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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Department of the Treasury Internal Revenue Service

Treated as a Private Foundation

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

OMB No 1545-0052

POL	alendar year 2010, or tax year beginning		, and ending			
G C	heck all that apply: Initial return		rmer public charity	Final returi	n	
Nor	Amended return	Address chang	ge	Name change A Employer identification number		
Ivai	ie or roundation			Employer Identification	n number	
	SNELL FAMILY FOUNDATION	ON, INC		26-3894877	1	
Nun	ber and street (or P O box number if mail is not delivered to street a		Room/suite	B Telephone number		
	1785 OAK ROAD		770-985-06	500		
City	or town, state, and ZIP code			C if exemption application is p	pending, check here	
	SNELLVILLE, GA 30078			D 1. Foreign organization	s, check here	
H C	heck type of organization: X Section 501(c)(3) exe			Foreign organizations macheck here and attach or	eeting the 85% test, omputation	
		Other taxable private founda	tion	E If private foundation sta	atus was terminated	
	r market value of all assets at end of year J Accountin	~	Accrual	under section 507(b)(1)(A), check here	
		er (specify)		F If the foundation is in a		
	\$ 3,935,420. (Part I, colunner Analysis of Revenue and Expenses			under section 507(b)(1	T	
Pa	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1 Contributions, gifts, grants, etc., received	500,000.		N/A	(cash basis only)	
	2 Check I if the foundation is not required to attach Sch B			,	<u> </u>	
	Interest on savings and temporary cash investments	4,021.	4,021.		STATEMENT 1	
	4 Dividends and interest from securities	44,995.	44,967.		STATEMENT 2	
	5a Gross rents					
	Net rental income or (loss)					
٥	6a Net gain or (loss) from sale of assets not on line 10	6,367.				
Revenue	b Gross sales price for all 506,367.		<u> </u>			
3eV	7 Capital gain net income (from Part IV, line 2)		6,367.			
_	8 Net short-term capital gain				 	
	9 Income modifications Gross sales less returns					
	10a and allowances b Less Cost of goods sold					
	c Gross profit or (loss)					
	11 Other income	67,467.	67,467.		STATEMENT 3	
	12 Total. Add lines 1 through 11	622,850.	122,822.			
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.	
	14 Other employee salaries and wages					
(A	15 Pension plans, employee benefits					
)Se:	16a Legal fees	2 520	4 000		1 070	
Expenses	b Accounting fees STMT 4	3,739. 3,113.	1,870.		1,870.	
_	c Other professional fees STMT 5	3,113.	3,113.		0.	
ativ	17 Interest RECEINED 6	2,261.	910.		0.	
istr	19 Depreciation and depletion 20 Occupancy JUL 0 5 2011 21 Travel, conferences, and meetings	2,2021	3200		 	
Ë	20 Occupancy JUL 0 5 2011 O					
Adı	21 Travel, conferences, and meetings				1	
pu	22 Printing and publications					
Operating and Administrative	23 Other expenses OGOENSTMT 7	31.	3.		27.	
ratii	24 Total operating and administrative					
þe	expenses. Add lines 13 through 23	9,144.	5,896.		1,897. 82,000.	
J	25 Contributions, gifts, grants paid	82,000.			82,000.	
	26 Total expenses and disbursements.	91,144.	5,896.		92 907	
_	Add lines 24 and 25	J1,144.	3,030.		83,897.	
		531,706.				
	8 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	331,700.	116,926.		<u> </u>	
	c Adjusted net income (if negative, enter -0-)		===,==	N/A		
0235					5 000 DE (0040)	

12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.



