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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  
Internal Revenue Service

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

For calendar year 2010, or tax year beginning , and ending

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return  
☐ Amended return ☐ Address change ☐ Name change

Name of foundation <b>ZARKS FAMILY FOUNDATION, INC. C/O C. BROWN EDWARDS, JR.</b>		A Employer identification number <b>58-1958697</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>POST OFFICE BOX 1606</b>	Room/suite	B Telephone number <b>(912) 749-1700</b>
City or town, state, and ZIP code <b>MACON, GA 31202-1606</b>		C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>800,464.</b> (Part I, column (d) must be on cash basis)	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities		12,676.	12,676.		STATEMENT 1
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		302.			
b Gross sales price for all assets on line 6a		173,964.			
7 Capital gain net income (from Part IV, line 2)			302.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		12,978.	12,978.		
13 Compensation of officers, directors, trustees, etc		2,500.	0.		0.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees STMT 2		1,093.	0.		0.
b Accounting fees STMT 3		1,850.	0.		0.
c Other professional fees					
17 Interest					
18 Taxes STMT 4		88.	0.		0.
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses STMT 5		7,704.	0.		0.
24 Total operating and administrative expenses Add lines 13 through 23		13,235.	0.		0.
25 Contributions, gifts, grants paid		26,872.			26,872.
26 Total expenses and disbursements. Add lines 24 and 25		40,107.	0.		26,872.
27 Subtract line 26 from line 12		<27,129.>			
a Excess of revenue over expenses and disbursements			12,978.		
b Net investment income (if negative, enter -0-)					
c Adjusted net income (if negative, enter -0-)				N/A	

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LHA For Paperwork Reduction Act Notice, see the Instructions.

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## ZARKS FAMILY FOUNDATION, INC.

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C/O C. BROWN EDWARDS, JR.

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock				
	c	Investments - corporate bonds				
11	Investments - land, buildings, and equipment: basis ▶					
	Less: accumulated depreciation ▶					
12	Investments - mortgage loans					
13	Investments - other	STMT 6	819,751.	792,622.	800,464.	
14	Land, buildings, and equipment: basis ▶					
	Less: accumulated depreciation ▶					
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers)		819,751.	792,622.	800,464.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶)				
23	Total liabilities (add lines 17 through 22)		0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>					
	and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>					
	and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds		1,077,533.	1,077,533.	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund		0.	0.	
29	Retained earnings, accumulated income, endowment, or other funds		<257,782.>	<284,911.>		
30	Total net assets or fund balances		819,751.	792,622.		
31	Total liabilities and net assets/fund balances		819,751.	792,622.		

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	819,751.
2	Enter amount from Part I, line 27a	2	<27,129.>
3	Other increases not included in line 2 (itemize) ▶	3	0.
4	Add lines 1, 2, and 3	4	792,622.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	792,622.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a STIFEL NICOLAUS—STATEMENT ATTACHED	P	VARIOUS	VARIOUS
b CAPITAL GAINS DIVIDENDS			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 173,226.		173,662.	<436.>
b 738.			738.
c			
d			
e			

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			<436.>
b			738.
c			
d			
e			

2 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	2	302.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8		3	N/A

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2009	59,384.	736,566.	.080623
2008	54,793.	988,063.	.055455
2007	51,744.	1,199,911.	.043123
2006	55,192.	1,105,388.	.049930
2005	53,600.	1,083,833.	.049454

2 Total of line 1, column (d)	2	.278585
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.055717
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	745,463.
5 Multiply line 4 by line 3	5	41,535.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	130.
7 Add lines 5 and 6	7	41,665.
8 Enter qualifying distributions from Part XII, line 4	8	26,872.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate  
See the Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	260.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0.
3 Add lines 1 and 2		3	260.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	260.
6 Credits/Payments.			
a 2010 estimated tax payments and 2009 overpayment credited to 2010	6a	3,438.	
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	3,438.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	3,178.	
11 Enter the amount of line 10 to be Credited to 2011 estimated tax	11	0.	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ 0. (2) On foundation managers \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
4b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>GA</u>		
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	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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**Part VII-A Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► GUIDESTAR.COM	13	X	
14	The books are in care of ► C. BROWN EDWARDS, JR. Telephone no ► 912-749-1700 Located at ► 240 THIRD STREET, MACON, GA ZIP+4 ► 31202			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country ►	16	Yes	No X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(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)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any 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 page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/> N/A	1b	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1c	X
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))		
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 ► 2009, 2008, <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	2b	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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.)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	X

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**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

**5b**

Organizations relying on a current notice regarding disaster assistance check here

☒**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**6b****b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

☐ Yes ☒ No**7b****7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

N/A

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation.

