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# SCANNED JUN 0 9 2011

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
In may be able to use a conv of this return to satisfy state ren

OMB No 1545-0052 2010

4 Dividends and interest from securities 4,046 3,438 5  5a Gross rents 6,407 6,407 NONE  b Net rental income or (loss) 1,691 5  6a Net gain or (loss) from sale of assets not on line 10 5 Gross sales price for all assets on line 6a 754,473 7  7 Capital gain net income (from Part IV, line 2) 8  Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances 10 a Gross sales less returns and allowances 11 Other income (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 -43,549 9,957 NONE 13 Compensation of officers, directors, trustees, etc 25,316 17,053 8  10 a Gross profit or (loss) (attach schedule) 17,053 8  10 a Gross profit or (loss) (attach schedule) 19,957 NONE 10,005 NON		endar year 2010,	or tax year beginni		35.0 to d	oc a copy or c		and endi				, 2	0
Name of foundation  BYNUM FOUNDATION 1055001912  20-3859323  Room/suite  C/O REGIONS BANK TRUST DEPT, PO BOX 2886  City or town, state, and ZIP code  MOBILE, AL 36652-2886  H Check type of organization:			<del> </del>			nitial return	of a former p	ublic char	ity		Fina	l return	
Number and street (or PO box number if mail is not delivered to street address)   Room/suite			Amended retu	turn		Addre	ss change						
Number and street (or P O box number if mail is not delivered to street address)   Room/suite   B Telephone number (see page 10 of the matrix   C/O REGIONS BANK TRUST DEPT, PO BOX 2886   (251) 690-102	Name o	f foundation								A Employer identi	fication r	number	
Number and street (or P O box number if mail is not delivered to street address)   Room/suite   B Telephone number (see page 10 of the matrix   C/O REGIONS BANK TRUST DEPT, PO BOX 2886   (251) 690-102		рулим е	לוואור א חיד (או ב	EE0010	212					20	- 2050	1222	
City or town, state, and ZIP code    MOBILE, AL 36652-2886	Number					dress)		Room/su	ıte				uctions)
City or town, state, and ZIP code    MOBILE, AL 36652-2886	110111001	and street (or 1 o box	t namber ii mairis not de	6114616616	31,001 00	u1033/		1100111700		D TOTOL TOTAL	(000 p-80		
City or town, state, and ZIP code   MOBILE, AL 36652-2886		C/O REG	IONS BANK TRU	UST DE	EPT,	PO BOX 2	886			(2	51) 6	90-102	4
MOBILE, AL 36652-2886	City or t	·										- •	lack
H Check type of organization:										=		ck here .	▶∐
Check type of organization:   X   Section 501(c)(3) exempt private foundation   Section 4947(a)(1) nonexempt charitable trust   Other taxable private foundation   If privat													
Fair market value of all assets at end of year (from Part II, col. (c), line   Other (specify)    16) ▶ \$ 3,928,906.					_								▶∟
of year (from Part II, col. (c), line 16) ►\$ 3, 9.28, 9.06. (Part I, column (d) must be on cash basis.)  Part II Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b).  1 Contributions, gifts, grants, etc., received (attach schedule). 2 Check ► X If the foundation is not required to tach schedule). 3 Interest on savings and temporary cash investments. 4 Dividends and interest from securities. (a, 40.7 (a, 40.7). NONE  5 Gross rents. (a, 40.7 (a, 40.7). NONE  6 A Net gain or (loss) from sale of assets not on line 10 (b) Gross sales price for all assets on line 6 (a) Revenue and expenses per books.  7 Capital gain net income (from Part IV, line 2). (a) None income (ficers, directors, trustess, etc. (a) Signal (from Part IV, line 2). (a) None income (ficers, directors, trustess, etc. (a) Signal (first proprioty explains and wages. (a) None income incom													
16							asn Acc	ruai					<b>-</b>
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))  1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ ☑ if the foundations is not required to altach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents 6 (407 6 (407 NONE  b Net rental income or (loss) 1, 691 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 754, 473 assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total Add lines 1 through 1143, 549 9, 957. NONE 13 Compensation of officers, directors, trustees, etc. 25, 316 17, 053. 8 16a Legal fees (attach   Schedule) 17 Pension plants, employee benefits NONE NONE  18 NONE  18 NONE							n cash basis.)					_	
total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))  1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ X if the foundations not required to 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Gross rents 6, 407 6, 407 NONE  6 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 754, 473 assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10 a Gross sales sers teturns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 15 Pefision plants, employee selarins and wages NONE  16 Legal fees (attach schedule) 17 Pefision plants, employee benefits NONE NONE  18 Pefision plants, employee benefits NONE NONE  19 Legal fees (attach schedule) NONE NONE NONE		Analysis of Rever	nue and Expenses	(The			}				(d)	Disburseme	ents
Column (a) (see page 11 of the instructions)   books   Cash basis of		total of amounts in	columns (b), (c), and (c	(d)					(0		fo		е
2 Check		column (a) (see pag	e 11 of the instruction	ns))			liicon	·			(ca		nly)
3   Interest on savings and temporary cash investments   112   112   112	1	Contributions, gifts, grants,	etc , received (attach schedu	lule)			,			· kg/	٠, گ		\$+ }
4 Dividends and interest from securities 4,046. 3,438.  5a Gross rents 6,407. 6,407. NONE  b Net rental income or (loss) 1,691  6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 754,473.  7 Capital gain net income (from Part IV, line 2).  8 Net short-term capital gain 10 a Gross sales less returns and allowances 10 a Gross sales less returns and allowances 11 Other income (attach schedule).  11 Other income (attach schedule).  12 Total. Add lines 1 through 11 -43,549 9,957. NONE  13 Compensation of officers, directors, trustees, etc. 25,316. 17,053. 8  14 Other income (attach schedule). 17,053. 8  15 Pénsion plans, employee benefits. NONE NONE  16a Legal fees (attach schedule). 10 NONE NONE	2	Check ► X attach	Sch B	ea to							1	<u> </u>	13.4TP =
5a Gross rents	3	-									- 48.	S'I	MT 1
b Net rental income or (loss) 1,691  6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 754,473.  7 Capital gain net income (from Part IV, line 2).  8 Net short-term capital gain line on a gross sales less returns and allowances.  b Less Cost of goods sold.  c Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 1143,549. 9,957. NONE  13 Compensation of officers, directors, trustees, etc. 25,316. 17,053. 8  14 Other remplayee salaries and wages. NONE NONE  15 Pension plans, employee benefits. NONE NONE  16a Legal fees (attach schedule)  10 NONE NONE  15 Description fees (attach schedule)  10 NONE NONE  11 NONE NONE  12 NONE NONE  13 Compensation of officers, directors, trustees, etc. 25,316. NONE NONE  15 Pension plans, employee benefits. NONE NONE  16a Legal fees (attach schedule)  15 NONE NONE  16b NONE NONE  16c NONE NONE  16c NONE NONE	4			⋯⊢						NON	<del></del>	**	· .
6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 754, 473.  7 Capital gain net income (from Part IV, line 2).  8 Net short-term capital gain  9 Income modifications  10 a Gross sales less returns and allowances  b Less Cost of goods sold  c Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 1143,549 9,957. NONE  13 Compensation of officers, directors, trustees, etc. 25,316 17,053. 8  14 Cliper employee salanes and wages NONE  15 Pension plans, employee benefits  16 Legal fees (attach schedule)  1 Journal of the compensation of officers, directors, trustees, etc. 900 NONE  16 Legal fees (attach schedule)  10 NONE  11 NONE  12 NONE  13 NONE  14 Other income (attach schedule)  15 Pension plans, employee benefits  16 NONE  17 NONE  18 NONE  18 NONE  19 NONE  19 NONE  19 NONE  19 NONE  19 NONE				;;; ⊢		0,407	:	0,407.		NON	<u> </u>	* *	· *
b Gross sales price for all assets on line 6a line 6a assets on li					· · · · · · · · · · · · · · · · · · ·	-54.114			`			3^	
8 Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 -43,549 9,957. NONE 13 Compensation of officers, directors, trustees, etc 25,316 17,053 8 14 Other employee salaries and wages NONE NONE 15 Pension plans, employee benefits NONE NONE 16 Legal fees (attach schedule) 16 Legal fees (attach schedule) STMT 2 900 NONE NONE	ā p	Gross sales price for all			-	<u> </u>				m + 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 3 3."	· · · · · · · · · · · · · · · · · · ·	
8 Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 -43,549 9,957. NONE 13 Compensation of officers, directors, trustees, etc 25,316 17,053 8  14 Other employee salaries and wages NONE NONE 15 Pension plans, employee benefits NONE NONE 16 Legal fees (attach schedule) 16 Legal fees (attach schedule) STMT 2 900 NONE NONE	8 7					•			s.,	. 3/4_		Žinia.	en %
10 a Gross sales less returns and allowances  b Less Cost of goods sold  c Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 11	<b>~</b> 8					· · · · · · · · · · · · · · · · · · ·		Ŕ					%
and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 11								` `			1 1 7	****	
b Less Cost of goods sold c Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 11	10 a	and allowances • • •	• •								<u> </u>	· · ·	٠,
11 Other income (attach schedule)  12 Total. Add lines 1 through 11		•								· · · · · · · · · · · · · · · · · · ·			
12 Total. Add lines 1 through 11								-			3 10	30%	645 -
13 Compensation of officers, directors, trustees, etc. 25,316. 17,053. 8  14 Other, employee salaries and wages NONE NONE  15 Pension plans, employee benefits NONE  16a Legal fees (attach schedule)  10 NACCOUNTRO fees (attach schedule) STMT 2 900 NONE NONE	1			• •		-43.549		9.957.	_	NON			****
16 Other employee salanes and wages NONE NONE 15 Pénsion plans, employee benefits NONE NONE  16 Legal fees (attach schedule) 16 Legal fees (attach schedule) STMT 2 900 NONE NONE												8	,263
16a Legal fees (attach schedule)  JONA Connting Tees (attach schedule) STMT 2 900 NONE NONE								NONE					
16a Legal fees (attach schedule)  JONA Connting Tees (attach schedule) STMT 2 900 NONE NONE	2 13C	Pension plans, emplo	oyee benefits					NONE		NON	<u> </u>		
	16a	Legal fees (attach sc	pedule)	L				31037-		37037	<del> </del>		000
C Unter professional tees (attach schedule)  17 Interest						900	<u></u>	NONE		NON	4		900
18 Texes (arjach schedule) (see page 14 of the Thirticulas)  19 Depreciation (attach schedule) and depletion.  20 Occupancy	A C			· · · ·			<del> </del>				+		
Depreciation (attach schedule) and depletion.	E 163	Taxad Brach Echadula	tee page 14 of STMT	1038		8,451		8,486			+		
E 20 Occupancy	E 19					3,131		<u>,,,</u>			``	*	
	E 20												
21 Travel, conferences, and meetings NONE NONE	전 일 21												
										NON	<u> E</u>		1
23 Other expenses (attach schedule) STMT. 4. 5,665. 5,508.	E 23	•				5,665		5,508.			-		157
23 Other expenses (attach schedule) STMT. 4. 5,665. 5,508.  24 Total operating and administrative expenses.  Add lines 13 through 23	E 24	, ,	•	I		40 222	,	1 047		NOM	닒	۵	,320
Add lines 13 through 23	이,	_					<u> </u>	1,04/.			1-		110
25 Contributions, girts, grants paid 100,710.							] 7	1.047			E		,430
27 Subtract line 26 from line 12.	$\neg$			nu 20				-,.v.,.	·········			<del>-, , , , , , , , , , , , , , , , , , , </del>	<u> </u>
8 Excess of revenue over expenses and disbursements252, 791.				s L		$\frac{252,79}{1}$	*				***	^ ·	
b Net investment income (if negative, enter -0-)				· · · —				-0-			<u> </u>		
c Adjusted net income (if negative, enter -0-) NONE  For Paperwork Reduction Act Notice, see page 30 of the instructions.  JSA  Form 990-PF	c	Adjusted net incom-	e (if negative, enter -0	0-)						NON			

