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See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

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

OMB No 1545-0052 2010

For c	alen	dar year 2010, or tax year beginning	··	, and ending		
		all that apply Initial return	Initial return of a fo	rmer public charity	Final return	
		Amended return	Address chang	· ·	Name change	
Nan	ne of	foundation			A Employer identification	number
		THE COLE FAMILY FOUND	DATION INC		55-0820931	
Nurr	ber a	nd street (or P O box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number	
		503 GLEN ECHO PLACE			615-298-40	
City	orto	own, state, and ZIP code			C If exemption application is p	
H C	heck	NASHVILLE, TN 37215 type of organization X Section 501(c)(3) e	xempt private foundation		D 1. Foreign organization: 2. Foreign organizations me check here and attach or	s, check here seting the 85% test, computation
		ction 4947(a)(1) nonexempt charitable trust	Other taxable private foundating method X Cash		E If private foundation sta	tus was terminated
		arket value of all assets at end of year J Account	other (specify)	Accrual	under section 507(b)(1	• •
(11°		Part II, col. (c), line 16) 1 , 042, 103 . (Part I, cold		pasis.)	F if the foundation is in a under section 507(b)(1	
<u> </u>	rt l		1 1			(d) Disbursements
Fe	H C E	(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	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	24,275.		N/A	<u> </u>
	2	Check ▶ if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	31,385.	31,385	•	STATEMENT 1
	5a	Gross rents .				
	b	Net rental income or (loss)	00.450		· · · · · · · · · · · · · · · · · · ·	
<u> </u>	6a b	Net gain or (loss) from sale of assets not on line 10	92,470.	,,		
enc				00 470	<u> </u>	
Revenue	7	Capital gain net income (from Part IV, line 2)		92,470	•	
_	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns				
	10a	and allowances	/			· · · · · · · · · · · · · · · · · · ·
	ŀ	Less Cost of goods sold			-	
	ļ	Gross profit or (loss)	2,719.	0	<u> </u>	STATEMENT 2
		Other income	150,849.	123,855		STATEMENT Z
_	12	Total. Add lines-1 through 11	40,200.	123,833		40,200
	13	Compensation of officers, directors, trustees, etc	40,200.		•	40,200
	14	Other employee salaries and wages Pension plans, employee benefits	2,926.	0		2,926
ses	15	· · · · · · · · · · · · · · · · · · ·				2,720
Sus	h	Legal fees Accounting fees	925.	925	_	0
ă	ָ ן	Other professional fees STMT 4	8,222.	8,222		0
e E	17	Interest				-
aţį	18	Taxes STMT 5	2,251.	0	•	2,251
istr	19	Depreciation and depletion	916.	Ö	•	
ᆵ	20	Occupancy				
Ad	21	Travel, conferences, and meetings	29,967.	0	•	29,967
2	22	Printing and publications				
Operating and Administrative Expen	23	Other expenses STMT 6	27,943.	2,547	•	25,396
atir	24	Total operating and administrative				
Opera		expenses. Add lines 13 through 23	113,350.	11,694	•	100,740
_	25	Contributions, gifts, grants paid	198,939.			198,939
}]	26	Total expenses and disbursements.				
; :	<u> </u>	Add lines 24 and 25	312,289.	11,694	•	299,679
	27	Subtract line 26 from line 12				
j	a	Excess of revenue over expenses and disbursements	-161,440.	110 101		
)	1	Net investment income (if negative, enter -0-)		112,161		
	0	Adjusted net income (if negative, enter -0-)			N/A	<u> </u>