	Part II Balance Sheets Attached schedules and amounts in the description religious should be for end advers amounts only		Beginning of year	of year	
L	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	45,977.	3,357.	3,357.
	2	Savings and temporary cash investments	507,380.	166,901.	166,901.
	3	Accounts receivable -		-~	
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	1 -	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons		· · · · · · · · · · · · · · · · · · ·	
	7	Other notes and loans receivable	_		
		Less: allowance for doubtful accounts			
şţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations		· · · · · · · · · · · · · · · · · · ·	
	b	Investments - corporate stock STMT 9	2,617,139.	3,765,162.	3,765,162.
	C	Investments - corporate bonds			
	11	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 >)			
	i				
_	16	Total assets (to be completed by all filers)	3,170,496.	3,935,420.	3,935,420.
	17	Accounts payable and accrued expenses			
		Grants payable			
es	19	Deferred revenue			1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			ļ
iat	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	ł.,		ا م	^	1
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
Ø	١	and complete lines 24 through 26 and lines 30 and 31.	2 170 400	2 025 420	
nces		Unrestricted	3,170,496.	3,935,420.	,
	1	Temporarily restricted			
9	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
or Fund Bala		and complete lines 27 through 31.			
ets	27				ł
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			1
et A	29	Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances	3,170,496.	3,935,420.	-
Ž	30	TOTAL HET ASSETS OF INHA DATABLES	3,170,430.	3,333,420.	
	21	Total liabilities and net assets/fund balances	3,170,496.	3,935,420.	
_			•	3,333,1200	-
LP	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)		1	3,170,496.
2	•	r amount from Part I, line 27a		2	531,706.
		r increases not included in line 2 (itemize)	SEE STA	ATEMENT 8 3	233,218.
4	Add	lines 1, 2, and 3		4	3,935,420.
		eases not included in line 2 (itemize)	·	5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	3,935,420.
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(a) List and desc	ribe the ki	osses for Tax on Ir ind(s) of property sold (e.g	., real estate,	income	<u>(</u> 6)	How acquir - Purchase	red (c) Date acquired	(d) Date sold
		or common stock, 200 shs			<u> </u> [- Donation]'	(mo., day, yr.)	(mo., day, yr.)
1a 102,890.658 T.			T-TERM	BONDS	<u> </u>		V	ARIOUS	03/01/10
b CAPITAL GAINS	DIAT	DENDS			┼-				
<u>c</u>				·	┼		-+		
d e			·-·-	_	+				·
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis xpense of sale	_			(h) Gain or (loss (e) plus (f) minus	
a 499,949.	-	<u> </u>		500,00	00.		<u> </u>	(-,,, (,,	<51.
b 6,418.	<u> </u>			300,00					6,418.
C C									0,72200
d		· · ·							
е				-					
Complete only for assets shown	ng gain in	column (h) and owned by	the foundation	on 12/31/69			(I) G	ains (Col. (h) gair	minus
(i) F.M.V. as of 12/31/69		(i) Adjusted basis as of 12/31/69		cess of col. (I) col. (J), If any			col. (k	t), but not less that losses (from col.	ın -0-) or
a									<51.
b									6,418.
С	[
d		· · · · · · · · · · · · · · · · · · ·							
е									
2 Capital gain net income or (net ca	apıtal loss	If gain, also enter) If (loss), enter -0			}	2			6,367.
3 Net short-term capital gain or (lo	•	((,			ار		-		
If gain, also enter in Part I, line 8,		` ,	ia (0).		J				
If (loss), enter -0- in Part I, line 8 Part V Qualification U	·	•				3 [N/A	<u> </u>
If section 4940(d)(2) applies, leave to was the foundation liable for the sec	tion 4942	tax on the distributable an		-	eriod?				Yes X No
If "Yes," the foundation does not qua 1 Enter the appropriate amount in					ies.		_		
(a) Base period years	Caon cold	(b)			(c			Distr	(d) bution ratio
Calendar year (or tax year beginn	ıng ın)	Adjusted qualifying dis		Net value of n				(col. (b) di	vided by col. (c))
2009		6	1,653.			,086,			.029553
2008			0.		1	,970,	<u>,728.</u>		.000000
2007									
2006				<u> </u>					
2005					_	-			
2 Total of line 1, column (d)								2	.029553
3 Average distribution ratio for the the foundation has been in existe	-		on line 2 by 5,	or by the numbe	r of ye	ars		3	.014777
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5					4	3,182,587.			
					5	47,029			
5 Multiply line 4 by line 3									
6 Enter 1% of net investment income (1% of Part I, line 27b)				6	1,169				
7 Add lines 5 and 6		•						7	48,198
8 Enter qualifying distributions from						n/ 1. ·		8	83,897
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, c	neck the box in Part VI, line	tb, and comp	piete that part usi	ng a 1 ———	% tax rate	•		
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Part 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		X
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
August 17, 2008?	12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
Website address ► N/A			
14 The books are in care of ▶ DAVID E. SNELL, VICE PRESIDENT Telephone no. ▶ 770-98	5-06	00	
Located at ▶ 1785 OAK ROAD, SNELLVILLE, GA ZIP+4 ▶30	078		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
and enter the amount of tax-exempt interest received or accrued during the year	N/	'A	
16 At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,	.	Yes	No
securities, or other financial account in a foreign country?	16		X
See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
the foreign country			
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	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?			'
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
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 1		- 1
(5) Transfer any income or assets to a disqualified person (or make any of either available			i
for the benefit or use of a disqualified person)?		1	
(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			
termination of government service, if terminating within 90 days.)		1	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			٦
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		
Organizations relying on a current notice regarding disaster assistance check here	1	J	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		- 1	
before the first day of the tax year beginning in 2010?	1c		<u> </u>
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			,
defined in section 4942(j)(3) or 4942(j)(5)):		İ	
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			
before 2010? Yes X No			
If "Yes," list the years		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.) N/A	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.			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1 1		
		ļ	
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	1		
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.) N/A	3b		
4a 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	"		 -
had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	ţ	х
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Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(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	information such as the	F.,,,,,,,,
number of organizations and other beneficiaries served, conferences convened, research papers produce	d, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.
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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:	[T	
а	Average monthly fair market value of securities	1a	2,864,537.
	Average of monthly cash balances	1b	366,516.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	3,231,053.
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	3,231,053.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	48,466.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,182,587.
6	Minimum investment return. Enter 5% of line 5	6	159,129.
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.)	nd certain	
1	Minimum investment return from Part X, line 6	1	159,129.
2a	Tax on investment income for 2010 from Part VI, line 5 2a 2a 1,169.		
b	Income tax for 2010. (This does not include the tax from Part VI.)	1 1	
C	Add lines 2a and 2b	2c	1,169.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,169. 157,960.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	157,960.
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	157,960.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		02 007
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	83,897.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
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:	-	
a	Surtability test (prior IRS approval required)	3a	
b	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	83,897.
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	1,169. 82,728.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	ir the section