Page 2

Part II			Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	nd of year		
	art II	Balance Sheets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-beari	ng			250 100		
	2	Savings and temporary	cash investments	228,510.	253,120	. 253,120		
	3	Accounts receivable ▶		man a ma		· · · · · · · · · · · · · · · · · · ·		
			btful accounts ▶			<u> </u>		
	4	Pledges receivable ▶_	<b></b> _	e electric de la constitut d				
		Less. allowance for doul	btful accounts ▶					
	5	Grants receivable						
	6	Receivables due from	officers, directors, trustees, and other					
			ach schedule) (see page 15 of the instructions)			*, , ,		
	7		eceivable (attach schedule)			\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
		Less allowance for doub	btful accounts ►NONE	-				
જ	8	Inventories for sale or us				ļ		
Assets	9	•	eferred charges		06 511	06 611		
ä			government obligations (attach school).		96,511			
			stock (attach schedule) . STMT 6		93,430			
	11 6	Investments - corporate Investments - land, building	bonds (attach schedule). STMT 8		84,253	. 85,096		
	''					***		
			ation > see attachment	4,170,170.	3,617,926	. 3,379,590		
			loans			<u> </u>		
	13 14	Investments - other (atta Land, buildings, and	ach schedule)		X			
	'-	equipment basis Less accumulated deprecia	• • • • • • • • • • • • • • • • • • •		v.	· '		
		(attach schedule)				ļ		
	15		<b>&gt;</b> )			<del> </del>		
	16	•	completed by all filers - see the		4 145 040	2 000 000		
_			age 1, item I)	4,398,680.	4,145,240	3,928,906		
	17		accrued expenses			- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	18		• • • • • • • • • • • • • • • • • • • •					
ies	19			1				
iabilities	20		ors, trustees, and other disqualified persons					
Lia	21		otes payable (attach schedule)					
	22	Other liabilities (describ	e ►)					
	23	Total liabilities (add line	es 17 through 22)			13 4 6 6 6		
_	20		low SFAS 117, check here ▶			<b>-</b>		
			24 through 26 and lines 30 and 31.			I was to be an		
ģ	24	-						
lances	25							
		• •	· · · · · · · · · · · · · · · · · · ·			The same street		
8	26		not follow SFAS 117,					
Ş		check here and com	plete lines 27 through 31.					
ě	27		cipal, or current funds	4,398,680.	4,145,240			
			r land, bldg , and equipment fund			1		
Assets	29		lated income, endowment, or other funds					
Ä	30		fund balances (see page 17 of the			<b>1</b> . ` ` ' ''		
Net				4,398,680.	4,145,240			
	31		et assets/fund balances (see page 17					
		of the instructions)		4,398,680.	4,145,240			
P	art II		anges in Net Assets or Fund					
			palances at beginning of year - Part		(must agree with			
			on prior year's return)		- 1	4,398,680.		
2						-252,791.		
3	Othe	r increases not includ	line 27a led in line 2 (itemize) ► SEE STA	TEMENT 10	3	46.		
4						4,145,935.		
5	Decr	eases not included in	line 2 (itemize) ▶ SEE STA	TEMENT 11	5	695.		
<u>6</u>			lances at end of year (line 4 minus li			4,145,240.		
						Form <b>990-PF</b> (2010)		