Part	Balance Sheets Attached schedules and amounts in the description column should be for each of year amounts only	beginning of year	End of y	/ear
Pari	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	18,389.	63,387.	63,387.
3	Accounts receivable		1	
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶	1		
	Less allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			
	Less allowance for doubtful accounts ▶			
<u>در</u> 8	Inventories for sale or use	-		
Assets				
¥ 10	a Investments - U S and state government obligations			· · · · ·
- 1	b Investments - corporate stock STMT 7	981,484.	770,466.	974,136.
	c Investments - corporate bonds	302,1010	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3,1,1000
1	Investments - Land, buildings, and equipment basis		· · · · · · · · · · · · · · · · · · ·	
''				
	Less accumulated depreciation			
	Investments - mortgage loans			
13	- 406			
14		0.	4,580.	4,580.
		0.	4,500.	4,300.
15	Other assets (describe)			
		000 072	838,433.	1 042 102
116		999,873.	030,433.	1,042,103.
17	• • • • • • • • • • • • • • • • • • • •			
18				
<u>ဖွ</u> 19	Deferred revenue			
Liabilities 50 51				
.tg 21	, , , , , , , , , , , , , , , , , , ,			
- 22	Other liabilities (describe)			
1				
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
,,	and complete lines 24 through 26 and lines 30 and 31.			
ğ 24	Unrestricted	999,873.	838,433.	
<u>E</u> 25	Temporarily restricted			
6 26	Permanently restricted			
בַּן	Foundations that do not follow SFAS 117, check here			
Ę	and complete lines 27 through 31.			
o 27	Capital stock, trust principal, or current funds			
7 28 get				
Net Assets or Fund Balances				
₹ 30	- Г	999,873.	838,433.	
_				
31	Total liabilities and net assets/fund balances	999,873.	838,433.	
		lances		
rar	Analysis of Changes in Net Assets or Fund Ba			
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
(m	ust agree with end-of-year figure reported on prior year's return)		. 1	999,873.
	er amount from Part I, line 27a		2	-161,440.
3 Ott	er increases not included in line 2 (itemize)		3	0.
4 Add	d lines 1, 2, and 3		4	838,433.
	creases not included in line 2 (itemize)		5	0.
	at net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	838,433.
-			<u></u>	Form 990-PF (2010)

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Part IV Gapital Gains and Lo	osses for Tax on Ir	nvestment						
(a) List and describe the k 2-story brick warehouse,	ind(s) of property sold (e g or common stock, 200 sh	, real estate, s MLC Co)		(b) How a P - Pur D - Dor	chase nation) Date aco (mo , day	quired , yr)	(d) Date sold (mo , day, yr)
1a CHARLES SCHWAB - S	ECURITIES				P 0	1/01	/10	12/31/10
b CHARLES SCHWAB - S	ECURITIES				P 0	1/01	/09	12/31/10
C								
d				-				
е		T						
(e) Gross sales price (f)	Depreciation allowed (or allowable)		t or other basis xpense of sale			(h) Gain (e) plus (f	or (loss) minus (
a 122,406.			101,84					20,565.
b 699,509.			627,60	4.	_			71,905.
C	 .							
d			· · · · · · · · · · · · · · · · · · ·	_				
е		<u> </u>						
Complete only for assets showing gain in	column (h) and owned by	the foundation	on 12/31/69			Bains (Col		
(i) F M V as of 12/31/69	(j) Adjusted basis		cess of col (I)	1	COI (k), but not Losses (fr	iess thai om col (n -U-) or h))
(1) 1 11 12 21 12 21 12 21	as of 12/31/69	over	col (j), if any	_		•		.,
a								20,565. 71,905.
b		<u> </u>	·				-	/1,905.
<u>C</u>		<u> </u>		_				·-·· , ·-·
d				_				
е		.L		$\overline{}$			···	
2 Capital gain net income or (net capital loss	If gain, also ente If (loss), enter -0	r in Part I, line :)- in Part I, line	7 7	<u>}</u>				92,470.
3 Net short-term capital gain or (loss) as def		nd (6)		\ \ \				
If gain, also enter in Part I, line 8, column	(c)						37/3	
If (loss), enter -0- in Part I, line 8	0+! 4040/-> f	. D . d d	Tau an Nat	<u> </u>			N/A	
Part V Qualification Under					ment inco	me		
(For optional use by domestic private foundat	ions subject to the section	4940(a) tax оп	net investment inc	come)				
If section 4940(d)(2) applies, leave this part b	olank							
Was the foundation liable for the section 4943			· -	100,5				Yes X No
If "Yes," the foundation does not qualify under 1 Enter the appropriate amount in each colo								<u> </u>
(a)		Tuctions before	making any entire			Ι		(d)
Base period years	(b) Adjusted qualifying dis	stributions	Net value of nor	(c) acharitable	e-use assets	100		putión ratio vided by col. (c))
Calendar year (or tax year beginning in)		2,402.			17,890.	, ,,,	טו (ט) טוע	• 207245
2009 2008		08,917.		1.4	33,334	1		.145756
2007		1,647.			28,479.			.122447
2006		13,979.			12,088.			.082647
2005		9,672.			90,734.			.064867
2000				,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
2 Total of line 1, column (d)						2		.622962
3 Average distribution ratio for the 5-year ba	ase period - divide the total	on line 2 by 5	or by the number	of vears				
the foundation has been in existence if les		· · · · · · · · · · · · · · · · · · ·	o, o,	o, jou.e		3		.124592
	,							1
4 Enter the net value of noncharitable-use a	ssets for 2010 from Part X,	, line 5				4		1,073,424.
P. Mariharia bara di haribara O								133,740.
5 Multiply line 4 by line 3						5		133,740.
6 Enter 1% of net investment income (1% o	of Part I, line 27b)					6		1,122.
7 Add lines 5 and 5						7		134,862.
7 Add lines 5 and 6								134/002.
8 Enter qualifying distributions from Part XI						8		299,679.
If line 8 is equal to or greater than line 7, or See the Part VI instructions	check the box in Part VI, line	e 1b, and comp	plete that part using	g a 1% tax	rate			

