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### Form **990-PF**

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

OMB No 1545-0052

2010

Department of the Treasury

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

For cale	ndar y	year 2010, or ta	x year beginnin	g		, 2010,	, and ending				,				
G Che	ck all	that apply:	Initial return	Initi	ial Return o	of a former pu	ublic charity					Fina	al return		
			Amended ret			Address of		XNar	ne c	hange					
		L					<u> </u>		A			ntification nun	nber		
The 3	leff	Gordon Ch	nildren's	Found	lation				l''	•	-	4163			
4345	Papa	a Joe Hend	drick Boul						В			mber (see the	instructions)		
Charl	ott	e, NC 2826	52						"	•		5-7424	,		
									С			application is	nending chec	k here	►TT
									1		•	application is lizations, chec		K HEIG	
H Ch	eck h	ype of organiza	tion: X Sec	tion 501	1/c)/3) ever	mpt private fo	undation		٦		-	nzations, chet nzations meet		act cha	rck
· ř			nonexempt char			ther taxable p		tion		here a	and atta	ch computation	រពី មេន ១១ /១ ។ ព	1631, CH	**
I Fai		et value of all assets				ethod: X C		rual	Ε	If priv	vate fou	ndation status	was terminat	ted	
		t II, column (c), line		_	Other (specif		asii	Juai	_			507(b)(1)(A)			<b>-</b>
► s		689	,576.			1) 1) must be on	cash basis \		F			tion is in a 60 i 507(b)(1)(B)		nation	▶ □
Part T	Δn	alysis of Re		( arti,			casii basis )		<u> </u>	unuei	360000	1 30/(1)(1)(1)	, CHECK HEIG		
			total of amount	s in		enue and	(b) Net inv		nt	(c)		sted net	(d) Disb		
	col	umns (b), (c), a	and (d) may not	neces-	expense	s per books	incon	ne			inco	me		naritab poses	
	sar	ily equal the an	nounts ın colum	n (a)									(cash b		
<del></del>		e the instruction	grants, etc, received	(ott cob)		991,364.									
			grants, etc, received oundn is <b>not</b> req to a			JJ1, 304.			<del></del>						<del></del>
!			ings and tempo							····					
		cash investmen		<b>u</b> . y		2,586.		2,58	36.						
	4	Dividends and inter	est from securities			5,093.		5,09	<del>3</del> .						
		Gross rents													
	Ø	Net rental income or (loss)			ļ										
R		- ' '	sale of assets not o			32,930.				<u> </u>		<del> </del>			
R E V		Gross sales price fo assets on line 6a	<sup>r all</sup> 182	<u>,670.</u>	ļ	.,						RECE	IVED.		
E			ome (from Part IV, III	ne 2) .			3	2,93	<u> 30.</u>		<u></u>	<u></u>		20	
E N U		Net short-term	. •										4 0044	Ĭğ.	
Ĕ		Income modific	ations . I		**********	<del></del>		<del>.,,,,,,,,,</del>			8	JUN 2	4 2011	10	····
	IVa	Gross sales less returns and allowances	ļ.											RS	
	b	Less Cost of			ļ	***************************************						OGDE	N. UT	-	
		goods sold Gross profit/(loss)	(att seh)		<del> </del>							OOUL	14, 01		
j			attach schedule	`	<b></b>					<del></del>			<del> </del>		<del></del>
}	••		See Statem	-	1	566,127.					5.6	66,127.			
	12	Total. Add lines				598,100.	4	0,60	9			56,127.			•••••
			ficers, directors, trus	tees, etc		102,250.	-	. 0 , 00	<del>, , .</del>			<del>50,127.</del>		102,	250.
	14	Other employee sala	aries and wages			77,040.									040.
	15	Pension plans,	employee bene	fits											
А	16 a	Legal fees (attach s	schedule). See	St 2		3,123.								3,	123.
, D	b	Accounting fees (at	ttach sch) See	St 3		10,650.									650.
₹ ï	С	Other prof fees (att	ach sch) See	St 4		75,452.								75,	452.
တူ ူ		Interest													
٣٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ - ١٤٠٤ -	18	Taxes (attach schedule)(s	see instr) See S	Stm 5		4,018.								4,	018.
EAT A	19	Depreciation (a	ittach											<u>-</u>	
北日		sch) and deple	tion	• •		6,950.				<u> </u>			ļ		
.G∑ K		Occupancy '				10 152				<del> </del>			-	10	150
		Printing and pu	ences, and meet	ıngs	<u> </u>	18,153. 21,671.	<del></del>			1			-	18, 21,	<u>153.</u>
A E X			s (attach schedi	ile\		41,0/1.	l							41,	671.
75 E			See Statem		;	175,243.		5,32	22		10	09,817.		60	104.
ENS	24		and administra		1	_,0,210.	-	-, -,	<u> </u>			,			
E S	24	expenses. Add	lines 13 throug	h 23		494,550.		5,32	22.		10	09,817.		372.	461.
ECHINICE OF A STATE OF	25	Contributions, gifts	s, grants paid Par	t XV.		453,351.				1			1.	453.	351.
<u>_</u>		_	s and disbursen				1	**********							
		Add lines 24 ar	nd 25		1,	947,901.		5,32	22.		1	09,817.	1,	<u>825,</u>	812.
		Subtract line 20					`								
	а	Excess of reve	nue over expen	ses		240 001									
	1	and disbursem			<del>-</del>	349,801.	<del> </del>	) E 20	27	-		<del> </del>	<del> </del>		
			ome (if negative, ent	-			ļ	35,28	<u> , , , , , , , , , , , , , , , , , , ,</u>	-	A 1	E 6 310	1		
	<u>c</u>	Adjusted net incom	e (if negative, enter	-0-)	1,	<del>,</del>	<u> </u>				4.	56,310.	<u> </u>		

Parl	11	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	En	d of year
1 41			(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing ,	448,239.	59,06	5. 59,065.
	2	Savings and tempor	ary cash investments .			
	3	Accounts receivable	▶	_		
		Less: allowance for	doubtful accounts	,		
	4	Pledges receivable	<b>-</b>			
		Less: allowance for	doubtful accounts			
	5	Grants receivable				
	6	Receivables due from offic disqualified persons (atta	ers, directors, trustees, and other ch schedule) (see the instructions)			
	7	Other notes and loans rec	eivable (attach sch)		<del></del>	
Ą		Less: allowance for	doubtful accounts	]		
Š	8	Inventories for sale	or use			
A S E T	9	Prepaid expenses as	nd deferred charges			
Ś	10 a	Investments – U.S. obligations (attach s	and state government chedule)			
	Ŀ	Investments - corporate	stock (attach schedule)			
	, ا	: Investments — corporate	bonds (attach schedule)		•	
	11	Investments - land, equipment: basis	buildings, and			
		Less: accumulated deprec (attach schedule)	iation •			
	12	Investments - mort	gage loans			
	13	Investments - other	(attach schedule) Statement 7	543,500.	513,962	2. 597,462.
	14	Land, buildings, and	equipment: basis ► 52,146.			
		Less accumulated deprec (attach schedule)	lation See Stmt 8 ►19,097.	5,206.	33,049	33,049.
			be ► See Statement 9 )		75,86	L.
		see instructions. Als	completed by all filers – o, see page 1, item l)	996,945.	681,93	
Ļ	17		nd accrued expenses		34,79	3.
À	18	Grants payable				
В	19	Deferred revenue	•		<del> </del>	_
Ĺ	20		tors, trustees, & other disqualified persons.			_
†	21		s payable (attach schedule)	_		
<u>i</u>	22	Other liabilities (descr	be)			
E S	23	Total liabilities (add	· ,	0.	34,79	3.
		Foundations that fo and complete lines	llow SFAS 117, check here X 24 through 26 and lines 30 and 31. □			
N F E U	24	Unrestricted		946,945.	582,84	4.
Ë U T N	25	Temporarily restricted	ed .	50,000.	64,30	<b>)</b> .
D	26	Permanently restrict	red			
A S S E L T A		Foundations that do and complete lines	o not follow SFAS 117, check here P 27 through 31.			
E L T A	27	Capital stock, trust i	principal, or current funds			
SN	28		, or land, building, and equipment fund			
O E	29	Retained earnings, accum	ulated income, endowment, or other funds .			
O E R S	30	=	fund balances (see the instructions)	996, 945.	647,14	4.
	31	Total liabilities and	net assets/fund balances		•	
	1	(see the instructions		996,945.	681,93	7.
Par	t III	Analysis of Chai	nges in Net Assets or Fund Baland	ces		<del></del>
1	Tota end-	I net assets or fund b of-year figure reporte	alances at beginning of year – Part II, colur d on prior year's return)	mn (a), line 30 (must agr	ee with	1 996,945.
2	Ente	r amount from Part I,	line 27a		[	2 -349,801.
3	Other	increases not included in I	ne 2 (ıtemıze)			3
4	Add	lines 1, 2, and 3				4 647,144.
5		ases not included in line 2	(ıtemıze) ►			5
6	Tota	I net assets or fund b	alances at end of year (line 4 minus line 5)	– Part II, column (b), lin	e 30	6 647,144.

2-story prick warehou	be the kınd(s) of property sold (e g , rea use; or common stock, 200 shares MLC		(b) How acqui P — Purchas D — Donatio	e (month, day, year)	(d) Date sold (month, day, yea
1a See Statement 10	<del></del>				
b					
с					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	
a					
b					
С					
<u>d</u>					
е	<u> </u>				
Complete only for assets show	ing gain in column (h) and owned by th	e foundation on 12/31/69		(I) Gains (Col	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		gain minus column (1 than -0-) <b>or</b> Losses (f	
a					
b					
С				<del></del>	
d				<u>.</u>	
е					
<ul><li>Capital gain net income or (ne</li><li>Net short-term capital gain or a</li></ul>	t capital loss)	enter in Part I, line 7 er -0- in Part I, line 7	-	2	32,93
If gain, also enter in Part I, lin	e 8, column (c) (see the instructions) If	···	-		
in Part I, line 8	·			3	
or optional use by domestic private section 4940(d)(2) applies, leave t	e foundations subject to the section 494 his part blank	.,	income )		V Na
or optional use by domestic private section 4940(d)(2) applies, leave t as the foundation liable for the sec Yes,' the foundation does not qua	e foundations subject to the section 494 his part blank ction 4942 tax on the distributable amou lify under section 4940(e) Do not comp	.0(a) tax on net investment int of any year in the base plete this part	income) period?	\_Yes	X No
or optional use by domestic private section 4940(d)(2) applies, leave the set the foundation liable for the set in the foundation does not quate in the appropriate amount (a)  Base period years Calendar year (or tax year	e foundations subject to the section 494 his part blank ction 4942 tax on the distributable amou	.0(a) tax on net investment int of any year in the base plete this part	period?		n ratio
per optional use by domestic private section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section 4940(d)(2) applies, leave the section for the section	this part blank  this part blank  thin 4942 tax on the distributable amount of the section 4940 tax on the distributable amount of the section 4940(e). Do not compute the section 4940(e). Do not compute the section 4940(e). Adjusted qualifying distributions	int of any year in the base plete this part (c)  Net value of noncharitable-use as:	period? any entries	Yes  (d)  Distribution	n ratio by column (c
pr optional use by domestic private section 4940(d)(2) applies, leave to as the foundation liable for the section 4940(d)(2).  Yes,' the foundation does not quantal to the appropriate amount (a)  Base period years Calendar year (or tax year beginning in)  2009	this part blank  this part blank  thin 4942 tax on the distributable amount of the following the following the following the following distributions  (b)  Adjusted qualifying distributions  1,516,438.	int of any year in the base plete this part structions before making a (c) Net value of noncharitable-use as:	period? any entries sets 5, 356.	Yes  (d)  Distribution	ratio by column (c
pr optional use by domestic private section 4940(d)(2) applies, leave to as the foundation liable for the section 4940(d)(2) applies, leave to as the foundation liable for the section 4940(d) as the foundation does not quantate in the appropriate amount (a)  Base period years Calendar year (or tax year beginning in)  2009 2008	this part blank  ction 4942 tax on the distributable amount of the section 4940 tax on the distributable amount of the section 4940(e). Do not compute each column for each year, see the interest of the section 4940(e).  Adjusted qualifying distributions  1,516,438. 1,581,227.	ont of any year in the base plete this part constructions before making a construction of noncharitable-use as:	period? any entries sets 5, 356. 2, 612.	Yes  (d)  Distribution	1.2686 1.9949
per optional use by domestic private section 4940(d)(2) applies, leave to as the foundation liable for the section. Yes,' the foundation does not quate 1. Enter the appropriate amount (a)  Base period years Calendar year (or tax year beginning in)  2009 2008 2007	this part blank  ction 4942 tax on the distributable amountlify under section 4940(e). Do not compare a compare a compare a column for each year, see the result of the column for each year, see the result of the column for each year, see the result of the column for each year, see the result of the column for each year, see the result of the column for each year, see the result of the column for each year, see the result of the column for each year, see the result of the column for each year.  1,516,438.  1,581,227.  1,640,508.	int of any year in the base plete this part instructions before making a (c)  Net value of noncharitable-use as:  1,19  79	period?  any entries  5, 356. 2, 612. 2, 509.	Yes  (d)  Distribution	1.2686 1.9949 2.2094
per optional use by domestic private section 4940(d)(2) applies, leave to as the foundation liable for the section. Yes,' the foundation does not quate 1. Enter the appropriate amount (a)  Base period years Calendar year (or tax year beginning in)  2009 2008 2007 2006	this part blank  ction 4942 tax on the distributable amount of the section 4940 tax on the distributable amount of the section 4940(e). Do not compute each column for each year, see the interest of the section 4940(e).  Adjusted qualifying distributions  1,516,438. 1,581,227. 1,640,508. 1,370,960.	int of any year in the base plete this part (c) Net value of noncharitable-use as:	period?  any entries  5, 356. 2, 612. 2, 509. 4, 354.	Yes  (d)  Distribution	1.2686 1.9949 2.2094 2.8304
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or optional use by domestic private section 4940(d)(2) applies, leave that the foundation liable for the section 4940(d)(2) applies, leave that the foundation does not quantal the foundation of the founda	this part blank  ction 4942 tax on the distributable amountify under section 4940(e). Do not compare a com	on line 2 by 5, or by the ears	period?  any entries  5, 356. 2, 612. 2, 509. 4, 354.	Column (b) divided  2  3  4  5	n ratio
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Form 990-PF (2010) The Jeff Gordon Children's Foundation	56-2174163		Pag	ge <b>4</b>
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	40(e), or 4948 — see the instruction	ns)		
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on lin	ie 1.	1		
Date of ruling or determination letter: (attach copy of letter if necessary — see	instr.)			
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,	T 1		70	<u> 6.</u>
check here ▶ ☐ 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, colu	ımn (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				_
foundations only. Others enter -0-)	2			0.
3 Add lines 1 and 2	3		/0	<u>)6.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.			<del></del> _	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5		70	06.
6 Credits/Payments:				
a 2010 estimated tax pmts and 2009 overpayment credited to 2010	800.			
<b>b</b> Exempt foreign organizations — tax withheld at source 6b				
c Tax paid with application for extension of time to file (Form 8868) . 6c				
d Backup withholding erroneously withheld 6d				
7 Total credits and payments. Add lines 6a through 6d	7		80	00.
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is a				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ 10			94.
11 Enter the amount of line 10 to be Credited to 2011 estimated tax 94.	Refunded 11			0.
Part VII-A   Statements Regarding Activities		—	<del></del>	
1 a During the tax year, did the foundation attempt to influence any national, state, or local le participate or intervene in any political campaign?	gislation or did it	1a		No X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purp (see the instructions for definition)?	oses	1ь		Х
If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies or distributed by the foundation in connection with the activities	of any materials published			
c Did the foundation file Form 1120-POL for this year?		1 c	İ	Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	ne vear.	- '-		
(1) On the foundation $\qquad \qquad	<b>►</b> \$0.		- 1	
e Enter the reimbursement (if any) paid by the foundation during the year for political exper	nditure tax imposed on			
foundation managers \$0.				v
2 Has the foundation engaged in any activities that have not previously been reported to the If 'Yes,' attach a detailed description of the activities	e IRS?	2	$\neg$	<u>X</u>
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	ng instrument, articles			
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed con	by of the changes.	3		<u>X</u>
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	ear?	4a		<u>X</u>
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		4b	N/	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	5		<u>X</u>
If 'Yes,' attach the statement required by General Instruction T				,
<ul> <li>6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied</li> <li>By language in the governing instrument, or</li> </ul>	either:			
By state legislation that effectively amends the governing instrument so that no manda with the state law remain in the governing instrument?	tory directions that conflict	6		Х
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c	), and Part XV	7	Х	
8a Enter the states to which the foundation reports or with which it is registered (see the ins				
See Statement 11				
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8b	X	V44 -
		T		
9 Is the foundation claiming status as a private operating foundation within the meaning of for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XI	V)? If 'Yes,' complete Part XIV	9	$\dashv$	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a s and addresses		10		X
BAA	Fo	orm <b>99</b> 0	)-PF (2	2010)

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_ '	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		X
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a		Х
	b If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010)	3 b	N	/A
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
	► 20, 20, 20			
•	c if the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	20	174	<u> </u>
t	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer 'No' and attach statement — see the instructions.)	2 b	NT.	A
á	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?  If 'Yes,' list the years ▶ 20, 20, 20			
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 $4942(j)(5)$ :			
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1 c	1	Х
	Organizations relying on a current notice regarding disaster assistance check here			
ŀ	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1ь		Х
	(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.)  Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(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?  (3) Ves X Ves No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
1 a	During the year did the foundation (either directly or indirectly):			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	1	Yes	No
Par	foreign country ► t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the	16		Х
16	and enter the amount of tax-exempt interest received or accrued during the year   At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a		Yes	N/A No
15	Located at > 4345 Papa Joe Hendrick Blvd Charlotte NC ZIP + 4 > 28262  Section 4947(a)(1) nonexempt charitable trusts filing Form 990 PF in lieu of Form 1041 — Check here	N/A		
14	The books are in care of Ryan Hutcheson Telephone no. > 704-	455-7	<u>424</u>	
	Website address   www.jeffgordonchildrensfoundation.org	_ <u></u> _	_ <u>^.</u>	
	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?  Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	Х	Х
	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		Х
	t VII-A   Statements Regarding Activities (Continued)	Т	<u> </u>	ı

Form 990-PF (2010) The Jeff Gordon Ch			5 <u>6-</u> 21	74163	Page 6
Part VII-B   Statements Regarding Activiti	es for Which Form	n 4720 May Be Red	uired (continued)	·	
5a During the year did the foundation pay or incur	•				
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	Yes X	No	
<ol><li>(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registrate</li></ol>		4955); or to carry		No	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes? .	. Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section 4	an a charitable, etc, org 4940(d)(2)? (see instruc	ganization described ctions)	Yes X	No	
(5) Provide for any purpose other than religiou educational purposes, or for the preventior			Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	a current notice regard	ualify under the exception ing disaster assistance	ons	. 5b	N/A
Organizations relying on a current notice regar		e check here	-,		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure respons	ne foundation claim exe ibility for the grant?	emption from the	. N/A Yes	No	
If 'Yes,' attach the statement required by Regu	•	-5(d)		'	
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	Yes X	No	
<b>b</b> Did the foundation, during the year, pay premit	ums, directly or indirect	ly, on a personal benefi	t contract?	6b	X
If 'Yes' to 6b, file Form 8870			D		
<ul><li>7a At any time during the tax year, was the found</li><li>b If yes, did the foundation receive any proceeds</li></ul>				No 7b	
Part VIII Information About Officers, D					es.
and Contractors					
1 List all officers, directors, trustees, foundation	managers and their co	<del>, • • • • • • • • • • • • • • • • • • •</del>	ctions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all	se account, lowances
See Statement 12			<u> </u>		
		102,250.	0.		0.
				ļ <u> </u>	
2 Compensation of five highest-paid employees	(other than those inclu	ided on line 1- see inst	ructions). If none, ente	r 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		se account, lowances
None					
	.,				
				ļ	
Total number of other employees paid over \$50,000	<u> </u>	1	<u>                                     </u>		<u>-</u>
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	, , , componed to
Total number of others receiving over \$50,000 for professional services ▶	0
Part IX-A Summary of Direct Charitable Activities	
	<del></del>
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	
Part IX-B Summary of Program-Related Investments (see instructions)	1
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>N/A</u>	
2	
All other program-related investments. See instructions.  3	
Total. Add lines 1 through 3	0.
BAA	Form <b>990-PF</b> (2010)

Form 990-PF (2010) The Jeff Gordon Children's Foundation

Form 990-PF (2010)

şee instructions.)	i oreigii	
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes: a Average monthly fair market value of securities.	1a	535,845.
<b>b</b> Average of monthly cash balances	1b	809,805.
c Fair market value of all other assets (see instructions)	1c	- <del>-</del>
d Total (add lines 1a, b, and c)	1d	1,345,650.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,345,650.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	20,185.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	. 5	1,325,465.
6 Minimum investment return. Enter 5% of line 5	6	66,273.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of	perating f	oundations
and certain foreign organizations check here ► and do not complete this	part.)	
1 Minimum investment return from Part X, line 6.	1	66,273.
2a Tax on investment income for 2010 from Part VI, line 5 . 2a 70	6.	
b Income tax for 2010. (This does not include the tax from Part VI.) .		
c Add lines 2a and 2b	2 c	706.
3 Distributable amount before adjustments. Subtract line 2c from line 1 .	3	65,567.
4 Recoveries of amounts treated as qualifying distributions .	4	
5 Add lines 3 and 4	5	65,567.
6 Deduction from distributable amount (see instructions)	6	· <del></del>
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	65,567.
Part XII Qualifying Distributions (see Instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	1,825,812.
b 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, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required).	3a	
<b>b</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	1,825,812.
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 (see instructions)	5	•
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,825,812.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whete qualifies for the section 4940(e) reduction of tax in those years.	ner the found	dation

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2009	<b>(c)</b> 2009	<b>(d)</b> 2010
1	Distributable amount for 2010 from Part XI, line 7				
2	Undistributed income, if any, as of the end of 2010:				65,567.
	a Enter amount for 2009 only			0.	
	• Total for prior years: 20, 20, 20		0.	- 0.	
3	Excess distributions carryover, if any, to 2010:				
i	From 2005 1, 262, 840.				
	From 2006 1,350,952.	i		1	
	From 2007 1,609,904.				
	From 2008 1,543,964.				
	From 2009 1, 457, 237.				
	Total of lines 3a through e	7,224,897.			
4	Qualifying distributions for 2010 from Part XII, line 4: \$1,825,812.				
,	Applied to 2009, but not more than line 2a .				
				0.	• • • • • • • • • • • • • • • • • • • •
1	Applied to undistributed income of prior years (Election required – see instructions) .		0.		
•	Treated as distributions out of corpus (Election required – see instructions)	0.			
•	Applied to 2010 distributable amount				65,567.
	Remaining amount distributed out of corpus	1,760,245.			
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:				
ä	Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,985,142.			
Ŀ	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.		
c	Subtract line 6c from line 6b. Taxable				
	amount – see instructions		0.		
6	Undistributed income for 2009 Subtract line 4a from line 2a. Taxable amount — see instructions				
	THE 28. TAXABLE BILLDUIK — See INSTRUCTIONS			0.	<u> </u>
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			**	0.
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
	(see instructions)	0.			
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see instructions)	1,262,840.			
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	7 700 000			
10	Analysis of line 9:	7,722,302.			·
	Excess from 20061, 350, 952.				
	Excess from 2007. 1, 609, 904.				
	Excess from 2008 . 1,543,964.				
	Excess from 2009 1, 457, 237.		1		
	Excess from 2010 1,760,245.				
<u> </u>	1,700,245.		<u>.</u>		

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Part XIV Private Operating Foundati					N/A
1a If the foundation has received a ruling or one is effective for 2010, enter the date of the	=				
<b>b</b> Check box to indicate whether the foundar		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	T	
investment return from Part X for each year listed	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
<b>b</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 .					
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:				1	
a 'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during t	ı (Complete this he year — see i	s part only if the nstructions.)	organization h	nad \$5,000 or m	ore in
Information Regarding Foundation Manager     a List any managers of the foundation who close of any tax year (but only if they have Jeffery M Gordon	nave contributed mo	ore than 2% of the to than \$5,000) (See s	otal contributions re section 507(d)(2).)	ceived by the founda	ation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the <b>None</b>	own 10% or more of foundation has a 10	f the stock of a corp 0% or greater interes	oration (or an equal st.	lly large portion of th	e ownership of
2 Information Regarding Contribution, Gran Check here  if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	makes contributions s gifts, grants, etc,	to preselected char (see instructions) to	itable organizations individuals or orga	nizations under othe	
a The name, address, and telephone numb	er of the person to v	wnom applications s	nouid be addressed	ı:	
See Statement 13	and the second second second		والمراجعة والمساورة	<u> </u>	
b The form in which applications should be	submitted and infor	mation and material	s tney should includ	ie:	
See Statement for Line 2a c Any submission deadlines:		· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charitat	ole fields, kinds of in	nstitutions, or other f	actors:
See Statement for Line 2a					

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3 Grants and Contributions Paid During the Ye	ar or Approved for Futu	re Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Contribution	
Name and address (home or business)  a Paid during the year  See Statement 14	substantial contributor	recipient	Contribution	
Total .			► 3a	1,453,351.
b Approved for future payment  Total			▶ 3₺	

•					
•	Part XVI-A		<i>,</i> ,	<b>D</b>	A
1	DAM TIMEN	Analyiete	AT INCAMA	UPARIICINA	ACTIVITION
-0	rail avita i	Alialvaia	OI IIICUIIIC-	riouuciiiu	ACUVIUES
		,			,

iter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (see the instructions)
b	<del> </del>		+		
c		<del></del>			
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	2,586.	
4 Dividends and interest from securities .			14	5,093.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</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	32,930.	
9 Net income or (loss) from special events .			1	19,327.	
Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b					
c					
d					
e					
2 Subtotal Add columns (b), (d), and (e)				59, <u>9</u> 36.	
3 Total. Add line 12, columns (b), (d), and (e)				13	59,936
ee worksheet in line 13 instructions to verify calculation	ns )				
art XVI-B Relationship of Activities to th	e Accomplis	hment of Exem	pt Purpose	s	
Explain below how each activity for which is accomplishment of the foundation's exemption.	ncome is reported purposes (other	d in column (e) of Part than by providing fu	art XVI-A cont unds for such	ributed importantly t purposes) (See the	o the instructions )
N/A					

N/A	
N/ A	
	<del></del>
	· · · · · · · · · · · · · · · · · · ·

# Form 990-PF (2010) The Jeff Gordon Children's Foundation 56-2174163 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							1 1	res	NO
describe	d in section 501(c) of	the Code (oth	gage in any of the following er than section 501(c)(3) org	with any othe ganizations) o	er organization or in section 527	,			
•	o political organization		noncharitable exempt organ	nization of			1		
(1) Cash		ouridation to a	Honorial Rable exempt organ	1112411011 01.			1a (1)		Х
(2) Othe							1a (2)		X
<b>b</b> Other tra			••	•	•	•	18 (2)		
	s of assets to a nonc	haritable evem	int organization				16(1)	Ì	Х
			le exempt organization.				1b(1)		X
• •			, ,			•	1 b (2)		X
• • •	al of facilities, equipr bursement arrangen	•	asseis				<del></del>		X
	•		•				1b (4)		X
	ns or loan guarantees		or fundamental collections				1 b (5)		X
			or fundraising solicitations				1 b (6)		X
c Snaring	of facilities, equipmen	nt, mailing lists	, other assets, or paid emp	loyees			1 c		
the good	ls, other assets, or se	ervices given b	omplete the following sched y the reporting foundation. ow in column (d) the value of	If the foundat	tion received les	s than fair mar	ket value in	of	
a) Line no	(b) Amount involved	(c) Name of	noncharitable exempt organization	(d)	Description of trans	fers, transactions,	and sharing arran	gements	
I/A									
					<del>_</del>				
		<del>-</del>							
						<del>.</del>			
describe	undation directly or ind in section 501(c) of complete the following	f the Code (oth	ed with, or related to, one c er than section 501(c)(3)) o	or more tax-e r in section 5	xempt organizat 27?	cions	. Yes	X	10
	Name of organization	on	(b) Type of organiza	ation	(c)	Description of	relationship		
I/A									
	<del></del>					<u> </u>			
	<del></del>				<del></del>				
	<del></del>	· <del>-</del> ·	<del></del>		<del></del>	<u> </u>	<del></del> .		—
ign lere	J. J.	e that I have exam of preparer (other I	ned this return, including accompanition to be before the payer or fiduciary) is based of	10	nd statements, and to of which preparer ha	o the best of my knows any knowledge  VP/Sec1  Title		, it is true	,
1 219	Print Type preparer's nar	ne .	Prepared's signature	Date	Date		PTIN		
	0 /		The signature	1. 11.	6/16/11	Check if	\" \		
aid	Phillip G. W			me	7 2/10/11	self-employed	N/A		
reparer				PAs		Firm's EIN ► N/	A		
Jse Only			ead Square Dr., St	e.450		<u></u> .		4 5	
		harlotte,	NC 28203		l	Phone no 70	)4-372-15		
BAA							Form 99	90-PF (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

