

# 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

al Reve	nue Service Note. The Tourida	ion may i	be able to use a copy of this	return to satisfy state repor	ang requirements.	
alend	ar year 2010, or tax year beginning			, and ending		
heck a	all that apply: Initial return		Initial return of a fo	rmer public charity	Fınal return	
	Amended return	l	Address chang	ge	Name change	
ne of f	oundation				A Employer identification	number
	THE JOSEPH TREADW	ELL	CHARITABLE F	DN.		
	C/O BANCTRUST COM	PANY			57-0880131	
ber an	d street (or P O box number if mail is not delivere	d to street	address)	Room/suite	B Telephone number	
	P. O. BOX 3067				(251)431-7	800
or to			-· · · · ·			. []
0. 10.						
heck t			emnt private foundation	<del></del>		
	· ·	· '\-		ation		
	·		•	L Accidal	, , , ,	, ,-
	aπ II, coi (c), line 10)	rt / co/u	ma (d) must be on cash b	haere I		
		- , com			1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
πι	(The total of amounts in columns (b), (c), and (d)	may not				(d) Disbursements for charitable purposes
			oxponded per books	modific		(cash basis only)
					١,	
_		h Sch B	24 225	24 226		
3	cash investments		1			STATEMENT 1
4	Dividends and interest from securities				<u> </u>	STATEMENT 2
5a		Initial return	STATEMENT 3			
b	Net rental income or (loss) 234,4	74.			-	STATEMENT 4
		0	35,798.	-	-	,
ь	Gross sales price for all assets on line 6a 35,7	98.			`	
7	Capital gain net income (from Part IV, line 2)			35,798.	^	,
8	Net short-term capital gain					
9	Income modifications	erta				
10a	Gross sales less to FIVED					
	, , , , , , , , , , , , , , , , , , ,	, I				
	Grossprofit of (loss)					
	Other Phome	1	1.143.	1.143.	0.	STATEMENT 5
l .	Total Add-Ines-1-through 11				<del>† • • • • • • • • • • • • • • • • • • •</del>	
		-				0.
14	Other employee-salaries and wades	ا د		, , , , , ,		
l					1	
ı		٠ 6	4 385	4 385	n.	0.
alendar year 2010, or tax year neck all that apply:  THE JOSEPH C/O BANCTR  ber and street (or P O box number if P. O. BOX  or town, state, and ZIP code MOBILE, AL  neck type of organization: Section 4947(a)(1) nonexempter market value of all assets at etcom Part II, col (c), line 16)  S 9, 319  It I Analysis of Revenue and (The total of amounts in columnecessarily equal the amounts of assets investments)  Contributions, gifts, grants Check X if the foundation state of a box investments  Dividends and interest from the same of a box investments  Net gain or (loss) from sale of a box investments  Net gain or (loss) from sale of a box investments  Net gain or (loss) from sale of a box investments  Net short-term capital gain of income (from Fancy) Net mental income (from Fancy) Net gain or (loss) from sale of a box investments  Capital gain net income (from Fancy) Net gain or (loss) from sale of a box investments  Capital gain net income (from Fancy) Net gain or (loss) from sale of a box investments  Complement of fine to the same of a box investments  Total memorifications  Capital gain net income (from Fancy) Complement of fine to the same of a box investment  Complement of fine to the same of a box investment  Complement of fine to the same of a box investment  Complement of fine to the same of a box investment  Complement of fine to the same of a box investment  Complement of fine to the same of a box investment  Complement of fine to the same of a box investment  Complement of fine to the same of a box investment  Complement of fine to the same of a box investment  Contributions, gifts, grant  Contributions of the same of a box in th		. •	=,505.	<del> </del>	•	1
ı				-		
1		٠ 7	1 295	1 205	n	0.
		. ,	30 501	20 EQ1		<u> </u>
l.	•		30,361.	30,361.	1	-
					+	
ł	•			-	1	
1		1 0	0.045	0 045	1	0.
		. 0	9,945.	7,745	· · · · · · · · · · · · · · · · · · ·	1
	-		116 070	116 070		
1	-			110,9/0.	0.	0.
l			554,044.		+	532,044.
26			C40 014	116 050		F20 044
<u> </u>			649,014.	116,970.	0.	532,044.
27	Subtract line 26 from line 12:		100 000			
i	·		-132,800.	222 211		
1		-)		399,244.		
C	Adjusted net income (if negative, enter -0-)				10.	<u> </u>
	alend   heck   alend   alend   heck   alend   alend	alendar year 2010, or tax year beginning heck all that apply: Initial return Amended return ne of foundation  THE JOSEPH TREADW C/O BANCTRUST COM aber and street (or P O box number if mail is not delivered P. O. BOX 3067 or town, state, and ZIP code MOBILE, AL 36652 Theck type of organization: X Section 50: Section 4947(a)(1) nonexempt charitable trus ir market value of all assets at end of year J om Part II, col (c), line 16)  S 9, 319, 177. (Pa int I Analysis of Revenue and Expenses (The total of amounts in column (a))  1 Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attact interest on savings and temporary ash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 234, 4 6a Net gain or (loss) from sale of assets not on line 1 b Gross sales price for all assets on on line 1 b Gross sales price for all assets on on line 1 b Gross sales price for all assets on on line 1 capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Incommemodifications 10a and allowance 10 prices for goods sold c Gross profit of (loss) 2 9 2011 11 Other-income 12 Total. Add-lines-t-through 11 13 Compensation of origes are and wages 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 3 STMT 3 Contributions, gifts, grants paid 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements	Allendar year 2010, or tax year beginning heck all that apply: Initial return Amended return ne of foundation  THE JOSEPH TREADWELL C/O BANCTRUST COMPANY ther and street (or P O box number if mail is not delivered to street P. O. BOX 3067  or town, state, and ZIP code MOBILE, AL 36652 theck type of organization: X Section 501(c)(3) ex Section 4947(a)(1) nonexempt charitable trust  or market value of all assets at end of year The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)  1 Contiributions, gifts, grants, etc., received 1 Check X If the foundation is not required to attach Sch B interest on savings and temporary cash investments 1 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 1 Capital gain net mecome (from Part IV, tine 2) 8 Net short-term capital gain 9 Incomermodifications Gross sales less that and sasets not on line 10 b assets on line 6a 2 A Capital gain net mecome (from Part IV, tine 2) 8 Net short-term capital gain 9 Incomermodifications Gross sales less that and the properties of the complete state of the c	Initial return	Initial return   Ini	Intelligence   Inte