Pa	Part IV Capital Gains and Losses for Tax on Investment Income										
		d describe the kind(s) of property sold (orrick warehouse; or common stock, 200	-	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo , day, yr )					
1a	SEE PART IV DETA	AIL		20.00.00							
b											
c											
<u>_d</u>				ļ							
e		Ţ ·	· · · · · · · · · · · · · · · · · · ·								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu						
<u>a</u>											
<u>_b</u>											
_c				<u> </u>							
<u>d</u> e											
		showing gain in column (h) and owned	by the foundation on 12/31/69	<u> </u>	Caina (Cal. (b) an						
	(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		Gains (Col. (h) ga (k), but not less t Losses (from co	than -0-) <b>or</b>					
				· · · · ·							
_ <u>=</u>				<u> </u>		<del></del> -					
c											
d				<u> </u>							
е											
2	Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-54,114.					
		n or (loss) as defined in sections 122									
		line 8, column (c) (see pages 13 ar									
	If (loss), enter -0- in Part I,	line 8	<del> </del>	3							
		Jnder Section 4940(e) for Red private foundations subject to the									
Wa		leave this part blank. the section 4942 tax on the distrib		ase perio	d?	Yes X No					
1		ount in each column for each year;	see page 18 of the instructions be	ore maki							
	(a) Base period years	(b)	(c)		(d) Distribution ra	tio					
_ C.	alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	-	(col (b) divided by						
	2009	75,849.	4,301,791.			63195841					
	2008 2007	131,380. 294,445.				002576118					
_	2006	294,445.	3,463,656.		0.062	00300331					
	2005				· ··	<del></del>					
		<u> </u>	-								
2	Total of line 1, column (d	)		2	0.132	66760510					
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	0.044	22253503					
4	Enter the net value of nor	ncharitable-use assets for 2010 from	m Part X, line 5	4	3	,951,734.					
5	Multiply line 4 by line 3		5		174,756.						
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6							
7	Add lines 5 and 6			7		174,756.					
8	Enter qualifying distributions of grant VI instructions on page	ons from Part XII, line 4	n Part VI, line 1b, and complete t	8 hat part (	using a 1% tax	178,430. rate. See the					

Form :	990-PF (2010) 20-3859323		r	'age 4
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of	the inst	ructio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			-
	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		N	IONE
	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, col (b)	£		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		N	IONE
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		N	IONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		N	IONE
6	Credits/Payments	_ { `		,
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a		*	4
b	Exempt foreign organizations-tax withheld at source 6b NONE	* "	, , , ,	<b>*</b>
c	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld 6d 6d	<u> </u>	· 🚕 😁	
7	Total credits and payments Add lines 6a through 6d		N	IONE
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		N	ONE
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refunded ▶ 11			
Part	VII-A Statements Regarding Activities	T		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	«×	Yes	No
	participate or intervene in any political campaign?	. <u>1a</u>		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	. 1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1 1		x**
	published or distributed by the foundation in connection with the activities.		_,	77
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. >\$(2) On foundation managers >\$	3g. 1/2	· .	**
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		,	*
_	on foundation managers  \$	à		X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	·   2	<del>,</del>	<u>, ^</u>
_	If "Yes," attach a detailed description of the activities	1.		W.
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			X
4.	Incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		<u>^</u> X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b		
5	If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
,	If "Yes," attach the statement required by General Instruction T.		2	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	V453	,	2 .
	By language in the governing instrument, or			4"
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		, 563, ,	, %
	conflict with the state law remain in the governing instrument?	. 6	Х	
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	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	1300	ૢ૽ૢૢૢૢૢૢૢૢૢૢઌૢૻ	· 1 · >
	ınstructions) ▶			, , , , , , ,
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	* 5 * *		# P. P.
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	. Вь	X_	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	- A		أوتت بالات
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			
	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			7.
	names and addresses	. 10		X
		Form 990	O-PF (	2010)

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

Form **990-PF** (2010)

3b

4a

ı aı	Otatements negarating Activities for	William Collin 47	ZO Way Be Hedu	ica (continuou)				
5a	During the year did the foundation pay or incur any amour (1) Carry on propaganda, or otherwise attempt to influence		4945(0))7	Yes X No		3	1	
	(2) Influence the outcome of any specific public election (	•			' l			
	• • • •			Yes X No			1	
	directly or indirectly, any voter registration drive?			Yes X No		.50	3.	
				iesinc	' l			
	(4) Provide a grant to an organization other than a charita			Yes X No		.		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (si			YesX_No	) <u> </u>	٠, "١	< f	
	(5) Provide for any purpose other than religious, charitable	•						
	purposes, or for the prevention of cruelty to children o				)	100	*	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa	• •	•					
	Regulations section 53 4945 or in a current notice regard	-				3.1	أموت ال	
	Organizations relying on a current notice regarding disaste			▶ 🗀			*\	
C	If the answer is "Yes" to question 5a(4), does the foundation	•				1.2	* (	
because it maintained expenditure responsibility for the grant? Yes								
	If "Yes," attach the statement required by Regulations secti	on 53 4945-5(d)			, i	- 49		
6a	Did the foundation, during the year, receive any funds, dire	ectly or indirectly, to	pay premiums				1.	
	on a personal benefit contract?			. Yes X No	1 2 4		27.5	
b	Did the foundation, during the year, pay premiums, directly	y or indirectly, on a p	ersonal benefit contrac	t?	6b		_X	
	If "Yes" to 6b, file Form 8870						٠ سور د	
7a	At any time during the tax year, was the foundation a part	y to a prohibited tax :	shelter transaction?	. Yes X No	·			
	If "Yes," did the foundation receive any proceeds or have a							
Par	Information About Officers, Directors, and Contractors	, Trustees, Foun	dation Managers,	Highly Paid Empl	oyees,			
1	List all officers, directors, trustees, foundation mar	nagers and their c	ompensation (see p	page 22 of the instru	ctions).			
	(a) Name and address	(b) Title, and average	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	(e) Expens			
	<b>1.</b>	hours per week devoted to position	-0-)	and deferred compensation	other all	owance	es	
SEE	STATEMENT 13		25,316.	-0-		-0-		
	Compensation of five highest-paid employees (oth frome, enter "NONE."	er than those incl	uded on line 1 - see	page 23 of the inst	ructions).			
		(b) Title, and average		(d) Contributions to	(.) 5			
(a	Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expens other all			
		devoted to position		compensation				
NOI	E		NONE	NONE	N	ONE		
Tota	I number of other employees paid over \$50,000 .	· · · · · · · · · · · · · · · · · · ·				► NC		
					Form 99	A DE	100101	

Form 990-PF (2010)	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)	Paid Employees,
3 Five highest-paid independent contractors for professional services (see page 23 of the instru	uctions). If none, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of s	ervice (c) Compensation
NONE	NONE
Total number of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as organizations and other beneficiaries served, conferences convened, research papers produced, etc	the number of Expenses
1NONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>NONE</u>	
2	
All other program-related investments See page 24 of the instructions	
3NONE	
Total. Add lines 1 through 3	▶

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions.)	n foundation	IS,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	?2 <	
	purposes:	2.10	
а	Average monthly fair market value of securities	1a	563,002.
b		1b	-671.
C	Fair market value of all other assets (see page 25 of the instructions)	1c	3,449,582.
d		1d	4,011,913.
е	Reduction claimed for blockeds or other feature reported on lines 1s and	r yř	
	1c (attach detailed explanation)	· 	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Culatorat long Office the Color and	3	4,011,913.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25 of		
	the instructions)	4	60,179.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,951,734.
6	Minimum investment return. Enter 5% of line 5	6	197,587.
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here ▶ and do not complete this page.		
1	Mınımum investment return from Part X, line 6	1	197,587.
2a	Tax on investment income for 2010 from Part VI, line 5 2a NONE		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	197,587.
4	Recoveries of amounts treated as qualifying distributions	4	200.
5	Add lines 3 and 4	5	197,787.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	197,787.
Pa	ort XII Qualifying Distributions (see page 25 of the instructions)		
1		*43	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	178,430.
þ	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)		NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	178,430.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del></del>	1/0,430.
-	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	178,430.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculated an experiment of the column (b) and the column (b) are subsequent years when calculated an experiment of the column (b) are subsequent years.	-	
	qualifies for the section 4940(e) reduction of tax in those years.	ulatiliy wileti	iei tile loulludtion

Form **990-PF** (2010)

	990-PF (2010)	00 (11 1 1 1	<del>,</del>		Page 3
Pai	t XIII Undistributed Income (see page	26 of the instruction	ns)		<del></del>
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
	line 7				197,787.
2	Undistributed income, if any, as of the end of 2010			,	
а	Enter amount for 2009 only			43,477.	, , , , ,
b	Total for prior years 20 08 , 20, 20		NONE		
3	Excess distributions carryover, if any, to 2010	>			
а	From 2005 NONE				
ь	From 2006 NONE				,
C	From 2007 NONE	*		<i>i</i> .	
d	From 2008 NONE				
е	From 2009 NONE	n <b>nón</b> en escentrator-se			a 💰 🗀 😘 , 😘 ,
f	Total of lines 3a through e	NONE		<	
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$178,430.	1			, '
а	Applied to 2009, but not more than line 2a	*	*	43,477.	**
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)		NONE	\$ !	** * *
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)	NONE	4x4'." # +	à · ~	14 1 (A)
d	Applied to 2010 distributable amount	· · · · · · · · · · · · · · · · · · ·	* ` `		134,953.
	Remaining amount distributed out of corpus	NONE			, and 12 1
5	Excess distributions carryover applied to 2010	NONE	**	4 3	NONE
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	NONE		``,'\\	. Krigorinesisi
	Prior years' undistributed income Subtract line 4b from line 2b	,	NONE		
c	Enter the amount of prior years' undistributed		1101112	* \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	, 3, 84,
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has	* .	27027		* .
	been previously assessed		NONE	* * *	<u> </u>
d	Subtract line 6c from line 6b. Taxable		NONE	1	,
e	amount - see page 27 of the instructions	· · · · · · · · · · · · · · · · · · ·	NONE		3
_	4a from line 2a Taxable amount - see page				
	27 of the instructions				· · · · · · · · · · · · · · · · · · ·
f	Undistributed income for 2010 Subtract lines		Ž.		
	4d and 5 from line 1. This amount must be distributed in 2011.	~	,	**************************************	62,834.
7	Amounts treated as distributions out of corpus		· · · · · · · · · · · · · · · · · · ·		(4), , he p. 1, 8, 1,
	to satisfy requirements imposed by section			·	Ä
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	NONE		. 47.°**	The state of the state of
8	Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the	NONE	,	\$	
	instructions)	TAOM P			* * *
9	Excess distributions carryover to 2011.	NONE		*	
10	Subtract lines 7 and 8 from line 6a	IVOIVE	<u> </u>	, «	85°2
	Excess from 2006 NONE	İ	· · · · · · · · · · · · · · · · · · ·	<i>"</i> "	"_der, went of "
ь	Excess from 2007 NONE	İ		•	• *
c	370370		*		CR 12 milying & Spanie
	Excess from 2009 NONE				
	Excess from 2010 NONE	ļ			
	HONE)	<u>.</u> .			Form 990-PF (2010)

rom	1990-PF (2010)			20-3	<u>859323</u>			Page 10
Pa	t XIV Private Oper	ating Foundations (s	ee page 27 of the	instructions and Part	VII-A, que	stion 9)	NOT APP	PLICABL
1 a	If the foundation has	received a ruling or de	termination letter tha	it it is a private operat	ting			
	foundation, and the ruling	is effective for 2010, ente	er the date of the ruling		. ▶∟			
b	Check box to indicate who	ether the foundation is a p	rivate operating founds	tion described in section		4942(j)(3	) or	4942(j)(5)
2a	Enter the lesser of the ad-	Tax year		Prior 3 years			(e) To	ntal
	justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 20	07		
	I or the minimum investment return from Part X for each year listed							
b	85% of line 2a		<del></del>					
	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 • • • • •							
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							
а	"Assets" alternative test - enter							
-	(1) Value of all assets							
	(2) Value of assets qualifying							
	under section							
b	4942(j)(3)(B)(i)							
	enter 2/3 of minimum invest-					ĺ		
	ment return shown in Part X,					1		
С	line 6 for each year listed "Support" alternative test - enter							
•	(1) Total support other than							
	gross investment income							
	(interest, dividends, rents, payments on securities					]		
	loans (section 512(a)(5)),					ł		
	or royalties)	-						
	public and 5 or more					ŀ		
	exempt organizations as provided in section 4942					ŀ		
	(j)(3)(B)(m)							
	(3) Largest amount of sup- port from an exempt organization							
	(4) Gross investment income.							
Pa	rt XV Supplementa	ary Information (Co	mplete this part	only if the founda	tion had	\$5,000 o	r more i	n assets
	at any time o	luring the year - see	page 28 of the in	structions.)				
1	Information Regarding	Foundation Managers	<b>:</b>					
а	List any managers of before the close of any	the foundation who ha	eve contributed more	e than 2% of the total more than \$5,000). (Se	contribution e section 50	ns received )7(d)(2).)	by the fo	oundation
	N/A	tan your (aut only in the	,					
	List any managers of	the foundation who e	100/ or more o	f the steek of a corner	ration for a	o oqually la	arge portic	on of the
IJ				n has a 10% or greater i		ii equaliy id	iige poitic	on the
	or a partitor	omp or other onerty, or	villon the realization	ir nad a 1070 or grouter				
	N/A							
2	Information Regarding	Contribution, Grant, 6	Gift, Loan, Scholarsh	ip. etc Programs:				
_					bla araani	intions and	l doos no	t accort
	Check here ► X if t	ne toundation only in or funds, if the found	ation makes diffs.	to preselected charita grants, etc. (see page	able organia	instructions	to indiv	uduals or
	organizations under ot				20 01 111 <del>0</del>	IIISti uctions	, to mare	iddais of
a	The name, address, an	<del> </del>			addressed:			
b	The form in which app	lications should be sub	mitted and informati	on and materials they s	hould includ	e:		
_	Any submission deadli	nes:		<del></del>				
•	y dabitiioolon doddiii							
d	Any restrictions or li factors:	mitations on awards,	such as by geogra	aphical areas, charitab	le fields, k	inds of ins	titutions,	or other

Form 990-PF (2010)		A*			Page 1
Part XV Supplementary Info 3 Grants and Contributions	Ormation (	continued)	oved for E	Litura Baymant	
Recipient	Paid Durin	If recipient is an individual,	Foundation	II	
Name and address (home or b	nusiness)	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
a Paid during the year	3431110337	or substantial contributor	recipient		
a raid dailing into you.					
SEE STATEMENT 19					
				1	
				1	
		1			
Total	·			▶ 3a	168,910
<b>b</b> Approved for future payment					
			1		
					<u> </u>
		]			İ
Total			L	▶ 3b	

Part XVI-	-A Analysis of Income-Produ	cing <u>Activ</u>	vities			
Enter gross	amounts unless otherwise indicated.	Unrela (a)	ated business income	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue	Business code		Exclusion code		(See page 28 of the instructions.)
_						
_						
c						
_						
е						
f						
	and contracts from government agencies					
2 Member	rship dues and assessments			ļ		
	on savings and temporary cash investments			14	112.	
	ds and interest from securities			14	4,046.	
		and a " Maran	. No control district and	, , , , , , , , , , ,	a in the same	
	t-financed property			1.6	1 601	
	debt-financed property			16	1,691.	
	al income or (loss) from personal property					
	vestment income	<b></b>		1.0	E4 114	
	loss) from sales of assets other than inventory	<u> </u>		18	-54,114.	
	ome or (loss) from special events	<u> </u>				
•	rofit or (loss) from sales of inventory			ļ		
_	evenue a					
_						
e				<del> </del>		
12 Subtota	l. Add columns (b), (d), and (e)	· \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\			-48,265.	
	add line 12, columns (b), (d), and (e)			<del></del>		-48,265.
(See worksh	neet in line 13 instructions on page 29 to	o verify calcu	ulations)			10/203.
	B Relationship of Activities			empt Purp	oses	
Line No.	Explain below how each activit	y for which	h income is reported in	n column (	e) of Part XVI-A contribu	ited importantly to the
•	accomplishment of the foundation					
	instructions.)					
				<del> </del>		
			NOW ADDITIONED			<del></del>
			NOT APPLICABLE	<u> </u>	<u> </u>	
					<u> </u>	
<del></del>					<u></u> <u></u>	
						·
	<del> </del>					
		<del> </del>				
	<u> </u>			<del></del>		<del></del>
	1					
	<u> </u>		<del></del>			
						<del></del>

Page **13** Form 990-PF (2010) Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of 1a(1 1a(2) (2) Other assets . . . **b** Other transactions (1) Sales of assets to a noncharitable exempt organization. 1b(1 (2) Purchases of assets from a noncharitable exempt organization . . . 1b(2) X (3) Rental of facilities, equipment, or other assets . . . . 1b(3) X (4) Reimbursement arrangements . . . . . . . . . Х (5) Loans or loan guarantees . . . . . . . . . . . . 1b(6) (6) Performance of services or membership or fundraising solicitations . . . c Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 5277............ b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Sign Here ure of officer or trustee REGIONS BANK. TRUSTEE PTIN rint/Type preparer's name Preparer's signature Date

Check

Firm's EIN ▶

Phone no.

self-employed

Paid

**Preparer** 

**Use Only** 

Firm's name

Firm's address

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description					Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	Ĭ	Gain or	
expenses of sale	allowable	682.58 FEDE PROPERTY TY 730.00		DAN MTG CORP	POOL #	Б	06/08/2010 -47.00	07/15/2010
786.00		785.81 FEDE		OAN MTG CORP FIES	POOL #	P	06/08/2010 -54.00	08/16/2010
996.00		996.47 FEDE PROPERTY TY 1,066.00		OAN MTG CORP FIES	POOL #	P	06/08/2010 -70.00	09/15/2010
1,018.00		1018.14 FED PROPERTY TY 1,089.00		LOAN MTG COR FIES	P POOL	Þ	06/08/2010 -71.00	10/15/2010
1,150.00		1150.4 FEDE PROPERTY TY 1,230.00		OAN MTG CORP FIES	POOL #	P	-80.00	11/15/2010
1,059.00		1058.7 FEDE PROPERTY TY 1,132.00		OAN MTG CORP FIES	POOL #	P	-73.00	12/15/2010
238.00		PROPERTY TY	PE: SECURI				-21.00	07/15/2010
77.00		76.9 FEDERAL PROPERTY TY 84.00		N MORTGAGE P FIES	OOL #A8	P	06/08/2010 -7.00	08/16/2010
6,150.00		5703.64 FED PROPERTY TY 6,196.00		LOAN MORTGAG FIES	E POOL	P	06/08/2010 -46.00	09/13/2010
301.00		300.61 FEDE PROPERTY TY 327.00		OAN MORTGAGE FIES	POOL #	P	-26.00	09/15/2010
673.00		673.44 FEDE PROPERTY TY 731.00		AL MORTGAGE FIES	ASSN PO	P	-58.00	07/26/2010

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

<i>CP</i>	APITAL GAI	NS AND LO	SSES FOR	RIAX ON I	INVES II	IIV Idi	ENT INCOM	<u>                                     </u>
Kınd of P	roperty		Descr	iption		or Or	Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	Ĭ	Gain or	
expenses of sale	allowable	basis	12/31/69	12/31/69	ad <u>ı basis</u>	$\dagger \dagger$	(loss)	
		714.33 FEDER			ASSN PO	P	06/08/2010	08/25/2010
714.00		775.00	en. Becoki	. 163			-61.00	
		1089.89 FEDE			E ASSN P	P	06/08/2010	09/27/2010
1,090.00		PROPERTY TYP	PE: SECURIT	TES			-93.00	
		1234.93 FEDE			E ASSN P	Þ	06/08/2010	10/25/2010
1,235.00		PROPERTY TYP	PE: SECURIT	TIES			-105.00	
		683.82 FEDER			ASSN PO	P	06/08/2010	11/26/2010
684.00		PROPERTY TYP	PE: SECURIT	TES			-58.00	
		697.32 FEDER			ASSN PO	E	06/08/2010	12/27/2010
697.00		PROPERTY TYP	PE: SECURIT	TES			-60.00	
		192.99 FEDER			ASSN PO	E	06/08/2010	07/26/2010
193.00		PROPERTY TYP 206.00	PE: SECURI	TES			-13.00	
		61.87 FEDERA			ASSN POO	E	06/08/2010	08/25/2010
62.00		PROPERTY TYP	PE: SECURI	TIES			-4.00	
		232.81 FEDER			ASSN PO	P	06/08/2010	09/27/2010
233.00		PROPERTY TYP 248.00	PE: SECURIT	TES			-15.00	
		192.54 FEDER			ASSN PO	Þ	06/08/2010	10/25/2010
193.00		PROPERTY TYP	PE: SECURIT	TES			-12.00	
		201.33 FEDER			ASSN PO		06/08/2010	11/26/2010
201.00		PROPERTY TYP	PE: SECURIT	TES			-14.00	
		241.51 FEDER			ASSN PO		06/08/2010	12/27/2010
242.00		258.00	PROPERTY TYPE: SECURITIES 258.00				-16.00	
		<u> </u>	·			Ц		

FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CA	APITAL GAI	<u>NS AND LO</u>	SSES FOR	I IAX UN	<u>IIVVES I I</u>	<b>[]V</b>	FINE INCOM		
Kind of P	roperty		Descr	ption		51	Date Date sold acquired		
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	Ĭ	Gain or (loss)		
4.00		.602 FRONTII PROPERTY TY	ER COMMUNIC	CATIONS COR		P	06/07/2010	07/08/2010	
67.00		9. FRONTIER PROPERTY TY 64.00				P	06/07/2010 3.00	08/06/2010	
991.00		1000. MICRO PROPERTY TY 1,000.00			010 1.62	P	-9.00	11/30/2010	
		1000. MICROS			010 1.62	P		11/30/2010	
989.00		996.00 2000. GCB PI			SIP FOR	P	-7.00 06/08/2010	11/02/2010	
2,626.00		PROPERTY TY	PE: SECURIT	TES			124.00		
4,033.00		4000. UNITE PROPERTY TY 4,000.00			E 5.00%	P	33.00	12/10/2010	
2,003.00		2000. UNITE PROPERTY TY: 2,000.00			DTD 2/2	P	3.00	12/10/2010	
184,367.00		184000. UNI PROPERTY TY 184,185.00			/B DTD 1	P	182.00	06/08/2010	
2,009.00		2000. UNITED PROPERTY TYPE 2,001.00			DTD 11/	P	05/11/2010 8.00	11/16/2010	
1,099.00		20. TRANSOCI PROPERTY TYI 1,012.00		PIES		P	06/07/2010 87.00	08/17/2010	
62,610.00		. 44 ACRES I PROPERTY TY 90,229.00			S RD, SC	D	03/17/2005	04/22/2010	
JSA									

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME											
Kind of F	Property		Descr	ption		6	Date acquired	Date sold			
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)				
expenses of sale	allowable	Dasis	12/31/09	112/31/65	du basis	П	(1033)				
		. 13 ACRES I			CT #31,	ם	03/17/2005	01/25/2010			
225,000.00		PROPERTY TY 237,290.00	PE: SECURIT	TES			-12,290.00				
		. 13 ACRES I			CT #31,	Þ	03/17/2005	05/25/2010			
250,000.00		263,625.00	il. becomi	.110			-13,625.00				
:							<b></b>				
TOTAL GAIN(I	oss)					,	-54,114.				
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							;				
						$\ $		i			
JSA		L				Ц					

Taxpayer's Name Identifying Number BYNUM FOUNDATION 1055001912 20-3859323 **DESCRIPTION OF PROPERTY** 44 ACRES M/L S MARGIN SNODGRASS RD, Yes No Did you actively participate in the operation of the activity during the tax year? RENTAL INCOME 1,869. OTHER INCOME 1,869. OTHER EXPENSES: **INSURANCE** TAXES 1,216 OTHER EXPENSES DEPRECIATION (SHOWN BELOW) 19 87 38 7 14 a depart LESS: Beneficiary's Portion TOTAL EXPENSES . . . . . . . . . . . . . . . . 1,377. TOTAL RENT OR ROYALTY INCOME (LOSS) · · · · 492. Less Amount to Rent or Royalty Investment Interest Expense Other Expenses . . . . . . . . . . . . . Net Income (Loss) to Others Net Rent or Royalty Income (Loss) 492. Deductible Rental Loss (if Applicable) SCHEDULE FOR DEPRECIATION CLAIMED (g) Depreciation (r) Life (e) (b) Cost or (c) Date (f) Basis for (j) Depreciation (h) ACRS Bus (a) Description of property ın or unadjusted basis for this year acquired depreciation Method des prior years rate Totals · · · · · · · · · ·····

**RENT AND ROYALTY INCOME** 

0E7000 1 000

### SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

### OTHER DEDUCTIONS

12. OTHER RENTAL EXPENSES 12. ========

Identifying Number Taxpayer's Name 20-3859323 BYNUM FOUNDATION 1055001912 **DESCRIPTION OF PROPERTY** 160 AC TIMBERLAND MTN. TOP VALUES-LAND, Yes No Did you actively participate in the operation of the activity during the tax year? 800. RENTAL INCOME OTHER INCOME 800. OTHER EXPENSES: INSURANCE 163 TAXES 424. OTHER EXPENSES DEPRECIATION (SHOWN BELOW) LESS: Beneficiary's Portion TOTAL EXPENSES . . . . . . . . . . . . . . . . . 599. 201. TOTAL RENT OR ROYALTY INCOME (LOSS) . . . . . **Less Amount to** Rent or Royalty Investment Interest Expense Net Income (Loss) to Others . . . . Net Rent or Royalty Income (Loss) . . . . 201. Deductible Rental Loss (if Applicable) SCHEDULE FOR DEPRECIATION CLAIMED (g) Depreciation (ı) Life (e) (b) Cost or (c) Date (f) Basis for (h) (j) Depreciation ACRS or Bus ın (a) Description of property unadjusted basis Method for this year depreciation acquired des prior years rate Totals . . . . . . . . . . . .

**RENT AND ROYALTY INCOME** 

0E7000 1 000

### SUPPLEMENT TO RENT AND ROYALTY SCHEDULE -------

OTHER DEDUCTIONS

OTHER RENTAL EXPENSES

12. 12. ========

Taxpayer's Name Identifying Number BYNUM FOUNDATION 1055001912 20-3859323 **DESCRIPTION OF PROPERTY** 79.80 AC M/L SE MARGIN HWY 72 Yes No Did you actively participate in the operation of the activity during the tax year? RENTAL INCOME 1,869. OTHER INCOME 1,869. OTHER EXPENSES: INSURANCE 1,433 TAXES OTHER EXPENSES DEPRECIATION (SHOWN BELOW) LESS: Beneficiary's Portion LESS: Beneficiary's Portion LESS: Beneficiary's Portion 1,594. 275. TOTAL RENT OR ROYALTY INCOME (LOSS) · · · Less Amount to Rent or Royalty **Investment Interest Expense** Other Expenses . . . . . . . . . . . . Net Income (Loss) to Others 275. Net Rent or Royalty Income (Loss) Deductible Rental Loss (if Applicable) SCHEDULE FOR DEPRECIATION CLAIMED (ı) Life (e) (g) Depreciation (b) Cost or (c) Date (f) Basis for (h) (j) Depreciation ACRS Bus or (a) Description of property Method for this year acquired depreciation unadjusted basis des prior years rate 

**RENT AND ROYALTY INCOME** 

0E7000 1 000

### SUPPLEMENT TO RENT AND ROYALTY SCHEDULE -----

## OTHER DEDUCTIONS

OTHER	RENTAL	EXPENSES	12.
			12.
			=======================================

Identifying Number Taxpayer's Name 20-3859323 BYNUM FOUNDATION 1055001912 **DESCRIPTION OF PROPERTY** 29 AC M/L VACANT TRACT CLOVERDALE & Yes No Did you actively participate in the operation of the activity during the tax year? RENTAL INCOME 1,869. OTHER INCOME 1,869. TOTAL GROSS INCOME OTHER EXPENSES: **INSURANCE** 149 985 TAXES OTHER EXPENSES DEPRECIATION (SHOWN BELOW) LESS: Beneficiary's Portion . . . . . . . . . . . . . . . . LESS: Beneficiary's Portion 1,146. TOTAL EXPENSES TOTAL RENT OR ROYALTY INCOME (LOSS) · · · · · · Less Amount to Investment Interest Expense Other Expenses . . . . . . . . . . . . Net Income (Loss) to Others 723 Net Rent or Royalty Income (Loss) SCHEDULE FOR DEPRECIATION CLAIMED (g) Depreciation (i) Life (d) (e) (b) Cost or (c) Date (f) Basis for (h) (i) Depreciation **ACRS** Bus (a) Description of property unadjusted basis Method for this year acquired depreciation prior years des ............ Totals · · · · · · · · ·

**RENT AND ROYALTY INCOME** 

### SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

### OTHER DEDUCTIONS

OTHER RENTAL EXPENSES 12. 12. ========

INVESTMENTS	
CASH	
TEMPORARY	
ON	}  }  }
INTEREST	
ı	
PART I	======
FORM 990PF,	

	NET	NVESTMENT	INCOME	1 1 1 1 1 1	112.	112.
REVENUE		•	PER BOOKS		112.	112.
						TOTAL
			DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	OTHER INTEREST	

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FEES	11 11 11 11
OUNTING	
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PART I	
990PF,	
FORM	

CHARITABLE PURPOSES	900.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	.006
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

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TAXES	       
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	NET	INVESTMENT	INCOME	1 1 1 1 1	Т	8,450.	31.	4.	; 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8,486.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1 1 1 1 1 1 1	ļ.	8,450.			1 1 1 1 1 1	8,451.	
			DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FOREIGN TAXES	REAL ESTATE TAX ON NON-RENTAL	FOREIGN TAXES ON QUALIFIED DIV	FOREIGN TAXES ON NONQUALIFIED		TOTALS	

1055001912

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CHARITABLE PURPOSES	105.
NET INVESTMENT INCOME	792.
REVENUE AND EXPENSES PER BOOKS	4,716. 105. 52. 792.
DESCRIPTION	RENT AND ROYALTY EXPENSES OTHER NON-ALLOCABLE EXPENSE - OTHER NON-ALLOCABLE EXPENSE - REAL ESTATE EXPENSE ON NON-REN REAL AND ROYALTY EXPENSES

157.

5,665.

TOTALS

5,508.