Name of the organization		Employer identification number
The Jeff Gordon Children's F	oundation	56-2174163
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a 527 political organization	private foundation
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation	vate foundation
Check if your organization is covered by the (Note. Only a section 501(c)(7), (8), or (10) org	General Rule or a Special Rule. ganization can check boxes for both the General Rule and a S	Special Rule. See instructions
General Rule    X   For an organization filing Form 990, 990-E contributor. (Complete Parts I and II.)	EZ, or 990-PF that received, during the year, \$5,000 or more (	(in money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi), and receive	Form 990 or 990·EZ, that met the 33-1/3% support test of the ed from any one contributor, during the year, a contribution or tVIII, line 1h or (ii) Form 990·EZ, line 1 Complete Parts I are	f the greater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) organiaggregate contributions of more than \$1,000 the prevention of cruelty to children or an	ization filing Form 990 or 990-EZ, that received from any one 000 for use <i>exclusively</i> for religious, charitable, scientific, literimals. Complete Parts I, II, and III.	contributor, during the year, ary, or educational purposes, or
contributions for use exclusively for religion of this box is checked, enter here the total	ization filing Form 990 or 990-EZ, that received from any one ous, charitable, etc, purposes, but these contributions did not I contributions that were received during the year for an <i>exclu</i> is unless the <b>General Rule</b> applies to this organization becaus	aggregate to more than \$1,000.  sively religious, charitable, etc.
religious, charitable, etc, contributions of	\$5,000 or more during the year .	<b>►</b> \$
990-PF) but it <b>must</b> answer 'No' on Part IV. III	by the General Rule and/or the Special Rules does not file Sc ne 2 of their Form 990, or check the box on line H of its Form ng requirements of Schedule B (Form 990, 990-EZ, or 990-Pf	990-F7, or on line 2 of its Form
BAA For Paperwork Reduction Act Notice, 990EZ, or 990-PF.	see the Instructions for Form 990, Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2010)

Part | Contributors (see instructions.)

Page 1

of 5

of Part I

The Jeff Gordon Children's Foundation

Employer identification number

56-2174163

	<del></del>		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<del></del>	Jeff Gordon  4345 Papa Joe Hendrick Blvd  Charlotte, NC 28262	\$232,115.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	Kiros Sistevaris  16016 Oak Park Court  Westfield, IN 46074	\$5,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	E.I. DuPont DE Nemours & Co.  PO Box 80040  Wilmington, DE 19880	\$ <u>5,100</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	, <i>,</i>	Aggregate	1
Number	Name, address, and ZIP + 4  Hendrick Motorsports  4400 Papa Joe Hendrick Blvd.	Aggregate contributions	Person X Payroll Noncash (Complete Part II if there
Number 4	Name, address, and ZIP + 4  Hendrick Motorsports  4400 Papa Joe Hendrick Blvd.  Charlotte, NC 28262  (b)	Aggregate contributions  \$12,517.  (c) Aggregate	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
4  (a) Number	Name, address, and ZIP + 4  Hendrick Motorsports  4400 Papa Joe Hendrick Blvd.  Charlotte, NC 28262  (b)  Name, address, and ZIP + 4  Jeff Gordon, Inc.  4345 Papa Joe Hendrick Blvd.	Aggregate contributions  \$12,517.  (c) Aggregate contributions	Type of contribution  Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)  (d) Type of contribution  Person X Payroll Noncash (Complete Part II if there

	Schedule B	(Form	990,	990-EZ,	or	990-PF)	(2010
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Page 2

of 5

of Part I

Name of organization

Employer identification number 56-2174163

The Jeff Gordon Children's Foundation Contributors (see instructions.) (d) (a) (b) (c) Aggregate contributions Number Name, address, and ZIP + 4 Type of contribution 7 Person Motorsports Charities **Payroll** PO Box 2875 11,535 Noncash (Complete Part II if there Daytona Beach, FL 32120 is a noncash contribution) (a) (c) (d) Aggregate contributions Number Name, address, and ZIP + 4 Type of contribution Motorsports Marketing 8 Person **Payroll** 13312 5th St. Ste B 10,388 Noncash (Complete Part II if there Grandview, MO 64030 is a noncash contribution.) (b) (a) (c) (d) Number Name, address, and ZIP + 4 Aggregate contributions Type of contribution 9 Pacific Technical Resources Person **Payroll** 2905 E. Imperial Hwy 50,200 Noncash (Complete Part II if there Brea, CA 92821\_ is a noncash contribution.) (b) (a) (d) (c) Aggregate contributions Number Name, address, and ZIP + 4 Type of contribution 10 Perfection Products, Inc. Person **Payroll** 1320 Indianapolis Ave. 24,000. Noncash (Complete Part II if there Lebanon, IN 46052 is a noncash contribution.) (a) (b) (d) (c) Number Name, address, and ZIP + 4 Aggregate contributions Type of contribution 11 Sprint Nextel Person **Pavroll** 9,000. 10115 Kincey Ave. Ste 210 Noncash (Complete Part II if there Huntersville, NC 28078 is a noncash contribution.) (a) (b) (c) (d) Number Name, address, and ZIP + 4 **Aggregate** Type of contribution contributions Village Pantry 12 Person **Payroll** 10 South Cardinal Drive 70,893 Noncash

Wilmington , NC 28403

(Complete Part II if there

is a noncash contribution)

of Part I

The Jeff Gordon Children's Foundation

Page 3 of 5
Employer identification number

56-2174163

Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	HGJ Licensing LLC  4345 Papa Joe Hendrick  Charlotte, NC 28262	\$28 <u>,590.</u>	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
14_	Schwan's Home Service  115 West College Drive  Marshall, MN 56258	\$28,836.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>15</u>	Speedway Children's Charities PO_Box_18747 Charlotte, NC 28218	\$ <u>10,550.</u>	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>16</u>	Pepsico  100 Summit Lake Drive  Valhalla, NY 10595	\$30,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>17</u>	Just Rite Acoustics Inc  1501 Estes Avenue  Elk Grove, IL 60007	\$10,024.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
18	Mitchell Swaback Charities Inc  1501 Estes Avenue  Elk Grove, IL 60007	\$10,000 <u>.</u>	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution.)

Schedule	В	(Form	990,	990-EZ,	or 990-PF)	(2010)
Name of orga	ni	zation				

of Part I

The Jeff Gordon Children's Foundation

Page 4 of 5
Employer identification number

56-2174163

Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19_	American Book Wholesale  11130 Kingston Pike  Knoxville, TN 37922	\$28 <u>,500.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
20	Crozet, VA 22932	\$ <u>5,353.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
21	Eldora Speedway Inc  5644 W 74th Street  Indianapolis , IN 46278	\$10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
22_	Just Marketing Inc  10960 Bennett Parkway  Zionsville, IN 46077	\$22,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
23_	Rebecca Kasten  17154 Pennington Drive  Huntersville, NC 28078	\$5,200.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
24	Paul Wellnitz  4472 Comanche Way  Pleasanton, CA 94588	\$6,700 <u>.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
	1	1	<b>!</b>

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Schedule Name of org	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2010)	Page 5	of 5 of Part I
_	off Gordon Children's Foundation	' '	.74163
Part I	Contributors (see instructions.)	<u></u>	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25_	Kraft Foods Global Inc		Person X
	3 Lakes Dr	\$5,000.	Payroll Noncash
	Northfield, IL 60093		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
26	Midwest Maintenance & Construction PO Box 7035	\$ 5,000.	Person X Payroll Noncash
	Greenwood, IN 46142		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<del></del>		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(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) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll

(a)

Number

(b)

Name, address, and ZJP + 4

(c)
Aggregate
contributions

Noncash

Person Payroll Noncash

(Complete Part II if there is a noncash contribution.)

(d)

Type of contribution

(Complete Part II if there is a noncash contribution.)

Page 1 of 1 of Part II

The Jeff Gordon Children's Foundation

Employer identification number

56-2174163

Part II	Noncash	<b>Property</b>	(see instructions.)
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(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Chevrolet Corvette		
1		!	
		\$55,615.	
		\$ 55,615.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u></u> -			
		-	
		\$	
		Y	
(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
		1	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		<b>-</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		1	
		ļ\$	
BAA	<u> </u>	edule <b>B</b> (Form 990, 990-E	

Name of organization
The Jeff Gordon Children's Foundation

Employer identification number

The Jeff Gordon Children's Foundation 56-2174163

Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry.

	organizations aggregating more th	nan \$1,000 for the year.Comp	plete cols (a) through (e) and the following line entry.	
	For organizations completing Part III, enter to contributions of \$1,000 or less for the year.	total of <i>exclusively</i> religious, charita	able, etc,	
(a)	(b)	(c)	nstructions.)	
No. from Part I	Purpose of gift	Use of gift	Description of how gift is held	
	N/A			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, addres	Relationship of transferor to transferee		
(a)	(b)	(c)	(d)	
No. from Part I	Purpose of gift	Use of gift	Description of how gift is held	
	Transferee's name, addres	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held	
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee	

2010	Federal Statements	Page 1
	The Jeff Gordon Children's Foundation	56-2174163
Statement 1 Form 990-PF, Part I, Line 11 Other Income		
Income From Special Event	(a) (b) Net  Revenue Investment  per Books Income  ss . \$ 566,127. \$  Total \$ 566,127.\$ 0.5	(c) Adjusted Net Income 566,127. 566,127.
Statement 2 Form 990-PF, Part I, Line 16a Legal Fees		
Legal fees	(a)       (b) Net       (c)         Expenses       Investment       Adjusted         Per Books       Income       Net Income         \$ 3,123.       \$ 0.       \$ 0.	\$ 3,123.
Statement 3 Form 990-PF, Part I, Line 16b Accounting Fees		
Accounting fees	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income  \$ 10,650. Total \$ 10,650. \$ 0.	(d) Charitable Purposes \$ 10,650. \$ 10,650.
Statement 4 Form 990-PF, Part I, Line 16c Other Professional Fees		
Professional services Video production Website management .	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         per Books       Income       Net Income          19,032.          25,399.       \$       0.         Total       \$       75,452.	(d) Charitable Purposes  \$ 31,021. 19,032. 25,399. \$ 75,452.

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010	Federal Statements	Page 2
T	ne Jeff Gordon Children's Foundation	56-2174163
Statement 5 Form 990-PF, Part I, Line 18 Taxes		
Other taxes and licenses .	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         per Books       Income       Net Income         \$ 4,018.       \$ 0.         \$ 0.       \$ 0.	(d) Charitable Purposes \$ 4,018. \$ 4,018.
Statement 6 Form 990-PF, Part I, Line 23 Other Expenses		
Bank charges Dues and subscriptions Gifts Investment mangagement fees Miscellaneous Office expense Postage and shipping Special Event Expenses Supplies Telephone Training	(a) (b) Net (c) Expenses per Books Investment Adjusted \$ 26,702. \$ 11,429. \$ 2,099. \$ 5,322. \$ 5,322. \$ 2,390. \$ 2,699. \$ 4,676. \$ 109,817. \$ 3,562. \$ 3,383. \$ 3,164.  Total \$ 175,243. \$ 5,322. \$ 109,817.	(d) Charitable Purposes  \$ 26,702. 11,429. 2,099. 2,390. 2,699. 4,676. 3,562. 3,383. 3,164. \$ 60,104.
Statement 7 Form 990-PF, Part II, Line 13 Investments - Other		
Other Investments	Valuation Book I <u>Method</u> Value	Fair Market Value
Fidelity Investment Account	Cost \$ 513,962. \$  Total \$ 513,962. \$	597, 462. 597, 462.
Statement 8 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipment		
Category	Accum. Book <u>Basis Deprec. Value</u>	Fair Market Value
Miscellaneous Tota	\$ 52,146. \$ 19,097. \$ 33,049. \$ 19,097. \$ 33,049. \$	33,049. 33,049.

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#### **Federal Statements**

Page 3

The Jeff Gordon Children's Foundation

56-2174163

Statement 9 Form 990-PF, Part II, Line 15 Other Assets

Other receivable

	Воо	k Value_	Fair Market <u>Value</u>
Total	\$	75,861. 75,861.	\$ 0.

#### Statement 10 Form 990-PF, Part IV, Line 1 Capital Gains and Losses for Tax on Investment Income

		(b) How	(c) Date	(d) Date
<u> Item</u>	(a) Description	<u>Acquired</u>	_Acquired	_Sold
1	2194.546 Artisian International Investors	Purchased	Various	3/30/2010
2	21.092 Fidelity Contrafund	Purchased	4/08/2005	11/17/2010
3	1000.000 Ishares TR S&P Smallcap	Purchased	12/23/2008	2/16/2010
4	1175.000 Ishares TR S&P Smallcap	Purchased	12/23/2008	3/09/2010
5	86.519 Perkins Small Cap Value	Purchased	10/02/2009	11/17/2010
6	Capital Gain Dividends			

	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(1)
	Gross	Deprec.	Cost	Gain	FMV	Adj. Bas.	Excess	Gain
<u> Item</u>	<u>Sales</u>	Allowed	<u>Basis</u>	<u>(Loss)</u>	12/31/69	12/31/69	<u>(i)-(j)</u>	(Loss)
1	44,088.		46,430.	-2,342.				\$ -2,342.
2	1,360.		1,250.	110.				110.
3	58,013.		46,078.	11,935.				11,935.
4	74,286.		54,175.	20,111.				20,111.
5	1,996.		1,807.	189.				189.
6								2,927.
							Total	\$ 32,930.