023501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2010)

Fa	OOO DE	(0040)
LOHII	990-PF	( <b>&amp;</b> U IU)

C/O BANCTRUST COMPANY

57-0880131 Page 2

n	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of y	/ear
<b>P</b>	art'	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	1,312,184.	953,164.	947,109.
	1	Accounts receivable ►			
		Less; allowance for doubtful accounts ▶			
	4	Pledges receivable			
	"	Less: allowance for doubtful accounts			
	5	Grants receivable			•
	_	Receivables due from officers, directors, trustees, and other			
	٦	disqualified persons		is the second se	
	,	· · ·			
	′	Other notes and loans receivable			
	_	Less: allowance for doubtful accounts			
ets		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
•	ı	Investments - U.S. and state government obligations	2.155.222	2 504 406	1 100 100
	b	Investments - corporate stock STMT 9	3,166,982.	3,704,186.	4,139,138.
	C	Investments - corporate bonds STMT 10	1,200,000.	949,317.	921,416.
	11	Investments - land, buildings, and equipment basis   2,400,000.			
		Less accumulated depreciation STMT 11► 504,587.	1,925,994.		2,940,000.
	12	Investments - mortgage loans STMT 12	392,534.		362,814.
	13	Investments - other STMT 13	8,700.	8,700.	8,700.
	14	Land, buildings, and equipment: basis ▶		٠_	
	ł	Less accumulated depreciation			
	15	Other assets (describe ▶			
			···		
	16	Total assets (to be completed by all filers)	8,006,394.	7,873,594.	9,319,177.
_	$\overline{}$	Accounts payable and accrued expenses	0,000,002	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5/5-5/
	18	Grants payable			
	1	Deferred revenue			
Liabilities	19				
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable			
	22	Other liabilities (describe )			
			^	١	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
ces	1	Unrestricted			
Fund Balanc	25	Temporarily restricted			
8	26	Permanently restricted			
Ę		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
Net Assets or	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	8,006,394.	7,873,594.	
Ę	30	Total net assets or fund balances	8,006,394.	7,873,594.	
~					
	31	Total liabilities and net assets/fund balances	8,006,394.	7,873,594.	
_				. / /	
LP	art	III Analysis of Changes in Net Assets or Fund Ba	aiances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)	<del></del>	1	8,006,394.
0	•	r amount from Part I, line 27a		2	-132,800.
		er increases not included in line 2 (itemize)		3	0.
3		lines 1, 2, and 3		4	7,873,594.
4		reases not included in line 2 (itemize)		5	0.
5			duma (h) lina 20	6	7,873,594.
<u>6</u>	1012	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numm (U), mie 30		Form <b>QQO-DF</b> (2010)

(a) List and desc 2-story brick wa	ribe the kir arehouse; o	nd(s) of property sold (e.g., r or common stock, 200 shs. N	eal estate, MLC Co.)		[ P	low acc - Purch - Donat	ase   `7	) Date acq mo., day,	uired yr.)	(d) Date sold (mo., day, yr.)
1a CAPITAL GAINS	DIVII	ENDS								
b										
C										
d										
e			_		<u>ل</u> ــــــــــــــــــــــــــــــــــــ					
(e) Gross sales price	(f) [	Depreciation allowed (or allowable)		t or other basis xpense of sale			(	(h) Gaın (e) plus (f)	or (loss) minus (	g)
a 35,798.										35,798
b										
C										
d	<u> </u>									
e									_	
Complete only for assets shown	ng gain in i	column (h) and owned by the	e foundation	on 12/31/69				ains (Col.		
(i) F.M.V. as of 12/31/69	(	j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				), but not osses (fro		
a							_		,	35,798
b										
C								_		
d										
e	<u> </u>									
<u> </u>	,		- D1 l	-·· <del></del>	$\overline{}$					
Capital gain net income or (net capital loss)  If gain, also enter in Part I, line 7  If (loss), enter -0- in Part I, line 7  Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):								35,798		
			(6):		ار					
If gain, also enter in Part I, line 8		c).			<b> </b>	,			N/A	
If (loss), enter -0- in Part I, line 8	Indox S	ection 4940(e) for F	Paducad	LTay on Ne	t Inv	ectm	ent Inco	me	N/A	
							ent inco			
For optional use by domestic privat	e toundati	ons subject to the section 49	14U(a) tax on	i net investment i	ncome	e.)				
f section 4940(d)(2) applies, leave t	this nart hi	ank								
* * * * * * * * * * * * * * * * * * * *										
Was the foundation liable for the sec					eriod?					Yes X No
f "Yes," the foundation does not qua	alify under	section 4940(e). Do not com	plete this pa	art.						
Enter the appropriate amount in	each colu	<u>`</u>	tions before	making any entr						(4)
(a) Base period years		(b)		Not color of a	(c)				Distrib	(d) outlon ratio
Calendar year (or tax year beginn	ing in)	Adjusted qualifying distri		Net value of n				(00	ol. (b) div	rided by col. (c))
2009			<u>,267.</u>		8	,60	5,584.			.05917
2008			<u>,192.</u>				2,230.			.05384
2007			5,932.				2,924.			.04663
2006			.,263 <u>.</u>				<u>8,635.</u>			.04981
2005		461	.,887.		8	<u>,76</u>	<u>3,808.</u>	<u> </u>		.05270
2 Total of line 1, column (d)								2		.26218
Average distribution ratio for the	5-year ba	se period - divide the total or	n line 2 by 5,	or by the numbe	er of ye	ears				
the foundation has been in exist			•	•	•			3		.05243
		,								
Enter the net value of noncharita	ible-use as	sets for 2010 from Part X. Iu	ne 5					4		8,944,508
Eliter the fiet value of honoraria	1010 000 00	5015 101 20 10 11 0111 1 unt 74 111								-,,,,,,,,
* Multiply line 4 by line 2								5		469,023
Multiply line 4 by line 3										405,025
5 - Francis 40/ of making continued to the	ma /40/ =	Dort Line 975)								3,992
6 Enter 1% of net investment inco	ine (1% 0	гап I, IIIne 2/D)						6		3,334
								_		172 A15
Add lines 5 and 6								7		473,015
										F00 04:
Enter qualifying distributions fro	m Part XII	, line 4						8		532,044
If line 8 is equal to or greater tha	an line 7, c	heck the box in Part VI, line	1b, and com	plete that part us	ing a 1	1% tax r	ate.			
See the Part VI instructions.				<u></u>						
023521 12-07-10									F	orm <b>990-PF</b> (201

THE JOSEPH TREADWELL CHARITABLE FDN.

Form	990-PF	(2010) C/O BANCTRUST COMPANY					0131		Page 4
Par	t VI	Excise Tax Based on Investment Income (Section 4940	)(a), 4940(b), 4940(e)	, or 4	948	- see	instru	ctio	ıs)
1a	Exempt	operating foundations described in section 4940(d)(2), check here  and en	nter "N/A" on line 1.						
	Date of	ruling or determination letter: (attach copy of letter if nece	essary-see instructions)						
b	Domest	tic foundations that meet the section 4940(e) requirements in Part V, check here 🕒	X and enter 1%	•	1_		_	3,9	<u>92.</u>
	of Part I	I, line 27b							
C.	All othe	r domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% $$	of Part I, line 12, col. (b).						
2	Tax und	der section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers enter -0-)		2				0.
3	Àdd line	es 1 and 2			3	ļ		3,9	
4	Subtitle	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)		4				0.
5	Tax bas	sed on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5			<u>3,9</u>	<u>92.</u>
6	Credits/	Payments:	1						
а	2010 es	stimated tax payments and 2009 overpayment credited to 2010	6a 4,8	77.					
b	Exempt	foreign organizations - tax withheld at source	6b						
C	Tax pan	d with application for extension of time to file (Form 8868)	6c						
d	Backup	withholding erroneously withheld	6d			ļ			
7	Total cr	edits and payments. Add lines 6a through 6d			7			<u>4,8</u>	<u>77.</u>
8	Enter ar	ny penalty for underpayment of estimated tax. Check here 🔲 if Form 2220 is attac	ched		8				
9	Tax due	e If the total of lines 5 and 8 is more than line 7, enter amount owed			9				
10	Overpa	yment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	,		10			8	<u>85.</u>
		ne amount of line 10 to be: Credited to 2011 estimated tax	885. Refund	ed 🕨	11				0.
Pai	t VII-	A Statements Regarding Activities							
1a	During :	the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate or in	tervene	IN			Yes	
	any pol	rtical campaign?					1a		X
b	Did it sp	pend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions for defini	tion)?			1b		<u>X</u>
	If the a	inswer is "Yes" to 1a or 1b, attach a detailed description of the activities and	l copies of any matenals pu	ıblıshe	d or				
	dıstrıbı	uted by the foundation in connection with the activities							
C	Did the	foundation file Form 1120-POL for this year?					1c		<u>X</u>
		ne amount (if any) of tax on political expenditures (section 4955) imposed during the							
		the foundation. $\blacktriangleright$ \$ (2) On foundation managers.		0.			'		
е	Enter th	ne reimbursement (if any) paid by the foundation during the year for political expendi	ture tax imposed on foundatio	n					
	-	ers. ▶ \$0							
2	Has the	foundation engaged in any activities that have not previously been reported to the IF	RS?				2		X
		," attach a detailed description of the activities							
		foundation made any changes, not previously reported to the IRS, in its governing in		ation, o	r		Ì		
	-	, or other similar instruments? If "Yes," attach a conformed copy of the change					3		X
		foundation have unrelated business gross income of \$1,000 or more during the year	L <sub>S</sub>				4a		X
		has it filed a tax return on Form 990-T for this year?			N	1/A	4b		
		ere a liquidation, termination, dissolution, or substantial contraction during the year?					5		X_
		," attach the statement required by General Instruction T.							
		requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	ther:						
	•	nguage in the governing instrument, or					ŀ		
	-	ate legislation that effectively amends the governing instrument so that no mandatory	y directions that conflict with t	he state	law				
		un in the governing instrument?					6		<u> </u>
		foundation have at least \$5,000 in assets at any time during the year?					7	X	<del></del>
		, " complete Part II, col. (c), and Part XV.							
8a		ne states to which the foundation reports or with which it is registered (see instruction	ns) 🟲						
_	AL	Bridge To the Action of the Control	#O						
		nswer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Ai	πorney General (or designate)					77	
		state as required by General Instruction G? If "No," attach explanation	alian 40.40(-)(0) == 40.40(-)(5)		- امید		8b	X	<u> </u>
		oundation claiming status as a private operating foundation within the meaning of sei		ior cale	noar		_		
	-	110 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," c					10		X
111	COLUMN ACTIV	r nacaona decome aguarding comitibilities difficil did lift VMI f if "Ves " attach a schedu	neting that names and addresses	RC .			1 117		. ^

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

<b>&gt;</b>	0
Forr	n <b>990-PF</b> (2010)

Total number of other employees paid over \$50,000

0.

N/A

Total. Add lines 1 through 3

All other program-related investments. See instructions.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	is, 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	4,926,973.
ь	Average of monthly cash balances	1b	838,981.
C	Fair market value of all other assets	1c	3,314,765.
d	Total (add lines 1a, b, and c)	1d	9,080,719.
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	9,080,719.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	136,211.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,944,508.
6	Minimum investment return Enter 5% of line 5	6	447,225.
P	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	ıd certai	n
1	Minimum investment return from Part X, line 6	1	447,225.
2a	Tax on investment income for 2010 from Part VI, line 5 2a 3,992.	<del>-</del>	
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	3,992.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	443,233.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	443,233.
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	443,233.
P	art XII Qualifying Distributions (see instructions)		, , , , , ,
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		•
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	532,044.
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	
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	532,044.
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	3,992.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	528,052.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	for the section
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	( <b>d</b> ) 2010
1 Distributable amount for 2010 from Part XI, line 7				443,233.
2 Undistributed income, if any, as of the end of 2010				115,255.
a Enter amount for 2009 only			273,002.	
b Total for prior years:			273,0024	
, and the second		0.		
3 Excess distributions carryover, if any, to 2010:				
<b>a</b> From 2005				
<b>b</b> From 2006				
<b>c</b> From 2007				
<b>d</b> From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 532,044.				
a Applied to 2009, but not more than line 2a			273,002.	
b Applied to undistributed income of prior				-
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				259,042.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
	0.			
a Corpus Add lines 31, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract				
· · · · · · · · · · · · · · · · · · ·		0.		
line 4b from line 2b 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				<del></del> :
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				<u></u>
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				, <u>-</u>
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				184,191.
7 Amounts treated as distributions out of		·		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.			-	
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009	1			
e Excess from 2010				
				Farm 000 DE (0010)

Form 990-PF (2010) C/O BANCTRUST COMPANY

Part XV | Supplementary Information (continued)

57-0880131 Page 11

Grants and Contributions Paid During the Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
Paid during the year	or odbownia communici			
,				
SEE STATEMENT 14			<b>▶</b> 3a	532,0
Total  Approved for future payment			Ja	<u> </u>
φρουστικό μεγικών				
NONE				

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

	amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	ded by section 512, 513, or 514  (d)  Amount	(e) Related or exempt function income
_	n Service revenue:	code		code	7 WHOUTH	- Iditation income
				1		
		1				
						-
						_
· , —						
a Fees	and contracts from government agencies			<u> </u>		- <del>.</del>
•	ship dues and assessments			1		
	on savings and temporary cash			1		
investm				03	91 806.	
	ds and interest from securities			03		
	al income or (loss) from real estate:			"	112,10,1	
	-financed property			1		
	debt-financed property			03	234,474.	
	al income or (loss) from personal			<u> </u>		
property						
	vestment income			03	1,143.	· · · · · · · · · · · · · · · · · · ·
	(loss) from sales of assets other			"	2/1134	
than inv	•			03	35,798.	
	ome or (loss) from special events			"	3377301	
	rofit or (loss) from sales of inventory			<u> </u>		<del></del> -
11 Other re	•			<del> </del>		
_						
				Ì		·
				<del>                                     </del>		
				İ		<del> ·</del>
<u> </u>		-		•		
12 Subtota	l. Add columns (b), (d), and (e)		0.		475.688.	0.
	add line 12, columns (b), (d), and (e)					475,688.
	heet in line 13 instructions to verify calculations.)					
Part X	/I-B Relationship of Activities	to the Acc	omplishment of Ex	emp	t Purposes	
Line No.	Explain below how each activity for which inc the foundation's exempt purposes (other that			contril	outed importantly to the accord	nplishment of
<b>▼</b> 03	THIS REPRESENTS BROKER			ENT	C AND CAPTERAT	GAINS, IT IS
	ALSO NET RENTAL INCOME			TRIAL	S AND CAPITAL	GAINS. IT IS
03	ALSO NET RENTAL INCOME	FROM E	BUILDING			
		···				
						<del></del>
					_	
		· · · · · · · · · · · · · · · · · · ·				
<del></del>		<del></del>	<del></del>			
					<del></del>	<del></del>
						<del></del>
					<del></del>	
						<del> </del>
						<del> </del>
					<del></del>	<del></del>
			· -	-	<del>.</del>	
<del></del> -			<del></del>			·
					••	
023621	<u> </u>		. <u> </u>	<del></del>		Form <b>990-PF</b> (2010)

THE JOSEPH TREADWELL CHARITABLE FDN. Form 990-PF (2010) C/O BANCTRUST COMPANY 57-0880131 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) (2) Other assets X 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization X 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) X (3) Rental of facilities, equipment, or other assets 1b(3) X (4) Reimbursement arrangements 1b(4) X (5) Loans or loan guarantees 1b(5) Х (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c Х d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described \_\_\_ Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A nis return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, Under penalties of Sign Here TRUSTEE Signature of officer or trustee Title Print/Twpe preparer's name Date Check | If PTIN Preparer's signature self- employed Paid LOUIS G. RUSSELL P00474055

Form **990-PF** (2010)

(251)473-5550

Firm's EIN  $\triangleright$  63-0965059

Phone no.

**Preparer** 

Use Only

& HOUSTON,

Firm's name ► RUSSELL THOMPSON BUTLER

MOBILE, AL 36670

Firm's address ▶ P.O. BOX 70106

# 2010 DEPRECIATION AND AMORTIZATION REPORT RENTAL PROPERTY

RENT

Current Year Deduction	0	30,581.	30,581.									
Current Sec 179	_	, , , , , , , , , , , , , , , , , , , ,	0				_					
Accumulated Depreciation		474,006.	474,00Ĝ.									
Basis For Depreciation	1207345.	1192655.	2400000.									
Reduction In Basis		-	<b>.</b>		-							,
Bus % Excl		- ,		·		 		F		<del></del>		
Unadjusted Cost Or Basis	1207345.	1192655.	2400000.									
No No		91							_			
Life		39.001				 					· · · · · · · · · · · · · · · · · · ·	
Method	ᄀ	SL						- ·-				
Date Acquired	070194L	070194SL										
Description	1LAND	2BUILDING	* TOTAL 990-PF RENTAL DEPR									
Asset No		N										
L						 _						

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

57-0880131

234,474.

FORM 990-PF INTEREST ON SAVINGS	AND TEMPORARY C	ASH INVESTMENTS	STATEMENT	1
SOURCE			AMOUNT	
BANCTRUST			91,80	06.
TOTAL TO FORM 990-PF, PART I, LI	NE 3, COLUMN A		91,8	06.
FORM 990-PF DIVIDENDS A	ND INTEREST FROM	SECURITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A AMOUNT	)
BANCTRUST	148,265.	35,798.	112,4	67.
TOTAL TO FM 990-PF, PART I, LN 4	148,265.	35,798.	112,4	67.
FORM 990-PF R	ENTAL INCOME		STATEMENT	3
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INC	OME
RENTAL PROPERTY		1	275,0	00.
TOTAL TO FORM 990-PF, PART I, LI	NE 5A		275,0	00.
FORM 990-PF RE	NTAL EXPENSES		STATEMENT	4
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL	
DEPRECIATION INSURANCE		30,581. 9,088.		
MISC - SUBT	OTAL - 1	857.	40,5	26.
TOTAL RENTAL EXPENSES			40,5	26.

NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B

FORM 990-PF	OTHER	INCOME		STATEMENT 5
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
NET PROCEEDS UNOCAL DOMESTIC OPERSTIONS		1,143.	1,143.	0.
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	1,143.	1,143.	0.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT 6
DESCRIPTION				(D) CHARITABLE PURPOSES
ACCOUNTING	4,385	. 4,385	. 0	0.
TO FORM 990-PF, PG 1, LN 16B	4,385	4,385	. 0	0.
FORM 990-PF	TA	XES		STATEMENT 7
DESCRIPTION				(D) CHARITABLE PURPOSES
TAXES PAID	1,295	. 1,295	• 0	0.
TO FORM 990-PF, PG 1, LN 18	1,295	1,295	. 0	0.
FORM 990-PF	OTHER	EXPENSES		STATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE MISC	9,088 857			0.
TO FORM 990-PF, PG 1, LN 23	9,945	. 9,945	•	0.

FORM 990-PF COF	RM 990-PF CORPORATE STOCK				
DESCRIPTION		BOOK VALUE	FAIR MARKE'	r	
CORPORATE STOCKS MUTUAL FUNDS	_	2,143,762. 1,560,424.	2,613,20		
TOTAL TO FORM 990-PF, PART II, LINE	- E 10B =	3,704,186.	4,139,1	38.	
FORM 990-PF COF	RPORATE BONDS		STATEMENT	10	
DESCRIPTION		BOOK VALUE	FAIR MARKE	r	
CORPORATE BONDS	_	949,317.	921,416		
TOTAL TO FORM 990-PF, PART II, LINE	- E 10C =	949,317.	921,4	16.	
FORM 990-PF DEPRECIATION OF ASSE	ETS HELD FOR INV	VESTMENT	STATEMENT	11	
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VAL	JE	
LAND BUILDING	1,207,345. 1,192,655.	0. 504,587.	1,207,3		
TOTAL TO FM 990-PF, PART II, LN 11	2,400,000.	504,587.	1,895,4	13.	
FORM 990-PF MORTGAGE LOANS			STATEMENT	12	
DESCRIPTION		BOOK VALUE	FAIR MARKE	r	
MORTGAGE LOANS	<del>-</del>	362,814.	362,8	14.	
TOTAL TO FORM 990-PF, PART II, LINE	362,814.	362,814.			

FORM 990-PF 05	THER INVESTMENTS		STATEMENT 13	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE 8,700.	
MINERAL INTERESTS/FINE ARTS	COST	8,700.		
TOTAL TO FORM 990-PF, PART II, L	INE 13	8,700.	8,700.	
	AND CONTRIBUTION DURING THE YEAR	S	STATEMENT 14	
RECIPIENT NAME AND ADDRESS	RECIPIENT RELA AND PURPOSE O		PIENT ATUS AMOUNT	
DRUG EDUCATION COUNCIL OF MOBILE MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	20,000.	
FAIRHOPE POLICE DEPT MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	5,000.	
FIRST BAPTIST CHURCH OF WARRINGTON MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	5,000.	
MOBILE SYMPHONY MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	4,000.	
MULHERIN HOME MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	45,000.	
SPRINGHILL COLLEGE MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	56,595.	

THE JOSEPH TREADWELL CHARITAB	LE FDN. C/O		57-0880131
ST MATY'S HOME MOBİLE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	5,000.
TEAM FOCUS MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	2,500.
THE SALVATION ARMY MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	65,000.
UNIVERSITY OF MOBILE MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	78,787.
UNIVERSITY OF SOUTH ALABAMA MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	210,162.
WATERFRONT RESCUE MISSION MOBILE, AL	N/A UNRESTRICTED CONTRIBUTION	N/A	35,000.
TOTAL TO FORM 990-PF, PART XV,	LINE 3A	-	532,044.

# 8868

(Rev. January 2011)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

mitaria .	Total de Cope					
● If yo	ou are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			$\mathbf{x}$
•	ou are filing for an Additional (Not Automatic) 3-Month Ex	•		form).		
•	t complete Part II unless you have already been granted a					
	onic filing (e-file). You can electronically file Form 8868 if y					ration
	ed to file Form 990-T), or an additional (not automatic) 3-mor				' <del>-</del> '	
of time	e to file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for Tran	sfers /	Associated With Cer	tain
	nal Benefit Contracts, which must be sent to the IRS in pap					
	ww.irs gov/efile and click on e-file for Charities & Nonprofits		,			,
Par		_	bmit original (no copies needed)			
A corp	poration required to file Form 990-T and requesting an autor only	natic 6-mo	onth extension - check this box and com	plete	<b>.</b>	
All oth	er corporations (including 1120-C filers), partnerships, REM income tax returns	ICs, and t	rusts must use Form 7004 to request an	exten	sion of time	
	<del></del>					<del></del>
Туре			EDM	Emp	loyer identification	number
print	THE JOSEPH TREADWELL CHARIT	TABLE	FUN.	_	7 0000121	
File by t	c/o BANCTRUST COMPANY			<u>  5</u>	7-0880131	<u>.</u>
due date filing you	Number, street, and room or suite no. It a P.O. box, s	ee instruc	tions.			
return S instructi	See 1. 0. DOM 5007	roign add	roce coe instructions			
nsuucu	ons Crty, town or post office, state, and ZIP code. For a for MOBILE, AL 36652	neign add	ress, see instructions.			
	MOBILE, AL 30032		<del></del>		<del></del>	<del></del>
Entor	the Return code for the return that this application is for (file	a conara	te application for each return)			0 1
CILLEI	the Return code for the return that this application is for this	a separa	te application for each feturin	•		0 1 1
Annlie	notion	Return	Application			Return
- •	eation	Code	Is For			
Is For		01	Form 990-T (corporation)			Code 07
Form 9		02	Form 1041-A		<del></del>	08
	990-BL	03			<del></del>	
	990-EZ	03	Form 4720 Form 5227			09
	990-PF 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			10
		06	Form 8870		<del></del>	11
-Offit S	990-T (trust other than above)  BANCTRUST COMPA	····	F0/// 08/0			12
■ The	books are in the care of > 100 ST. JOSEPH		ET MORTIE AT MOR	TT.E	AT. 36652	
	ephone No. ► 251-431-7821	DINE	FAX No ►	1111	<u>, AL 30032</u>	
	ne organization does not have an office or place of business	o un tha Lir				$\Box$
	ns is for a Group Return, enter the organization's four digit				r the whole group, al	
	. —					
oox 🕨					ers the extension is	ioi
1	I request an automatic 3-month (6 months for a corporation AUGUST 15, 2011, to file the exemp		-		The endomena	
-	is for the organization's return for:	i Oigailiza	tion return for the organization named a	Dove.	The extension	
	S for the organization's return for.  X calendar year 2010 or					
			d and na			
'	tax year beginning	, an	d ending		<u> </u>	
2	If the tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return Fina	ıl retur	n	
	Change in accounting period					
3a 1	If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			· <del></del>
<u> </u>	nonrefundable credits. See instructions			3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
-	estimated tax payments made Include any prior year overp		<del>'                                    </del>	3b	\$	0.
	Balance due. Subtract line 3b from line 3a. Include your pa	-	• • •			_
	by using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.
<u> Cautic</u>	on. If you are going to make an electronic fund withdrawal v	_	orm 8868, see Form 8453-EO and Form	<u>8879-</u>	EO for payment instr	uctions.
AHL	For Paperwork Reduction Act Notice, see Instructions	i.			Form <b>8868</b> (Re	v 1-2011)