(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) Expense account, other allowances
MORRIS COHEN 1460 LONE DARK ROAD MACON, GA 31210	DIRECTOR 2.00	1,000.	0.	0.
BROWN EDWARDS 240 THIRD STREET MACON, GA 31210	DIRECTOR 2.00	500.	0.	0.
MIKE KAPLAN 6271 FORSYTH ROAD MACON, GA 31210	DIRECTOR 2.00	1,000.	0.	0.

**2** Compensation of five highest-paid employees (other than those included on line 1). If none, enter "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	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000**0**

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**Part VIII****Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 NONE	
	0.
2	
3	
4	

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 NONE	
	0.
2	
All other program-related investments See instructions	
3	
<b>Total.</b> Add lines 1 through 3	0.

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**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	625,934.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	130,881.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	756,815.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	756,815.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	11,352.
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	745,463.
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	37,273.

**Part XI** Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	37,273.
<b>2a</b>	Tax on investment income for 2010 from Part VI, line 5	<b>2a</b>	260.
<b>b</b>	Income tax for 2010 (This does not include the tax from Part VI)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	260.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	37,013.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0.
<b>5</b>	Add lines 3 and 4	<b>5</b>	37,013.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	37,013.

**Part XII** Qualifying Distributions (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	26,872.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	26,872.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	<b>5</b>	0.
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	26,872.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				37,013.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			27,357.	
b Total for prior years 2008 , _____ , _____		485.		
3 Excess distributions carryover, if any, to 2010				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from Part XII, line 4 ▶ \$ 26,872.				
a Applied to 2009, but not more than line 2a			26,872.	
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				0.
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				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		485.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		485.		
e Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see instr			485.	
f Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011				37,013.
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				
e Excess from 2010				

N/A

- ☐ 4942(1)(3) or ☐ 4942(1)(5)

- (4) Gross investment income**

[illegible]

**Part XV** **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)**

### 1 Information Regarding Foundation Managers:

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

- b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number of the person to whom applications should be addressed

SEE STATEMENT 7

- b The form in which applications should be submitted and information and materials they should include**

- c Any submission deadlines**

- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** Supplementary Information (continued)

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
SHERAH ISRAEL SYNOGAGUE MACON, GA	N/A	NONE	CHARITY	5,000.
SHRINERS HOSPITAL MACON, GA	N/A	NONE	CHARITY	1,000.
TEMPLE BETH ISRAEL MACON, GA	N/A	NONE	CHARITY	10,512.
FEDERATION OF JEWISH CHARITIES MACON, GA	N/A	NONE	CHARITY	10,000.
MAJOR STUART ADAM WOLFER MACON, GA	N/A	NONE	CHARITY	360.
<b>Total</b>			<b>3a</b>	<b>26,872.</b>
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>			<b>3b</b>	<b>0.</b>

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

12-07-10	12	Form 990 (2010)
14001024 101061 6210DM990PF	2010.04041 ZARKS FAMILY FOUNDATION, IN 6210DM91	



- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

<b>Part II</b>	<b>Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed)	
Type or print  File by the extended due date for filing your return. See instructions	Name of exempt organization <b>ZARKS FAMILY FOUNDATION, INC. C/O C. BROWN EDWARDS, JR.</b>	Employer identification number <b>58-1958697</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>POST OFFICE BOX 1606</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>MACON, GA 31202-1606</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

**0 4**

Application Is For	Return Code	Application Is For	Return 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 automatic 3-month extension on a previously filed Form 8868.**

**C. BROWN EDWARDS, JR.**

- The books are in the care of **240 THIRD STREET - MACON, GA 31202**

Telephone No **912-749-1700**

FAX No

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **NOVEMBER 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, check reason ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

**TAXPAYER NEED ADDITIONAL TIME TO GATHER INFORMATION.**

<b>8a</b> 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.	<b>8a</b>	\$	<b>0.</b>
<b>b</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 and any amount paid previously with Form 8868	<b>8b</b>	\$	<b>3,438.</b>
<b>c</b> <b>Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$	<b>0.</b>

### Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature 

Title **CPA**

Date **AUG 9 2011**

**REALIZED GAINS/(-)LOSSES**

This section provides estimated realized gains or losses for informational purposes only, and should not be used for tax preparation without the assistance of your tax advisor. Cost basis may be adjusted for, but not limited to, amortization, accretion, principal paydowns, capital changes, or listed option premiums. To calculate gains or losses, the oldest position has been liquidated first, unless otherwise specified at the time of the trade. We suggest you review this information for accuracy and contact your Financial Advisor with any questions.

Equities	Date acquired	Date sold	Quantity	Purchase price	Sale price	Cost basis	Sale proceeds	Realized gain/(-)loss**
BARCLAYS BANK PLC IPATH DOW JONES UBS IND METALS CUSIP: 06738G407	06/12/09	02/02/10	127	30 0000	37 0000	3,810 00	4,698 94	888 94 (ST)
BARCLAYS BANK PLC IPATH DOW JONES UBS COPPER CUSIP: 06739F101	06/12/09	02/02/10	115	33 1300	42.3200	3,809 95	4,866 73	1,056 78 (ST)
BARCLAYS BANK PLC IPATH DOW JONES UBS PLATINUM CUSIP: 06739H255	11/19/09	02/02/10	128	39 2400	37 5101	5,022 72	4,801 22	-221 50 (ST)
BARCLAYS BANK PLC IPATH DOW JONES UBS ALUMINUM CUSIP: 06739H321	12/17/09	02/02/10	138	31 9674	29 1100	4,411 50	4,017 12	-394 38 (ST)
ISHARES INC MSCI BRAZIL FREE INDEX FUND CUSIP: 464286400	06/12/09	02/05/10	46	56 7500	62 7400	2,610 50	2,886 00	275 50 (ST)
ISHARES INC MSCI BRAZIL FREE INDEX FUND CUSIP: 464286400	04/06/10	05/20/10	36	75 6000	58 2700	2,721 60	2,097 68	-623 92 (ST)

\*\* Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing



**STIFEL**  
**NICOLAUS**

THE ZARKS FAMILY FOUNDATION  
ATTN MIKE KAPLAN  
HORIZON ACCOUNT

December 1 -  
December 31, 2010  
Account Number

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# REALIZED GAINS/(-)LOSSES continued

This section provides estimated realized gains or losses for informational purposes only, and should not be used for tax preparation without the assistance of your tax advisor. Cost basis may be adjusted for, but not limited to, amortization, accretion, principal paydowns, capital changes, or listed option premiums. To calculate gains or losses, the oldest position has been liquidated first, unless otherwise specified at the time of the trade. We suggest you review this information for accuracy and contact your Financial Advisor with any questions.

securities	Date acquired	Date sold	Quantity	Purchase price	Sale price	Cost basis	Sale proceeds	Realized gain/(-)loss**
IARES INC CSI THAILAND JSIP 464286624	10/05/09	02/05/10	64	41 8600	39 6700	2,679 04	2,538 84	-140 20 (ST)
IARES INC CSI THAILAND JSIP 464286624	04/06/10	05/20/10	55	49 7600	42 6800	2,736 80	2,347 36	-389 44 (ST)
IARES INC SCI TURKEY INDEX FUND JSIP 464286715	08/27/09	02/05/10	54	48 9000	52 2500	2,640 60	2,821 46	180 86 (ST)
IARES INC SCI TURKEY INDEX FUND JSIP 464286715	04/06/10	05/20/10	45	60 1500	52 9500	2,706 75	2,382 70	-324 05 (ST)
IARES INC SCI SOUTH KOREA INDX FD JSIP 464286772	06/12/09	02/05/10	73	36 3000	43 8900	2,649 90	3,203 92	554 02 (ST)
IARES INC SCI SOUTH KOREA INDX FD JSIP 464286772	04/06/10	05/20/10	52	52 0300	43 1100	2,705 56	2,241 68	-463 88 (ST)
IARES INC SCI SOUTH KOREA INDX FD JSIP 464286772	08/03/10	09/23/10	100	50 7699	52 0500	5,076 99	5,204 91	127 92 (ST)
IARES TRUST P LATIN AMERN 40 ISIP 464287390	12/03/09	02/05/10	65	49 5400	41 5103	3,220 10	2,698 13	-521 97 (ST)
IARES TRUST P LATIN AMERN 40 ISIP 464287390	04/06/10	05/20/10	55	49 6800	40 3800	2,732 40	2,220 86	-511 54 (ST)
IARES TR ISSELL MIDCAP GROWTH ISIP 464287481	03/11/10	05/20/10	100	47 7994	45 4306	4,779 94	4,542 98	-236 96 (ST)

Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing



**REALIZED GAINS/(-)LOSSES continued**

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<b>Equities</b>	<b>Date acquired</b>	<b>Date sold</b>	<b>Quantity</b>	<b>Purchase price</b>	<b>Sale price</b>	<b>Cost basis</b>	<b>Sale proceeds</b>	<b>Realized gain/(-)loss**</b>
ISHARES S&P NORTH AMERICAN TECHNOLOGY CUSIP: 464287515	06/12/09 03/11/10	05/20/10 05/20/10	50 50	39,2100 48,2200	45,4606 45,4606	1,960.50 2,411.00	2,272.99 2,272.99	312.49 (ST) -138.01 (ST)
			100			4,371.50	4,545.98	174.48
ISHARES S&P NORTH AMERICAN TECHNOLOGY CUSIP: 464287523	06/12/09 03/11/10	05/20/10 05/20/10	51 49	37,8800 48,0000	45,7318 45,7318	1,931.88 2,352.00	2,332.28 2,240.82	400.40 (ST) -111.18 (ST)
			100			4,283.88	4,573.10	289.22
ISHARES S&P NORTH AMERICAN TECHNOLOGY CUSIP: 464287531	06/12/09	02/04/10	79	24,3100	25,3800	1,920.20	2,004.99	84.79 (ST)
ISHARES TRUST COHEN & STEERS REALTY CUSIP: 464287564	12/03/09 03/11/10	05/20/10 05/20/10	50 50	51,6600 55,4900	55,7236 55,7236	2,583.00 2,774.50	2,786.13 2,786.13	203.13 (ST) 11.63 (ST)
			100			5,357.50	5,572.26	214.76
ISHARES TR DOW JONES US CONSUMER CUSIP: 464287580	04/29/10	05/20/10	100	63,8700	58,1001	6,387.00	5,809.91	-577.09 (ST)
ISHARES TR DOW JONES US FINL SVCS INDEX FD CUSIP: 464287770	06/12/09 03/11/10	05/06/10 05/06/10	41 59	47,4800 57,7000	59,4500 59,4500	1,946.68 3,404.30	2,437.40 3,507.49	490.72 (ST) 103.19 (ST)
			100			5,350.98	5,944.89	593.91
ISHARES TR DOW JONES US BASIC CUSIP: 464287838	02/04/10 03/11/10	05/20/10 05/20/10	37 63	54,8200 62,3500	55,3713 55,3713	2,028.34 3,928.05	2,048.70 3,488.33	20.36 (ST) -439.72 (ST)

\*\* Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing.

**REALIZED GAINS/(-)LOSSES continued**

this section provides estimated realized gains or losses for informational purposes only, and should not be used for tax preparation without the assistance of your tax advisor. Cost basis may be adjusted for, but not limited to, amortization, accretion, principal paydowns, capital changes, or listed option premiums. To calculate gains or losses, the oldest position has been liquidated first, unless otherwise specified at the time of the trade. We suggest you review this information for accuracy and contact your Financial Advisor with any questions.

curities	Date acquired	Date sold	Quantity	Purchase price	Sale price	Cost basis	Sale proceeds	Realized gain/(-)loss**
HARES TRUST DOW JONES J S INSURANCE INDEX FUND CUSIP 464288786	03/25/10	05/20/10	100	30 0500	27 4600	5,956 39	5,537 03	-419 36
HARES TRUST DOW JONES	06/12/09	03/25/10	75	26 0900	28 5805	1,956 75	2,143 50	186 75 (ST)
J S BROKER-DEALERS CUSIP 464288794	03/11/10	03/25/10	25	28 3900	28 5805	709 75	714 51	4 76 (ST)
HARES TRUST DOW JONES J S MEDICAL DEVICES CUSIP 464288810	05/06/10	05/20/10	100	58 8799	55 3000	5,887 99	5,529 90	-358 09 (ST)
HARES TRUST DOW JONES	08/06/09	05/20/10	48	40 1700	48 1001	1,928 16	2,308 76	380 60 (ST)
J S HEALTH CARE CUSIP 464288828	03/11/10	05/20/10	52	50 3700	48 1001	2,619 24	2,501 16	-118 08 (ST)
HARES TRUST DOW JONES J S PHARMACEUTICALS CUSIP 464288836	04/08/10	04/29/10	100	59 6000	58 7201	5,960 00	5,871 91	-88 09 (ST)
HARES TRUST DOW JONES	06/12/09	04/08/10	50	38 1800	45 6801	1,909 00	2,283 96	374 96 (ST)
J S OIL EQUIPMENT CUSIP 464288844	03/11/10	04/08/10	50	45 3400	45 6801	2,267 00	2,283 97	16 97 (ST)
ARKET VECTORS ETF TR RUSSIA ETF CUSIP 57060U506	04/06/10	05/20/10	76	35 7700	27 7700	4,176 00	4,567 93	391 93
						2,718 52	2,110 48	-608 04 (ST)

Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing

6 7 6 4 0 SNC14 7/09  
1 1 0 4 0 SNC14 7/09  
1 1 0 4 0 SNC14 7/09

**REALIZED GAINS/(-)LOSSES continued**

This section provides estimated realized gains or losses for informational purposes only, and should not be used for tax preparation without the assistance of your tax advisor. Cost basis may be adjusted for, but not limited to, amortization, accretion, principal paydowns, capital changes, or listed option premiums. To calculate gains or losses, the oldest position has been liquidated first, unless otherwise specified at the time of the trade. We suggest you review this information for accuracy and contact your Financial Advisor with any questions.

Equities	Date acquired	Date sold	Quantity	Purchase price	Sale price	Cost basis	Sale proceeds	Realized gain/(-)loss**
RYDEX ETF TRUST S&P SMALLCAP 600 PURE VALUE CUSIP 78355W700	03/11/10	05/20/10	100	36 6500	34 8000	3,665 00	3,479 94	-185 06 (ST)
SPDR INDEX SHARES FDS S&P EMERGING EUROPE ETF CUSIP 78463X608	04/06/10	05/20/10	57	47 4255	37 6900	2,703 25	2,148 29	-554 96 (ST)
VANGUARD EXTENDED MARKET ETF CUSIP 922908652	03/11/10	05/20/10	100	46.3300	44 3718	4,633 00	4,437 10	-195 90 (ST)
WISDOMTREE TRUST SMALLCAP EARNINGS FUND CUSIP 97717W562	03/11/10	05/20/10	100	44 4258	43 1800	4,442 58	4,317 92	-124 66 (ST)
<b>Total Equities</b>						<b>\$132,347.04</b>	<b>\$130,436.04</b>	<b>-\$1,911.00</b>
<b>Corporate/Government Bonds</b>	<b>Date acquired</b>	<b>Date sold</b>	<b>Quantity</b>	<b>Purchase price</b>	<b>Sale price</b>	<b>Cost basis</b>	<b>Sale proceeds</b>	<b>Realized gain/(-)loss**</b>
ISHARES TRUST	05/27/10	10/07/10	60	105.5600	108 6400	6,333 60	6,518 28	184 68 (ST)
BARCLAYS AGGREGATE CUSIP 464287226	05/27/10	10/07/10	50	105 5600	108 6400	5,278 00	5,431 91	153 91 (ST)
			110			11,611 60	11,950 19	338 59
ISHARES TRUST BARCLAYS 7 10 YEAR CUSIP 464287440	05/27/10	09/21/10	60	92 8300	97 8400	5,569 80	5,870 30	300 50 (ST)
ISHARES TRUST BARCLAYS GOVERNMENT CUSIP 464288596	05/27/10	08/03/10	50	107 0600	109 1900	5,353 00	5,459 40	106 40 (ST)
ISHARES TRUST BARCLAYS INTERMEDIATE GOVERNMENT CUSIP 464288612	05/27/10	08/03/10	50	107 2300	109 1800	5,361 50	5,458 90	97 40 (ST)

\*\* Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing

# STIFEL NICOLAUS

THE ZARKS FAMILY FOUNDATION  
ATTN MIKE KAPLAN  
HORIZON ACCOUNT

December 1 -  
December 31, 2010  
Account Number

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## REALIZED GAINS/(-)LOSSES continued

This section provides estimated realized gains or losses for informational purposes only, and should not be used for tax preparation without the assistance of your tax advisor. Cost basis may be adjusted for, but not limited to, amortization, accretion, principal paydowns, capital changes, or listed option premiums. To calculate gains or losses, the oldest position has been liquidated first, unless otherwise specified at the time of the trade. We suggest you review this information for accuracy and contact your Financial Advisor with any questions.

Corporate/Government Bonds	Date acquired	Date sold	Quantity	Purchase price	Sale price	Cost basis	Sale proceeds	Realized gain/(-)loss**
ARES TRUST 1+ YEAR GOVERNMENT/CR JSIP 464289479	05/27/10	08/03/10	100	52 3400	53 7000	5,234 00	5,369 90	135 90 (ST)
GUARD INTERMEDIATE RM BOND ETF JSIP 921937819	05/27/10	09/29/10	100	81 8499	86 8101	8,184 99	8,680 86	495 87 (ST)
<b>Total Corporate/Government Bonds</b>						<b>\$41,314.89</b>	<b>\$42,789.55</b>	<b>\$1,474.66</b>
<b>Total Realized Gains/(-) Losses</b>						<b>\$173,661.93</b>	<b>\$173,225.59</b>	<b>-\$436.34</b>
<b>Total Net Short-Term (ST)</b>						<b>\$173,661.93</b>	<b>\$173,225.59</b>	<b>-\$436.34</b>
<b>Total Net Long-Term (LT)</b>						<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Total Net Other-Term (OT)</b>						<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

Please note "Realized Gain/(-)Loss" does not equal total sale proceeds minus total cost basis if any cost basis amounts are missing

## INTERESTED PARTIES AND/OR SUPPORTING FINANCIAL ADVISOR(S)

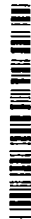
for the account of:

THE ZARKS FAMILY FOUNDATION  
ATTN MIKE KAPLAN  
HORIZON ACCOUNT  
PO BOX 4181  
ALCON GA 31208-4181

A copy of this statement has also been sent to:

JOHN R. COHEN  
SECOND ST  
ALCON GA 31201-6863

KE M KAPLAN  
PO BOX 4181  
ALCON GA 31208-4181



FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
SMITH BARNEY	12,288.	470.	11,818.
SMITH BARNEY-SHORT TERM GAIN	268.	268.	0.
SMITH BROWN & GROOVER	23.	0.	23.
UBS	835.	0.	835.
TOTAL TO FM 990-PF, PART I, LN 4	13,414.	738.	12,676.

FORM 990-PF	LEGAL FEES	STATEMENT	2
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	1,093.	0.		0.
TO FM 990-PF, PG 1, LN 16A	1,093.	0.		0.

FORM 990-PF	ACCOUNTING FEES	STATEMENT	3
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	1,850.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	1,850.	0.		0.

FORM 990-PF	TAXES	STATEMENT	4
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
IRS	88.	0.		0.
TO FORM 990-PF, PG 1, LN 18	88.	0.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BROKER FEES	7,634.	0.		0.	
POSTAGE	70.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	7,704.	0.		0.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
BB&T	COST	1,307.	1,307.	
SMITH BARNEY	COST	677,784.	678,594.	
SMITH BROWN & GROOVER	COST	24,028.	23,060.	
STIFEL NICOLAUS	COST	89,503.	97,503.	
TOTAL TO FORM 990-PF, PART II, LINE 13		792,622.	800,464.	

FORM 990-PF

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

STATEMENT 7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

C. BROWN EDWARDS, JR.; ZARKS FAMILY FOUNDATION, INC.  
P.O. BOX 1606  
MACON, GA 312021606

TELEPHONE NUMBER

(912)749-1700

FORM AND CONTENT OF APPLICATIONS

THE APPLICATION SHOULD BE IN LETTER FORM, INCLUDE THE ORGANIZATION NAME,  
AND DESCRIPTION OF ACTIVITY.

ANY SUBMISSION DEADLINES

SEPTEMBER 30TH

RESTRICTIONS AND LIMITATIONS ON AWARDS

NO