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3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

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

Form 4720, to determine if the foundation had excess business holdings in 2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

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

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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4a

X

Х

Yes X No

N/A

during the year?

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Total number of others receiving over \$50,000 for professional services	>
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

All other program-related investments See instructions

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Amount

Page 7

Total. Add lines 1 through 3

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 1 and 2

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	1,075,834.
	Average of monthly cash balances	1b	1,075,834. 13,937.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,089,771.
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	1,089,771.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	16,347.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,073,424.
6	Minimum investment return. Enter 5% of line 5	6	53,671.
P	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.)	id certain	
1	Minimum investment return from Part X, line 6	1	53,671.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	2c	1,122.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,122. 52,549.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	52,549.
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	52,549.
P	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	299,679. 0.
a b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
-	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	299,679.
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	1,122.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,122. 298,557.
•	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		

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Part XIII 'Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				52,549.
2 Undistributed income, if any, as of the end of 2010	•			
a Enter amount for 2009 only			0.	· · · · · · · · · · · · · · · · · · ·
b Total for prior years			,	
	I THE SECTION AND ADDRESS OF THE SECTION ASSESSMENT OF THE SECTION ASS	0.		v
3 Excess distributions carryover, if any, to 2010				
a From 2005 26,261. b From 2006 58,101.				
105 060				
127 720				
100 000				
	541,130.			
f Total of lines 3a through e 4 Qualifying distributions for 2010 from	341/130.			······································
Part XII, line 4 > \$ 299,679.				
a Applied to 2009, but not more than line 2a		1	0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	, <u>,</u>		***************************************	////···
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount	"	······································		52,549.
e Remaining amount distributed out of corpus	247,130.			
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))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	788,260.	, and the second		
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.	`	,
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2009 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				·
corpus to satisfy requirements imposed by	_			
section 170(b)(1)(F) or 4942(g)(3)	0.			······
8 Excess distributions carryover from 2005		,		
not applied on line 5 or line 7	26,261.			·····
9 Excess distributions carryover to 2011.	261 222			
Subtract lines 7 and 8 from line 6a	761,999.			
10 Analysis of line 9				
a Excess from 2006 58, 101.				
b Excess from 2007 126, 969.				
c Excess from 2008 137,730.				
d Excess from 2009 192,069. e Excess from 2010 247,130.				
e Excess from 2010 247, 130.				Form 990-PF (2010)

