par				Firm's EIN			
USC U	ייין אַייין						I			

Firm's address ▶ P. O. Box 20099 Charleston, SC 29413-0099

(843)577-5843 Form **990-PF** (2010)

Phone no

Form 990-PF Interest on Savi	ngs and Tem	porary Cash I	nvestments	Statement	1	
Source				Amount		
Bank of America First Citizens					0. 77.	
Total to Form 990-PF, Part I,	line 3, Co	lumn A	=	23	37.	
Form 990-PF	Accounti	ng Fees	Statement 2			
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitab Purpose		
Accounting fees	1,200.	0.		0		
To Form 990-PF, Pg 1, ln 16b	1,200.	0.			0.	
Form 990-PF	Tax	es		Statement	3	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income			
Federal excise tax FL Annual Report	11. 61.		100,		0.	
To Form 990-PF, Pg 1, ln 18	72.	0.		0.		

	st of Officers, D. I Foundation Manag	Statement 4		
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	
Doris M. Rollins 1018 Fort Sumter Dr. Charleston, SC 29412	President & Di	rector 0.	0.	0.
William David McClary, IV P.O. Box 669 Summerton, SC 29418	Director & Vice	e President 0.	0.	0.
Carl Reader McClary 475 Hascall Road Atlanta, GA 30309	Director 0.00	0.	0.	0.
Leland Gregory Rollins 914 Kushiwah Creek Drive Charleston, SC 29412	Director & Trea	asurer 0.	0.	0.
Doris McClary Rollins 4520-B 28th Road South Arlington, VA 22206	Director & Section 0.00	retary 0.	0.	0.
Karen Boylston Rollins 914 Kushiwah Creek Drive Charleston, SC 29412	Director 0.00	0.	0.	0.
Totals included on 990-PF, Page 6	5, Part VIII	0.	0.	0.

Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

									
■ If yo	ou are filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box		>	X			
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)									
Do no	t complete Part II unless you have already been granted a	n automa	tic 3-month extension on a previously fil	ed For	m 8868				
Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation									
	ed to file Form 990-T), or an additional (not automatic) 3-mor								
of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain									
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,									
	www.irs.gov/efile and click on e-file for Chanties & Nonprofits								
Par									
	poration required to file Form 990-T and requesting an auton	natic 6-mo	onth extension - check this box and com	plete	_				
Part I									
	er corporations (including 1120-C filers), partnerships, REMi Income tax returns	iCs, and ti	rusts must use Form 7004 to request an	exten	sion of time				
Гуре	or Name of exempt organization			Empl	oyer identification	number			
print									
ile by t	Reader Mood McClary Foundat			2	<u>0-1486711 </u>				
due date	e for Number, street, and room or suite no. If a PO box, se	e instruct	tions						
iling yo eturn S	See TOTO FOIC SURCEI DI								
nstructi	, only, 10 miles, poor office, and 2 miles	reign add	ress, see instructions						
	Charleston, SC 29412								
Enter	the Return code for the return that this application is for (file	a separa	te application for each return)			0 4			
Applie	cation	Return	Application			Return			
s For		Code	Is For			Code			
Form		01				07			
Form 990·BL 02 Form 1041-A					08				
	990-EZ	03	Form 4720			09			
	Form 990-PF 04 Form 5227					10			
Form	orm 990-T (sec 401(a) or 408(a) trust) 05 Form 6069					11			
Form 990-T (trust other than above) 06			Form 8870			12			
	Doris M. Rollir	ıs							
• The	e books are in the care of 1018 Fort Sumte	er Dr	<u>ive – Charleston, SC</u>	29	412				
Tel	ephone No ▶ <u>(843)795-0643</u>		FAX No 🕨						
	he organization does not have an office or place of business				>				
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)									
xod			ch a list with the names and EINs of all		ers the extension is	for			
1	I request an automatic 3-month (6 months for a corporation								
		torganiza	tion return for the organization named a	bove.	The extension				
	is for the organization's return for								
	X calendar year 2010 or								
	tax year beginning	, an	d ending						
	If the tax year entered in line 1 is for less than 12 months, cl		on: Initial return Fina	l retun	•				
2	Change in accounting period	ieck reas	on illidai retuiti Filia	ııetun	· ·				
	onange in accounting pendo								
3a	a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any								
	nonrefundable credits. See instructions 3a \$					0.			
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and									
	estimated tax payments made. Include any prior year overp		3b	\$	0.				
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,									
	by using EFTPS (Electronic Federal Tax Payment System) See instructions 3c \$ 0.								
	aution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions								