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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 , 2010, and ending

G Check all that apply: ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name changeTHE DANIEL P. AMOS FAMILY FOUNDATION
POST OFFICE BOX 5346
COLUMBUS, GA 31906

A Employer identification number

58-2005391

B Telephone number (see the instructions)

C If exemption application is pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐H Check type of organization: ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, column (c), line 16)

\$ 132,459,358.

J Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) _____

(Part I, column (d) must be on cash basis)

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) (see the instructions).)

| | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---|------------------------------------|---------------------------|-------------------------|---|
| REVENUE | | | | |
| 1 Contributions, gifts, grants, etc., received (att sch) | 12,037,357. | | | |
| 2 Ck <input type="checkbox"/> if the foundn is not req to att Sch B | | | | |
| 3 Interest on savings and temporary cash investments | 161,703. | 161,703. | 161,703. | |
| 4 Dividends and interest from securities | 1,935,386. | 1,935,386. | 1,935,386. | |
| 5a Gross rents | | | | |
| b Net rental income or (loss) | | | | |
| 6a Net gain/(loss) from sale of assets not on line 10 | -640,131. | | | |
| b Gross sales price for all assets on line 6a | 15,340,813. | | | |
| 7 Capital gain net income (from Part IV, line 2) | | 0. | | |
| 8 Net short-term capital gain | | | 218,406. | |
| 9 Income modifications | | | | |
| 10a Gross sales less returns and allowances | | | | |
| b Less Cost of goods sold | | | | |
| c Gross profit/(loss) (att sch) | | | | |
| 11 Other income (attach schedule) | | | | |
| SEE STATEMENT 1 | -370,829. | | | |
| 12 Total. Add lines 1 through 11 | 13,123,486. | 2,097,089. | 2,315,495. | |
| ADMINISTRATIVE AND OPERATING EXPENSES | | | | |
| 13 Compensation of officers, directors, trustees, etc | 0. | | | |
| 14 Other employee salaries and wages | | | | |
| 15 Pension plans, employee benefits | | | | |
| 16a Legal fees (attach schedule) | | | | |
| b Accounting fees (attach sch) | SEE ST 2 | 12,315. | 12,315. | |
| c Other prof fees (attach sch) | SEE ST 3 | 27,992. | 27,992. | |
| 17 Interest | | 2. | 2. | |
| 18 Taxes (attach schedule)(see instr) | SEE STM 4 | 69,946. | 31,339. | |
| 19 Depreciation (attach sch) and depletion | | | | |
| 20 Occupancy | | | | |
| 21 Travel, conferences, and meetings | | | | |
| 22 Printing and publications | | | | |
| 23 Other expenses (attach schedule) | | | | |
| SEE STATEMENT 5 | 139,064. | 96,596. | | |
| 24 Total operating and administrative expenses. Add lines 13 through 23 | 249,319. | 168,244. | | |
| 25 Contributions, gifts, grants paid PART XV | 4,190,510. | | | 4,190,510. |
| 26 Total expenses and disbursements. Add lines 24 and 25 | 4,439,829. | 168,244. | 0. | 4,190,510. |
| 27 Subtract line 26 from line 12: | | | | |
| a Excess of revenue over expenses and disbursements | 8,683,657. | | | |
| b Net investment income (if negative, enter -0-) | | 1,928,845. | | |
| c Adjusted net income (if negative, enter -0-) | | | 2,315,495. | |

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| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | | | 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 | 1,947,138. | 648,531. | 648,531. | | |
| | 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 (attach schedule) (see the instructions) | | | | | |
| | 7 | Other notes and loans receivable (attach sch) | | | | | |
| | | Less: allowance for doubtful accounts | | | | | |
| | 8 | Inventories for sale or use | | | | | |
| | 9 | Prepaid expenses and deferred charges | 42,632. | 11,377. | 11,377. | | |
| | 10a | Investments — U.S. and state government obligations (attach schedule) | | | | | |
| | b | Investments — corporate stock (attach schedule) STATEMENT 6 | 42,677,789. | 54,183,691. | 54,183,691. | | |
| | c | Investments — corporate bonds (attach schedule) | | | | | |
| | LIABILITIES | 11 | Investments — land, buildings, and equipment: basis | | | | |
| | | Less: accumulated depreciation (attach schedule) | | | | | |
| 12 | | Investments — mortgage loans | | | | | |
| 13 | | Investments — other (attach schedule) STATEMENT 7 | 62,823,031. | 77,615,759. | 77,615,759. | | |
| 14 | | Land, buildings, and equipment: basis | | | | | |
| | | Less: accumulated depreciation (attach schedule) | | | | | |
| 15 | | Other assets (describe) | | | | | |
| 16 | | Total assets (to be completed by all filers — see instructions. Also, see page 1, item I) | 107,490,590. | 132,459,358. | 132,459,358. | | |
| 17 | | Accounts payable and accrued expenses | | | | | |
| 18 | | Grants payable | | | | | |
| NET ASSETS OR FUND BALANCES | 19 | Deferred revenue | | | | | |
| | 20 | Loans from officers, directors, trustees, & other disqualified persons | | | | | |
| | 21 | Mortgages and other notes payable (attach schedule) | | | | | |
| | 22 | Other liabilities (describe) | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | | | |
| | | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/> | | | | | |
| | 24 | Unrestricted | 107,490,590. | 132,459,358. | | | |
| | 25 | Temporarily restricted | | | | | |
| | 26 | Permanently restricted | | | | | |
| | | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/> | | | | | |
| 27 | Capital stock, trust principal, or current funds | | | | | | |
| 28 | Paid-in or capital surplus, or land, building, and equipment fund | | | | | | |
| 29 | Retained earnings, accumulated income, endowment, or other funds | | | | | | |
| 30 | Total net assets or fund balances (see the instructions) | 107,490,590. | 132,459,358. | | | | |
| 31 | Total liabilities and net assets/fund balances (see the instructions) | 107,490,590. | 132,459,358. | | | | |

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 | 107,490,590. |
| 2 | Enter amount from Part I, line 27a | 2 | 8,683,657. |
| 3 | Other increases not included in line 2 (itemize) <input type="checkbox"/> SEE STATEMENT 8 | 3 | 16,303,426. |
| 4 | Add lines 1, 2, and 3 | 4 | 132,477,673. |
| 5 | Decreases not included in line 2 (itemize) <input type="checkbox"/> SEE STATEMENT 9 | 5 | 18,315. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30 | 6 | 132,459,358. |

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 shares MLC Company) | (b) How acquired P — Purchase D — Donation | (c) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
|--|--|---|-------------------------------------|
| 1a SEE STATEMENT 10 | | | |
| b | | | |
| 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 | | | |
| b | | | |
| c | | | |
| d | | | |
| e | | | |

| (i) Fair Market Value as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of column (i) over column (j), if any | (l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h)) |
|---|--------------------------------------|---|---|
| a | | | |
| b | | | |
| 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 -640,131. |
| 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) (see the instructions). If (loss), enter -0- in Part I, line 8] | 3 218,406. |

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 the 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 (column (b) divided by column (c)) |
|---|--|---|---|
| 2009 | 5,627,477. | 85,950,738. | 0.065473 |
| 2008 | 4,821,591. | 111,339,405. | 0.043305 |
| 2007 | 3,899,746. | 100,950,177. | 0.038630 |
| 2006 | 2,982,085. | 77,085,783. | 0.038685 |
| 2005 | 2,764,189. | 62,185,736. | 0.044451 |

| | |
|---|-----------------------|
| 2 Total of line 1, column (d) | 2 0.230544 |
| 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 0.046109 |
| 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 | 4 113,522,038. |
| 5 Multiply line 4 by line 3. | 5 5,234,388. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | 6 19,288. |
| 7 Add lines 5 and 6 | 7 5,253,676. |
| 8 Enter qualifying distributions from Part XII, line 4 | 8 4,190,510. |

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 the instructions)

| | | |
|--|-------------------|-------------------|
| 1 a 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 instr.) | | |
| 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 38,577. |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (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 38,577. |
| 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 38,577. |
| 6 Credits/Payments: | | |
| a 2010 estimated tax pmts and 2009 overpayment credited to 2010 | 6a 50,000. | |
| 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 50,000. |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached | | 8 46. |
| 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 11,377. |
| 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax 11,377. Refunded | | 11 0. |

Part VII-A Statements Regarding Activities

| | Yes | No |
|---|-----|-----|
| 1 a 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 |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? <i>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.</i> | | X |
| c 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? <i>If 'Yes,' attach a detailed description of the activities.</i> | | 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? <i>If 'Yes,' attach a conformed copy of the changes</i> | | X |
| 4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | X |
| b If 'Yes,' has it filed a tax return on Form 990-T for this year? | | N/A |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i> | | 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? <i>If 'Yes,' complete Part II, column (c), and Part XIV</i> | X | |
| 8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) GA | | |
| 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? <i>If 'No,' attach explanation</i> | 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)? <i>If 'Yes,' complete Part XIV</i> | | X |
| 10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i> | | 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? | 13 | X | |
| Website address ▶ N/A | | | | |
| 14 | The books are in care of ▶ JEANNIE CHOBOTIUK Telephone no. ▶ | | | |
| | Located at ▶ P.O. BOX 5566 COLUMBUS GA ZIP + 4 ▶ 31906 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A ▶ | 15 | | N/A |
| and enter the amount of tax-exempt interest received or accrued during the year | | | | |
| 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? | 16 | Yes | No |
| See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ▶ | | | | |

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

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

| | Yes | No |
|--|-----|-----|
| 1 a 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 the instructions)? | 1 b | N/A |
| Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/> | | |
| 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? | 1 c | 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| If 'Yes,' list the years ▶ 20__ , 20__ , 20__ , 20__ | | |
| 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 the instructions.) | 2 b | N/A |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20__ , 20__ , 20__ , 20__ | | |
| 3 a 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.) | 3 b | N/A |
| 4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4 a | 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? | 4 b | 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)? (see instructions) ☐ 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)?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? ☐ 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**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

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

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No**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 (see instructions).

| (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 |
|--|--|---|---|---------------------------------------|
| DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906 | PRESIDENT 0 | 0. | 0. | 0. |
| MORTON A. HARRIS 2854 CROMWELL DRIVE COLUMBUS, GA 31906 | ASSISTANT SE 0 | 0. | 0. | 0. |
| LAUREN A. AMOS P.O. BOX 5346 COLUMBUS, GA 31906 | VICE CHAIRMA 0 | 0. | 0. | 0. |
| DAVID B. PLYLER 3715 NS PKWY NC 200, SUITE 600 ATLANTA, GA 30327 | SECRET/ASST 0 | 0. | 0. | 0. |

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). 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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**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 | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 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 N/A | |
| 2 | |
| 3 | |
| 4 | |

Part IX-B Summary of Program-Related Investments (see instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
|---|--------|
| 1 N/A | |
| 2 | |
| All other program-related investments See instructions | |
| 3 | |
| Total. Add lines 1 through 3 | 0. |

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Form 990-PF (2010)

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

| | | |
|--|-----------|--------------|
| 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 | 114,418,990. |
| b Average of monthly cash balances | 1b | 831,810. |
| c Fair market value of all other assets (see instructions) | 1c | |
| d Total (add lines 1a, b, and c) | 1d | 115,250,800. |
| e 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 | 115,250,800. |
| 4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | 1,728,762. |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 113,522,038. |
| 6 Minimum investment return. Enter 5% of line 5. | 6 | 5,676,102. |

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.)

| | | |
|---|-----------|------------|
| 1 Minimum investment return from Part X, line 6 | 1 | 5,676,102. |
| 2a Tax on investment income for 2010 from Part VI, line 5 | 2a | 38,577. |
| b Income tax for 2010. (This does not include the tax from Part VI.) | 2b | |
| c Add lines 2a and 2b. | 2c | 38,577. |
| 3 Distributable amount before adjustments. Subtract line 2c from line 1. | 3 | 5,637,525. |
| 4 Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 Add lines 3 and 4 | 5 | 5,637,525. |
| 6 Deduction from distributable amount (see instructions) | 6 | |
| 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 5,637,525. |

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 | 4,190,510. |
| 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 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 | 4,190,510. |
| 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 | 4,190,510. |

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.

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 | | | | 5,637,525. |
| 2 Undistributed income, if any, as of the end of 2010: | | | | |
| a Enter amount for 2009 only | | | 4,153,336. | |
| b Total for prior years: 20____, 20____, 20____ | | 0. | | |
| 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: ▶ \$ 4,190,510. | | | | |
| a Applied to 2009, but not more than line 2a | | | 4,153,336. | |
| 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 | | | | 37,174. |
| 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 | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable amount — see instructions. | | 0. | | |
| e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount — see instructions | | | 0. | |
| f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 | | | | 5,600,351. |
| 7 Amounts treated as distributions out of 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) | 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 | | | | |

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

- | | | | | | |
|--|----------|---------------|----------|----------|------------|
| 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling | | | | | |
| b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or | | | | | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | Tax year | Prior 3 years | | | (e) Total |
| | (a) 2010 | (b) 2009 | (c) 2008 | (d) 2007 | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a 'Assets' alternative test — enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(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: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | | |

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

DANIEL P. AMOS

- 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:

- 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)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| 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) | | | | |
| a Paid during the year SEE STATEMENT 11 | | | | |
| Total | | | 3 a | 4,190,510. |
| b Approved for future payment | | | | |
| Total | | | 3 b | |

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

| Enter gross amounts unless otherwise indicated. | | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) Related or exempt function income (see the instructions) |
|---|--|---------------------------|---------------|--------------------------------------|---------------|---|
| | | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | |
| 1 | Program service revenue: | | | | | |
| a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| f | | | | | | |
| g | Fees and contracts from government agencies | | | | | |
| 2 | Membership dues and assessments . . . | | | | | |
| 3 | Interest on savings and temporary cash investments | | | 14 | 161,703. | |
| 4 | Dividends and interest from securities | | | 14 | 1,935,386. | |
| 5 | Net rental income or (loss) from real estate: | | | | | |
| a | Debt-financed property | | | | | |
| b | Not debt-financed property | | | | | |
| 6 | Net rental income or (loss) from personal property | | | | | |
| 7 | Other investment income . . . | | | 14 | -370,829. | |
| 8 | Gain or (loss) from sales of assets other than inventory | | | 18 | -640,131. | |
| 9 | Net income or (loss) from special events . . . | | | | | |
| 10 | Gross profit or (loss) from sales of inventory | | | | | |
| 11 | Other revenue: | | | | | |
| a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| 12 | Subtotal. Add columns (b), (d), and (e) | | | | 1,086,129. | |
| 13 | Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 1,086,129. |

(See worksheet in line 13 instructions to verify calculations)

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

[illegible]

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

THE DANIEL P. AMOS FAMILY FOUNDATION

Employer identification number

58-2005391

Organization type (check one).

Filers of:

Form 990 or 990-EZ

Section:

- ☐ 501(c)(____) (enter number) organization
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II)

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ► \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

Name of organization

Employer identification number

THE DANIEL P. AMOS FAMILY FOUNDATION

58-2005391

Part I Contributors (see instructions)

| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
|---------------|--|-----------------------------------|--|
| 1 | DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906 | \$ 1,823,400. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 2 | THE PAUL S & JEAN R AMOS CLAT 3715 NORTHSIDE PARKWAY ATLANTA, GA 30327 | \$ 1,115,395. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 3 | DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906 | \$ 3,100,308. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 4 | DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906 | \$ 2,398,246. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 5 | DANIEL P. AMOS P.O. BOX 5566 COLUMBUS, GA 31906 | \$ 3,600,008. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |

Name of organization

THE DANIEL P. AMOS FAMILY FOUNDATION

Employer identification number

58-2005391

Part II Noncash Property (see instructions.)

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| 1 | 36000 SHARES OF AFLAC, INC. STOCK | | |
| | | | |
| | | | |
| | | \$ 1,823,400. | 9/03/10 |
| 3 | 55200 SHARES OF AFLAC, INC. STOCK | | |
| | | | |
| | | | |
| | | \$ 3,100,308. | 10/28/10 |
| 4 | 42700 SHARES OF AFLAC, INC. STOCK | | |
| | | | |
| | | | |
| | | \$ 2,398,246. | 10/28/10 |
| 5 | 63610 SHARES OF AFLAC, INC. STOCK | | |
| | | | |
| | | | |
| | | \$ 3,600,008. | 12/22/10 |
| | | | |
| | | | |
| | | | |
| | | \$ | |
| | | | |
| | | | |
| | | | |
| | | \$ | |

BAA

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

Name of organization

Employer identification number

THE DANIEL P. AMOS FAMILY FOUNDATION

58-2005391

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.For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.)

► \$ N/A

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------------|---|--------------------|--|
| | N/A | | |
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |
| | (e) Transfer of gift | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee |
| | | | |
| | | | |
| | | | |

STATEMENT 5
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-----------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| BANK CHARGES | \$ 30. | \$ 30. | | |
| CONSULTING FEES | 40,000. | | | |
| INVESTMENT FEES | 96,026. | 96,026. | | |
| MANAGEMENT FEES | 540. | 540. | | |
| OFFICE EXPENSE | 2,268. | | | |
| | 46. | | | |
| POSTAGE EXPENSE | 154. | | | |
| TOTAL | \$ 139,064. | \$ 96,596. | \$ 0. | \$ 0. |

STATEMENT 6
FORM 990-PF, PART II, LINE 10B
INVESTMENTS - CORPORATE STOCKS

| <u>CORPORATE STOCKS</u> | <u>VALUATION METHOD</u> | <u>BOOK VALUE</u> | <u>FAIR MARKET VALUE</u> |
|--------------------------|-----------------------------|-----------------------|------------------------------|
| AFLAC, INC. COMMON STOCK | MKT VAL | \$ 54,183,691. | \$ 54,183,691. |
| | TOTAL | \$ 54,183,691. | \$ 54,183,691. |

STATEMENT 7
FORM 990-PF, PART II, LINE 13
INVESTMENTS - OTHER

| <u>OTHER INVESTMENTS</u> | <u>VALUATION METHOD</u> | <u>BOOK VALUE</u> | <u>FAIR MARKET VALUE</u> |
|--|-----------------------------|-----------------------|------------------------------|
| VANGUARD TOTAL STOCK MKT INDEX INSTL | MKT VAL | \$ 0. | \$ 0. |
| ARCADIAN NON-US ALL CAP | MKT VAL | 0. | 0. |
| DFA EMERGING MARKETS VALUE PORTFOLIO | MKT VAL | 0. | 0. |
| SANDERSON INTERNATIONAL VALUE FUND | MKT VAL | 0. | 0. |
| WILLIAM BLAIR INT EQ FUND CL 1 | MKT VAL | 0. | 0. |
| WESTERN ASSET CORE PLUS BOND PORT INST | MKT VAL | 0. | 0. |
| COMMONFUND CAPITAL INTL PTRS VI | MKT VAL | 0. | 0. |
| COMMONFUND CAPITAL PVT EQUITY PTRS VII | MKT VAL | 0. | 0. |
| COMMONFUND VENTURE PTRS VIII | MKT VAL | 0. | 0. |
| HRJ DOMESTIC | MKT VAL | 0. | 0. |
| HRJ INTERNATIONAL | MKT VAL | 0. | 0. |
| LANDMARK EQUITY PARTNERS XIV | MKT VAL | 0. | 0. |
| METROPOLITAN RE PARTNERS | MKT VAL | 0. | 0. |
| VERDIS REAL ASSETS FUND | MKT VAL | 0. | 0. |
| CANYON VALUE REALIZATION FUND | MKT VAL | 0. | 0. |
| KING STREET CAPITAL | MKT VAL | 0. | 0. |
| AFLAC CALLS | MKT VAL | 0. | 0. |
| ADAGE CAPITAL PARTNERS LP | MKT VAL | 0. | 0. |
| ARCHSTONE OFFSHORE PARTNERS LTD | MKT VAL | 0. | 0. |
| HIGHLINE CAPITAL INTERNATIONAL; LTD | MKT VAL | 0. | 0. |
| ROYALCAP VALUE FUND | MKT VAL | 0. | 0. |
| BLAIR WILLIAM FDS | MKT VAL | 0. | 0. |

2010

FEDERAL STATEMENTS

PAGE 5

THE DANIEL P. AMOS FAMILY FOUNDATION

5: 200539

STATEMENT 1
FORM 990-PF, PART I, LINE 11
OTHER INCOME

| | (A) REVENUE PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME |
|-------------------------|-----------------------------|---------------------------------|-------------------------------|
| OTHER INVESTMENT INCOME | \$ -370,829. | | |
| TOTAL | \$ -370,829. | \$ 0. | \$ 0. |

STATEMENT 2
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-------------------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| WITT CALLIER & PRESTLEY, CPAS | \$ 12,315. | \$ 12,315. | | |
| TOTAL | \$ 12,315. | \$ 12,315. | \$ 0. | \$ 0. |

STATEMENT 3
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|--------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| LEGAL FEES | \$ 27,992. | \$ 27,992. | | |
| TOTAL | \$ 27,992. | \$ 27,992. | \$ 0. | \$ 0. |

STATEMENT 4
FORM 990-PF, PART I, LINE 18
TAXES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-------------------------|------------------------------|---------------------------------|-------------------------------|-------------------------------|
| EXCISE TAX | \$ 38,577. | | | |
| FOREIGN TAX | 31,339. | \$ 31,339. | | |
| STATE REGISTRATION FEES | 30. | | | |
| TOTAL | \$ 69,946. | \$ 31,339. | \$ 0. | \$ 0. |

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART II, LINE 13
INVESTMENTS - OTHER

| | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
|--|---------------------|-----------------------|-----------------------|
| OTHER INVESTMENTS | | | |
| MFO ADVISORS INNER CIRCLE | MKT VAL | \$ 0. | \$ 0. |
| WT MT FD CRM | MKT VAL | 0. | 0. |
| NATURAL GAS PARTNERS IX LP | MKT VAL | 0. | 0. |
| WELLINGTON DIVERSIFIED INFALTION HDG FND | MKT VAL | 0. | 0. |
| TEMPLETON INCOME TR GLOBAL BOND FUND | MKT VAL | 0. | 0. |
| OZ OVERSEAS FUND II | MKT VAL | 0. | 0. |
| TACONIC OPPORTUNITY OFFSHORE FUND | MKT VAL | 0. | 0. |
| NGP ENERGY TECHNOLOGY PARTNERS II | MKT VAL | 0. | 0. |
| SOMA FOUNDATION INVESTMENTS | MKT VAL | 77,615,759. | 77,615,759. |
| TOTAL | | \$ 77,615,759. | \$ 77,615,759. |

STATEMENT 8
FORM 990-PF, PART III, LINE 3
OTHER INCREASES

| | | |
|---------------------------------|--|-----------------------|
| UNREALIZED GAIN IN MARKET VALUE | | \$ 16,303,426. |
| TOTAL | | \$ 16,303,426. |

STATEMENT 9
FORM 990-PF, PART III, LINE 5
OTHER DECREASES

| | | |
|------------------------------|--|-------------------|
| 2009 EXCISE TAX NOT RECORDED | | \$ 18,315. |
| TOTAL | | \$ 18,315. |

STATEMENT 10
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| ITEM | (A) DESCRIPTION | (B) HOW ACQUIRED | (C) DATE ACQUIRED | (D) DATE SOLD |
|------|---|---------------------|----------------------|------------------|
| 1 | SHORT TERM GAIN FROM K-1S | PURCHASED | VARIOUS | VARIOUS |
| 2 | LONG TERM GAIN FROM K-1S | PURCHASED | VARIOUS | VARIOUS |
| 3 | 2000 CALL AFL FEB 10 @ 45.00 | PURCHASED | 11/13/2009 | 2/05/2010 |
| 4 | 500 CALL AFL FEB 10 @ 45.00 | PURCHASED | 8/14/2009 | 2/05/2010 |
| 5 | 160080 AFLAC INC | PURCHASED | VARIOUS | 11/04/2010 |
| 6 | 29347.029 VANGUARD TOTAL STOCK | PURCHASED | VARIOUS | 6/01/2010 |
| 7 | 14492.754 LSV CONSERVATIVE CORE EQUITY FUND | PURCHASED | VARIOUS | 6/01/2010 |
| 8 | 4019.293 CRM SMALL/MID CAP | PURCHASED | VARIOUS | 6/01/2010 |
| 9 | 1333.87 WILLIAM BLAIR | PURCHASED | VARIOUS | 6/01/2010 |
| 10 | 2708.167 WILLIAM BLAIR | PURCHASED | VARIOUS | 6/01/2010 |
| 11 | 297074.398 WESTERN ASSET CORE PLUS | PURCHASED | VARIOUS | 6/01/2010 |
| 12 | 7377.352 VANGUARD TOTAL STOCK | PURCHASED | VARIOUS | 6/24/2010 |