Part XIV Private Operating For		structions and Part VI		N/A	5-0820931 Page
1 a If the foundation has received a ruling or d					
foundation, and the ruling is effective for 2	010, enter the date of	the ruling	▶		·
b Check box to indicate whether the found <u>at</u>	ion is a private operati	ing foundation described		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed		<u> </u>			
b 85% of line 2a	<u> </u>				
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	····	· · · · · · · · · · · · · · · · · · ·			
Part XV Supplementary Inform	mation (Compl	ete this part only	if the foundation	n had \$5,000	or more in assets
at any time during th					
Information Regarding Foundation	_	······································			
a List any managers of the foundation who	-	e than 2% of the total cor	tributions received by th	he foundation before	the close of any tax
year (but only if they have contributed mo			,		,
IONE					
b List any managers of the foundation who	own 10% or more of	the stock of a corporation	(or an equally large por	tion of the ownershi	p of a partnership or
other entity) of which the foundation has			(0. 0 0 4-0)30 p.o.		, ,
IONE					
2 Information Regarding Contribution	n. Grant. Gift. Loa	n. Scholarship, etc., F	rograms:		
Check here ► ☐ If the foundation on				s not accept unsolici	ted requests for funds If
the foundation makes gifts, grants, etc. (s	ee instructions) to ind	lividuals or organizations	under other conditions,	complete items 2a,	b, c, and d
a The name, address, and telephone numb	er of the person to wh	om applications should b	e addressed		
SEE STATEMENT 9				_	
b The form in which applications should be	submitted and inform	nation and materials they	should include		
c Any submission deadlines		*		-	
d Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable field	s, kinds of institutions, o	or other factors	
					·
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Part XV Supplementary Information				
3 Grants and Contributions Paid During the You	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 10				
Total		L	▶ 3a	198,939.
b Approved for future payment	-			
NONE				
		<u> </u>		
Total	-		▶ 3b	0.0

Part XVI-A	Analysis	of Income	-Producing	Activities
F G	Allalysis		- i i ouucii ig	ACUTICO

Enter gross amounts unless otherwise indicated	Unrelated I	ousiness income		by section 512, 513, or 514	(e)
·	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		code	741100111	
ā					
b	-				
<u> </u>		·			
d	_				
е	_				
Topo and contracts from government agencies	_				
g Fees and contracts from government agencies 2 Membership dues and assessments	-	. .			
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	31,385.	
5 Net rental income or (loss) from real estate				"	. , ., .
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	92,470.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a OTHER INCOME	_				2,719.
b	_				
C					
đ	_				
e	_			100 055	0.510
12 Subtotal Add columns (b), (d), and (e)		(0.	123,855.	2,719.
13 Total. Add line 12, columns (b), (d), and (e)				13	126,574.
(See worksheet in line 13 instructions to verify calculations)				

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

Line No.												
	the foundation's exempt purposes (other than by providing funds for such purposes)											
11A	VARIO	US OTHER	INCO	IE RE	CEIVED	AND	USED	TO	HELP	FURTHER	THE	ORGANIZA-
	TIONS	CHARITA	BLE P	JRPOS	E							· - · · · -
		-										
				_								
			-									
										•		
											_	
					··········							
					· . w.s ·							
	1											
	1											