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STATEMENT

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

BYNUM FOUNDATION 1055001912

ENDING FMV 	5,270. 7,048. 2,171. 9,619. 14,055. 3,992. 3,773. 19,455. 24,550.	
ENDING BOOK VALUE	5,371. 7,079. 2,173. 9,357. 14,010. 3,990. 3,783. 19,693. 24,352.	
DESCRIPTION	FHLM CORP 5.75% 1/15/12 FANNIE MAE 2.75% 4/11/2011 TENNESSE VALLEY 6.79% 5/23/12 US TREASURY 1.375% 7/15/18 US TREASURY .75% 11/30/11 US TREASURY 3.625% 2/15/20 US TREASURY .75% 8/15/13 US TREASURY 2.625% 11/15/20 FHLM POOL#G13378 5% FNMA POOL#930055 6% FNMA POOL#963138 5%	

- CORPORATE STOCK 990PF, PART II FORM

ENDING FMV	958. 11,2888. 11,067. 11,067. 11,067. 11,067. 11,067. 11,067. 11,068. 11,068. 11,053. 11,116. 11,239.
ENDING BOOK VALUE	1,174. 1,330. 1,210. 1,0839. 1,10839. 1,10839. 1,1024. 1,1024. 1,1028. 1,1028. 1,1028. 1,1029.
DESCRIPTION	ABBOT LABS ALLERGAN LABS AMERICAN EXPRESS CO APACHE CORP BANK OF AMERICA CORP CVS/CAREMARK CORP CATERPILLAR INC CHEVRON CORP CISCO SYSTEMS DELL INC WALT DISNEY CO EMC CORP EATON CORP EXCLON CORP EXCLON CORP EXCLON CORP EXCLON CORP EXCLON CORP EXCLON CORP INTL CORP INCROSOFT CORP MONSANTO CO NORFOLK SOUTHERN CORP

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90PF, PART I	
1 990PF, PART I	
M 990PF, PART I	

ENDING FMV	1,307.	177	4 ú	,67	98,	, 07	1,107.	, 86	, 11	, 57	9	,43	വ	, 0.7	9 7	40,0	5,83	9		9,191.	9,046.	114,489.
ENDING BOOK VALUE	1,248.	, 12		ц,	, 10	,02	, uo , 13	, 24	7	ω	4	, 02	9	, 02	υ . Η Γ	, U5	, 02	σ	, 51	,38	2	93,430.
DESCRIPTION	PEPSICO INC PHILIP MORRIS INT INC PROCTER & GAMBLE CO	PRUDENTIAL FIN INC	QUALCOMM INC ROBERT HALF INTL INC	SCHLUMBERGER LTD	STATE STREET CORP		THERMO FISHER SCIENTIFIC INC 3 MCO	TIFFANY & CO	TRAVELLERS COMP INC	UNITED TECHNOLOGIES CORP	VF CORP	VERIZON CORP COMM	VISA-INC-CLASS A SHRS	WALMART STORES INC	WALGREEN CO	TEVA PHARMACEUTICAL		OPPENHEIMER MAIN ST SMALL CAP	PIONEER SELECT MID CAP GROWTH	AMERICAN EUROPACIFIC GRTH-F-2	MFS RESH INTL FD CL I	TOTALS

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CORPORATE BONDS PART 990PF, FORM

BYNUM FOUNDATION 1055001912

ENDING ENDING BOOK VALUE FMV	2,069. 1,965. 2,085. 2,085. 2,082. 2,182. 2,182. 2,191. 2,072. 2,073. 2,082. 2,082. 2,083. 1,970. 2,288.	,180. 9,25 ,168. 6,19 ,090. 5,11
DESCRIPTION	13/08 13/08 13/08 13/08 10/27 13/08 10/17 10	.25% ORP RP 2

- CORPORATE BONDS FORM 990PF, PART II

ENDING BOOK VALUE

ENDING FMV

DESCRIPTION

TOTALS

84,253. 

.960,58 

36

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STATEMENT

1055001912

CBM898 9155 05/27/2011 08:48:39

FORM 990PF, PART III - OTHER	INCREASES IN NET	WORTH OR FUND	BALANCES =======
DESCRIPTION			AMOUNT
TIP OID INCOME ADJUSTMENT ROUNDING ADJUSTMENT			39. 7.
	TOTAL		46.

FORM 990PF, PAI	RT III - C	OTHER DECREASES	IN NET WORTH	OR FUND BALANCES	
==========	========	=======================================		=======================================	
DESCRIPTION				AMOUN	T
					-
AMORTIZATION A	DJUSTMENT				695.
		TOTA	<b>4</b> T.		695.
		1011	· <del></del>	========	=====

STATE(S) WHERE THE FOUNDATION IS REGISTERED \_\_\_\_\_ AL

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES \_\_\_\_\_\_ OFFICER NAME: REGIONS BANK ADDRESS: PO BOX 11426 BIRMINGHAM, AL 35202 TITLE: TRUSTEE AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1 COMPENSATION ..... 21,316. OFFICER NAME: ANDREW SKELTON ADDRESS: 907 BUCHANNAN SCOTTSBORO, AL 35768 TITLE: CHAIRMAN AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1 1,000. COMPENSATION ..... OFFICER NAME: MARK SKELTON SR. ADDRESS: 204 KIRBY STREET SCOTTSBORO, AL 35768 TITLE: BOARD MEMBER AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1 1,000. COMPENSATION ..... OFFICER NAME: WILLIAM TALLY ADDRESS: PO BOX 1067 SCOTTSBORO, AL 35768 TITLE: BOARD MEMBER AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1 1,000. COMPENSATION ......

.BYNUM FOUNDATION 1055001912

20-3859323

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES 

OFFICER NAME:

MARK SKELTON JR.

ADDRESS:

1445 LAKE CREEK RD

EDWARDS, CO 81632

TITLE:

BOARD MEMBER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION .....

1,000.

TOTAL COMPENSATION:

25,316.

### AVERAGE MONTHLY FMV - 990PF, PART X, LINES 1a-1c

MONTH	LINE 1a-FMV SECURITIES	LINE 1b-FMV CASH BALANCES	LINE 1c-FMV OTHER ASSETS
JANUARY FEBRUARY MARCH APRIL MAY JUNE JULY AUGUST SEPTEMBER OCTOBER NOVEMBER DECEMBER	441,516. 439,238. 437,841. 436,133. 730,976. 719,004. 726,940. 563,694. 572,459. 577,055. 561,855. 549,314.	NONE NONE NONE NONE -3,698. NONE NONE NONE NONE -9113,445. NONE	3,605,201. 3,605,202. 3,605,203. 3,542,594. 3,379,595. 3,379,596. 3,379,598. 3,379,599. 3,379,600. 3,379,601. 3,379,602.
TOTAL	6,756,025.	-8,054. ==========	41,394,988.
AVERAGE FMV	563,002.	-671.	3,449,582.

BYNUM FOUNDATION 1055001912 20-3859323 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: FIRST UNITED METHODIST CHURCH ADDRESS: 1105 S. BROAD STREET SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: DISCRETIONARY USE FOR THREE GRANT REQUESTS FOUNDATION STATUS OF RECIPIENT: PUBLIC 50,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: JACKSON COUNTY HISTORICAL ASSOCIATION ADDRESS: PO BOX 1494 SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: FOR REFURBISHING FREIGHT DEPOT, COMPUTER ETC FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID ..... 12,300. RECIPIENT NAME: SCOTTSBORO JACKSON HERITAGE CENTER ASSOCIATION ADDRESS: 208 S. HOUSTON STREET SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: FOR IRRIGATION SYSTEM, RETAINING WALL ETC FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID ..... 3,802.

20-3859323 BYNUM FOUNDATION 1055001912 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_\_ RECIPIENT NAME: CITY OF SCOTTSBORO ADDRESS: 316 SOUTH BROAD STREET SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: FOR SCOTT CEMETERY AND CEDAR HILL CEMETERY FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID ..... 45,000. RECIPIENT NAME: CARE ASSURANCE SYSTEM FOR THE AGING AND HOMEBOUND ADDRESS: 250 S. BROAD STREET SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: MINOR HOME REPAIRS, WHEELCHAIR RAMPS, ETC FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID ..... 8,220. RECIPIENT NAME: YOUTH LEADERSHIP JACKSON COUNTY ADDRESS: P. O. BOX 906 SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: FOR SCHOLARSHIP AWARDS FOUNDATION STATUS OF RECIPIENT: PUBLIC 7,500. AMOUNT OF GRANT PAID .....