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				157,960.
2 Undistributed income, if any, as of the end of 2010		<u> </u>		
a Enter amount for 2009 only			45,706.	
b Total for prior years:				<u> </u>
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
dFrom 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 83,897.				
a Applied to 2009, but not more than line 2a			45,706.	
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				38,191.
e Remaining amount distributed out of corpus	0.	·		
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	<u>:</u>			
6 Enter the net total of each column as indicated below:				,
	₀ -	1		· ·
Corpus Add lines 3f, 4c, and 4e Subtract line 5 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				110 500
be distributed in 2011		<u> </u>	<u> </u>	119,769.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by			1	
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005	•			
not applied on line 5 or line 7	0.			<u> </u>
9 Excess distributions carryover to 2011.	•			
Subtract lines 7 and 8 from line 6a	0.			·
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010			<u> </u>	Form 990-PF (2010)

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Form **990-PF** (2010)

Grants and Contributions Paid During the Recipient	If recipient is an individual			
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
a Paid during the year	or substantial contributor	recipient		
		:		
SEE STATEMENT 14				
Total			▶ 3a	82,000
Approved for future payment				
NONE				
Total		L	▶ 3b	0

Part XVI-A	Analysis of	Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
-	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b	-		 		
C			 		•
d	-				
е	_		+		
1	-				
g Fees and contracts from government agencies	-				
2 Membership dues and assessments		- "	T		
3 Interest on savings and temporary cash			\vdash		
investments			14	4.021.	
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:			+		
a Debt-financed property			1		
b Not debt-financed property			+		
6 Net rental income or (loss) from personal			†		
property	-				
7 Other investment income			14	67,467.	
8 Gain or (loss) from sales of assets other			 	•	
than inventory			18	6,367.	
9 Net income or (loss) from special events	-				
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue:		-	1		
8			1		
	-		1		
b			1		
d	_		 		
e	-		1		
12 Subtotal. Add columns (b), (d), and (e)	_	0	•	122,850.	0
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	<u> </u>	•	13	122,850
(See worksheet in line 13 instructions to verify calculations.)	\			· · ·	

Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).	
		_
		_
		_
-		_
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Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the org	ganization directly or indir	rectly engage in any of the followi	ng with any other organization	described in section 501(c) of	[∴::\Yes No
	the Code (other than section 501(c))(3) organizations) or in section 5	27, relating to political organiz	ations?	10.1 30.0 %
а	Transfers	from the reporting founda	ation to a noncharitable exempt or	rganization of:		1. 1990年 199
	(1) Cash					[1a(1)] X
	(2) Other	assets				1a(2) X
b	Other trans	sactions:				
	• •	of assets to a noncharital	· -			1b(1) X
	(2) Purch	nases of assets from a no	ncharitable exempt organization			1b(2) X
	• •	il of facilities, equipment,				1b(3) X
	٠,	bursement arrangements			•	1b(4) X
	• •	s or loan guarantees			•	1b(5) X
	` '		embership or fundraising solicitati			1b(6) X 1c X
	-		alling lists, other assets, or paid en		and the few modern value of the se	
a		•			ays show the fair market value of the go	
		• • •	other assets, or services received		in any transaction or sharing arrangen	nent, snow in
(a)ı		(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transaction	as and sharing arrangements
(4)	110	(b) Allount involved	N/A	io oxompt organization	(e) bescription of earload, defeation	is, and sharing arangements
			 			