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Porm 990-PF				DATION INC		55-082			apo 13
Part XVI	Information Re Exempt Organ	izations				onships With Nonche	ritable	•	·
1 Did the	organization directly or indi	rectly engage in any	of the following	ng with any other organiza	ation described in	saction 501(c) of	P Septi	Yes	No
	e (other than section 501(c)						123	14.3	
	is from the reporting found.						100		
			1010 0-01-191 0-	gotta-tijon of			12(1)	Jair adding	X
(1) Cas					••	11 11 11 11	12(2)	_	X
• •	Br Assets					1 11 11 11 11 11 11 11	13.53	4 YS 874	
	ensactions:							11.53	
1.,	es of essets to a noncharite	, -					16(1)		X
• •	chases of assets from a nor		•			0.0000000	16(2)		X
(3) Rer	ntal of facilities, equipment,	sinees ratho 10					15(3)	<u> </u>	X
(4) Rel	atnemegneris inememudm					1.10 (1.1) 1 (1.1)	10(4)		X
(5) Loa	ins or loan guarontees 👢						16(5)		X
(6) Per	formance of services or me	mbarship or fundra	ising solicitatio	ons			16(6)		X
e Sharing	of facilities, equipment, mail	Ming lists, other ass	ets, or paki en	nployees		,	10		X
d If the on	swer to any of the above is	"Ves," complete the	fallowing sch	edula Column (B) should	always show the	fair market value of the goods,	other ass	ots,	
or sorvic	res given by the reporting fo	nuadation if the for	ndation receiv	ed less then fair market v	alue in any transi	action or enaring arrangement, s	how in		
	(d) the value of the goods, (
(a) Line no	(b) Amount Involved			e exempt organization	(d) Dees	tons are insured, content to neither	anaring on	rangeme	en be
1-7			N/A			<u></u>			
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				ه					
in sectio	undation directly or Indirect n 501(c) of the Code (other complete the following achi	than section 601(c	•	tion 527?		oad .	Yes	(X] No
	(a) Name of orgi	notecina		(b) Type of organization		(e) Description of relationsi	11p		
	N/A								
	···								
					T				
						روست میں ہوئیں و مہمت — — — میں میں اور			
Une	in penation of barjury, I decime	that I have exemined I	hie return, includ	ing necompanying achedules i	end statements and	to the best of my knowledge and bef	of, it in the	e, come	el,
Sign me	eampiete, persuration of symper	on futbox trout tenboher.	or fidicings in b	med an all information of whic		knowledge,			
Here	A. J. J. Lane	_		1 11-13	-2011	TRUSTEE			
	Signature of officer or trus	. Pag		Date		Title			
	Print/Type preparer's nar		Preparer's s		Date	Check If PTIN			
	LINID 1358 bushers 2 191	· · · · · · · · · · · · · · · · · · ·	riopaier s a	Muama	D418				
D-1.4			481111	Latte Mar.		self-employed			
Peld	ELIZABETH N			MUST LILLOW	11/15/1				
Preparer	Firm's name CHE	RRY, BEKA	ERT 🛊 🕻	HOLLAND, LL	P	Firm's EIN ▶			
Use Only			<i>\</i>						
	Firm's address > 10	29 GREENE	STREE	T					
	1	GUSTA, GA				Phone no. 706-7	124-	3551	7
							m 990-		_
						POF	יטעכ ווו	rr (2	2010)

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

Employer identification number Name of the organization THE COLE FAMILY FOUNDATION INC 55-0820931 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 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, charitable, 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),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule 8 (Form 990, 990-EZ, or 990-PF) (2010)

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)

Name of organization

Employer identification number

THE COLE FAMILY FOUNDATION INC

55-0820931

Part Contributors	(see instructions)
---------------------	--------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	WEST VIRGINIA UNITED METHODIST VOLUNTEERS IN MISSION		Person X Payroll
,	100 CENTERVIEW DRIVE, SUITE 210 BIRMINGHAM, AL 35216	\$20,000.	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 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 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 Payroli Noncash (Complete Part II if there is a noncash contribution)

Employer identification number

THE COLE FAMILY FOUNDATION INC

55-0820931

art II	Noncash 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
		\$	
(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
. 01(1			
1453 12-23	3-10		90, 990-EZ, or 990-PF) (