Statement 11 Form 990-PF, Part VII-A, Line 8a States to which the Foundation Reports

AL AK AR AZ CA CO CT DC FL GA IL KS LA ME MD MA MI MN MS MO NH NJ NM NY NC ND OK OH OR PA RI SC TN UT VA WA WI WV

#### Statement 12 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation		buti	tri- on to <u>&amp; DC</u>	Expense Account/ Other
Jeffery M Gordon 4345 Papa Joe Hendrick Blvd Charlotte, NC 28262	President O	\$	0.	\$	0.	\$ 0.

56-2174163

### Statement 12 (continued) Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
John S Bickford, Sr. 4345 Papa Joe Hendrick Blvd Charlotte, NC 28262	VP/Secretary 0	\$ 0.	\$ 0.	\$ 0.
Michael Holland 4345 Papa Joe Hendrick Blvd Charlotte, NC 28262	VP/Director 2.00	8,050.	0.	0.
Kimberly Thompson 9604 Callis Court Harrisburg, NC 28075	Treasurer 0	0.	0.	0.
Stokely G. Caldwell, Jr. 101 N. Tryon St., Suite 1900 Charlotte, NC 28246	Asst. Secretary 0	0.	0.	0.
Patricia Kriger 4345 Papa Joe Hendrick Blvd Charlotte, NC 28262	Director 40.00	81,000.	0.	0.
Ryan Hutcheson 4345 Papa Joe Hendrick Blvd Charlotte, NC 28262	CFO 4.00	13,200.	0.	0.
	Total	\$ 102,250.	\$ 0.	\$ 0.

#### Statement 13 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

Katie Harty

Care Of:

Street Address:

4345 Papa Joe Hendrick Blvd.

Charlotte, NC 28262

Telephone:

City, State, Zip Code:

704-455-7424

Form and Content:

Grant application is available at

www.jeffgordonchildrensfoundation.org. Applications should include IRS letter of determination, most recent Form 990, program summary, budget, itemized program budget, list of other funds received for this program, Board of Directors list, most recent audited financial statements and annual report. See application for further

details.

Submission Deadlines: Restrictions on Awards:

August 1

Consideration is limited to section 501(c)(3) tax-exempt organizations with programs that support the physical and

emotional health of children, medical research for childhood diseases and patient assistance programs for children. Programs must be based in the United States and may not discriminate by race, religion, color, creed, sex,

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#### **Federal Statements**

Page 5

The Jeff Gordon Children's Foundation

56-2174163

Statement 13 (continued) Form 990-PF, Part XV, Line 2a-d Application Submission Information

age or national origin. Funding is awarded in amounts up to \$15,000 per grant. See policy guidelines for further details.

#### Statement 14 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	 Amount
The Leukemia & Lymphoma Society 1311 Mamaroneck Ave Suite 310 White Plains, NY 10605	None	Exempt	Pediatric Blood Cancer Research	\$ 100,000.
Riley Hospital for Children 30 S. Meridan Street, Ste 200 Indianapolis, IN 46204	None	Exempt	Cancer research endowment.	305,000.
Ronald McDonald House of Charlotte 1613 E. Morehead Street Charlotte, NC 28207	None	Exempt	Fund construction of house for families of children with illnesses.	9,375.
NorthEast Foundation 920 Church Street N Concord, NC 28025	None	Exempt	Medical equipment and child life services.	282,994.
Jay's Hope for Kids 1157 B Forsyth Street Macon, GA 31201	None	Exempt	Support for pediatric cancer patients funeral expenses.	15,000.
Tatum's Bags of Fun PO Box 90290 Indianapolis, IN 46290	None	Exempt	Support for pediatric cancer patients.	15,000.
Speedway Children's Charities PO Box 500 Fort Worth, TX 76101	None	Exempt	Support for pediatric cancer patients.	75,000.

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2010	Federal Stat	ements		Page 6
Tł	ne Jeff Gordon Child	ren's Founda	tion	56-2174163
Statement 14 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
Memorial Sloan-Kettering Cancer 1275 York Avenue New York , NY 10065	None	Exempt	Prosthetic eye fund program.	\$ 15,000.
Cincinnati Children's Hospital 3333 Burnet Avenue Cincinnati, OH 45229	None	Exempt	Cancer and Blood Diseases Institute's School Intervention Program.	15,000.
Pablove Foundation, Inc. 3801 Sunset Boulvard Los Angeles, CA 90026	None	Exempt	Wilm's Tumor Symposium.	7,000.
Children's Medical Center of Dayton One Children's Plaza Dayton, OH 45404	None	Exempt	Oncology patient support.	12,500.
CureSearch 1835 Savoy Drive, Suite 102 Atlanta, GA 30341	None	Exempt	Long-term follow up study of cancer patients.	280,000.
Brain Tumor Foundation for Children 6065 Roswell Road NE Suite 505 Atlanta, GA 30328	None	Exempt	Emergency Financial Assistance Program.	10,000.
Be The Match Foundation 3001 Broadway Street NE Suite 601 Minneapolis , MN 55413	None	Exempt	Support lab costs for marrow registry and patient assistance.	300,000.
Miscellaneous less than \$1,000 4345 Papa Joe Hendrick Blvd Charlotte, NC 28262	None	Exempt	Various support.	1,482.

Exempt

None

Flashes of Hope 6009 Landerhaven Drive Suite I Mayfield Hights, OH 44124

Total \$ 1,453,351.

10,000.

Patient support.

7	63		er	47		
Page 2	56-2174163		December	589, 647 589, 647		
l g	56-2					
			November	1,736		
			Nove	571, 571,		
			er	69,		
			October	561, 769 561, 769		
			September	530, 607 530, 607		
			Sept	53		
			August	381 381		
			Aug	518, 381 518, 381		
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Federal Worksheets	hild			507		
  a	The Jeff Gordon Children's Foundation		May	592	12	
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			April	544, 318 544, 318		
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		curit	March	529,815 529,815	f Moi	535,845
		of Se	ž	529 529	Number of Months	535
		due o	<u>}</u>	35	Num	<u></u>
		et Va	February	514,285 514,285		Valu
		Average Monthly Fair Market Value of Securities Forn 990-PF, Part X, Line 1a	Fe	200	145	arket
			January	ts ,047		ir i
			Jan	Fidelity Investments 516,047 Averages 516,047	6,430,145	Iy Fa
				Inve	Ψ	Average Monthly Fair Market Value
			Security	lity ages	Totals	ag e e
2010		Ave	Sec	Fide	J	Aver
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The Jeff Gordon Children's Foundation 56-21/3162  From 990-PF, Park Line 1b  Cash Bal. January Fabriary Match April Kay June July August September October Brownber December  Free Lity Investment 2	Federal Worksheets	Page 3
March April   May June July August September   October November   133   485,955   552,992   656,067   878,016   1,041,893   1,137,125   1,201,358   1,139,953   1,011,938   1,137,125   1,201,358   1,139,953   1,011,938	The Jeff Gordon Children's Foundation	56-217416
Number of Months 12 November   July August September October November   July 33 495,955 52,992 656,067 878,016 1,041,893 1,137,125 1,201,358 1,179,953 1,011,938   Number of Months 12   Number of Months 12   Number of Months 12   Number of Months 13   Number of Months 14   Number of Months 15   Number of Months 16   Number of Months 17   Number of Months 17   Number of Months 17   Number of Months 17   Number of Months 18   Number of Mon	fonthly Cash Balances PF, Part X, Line 1b	
733 495,955 552,992 656,067 878,016 1,041,893 1,137,125 1,201,358 1,179,953 1,011,938  Number of Months 12  809,805	February March April May June July August September	November
809,805	467,733 495,955 552,992 656,067 878,016 1,041,893 1,137,125 1,201,358 467,733 495,955 552,992 656,067 878,016 1,041,893 1,137,125 1,201,358	1,011,938 1,011,938
	Number of Months	