20-3859323 BYNUM FOUNDATION 1055001912 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_ RECIPIENT NAME: COLLINS ELEMENTARY SCHOOL ATTN: CINDY WOOD ADDRESS: 102 LEGION DRIVE SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: OUT DOOR LABORATORY ITEMS FOUNDATION STATUS OF RECIPIENT: PUBLIC 15,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: SCOTTSBORO BOYS MUSEUM & CULTURAL CENTER, ATTN: GARY M. SPEERS ADDRESS: 428 W. WEST WILLOW STREET SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: TECH FOR CREATING PRESENTATION FOUNDATION STATUS OF RECIPIENT: PUBLIC 4,588. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: SCOTTSBORO CITY BOARD OF EDUCATION ATTN1: JUDITH L. BERRY ADDRESS: 305 S. SCOTT STREET SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: PROMETHEAN ACTIVE BOARDS FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID .....

10,000.

20-3859323 BYNUM FOUNDATION 1055001912 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: BOYS & GIRLS CLUBS OF NE AL, INC ATTN: TIM WOFFORD ADDRESS: P. O. BOX 22 GADSDEN, AL 35902 RELATIONSHIP: NONE PURPOSE OF GRANT: EQUIPMENT & PROGRAM MATERIALS FOUNDATION STATUS OF RECIPIENT: PUBLIC 5,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: SHS DRAMA DEPARTMENT ATTN: DEBORAH JONES ADDRESS: 25053 JOHN T. REID PARKWAY SCOTTSBORO, AL 35768 RELATIONSHIP: NONE PURPOSE OF GRANT: REAR SCRIM/SCREEN AND PROJECTORS FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID ..... 7,500. 168,910. TOTAL GRANTS PAID:

=============

### BYNUM FOUNDATION 1055001912

20-3859323

### RENT AND ROYALTY SUMMARY

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET INCOME
44 ACRES M/L S MARGI 160 AC TIMBERLAND MT 79.80 AC M/L SE MARG 29 AC M/L VACANT TRA	1,869. 800. 1,869. 1,869.		1,377. 599. 1,594. 1,146.	492. 201. 275. 723.
TOTALS	6,407.		4,716.	1,691.

# ATTACHMENT TO PART II, LINE 11 DETAIL LISTING OF REAL ESTATE ASSETS

### AS OF 12/31/2010

	A5 OF 12/51/2010		· · · · · · · · · · · · · · · · · · ·
CUSIP	ASSET NAME	BOOK VALUE	FAIR MARKET VALUE
	<u> </u>		——————————————————————————————————————
NM0004678	44 ACRES M/L SCOTTSBORO JACKSON CO, AL	\$179,620.39	\$247,390.00
NM0004686	13 ACRES M/L WOODED #31, JACKSON CO., AL	\$368,209.87	\$452,000.00
11110001000	13 Tested National Wood Barrier 13 Tested No. 10 Tested National N	<u> </u>	<b>\$</b> 10)
NM0004694	160 AC TIMBERLAND MTN. JACKSON CO AL	\$208,794.52	\$181,000.00
NM0004702	40 AC TIMBERLAND VALUES LAND	\$42,242.16	\$48,400.00
NM0004710	21.5 AC TIMBERLAND, VALUES LAND, JACKSON CO, AL	\$20,828.48	\$19,000.00
NM0004728	73 AC TIMBERLAND VALUES LAND, JACKSON CO, AL	\$88,475.00	\$100,000.00
NM0004736	TRACT 32, 6.02 AC M/L E MARGIN HWY, 72 JACKSON CO, AL	\$570,059.49	\$435,000.00
NM0004744	79.80 AC M/L, SCOTTSBORO, JACKSON CO, AL	\$1,791,914.87	\$1,600,000.00
RR0007528	1.77 AC M/L VACANT TRACT SCOTTSBORO, JACKSON CO, AL	\$96,628.02	\$52,000.00
RR0007536	13.47 AC M/L WALSH & WILSON STS, JACKSON CO, AL	\$27,524.50	\$23,000.00
1440007330	15.17 No Wil Walsii & Wilson 515, Jackson Co, All	Ψ21,324.30	\$25,000.00
RR0007551	VACANT LOT, E145 LOT 41, JACKSON CO, AL	\$2,800.00	\$4,000.00
RR0007569	LOTS 71-78 COFFEY BYNUM 3RD ADDN, JACKSON CO, AL	\$2,300.00	\$2,000.00
RR0007577	LOTS 69-70 COFFEY BYNUM 3RD ADDN, JACKSON CO, AL	\$1,300.00	\$1,800.00
RR0007585	TRACTS 17 & 20-VACANT LAND, JACKSON CO, AL	\$11,575.00	\$11,000.00
RR0011256	29 AC M/L VACANT TRACT, JACKSON SO, AL	\$205,653.20	\$203,000.00
	TOTAL	\$3,617,925.50	\$3,379,590.00

(Rev January 2011)

## Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Internal Revenue		► File a s	separate ap	plication for each return.	1			
		Automatic 3-Month Extension, c	omplete o	nly Part I and check this box				<b>X</b>
				sion, complete only Part II (on page				
				omatic 3-month extension on a prev				8.
a corporation 8868 to req Return for 3	n required t uest an ext Transfers A	to file Form 990-T), or an addition ension of time to file any of the ssociated With Certain Personal	al (not aut forms liste Benefit (	u need a 3-month automatic extensionatic) 3-month extension of time id in Part I or Part II with the excellentracts, which must be sent to sit www.irs.gov/efileand click on e-fi	. You can option of Fo the IRS	elect orm in (	tronica 8870, paper	lly file Form Information format (see
Part I Aut	tomatic 3-	Month Extension of Time. On	ly submit	original (no copies needed).				
A corporation	n required t	o file Form 990-T and requesting	an automat	tic 6-month extension - check this b	ox and con	nple	te	
Part I only .								▶ 💹
				, and trusts must use Form 7004 to			ension	of time
to file incom								
Type or		empt organization			Employer identification number			
print		UM FOUNDATION 10550019			20-3	<u> 385</u>	<u>9323</u>	
File by the	l .	reet, and room or suite no If a P O box						
due date for ifiling your		REGIONS BANK TRUST DE						
return See		or post office, state, and ZIP code For a	i toreign add	dress, see instructions				
instructions	I MOR	ILE, AL 36652-2886						
Enter the Re	turn code fo	or the return that this application is	s for (file a	separate application for each return	)			. 04
Application			Return	Application				Return
Is For			Code	Is For				Code
Form 990			01	Form 990-T (corporation)				07
Form 990-BL	<u> </u>		02	Form 1041-A				08
Form 990-EZ	<u> </u>		03	Form 4720				09
Form 990-PF			04	Form 5227				10
		or 408(a) trust)	05	Form 6069				11
Form 990-T	(trust other	than above)	06	Form 8870				12
Telephone If the orga If this is for the whole a list with the I reques until for the	e No.   (i)  anization do  or a Group F  e group, che  e names an  st an autom  organization  calendar ye	Return, enter the organization's founce this box	usiness in ur digit Gro it is for pai on is for. oration rec exempt org	FAX No. ► (24) - 690 - the United States, check this box.	of time		If the e	
3a If this	hange in ac	counting period		k reason: Initial return , or 6069, enter the tentative tax			•	NONE
			4720 or	6069, enter any refundable cr	edits and	138	<b>├</b>	TAONE
		nents made. Include any prior year	-	· · · · · · · · · · · · · · · · · · ·	ounto anu	3b	s	
, —				ent with this form, if required, by us	ina EFTPS		†	
		Tax Payment System). See instruc		,,,	., 0	3c	\$	NONE
				with this Form 8868, see Form 8	3453-EO a			

For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2011)

payment instructions.