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Employer identification number Name of organization THE COLE FAMILY FOUNDATION INC 55-0820931 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating Part III more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

2010 DEPRECIATION AND AMORTIZATION REPORT

. [g ated tion	916.	916.	
	Ending Accumulated Depreciation			
	Current Year Deduction	916.	916.	
	Current Sec 179 Expense			
	Beginning Accumulated Depreciation		ó	
	Basis For Depreciation	5,496.	5,496	
	Reduction In Basis			
	Section 179 Expense			
990-PF	Bus % Excl			
	Unadjusted Cost Or Basis	5,496.	5,496.	
	No c >	H Y 1 6		
	Lıfe	5.00		
	Method	IS.		
	Date Acquired	02/22/10		
1	Description		* tight 990-pf pg 1 debr	
FORM 990-PF PAGE		COMPUTER	* popal 9:	
8K 99	Asset	11		

FORM 990-PF DIVIDEND	S AND	INTER	EST FRO	OM SEC	URITIES	STATEMENT	1
SOURCE		GROSS	AMOUN!		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
CHARLES SCHWAB	-		28,23	0.	0.	28,2	30.
COLE REAL ESTATE INVESTMENT TRUST			3,15	5.	0.	3,1	55.
TOTAL TO FM 990-PF, PART I, L	N 4		31,38	5.	0.	31,3	85.
FORM 990-PF	0'	THER I	NCOME			STATEMENT	2
DESCRIPTION		:	(A) REVEN PER BO		(B) NET INVEST- MENT INCOME		
OTHER INCOME				2,719.	0	•	
TOTAL TO FORM 990-PF, PART I,	LINE	11		2,719.	0	•	
FORM 990-PF	AC	COUNTI	NG FEE	S		STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	NET I	B) NVEST- INCOME			
ACCOUNTING FEES		925.		925	•		0.
TO FORM 990-PF, PG 1, LN 16B		925.		925	•		0.
FORM 990-PF C	THER :	PROFES	SIONAL	FEES		STATEMENT	4
	EXPE	A) NSES BOOKS	NET I	B) NVEST- INCOME			
DESCRIPTION	PER .	BOOKS	IIIIII .				-
DESCRIPTION		8,222.		8,222			0.

FORM 990-PF	TAX	ES 		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
PAYROLL TAXES	2,251.	0.		2,251.		
TO FORM 990-PF, PG 1, LN 18	2,251.	0.		2,251.		
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
OFFICE EXPENSE FOUNDATION EXPENSE BANK CHARGES LICENSES & PERMITS MISCELLANEOUS	4,291. 20,000. 358. 43. 3,251.	2,146. 0. 358. 43. 0.		2,145. 20,000. 0. 0. 3,251.		
TO FORM 990-PF, PG 1, LN 23	27,943.	2,547.		25,396.		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7		
DESCRIPTION		BO	OK VALUE	FAIR MARKET VALUE		
INVESTMENT INVESTMENT			670,466. 100,000.	874,136. 100,000.		
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		770,466.	974,136.		

FORM 990-PF	DEPRECIATION	OF ASSE	rs not	HELD	FOR	INVESTMENT	STATEMENT	8
DESCRIPTION			COST	r or Basi	S	ACCUMULATED DEPRECIATION	BOOK VALUI	E
COMPUTER		•		5,49	96.	916.	4,58	30.
TOTAL TO FM 9	90-PF, PART II	I, LN 14	- 444	5,49	96.	916.	4,58	80.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ROBERT D COLE 503 GLEN ECHO PLACE NASHVILLE, TN 37215

TELEPHONE NUMBER

615-298-4083

FORM AND CONTENT OF APPLICATIONS

LETTER STATING CONTRIBUTION REQUEST

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

CHARITABLE ORGANIZATION INCLUDES EDUCATIONAL, RELIGIOUS, SCIENTIFIC, LITERARY, PUBLIC, AND OTHER PURPOSES PERMITTED TO BE CARRIED ON BY ORGANIZATIONS APPROVED BY INTERNAL REVENUE SERVICE.

22

FORM 990-PF

STATEMENT

10

	DURING THE YEAR	STATEMENT 10		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
ALLIANCE DEFENSE FUND 15100 N. 90TH STREET SCOTTSDALE, AZ 85260	NONE SUPPORT CHARITABLE PURPOSE		2,500.	
BLAKEMORE CHURCH OF THE NAZARENE 414 BELL ROAD NASHVILLE, TN 37217	NONE SUPPORT CHARITABLE PURPOSE		12,614.	
COMMON HOPE 550 VANDALIA STREET ST. PAUL, MN 55114	NONE SUPPORT CHARITABLE PURPOSE		770.	
DICKSON FIRST UNITED METHODIST CHURCH 215 N. MAIN STREET DICKSON, TN 37055	NONE SUPPORT CHARITABLE PURPOSE		8,500.	
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS ROAD KANSAS CITY, MO 64129			1,500.	
FOCUS ON THE FAMILY 8605 EXPLORER DRIVE COLORADO SPRINGS, CO 80920	NONE SUPPORT CHARITABLE PURPOSE		1,000.	
INTERNATIONAL HUMANITARIAN FOUNDATION PO BOX 55071 BOSTON, MA 02205	NONE SUPPORT CHARITABLE PURPOSE		39,646.	
KIDS ALIVE INTERNATIONAL 2507 CUMBERLAND DRIVE VALPARAISO, IN 46383	NONE SUPPORT CHARITABLE PURPOSE		1,800.	

GRANTS AND CONTRIBUTIONS

	-	
THE COLE FAMILY FOUNDATION INC		55-0820931
MISSION AVIATION FELLOWSHIP PO BOX 47 NAMPA, ID 83653	NONE SUPPORT CHARITABLE PURPOSE	800.
MUSIC FOR LIFE INSTITUTE PO BOX 29690 BELLINGHAM, WA 98228	NONE SUPPORT CHARITABLE PURPOSE	1,200.
PRISON FELLOWSHIP MINISTRIES 44180 RIVERSIDE PARKWAY LANDSDOWNE, VA 20176	NONE SUPPORT CHARITABLE PURPOSE	1,000.
PUEBLO A PUEBLO, INC PO BOX 11486 WASHINGTON, DC 20008	NONE SUPPORT CHARITABLE PURPOSE	47,764.
12290 VOYAGER PARKWAY COLORADO	NONE SUPPORT CHARITABLE PURPOSE	172.
RURAL HILL CHURCH OF CHRIST 564 BELL ROAD ANTIOCH, TN 37013		2,400.
TREVECCA NAZARENE UNIVERSITY 333 MURFREESBORO ROAD NASHVILLE, TN 37210	NONE SUPPORT CHARITABLE PURPOSE	20,400.
WE CARE ARTS 3035 WILMINGTON PIKE KETTERING , OH 45429	NONE SUPPORT CHARITABLE PURPOSE	5,000.
WORLDLINK ASSOCIATES, INC WORLDLINK ASSOCIATES MINNEAPOLIS, MN 55401	NONE SUPPORT CHARITABLE PURPOSE	41,800.
WORLDVENTURE 1501 W. MINIERAL AVENUE LITTLETON, CO 80120	NONE SUPPORT CHARITABLE PURPOSE	5,116.

THE COLE FAMILY FOUNDATION INC

55-0820931

VARIOUS CONTRIBUTIONS 503 GLEN ECHO PLACE NASHVILLE, TN 37215

NONE SUPPORT CHARITABLE **PURPOSE**

4,957.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

198,939.