						
	_					
		·				
	- 					
					1	
2a			ctly affiliated with, or related to, on		ations described	ি ভি.,
			er than section 501(c)(3)) or in sec	ction 527?		Yes X No
<u>b</u>	If "Yes," co	omplete the following sch		(h) Type of organization	(c) Description of re	lationehin
		(a) Name of org	Janization	(b) Type of organization	(c) Description of te	iationship
		N/A		 		
_	-			 		
_				 	 	
	Unde	er penalties of perlury, I declar	re that I have examined this return, inclu	iding accompanying schedules and	statements, and to the best of my knowledge	and belief, it is true, correct,
S	ign and	complete Declaration of preparation	are (ether than taxpayer or fiduciary) is	based on all information of which pr	1	
	ere	1/2/6	Snell	16/28/	/1) 🕨 V.Ρ.	
		Signature of officer or tri	ustee	Date	Title	
		Print/Type preparer's na	ame Preparer's	signature	Date Check if	PTIN
					self- employed	
Pa	aid	GREGORY W.	HAYES C		6/24/11	
Pi	eparer	Firm's name ► MOC	ORE STEPHENS TI	LZER LLC	Firm's EIN ▶	
U	se Only					· · · · · · · · · · · · · · · · · · ·
			60 SATELLITE B	OULEVARD, SUI		
		שם	JLUTH, GA 30097	<u> </u>	Phone no. 7	70-995-8800
						Form 990-PF (2010)

023622 04-26-11

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Name of the organization **Employer identification number** SNELL FAMILY FOUNDATION, 26-3894877 Organization type (check one): Filers of: Section: ____ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV. line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number

SNELL FAMILY FOUNDATION, INC

26-3894877

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	E.R. SNELL CONTRACTOR, INC. P.O. BOX 306 SNELLVILLE, GA 30078	\$\$	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
023452 12-2	3-10	Schedule B (Form	990, 990-EZ, or 990-PF) (2010)

SNELL FAMILY FOUNDATION, INC

26-3894877

Employer identification number

rt III None	cash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u> </u>			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u> </u>			
<u> </u>		<u> </u>	
		\ \$	
(a)		(c)	
No. from Part I	(b) Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
453 12-23-10		\$	990, 990-EZ, or 990-PF) (

Employer identification number

t III .	AMILY FOUNDATION, INC Exclusively religious, charitable, etc., indi more than \$1,000 for the year. Complete of Part III, enter the total of exclusively religious	columns (a) through (e) and the s, chantable, etc., contributions	following line entry. For o	26-3894877 rganizations aggregating organizations completing
	\$1,000 or less for the year. (Enter this inform	mation once. See instructions.)	> \$	
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
_	Tourism address and	(e) Transfer of gift		nsferor to transferee
	Transferee's name, address, and		nerationship of da	insterior to d'alisteree
No. om irt I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
_		(e) Transfer of gift		
	Transferee's name, address, and	I ZIP + 4	Relationship of tra	nsferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
	Transferee's name, address, and	(e) Transfer of gift		insferor to transferee
	Transfered a name, address, and			
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
_ _				
		(e) Transfer of gif	t	
	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	insferor to transferee
-	· · · · · · · · · · · · · · · · · · ·			

FORM 990-PF INTEREST ON SAVIN	GS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
BANK ACCOUNTS			-	4,0	21.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	DLUMN A	-	4,0	21.
FORM 990-PF DIVIDENDS	AND INTER	REST FROM SE	CURITIES	STATEMENT	2
SOURCE	GROSS	C. AMOUNT	APITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
INVESTMENTS		51,385.	6,418.	44,9	67.
INVESTMENTS - TAX EXEMPT INTEREST		28.	0.		28.
TOTAL TO FM 990-PF, PART I, LN	4	51,413.	6,418.	44,9	95.
FORM 990-PF	OTHER 1	INCOME		STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
INVESTMENTS - INCOME ON ANNUIT CONTRACTS	·Y	67,467	. 67,467	•	
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	67,467	67,467	•	
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM			
ACCOUNTING FEES	3,739	1,87	0.	1,8	70.
TO FORM 990-PF, PG 1, LN 16B	3,739	. 1,87	0.	1,8	70.