023841

Form 8868 (Rev. 1-2011)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension.	complete only Part II and check this bo	×		X
Note. Only complete Part II if you have already been granted an a		· ·		8868	
• If you are filing for an Automatic 3-Month Extension, complete					
Part II Additional (Not Automatic) 3-Month E			pies n	needed).	
_ Name of exempt organization		, , , , , , , , , , , , , , , , , , , ,		loyer identification	number
THE JOSEPH TREADWELL CHARITABLE FDN.					
print C/O BANCTRUST COMPANY 5					
File by the extended Number, street, and room or suite no If a P O box, s	ee instruc	tions			
due date for P. O. BOX 3067					
return See City, town or post office, state, and ZIP code For a fo	oreign add	Iress, see instructions.		•	
MOBILE, AL 36652					
· · · · · · · · · · · · · · · · · · ·				-	
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990	01				
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069		·	11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a previou	sly file	d Form 8868.	
BANCTRUST COMPA					
• The books are in the care of ▶ 100 ST. JOSEPH	STRE	<u>ET, MOBILE, AL - MOB</u>	ILE	<u>, AL 36652</u>	
Telephone No ▶ 251-431-7821		FAX No 🕨			
<ul> <li>If the organization does not have an office or place of business</li> </ul>				<b>•</b>	
If this is for a Group Return, enter the organization's four digit	1				
box If it is for part of the group, check this box		ach a list with the names and EINs of all	<u>memb</u>	ers the extension is	for
<del></del>	NOVEM	BER 15, 2011			
5 For calendar year 2010, or other tax year beginning		, and ending			
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	Final r	eturn	
Change in accounting period					
7 State in detail why you need the extension	~ > mrrm	D THEODIA MICH.	···	DMD MUTO	
	GATHE:	R INFORMATION AND CO	MPL	ETE THIS	
RETURN				<b></b>	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, 6	or 6060 .	enter the tenteture toy less only			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, on nonrefundable credits. See instructions	UI 0009, E	enter the tentative tax, less any	. !	•	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	8a	\$	
tax payments made Include any prior year overpayment all	•				
previously with Form 8868	owed as	a credit and any amount paid	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your pa	wment wit	th this form if required by using	OD	<b>3</b>	<u> </u>
EFTPS (Electronic Federal Tax Payment System) See instru	=	art and form, a required, by daing	8c	s	0.
		nd Verification	OC_	_ Ψ	
Under penalties of perjury, I declare that I have examined this form, includ			best o	f my knowledge and he	lief
it is true, correct, and complete, and that Lampauthorized to prepare this for	orm.	,g concessed and catemonic, and to the		,omougo and be	,
Signature Title Much Title			Date	► 81171n	
710	¥ *			Form <b>8868</b> (Re	v. 1-2011)

023842