Form 8868 (Rev. 1 2011)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex	ktension, d	complete only Part II and check this be	ox	>	X
Note. Only complete Part II if you have already been granted an				8868	
If you are filing for an Automatic 3-Month Extension, complete					
art II Additional (Not Automatic) 3-Month E			opies	needed)	
_ Name of exempt organization			Emp	loyer identification	number
Type or					
THE COLE FAMILY FOUNDATION	INC		5	5-0820931	
File by the extended Number, street, and room or suite no. If a P.O box, s	see instruc	tions			
due date for filing your 503 GLEN ECHO PLACE					
return See City, town or post office, state, and ZIP code For a f	oreign add	dress, see instructions			
NASHVILLE, TN 37215				-	
Enter the Return code for the return that this application is for (fil	e a separa	ite application for each return)			0 4
Analization	Return	Application			Return
Application Is For	Code	Is For			Code
Form 990	01	13101			Code
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Torm 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	-		11
. orm 990-T (trust other than above) 06 Form 8870					12
STOP! Do not complete Part II if you were not already granted	d an autor	natic 3-month extension on a previou	sly file	ed Form 8868.	
ROBERT D COLE					
 The books are in the care of ➤ 503 GLEN ECHO 	PLACE	- NASHVILLE, TN 372	15		
Telephone No. ► 803-439-3810		FAX No. ▶			
 If the organization does not have an office or place of busines 				. <i></i> . •	\Box
If this is for a Group Return, enter the organization's four digit	-	******			
. If it is for part of the group, check this box			memb	ers the extension is	for.
•	NOVEM.	BER 15, 2011			
5 For calendar year 2010, or other tax year beginning	.h.al	, and ending	Cinala		 ·
6 If the tax year entered in line 5 is for less than 12 months, o	neck reas	on: Initial return []	Final r	etum	
Change in accounting period State in detail why you need the extension					
ALL INFORMATION NEEDED TO PRE	PARE	A COMPLETE TAX RETUR	и н	AS NOT BEE	<u></u>
RECEIVED.			_,	110 1101 222	
				•	
a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
nonrefundable credits See instructions.			8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
tax payments made Include any prior year overpayment al	lowed as a	a credit and any amount paid			
previously with Form 8868.			8b	\$	0.
c Balance due. Subtract line 8b from line 8a Include your pa	ayment wit	h this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System) See instr			8c	\$	<u> </u>
•		d Verification			
Under penalties of perjury, I declare that I have examined this form, includit is true, correct, and complete, and that I am authorized to prepare this form.	iing accomp orm.	panying schedules and statements, and to the	e best o	i my knowledge and be	net,
Signature - Whatath Mary Title -			Data	► 8-11-11	<i>f</i>
			טמוט	P 0 - 11 - 11	

Form 8868 (Rev 1-2011)

Form **8868**

Department of the Treasury

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

File a separate application for each return.

OMB No 1545-1709

Internal Revenue Service $\triangleright X$ you are filing for an Automatic 3-Month Extension, complete only Part I and check this box - if you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Employer identification number Name of exempt organization Type or print 55-0820931 THE COLE FAMILY FOUNDATION INC File by the Number, street, and room or suite no. If a PO box, see instructions due date fo filing your 503 GLEN ECHO PLACE return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions NASHVILLE, TN 37215 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Return **Application** Return **Application** Code Is For Code Is For Form 990-T (corporation) 07 01 rm 990 Form 1041-A 80 m 990-BL 02 Form 4720 09 Form 990-EZ 04 Form 5227 10 Form 990-PF Form 6069 11 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 990-T (trust other than above) 06 Form 8870 12 ROBERT D COLE • The books are in the care of ▶ 503 GLEN ECHO PLACE - NASHVILLE, TN 37215 Telephone No ► 803-439-3810 FAX No > If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box If it is for part of the group, check this box In and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2010 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason Final return Initial return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions 3a If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 359. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879 EO for payment instructions

023841 01-03 11

Form 8868 (Rev 1:2011)

For Paperwork Reduction Act Notice, see Instructions.