FORM 990-PF 0	THER PROFES	SIONAL FEES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
INVESTMENT FEES	3,113.	3,113.			0.
TO FORM 990-PF, PG 1, LN 16C =	3,113.	3,113.			0.
FORM 990-PF	TAX	ES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
EXCISE TAXES FOREIGN INVESTMENT TAXES	1,351. 910.				
TO FORM 990-PF, PG 1, LN 18 =	2,261.	910.			0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
BUSINESS REGISTRATION FEES ROUNDING	30.	3.			27.
TO FORM 990-PF, PG 1, LN 23	31.	3.			27.
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND BA	ALANCES	STATEMENT	8
DESCRIPTION				AMOUNT	
UNREALIZED GAINS ON PORTFOLIC	APPRECIATI	ON		233,21	L8.
	I, LINE 3		_	233,21	

,					· · · · · · · · · · · · · · · · · · ·	
FORM 990-PF	CORPO	RATE STOCK		STAT	EMENT	9
DESCRIPTION			BOOK VALUE		MARKE ALUE	т
ROYAL ALLIANCE NATIONWIDE INSURANCE	A NINITI T TO Y	_	2,697,695		,697,6 528,6	
PRUDENTIAL INSURANCE		_	528,639. 538,828.			28.
TOTAL TO FORM 990-PF,	PART II, LINE 1	0B =	3,765,162	2. 3	,765,1	62.
FORM 990-PF	INTEREST AN	D PENALTIES		STAT	EMENT	10
TAX DUE FROM FORM 99 UNDERPAYMENT PENAL LATE PAYMENT INTER LATE PAYMENT PENAL	TY EST				4	19. 2. 2. 4.
TOTAL AMOUNT DUE					4	27.
FORM 990-PF	LIST OF SUBSTAN	TIAL CONTRIBU A, LINE 10	JTORS	STAT	EMENT	11
NAME OF CONTRIBUTOR	A	DDRESS				
E.R. SNELL CONTRACTOR	•	NELLVILLE, GA	A 30078			
FORM 990-PF	LATE PA	YMENT PENALTY	7	STAT	EMENT	12
DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENAL	тY
TAX DUE	05/15/11	419.	419.	2	-	4.

06/30/11

419.

4.

TOTAL LATE PAYMENT PENALTY

DATE FILED

FORM 990-PF L.	ATE PAYMENT I		STATEMENT 13			
DESCRIPTION DATE	AMOUNT	BALANCE	RATE	DAYS	INTER	REST
TAX DUE 05/15/11 DATE FILED 06/30/11	419.	419. 421.	.0400	46		2.
TOTAL LATE PAYMENT INTEREST						2.
	S AND CONTRIB D DURING THE			STAT	EMENT	14
RECIPIENT NAME AND ADDRESS		RELATIONSHIP		PIENT ATUS	AMOU	ЛY
MEMORIAL FUND FOR TRAVIS MCCART WACHOVIA BANK ATLANTA, GA 3036		THE EXEMPT	PUBLI CHARI		2,5	500.
NAVO CHURCH 630 EAST LAKE DRIVE DECATUR, G 30030	NONE A TO PROMOTE PURPOSE OF RECIPIENT	THE EXEMPT	PUBLI CHARI		2,0	000.
GRAYSTONE CHURCH 1551 OZORA ROAD LOGANVILLE, GA 30052	NONE TO PROMOTE PURPOSE OF RECIPIENT	THE EXEMPT	PUBLI CHARI		10,0	000
GEORGIA TRANSPLANT FOUNDATION 6600 PEACHTREE DUNWOOD ROAD ATLANTA, GA 30328	NONE TO PROMOTE PURPOSE OF RECIPIENT	THE EXEMPT	PUBLI CHARI		2,5	500
GENERAL BOARD OF PENSION/HEALTH BENEFITS 1201 DAVIS STREET DECATUR, GA 30030	TO PROMOTE	THE EXEMPT	PUBLI CHARI		5,(000
FAMILY PROMISE OF GWINNETT COUNTY, INC. 3495 SUGARLOAF PARKWAY	NONE TO PROMOTE PURPOSE OF		PUBLI CHARI		5,(000

RECIPIENT

LAWRENCEVILLE, GA 30044

SNELL FAMILY FOUNDATION, INC			26-3894877
EAGLÈ RANCH, INC. 5500 UNION CHURCH ROAD CHESNUT MOUNTAIN, GA 30502	NONE TO PROMOTE THE EXEMPT PURPOSE OF THE RECIPIENT	PUBLIC CHARITY	50,000.
GRACE SNELL MIDDLE SCHOOL 3800 BRUSHY FORK ROAD LOGANVILLE, GA 30052	NONE TO PROMOTE THE EXEMPT PURPOSE OF THE RECIPIENT	PUBLIC CHARITY	5,000.
TOTAL TO FORM 990-PF PART XV L	INE 3A		82 000

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.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

OMB No 1545-1709

 $\triangleright \mathbf{X}$

Form 8868 (Rev 1-2011)

•	re filing for an Additional (Not Automatic) 3-Month Exte		· · · · · · · · · · · · · · · · · · ·	·= ·		
	implete Part II unless you have already been granted an					
Electronic	c filing (e-file). You can electronically file Form 8868 if yo	u need a 3	3-month automatic extension of time to	file (6 m	onths for a c	orporation
required t	o file Form 990-T), or an additional (not automatic) 3-mont	h extension	on of time. You can electronically file Fo	orm 8868	3 to request a	n extension
of time to	file any of the forms listed in Part I or Part II with the exce	eption of F	form 8870, Information Return for Trans	sfers Ass	sociated With	Certain
Personal	Benefit Contracts, which must be sent to the IRS in pape	r format (s	ee instructions) For more details on th	e electro	onic filing of the	nis form,
visit www	rs gov/efile and click on e-file for Charities & Nonprofits		· · · · · · · · · · · · · · · · · · ·			
Part I	Automatic 3-Month Extension of Time.			_		-
A corpora	ition required to file Form 990 T and requesting an autom	atıc 6-mor	nth extension - check this box and com	plete		
Part i only						
	corporations (including 1120-C filers), partnerships, REMI ome tax returns	Cs, and tru	usts must use Form 7004 to request an	extensio	on of time	
Type or	Name of exempt organization			Emplo	yer identifica	tion number
print				}		
	SNELL FAMILY FOUNDATION, IN	IC		26	-389487	77
File by the due date for filing your	Number, street, and room or suite no. If a P O box, set 1785 OAK ROAD	e instruct	ions			
return See instructions		reign addi	ress, see instructions		.	
	SNELLVILLE, GA 30078	3				
Enter the	e Return code for the return that this application is for (file	a separat	te application for each return)			0 4
Applica	tion	Return	Application			Return
Is For		Code	Is For			Code
Form 99	00	01	Form 990-T (corporation)			07
Form 99		02	Form 1041-A			08
Form 99		03	Form 4720			09
Form 99		04	Form 5227			10
Form 99	30-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 99	30-T (trust other than above)	06	Form 8870		_	12
	DAVID E. SNELL	, VIC	E PRESIDENT			
• The	books are in the care of > 1785 OAK ROAD	- SNE	LLVILLE, GA 30078			
Tele	phone No ► <u>770-985-0600</u>		FAX No. ►	_		
• If the	e organization does not have an office or place of busines	s in the U	nited States, check this box			
• If the	s is for a Group Return, enter the organization's four digit	Group Ex	emption Number (GEN) If t	hıs ıs for	the whole gr	oup, check this
box 🕨	If it is for part of the group, check this box	and att	ach a list with the names and EINs of a	li membe	ers the extens	sion is for
1 1	request an automatic 3-month (6 months for a corporation	n required	to file Form 990-T) extension of time ui	ntıl		
-	AUGUST 15, 2011 , to file the exemp	ot organiza	ation return for the organization named	above '	The extension	า
1:	s for the organization's return for					
•	X calendar year 2010 or					
l	tax year beginning	, a	nd ending			
2 1	f the tax year entered in line 1 is for less than 12 months,	check rea	son Initial return Fi	nal retur	n	
2 (Change in accounting period	ONCOR FOL		· iai rotai	•	
	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 606	9, enter ar	y refundable credits and	ł		
	estimated tax payments made Include any prior year ove			3b	\$	0.
С	Balance due. Subtract line 3b from line 3a. Include your	payment v	vith this form, if required,	1		
	by using EFTPS (Electronic Federal Tax Payment System			3c	\$	0.
Cauti	on. If you are going to make an electronic fund withdrawa	l with this	Form 8868, see Form 8453-EO and Fo	rm 8879	-EO for paym	ent instructions

LHA For Paperwork Reduction Act Notice, see Instructions.