4 14 1

4 25 6

# Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Form 8868 (Rev. 1-2011)

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

● If you are	e filing for an Automatic 3-Month Extension, comp	lete only P	art I and check this box			►  X			
• If you are	e filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II (on page 2 of this f	orm).					
Do not comp	<b>plete Part II unless</b> you have already been granted	an automa	itic 3-month extension on a previously file	d Forr	n 8868.				
corporation r request an e Associated V	ling (e-file). You can electronically file Form 8868 is required to file Form 990-T), or an additional (not a xtension of time to file any of the forms listed in Fourth Certain Personal Benefit Contracts, which muing of this form, visit www irs gov/efile and click or	automatic) art I or Par st be sent t	3-month extension of time. You can elect t II with the exception of Form 8870, Info to the IRS in paper format (see instruction	ronicà rmatio	lly file Forn n Return fo	n 8868 to or Transfers			
Part I A	utomatic 3-Month Extension of Time. (	Only subr	nit original (no copies needed).						
	n required to file Form 990-T and requesting an ac			mplete	Part I onl	y <b>-</b>			
All other corp Income tax r	porations (including 1120-C filers), partnerships, F eturns	REMICS, an	d trusts must use Form 7004 to request a	an exte	ension of til	me to file			
<u>-</u> _	Name of exempt organization			Emplo	yer identificat	ion number			
Type or									
print	The Jeff Gordon Children's Fou	indation	ı	56-	2174163	3			
File by the due date for	Number, street, and room or suite number If a P.O box, see instructions								
filing your return See	4345 Papa Joe Hendrick Boulevard								
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions								
	Charlotte, NC 28262								
	· · · · · · · · · · · · · · · · · · ·								
Enter the Re	turn code for the return that this application is for	(file a sepa	arate application for each return)			04			
Application Is For		Return Code	Application Is For			Return Code			
Form 990		01	Form 990-T (corporation)			07			
Form 990-BL	-	02	Form 1041-A			08			
Form 990-E2	7	03	orm 4720			09			
Form 990-PF	=	04	Form 5227			10			
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069			11			
Form 990-T	(trust other than above)	06	Form 8870	12					
Telephon If the org If this is check th	e No. > 704-455-7424  ganization does not have an office or place of bus for a Group Return, enter the organization's four or is box > [ ]. If it is for part of the group, check insign is for.  est an automatic 3-month (6 months for a corporation is for a corporation is for a corporation.	digit Group this box	United States, check this box  Exemption Number (GEN) If  If and attach a list with the names a			► □ nole group, embers			
until _ The ex	8/15, 20 _11, to file the exempt orgetension is for the organization's return for:    calendar year 20 _10 _ or, 20	anızatıon re	eturn for the organization named above.						
	ax year entered in line 1 is for less than 12 month ange in accounting period	s, check re	ason: Initial return Fir	nal retu	ırn				
3a If this nonref	application is for Form 990-BL, 990-PF, 990-T, 472 undable credits. See instructions	20, or 6069	enter the tentative tax, less any	3a	\$	353.			
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 allowed as a credit					464.				
c Baland EFTPS	ce due. Subtract line 3b from line 3a. Include your 6 (Electronic Federal Tax Payment System). See	payment w instructions	with this form, if required, by using	30	\$	0.			
Caution. If y payment ins	ou are going to make an electronic fund withdraw structions.	al with this	Form 8868, see Form 8453-EO and Form	1 8879	-EO for				

BAA For Paperwork Reduction Act Notice, see Instructions.

## 50

Form **8868** (Rev January 2011)

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

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

• If you a	re filing for an Automatic 3-Month Extension, com	plete only F	art I and check this box			► X			
-	re filing for an Additional (Not Automatic) 3-Monti			-					
Do not con	<i>nplete Part II unless</i> you have already been grante	d an automa	atic 3-month extension on a previously file	ed Forr	n 8868				
corporation request an Associated	filing (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which milling of this form, visit www irs gov/efile and click of	: aútomatic) Part I or Pa ust be sent	3-month extension of time. You can elec rt II with the exception of Form 8870, Info to the IRS in paper format (see instructio	tronicà ormatio	lly file Forn n Return fo	n 8868 to or Transfers			
Part I	Automatic 3-Month Extension of Time.	Only subi	mit original (no copies needed).						
	on required to file Form 990-T and requesting an a			omplete	Part I onl	y <b>-</b>			
All other co	rporations (including 1120-C filers), partnerships, returns	REMICS, ar	nd trusts must use Form 7004 to request	an exte	ension of til	me to file			
	Name of exempt organization			Emplo	yer identificati	ion number			
Type or print									
•	The Jeff Gordon Children's Fo		n	56-	56-2174163				
File by the due date for	Number, street, and room or suite number. If a P.O. box, see	instructions.							
filing your return See	4345 Papa Joe Hendrick Boulevard								
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions								
	Charlotte, NC 28262								
						<del></del>			
Enter the R	eturn code for the return that this application is fo	r (file a sep	arate application for each return)			04			
Application	·	Return Code	Application Is For			Return Code			
			<del> </del>			<del></del>			
Form 990	N	01	Form 990-T (corporation)			07			
Form 990-E		02	Form 1041-A	<del></del>		08			
Form 990-E		03	Form 4720			09			
Form 990-F		04	Form 5227		10				
	(section 401(a) or 408(a) trust)	05	Form 6069						
Form 990-1	(trust other than above)	06	Form 8870			12			
Telephon  If the on  If this is check the external the external the content to the content	ne No. > 704-455-7424  Iganization does not have an office or place of but for a Group Return, enter the organization's four his box > If it is for part of the group, checension is for.	digit Group k this box	Eunited States, check this box  Exemption Number (GEN) If						
until The e	8/15 , 20 $11$ , to file the exempt or xtension is for the organization's return for:  Calendar year 20 $10$ or tax year beginning , 20	ganization re	eturn for the organization named above.						
	tax year entered in line 1 is for less than 12 mont hange in accounting period	hs, check re	ason: Initial return Fir	nal retu	rn				
3a 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					353.				
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 allowed as a credit					464.				
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  3c \$  Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for					0.				
payment in		wai with this	Form 8868, see Form 8453-EO and Form	n 88/9	EO tor				
BAA For P	aperwork Reduction Act Notice, see Instructions.				Form 886	8 (Rev. 1-2011)			