THE DANIEL • AMOS FAMILY FOUNDATION

58-2005391

STATEMENT 10 (CONTINUED)
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| ITEM | (A) DESCRIPTION | (B) HOW ACQUIRED | (C) DATE ACQUIRED | (D) DATE SOLD |
|------|---|---------------------|----------------------|------------------|
| 13 | 28901.734 LSV CONSERVATIVE CORE EQUITY FUND | | | |
| 14 | 16334.531 DFA EMERGING MARKETS VALUE FUND | PURCHASED | VARIOUS | 6/24/2010 |
| 15 | 15625 LOOMIS SAYLES | PURCHASED | VARIOUS | 6/24/2010 |
| | | PURCHASED | VARIOUS | 6/25/2010 |

| ITEM | (E) GROSS SALES | (F) DEPREC. ALLOWED | (G) COST BASIS | (H) GAIN (LOSS) | (I) FMV 12/31/69 | (J) ADJ. BAS. 12/31/69 | (K) EXCESS (I) - (J) | (L) GAIN (LOSS) |
|-------|-----------------------|---------------------------|----------------------|-----------------------|------------------------|------------------------------|----------------------------|-----------------------|
| 1 | 86,040. | | 0. | 86,040. | | | | \$ 86,040. |
| 2 | 185,736. | | 0. | 185,736. | | | | 185,736. |
| 3 | 674,089. | | 637,044. | 37,045. | | | | 37,045. |
| 4 | 103,609. | | 27,254. | 76,355. | | | | 76,355. |
| 5 | 9054233. | | 9983799. | -929,566. | | | | -929,566. |
| 6 | 800,000. | | 1033309. | -233,309. | | | | -233,309. |
| 7 | 100,000. | | 131,159. | -31,159. | | | | -31,159. |
| 8 | 50,000. | | 64,550. | -14,550. | | | | -14,550. |
| 9 | 16,500. | | 20,659. | -4,159. | | | | -4,159. |
| 10 | 33,500. | | 41,791. | -8,291. | | | | -8,291. |
| 11 | 3137106. | | 2910355. | 226,751. | | | | 226,751. |
| 12 | 200,000. | | 259,757. | -59,757. | | | | -59,757. |
| 13 | 200,000. | | 261,561. | -61,561. | | | | -61,561. |
| 14 | 500,000. | | 411,182. | 88,818. | | | | 88,818. |
| 15 | 200,000. | | 198,524. | 1,476. | | | | 1,476. |
| TOTAL | | | | | | | | \$-640,131. |

STATEMENT 11
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|--------------------------|------------|
| ST LUKE UM CHURCH PO BOX 867 COLUMBUS, GA 31902 | NONE | NA | CAPITAL BUILDING FUND | \$ 75,050. |
| UNIVERSITY OF GEORGIA-ARCH FOUNDATION 824 SOUTH MILLEDGE AVENUE ATHENS, GA 30602 | NONE | NA | CHAPLAIN'S PROGRAM | 250,000. |
| FOCUS ON TRUTH 1252 CEDAR AVENUE COLUMBUS, GA 31906 | NONE | NA | YOUTH IN CRISIS | 22,500. |
| VALLEY RESCUE MISSION P.O. BOX 1232 COLUMBUS, GA 31902 | NONE | NA | CARE OF THE HOMELESS | 38,000. |

STATEMENT 11 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|--|-----------------------|---------------------------|---|------------|
| HOUSE OF MERCY P.O. BOX 641 COLUMBUS, GA 31902 | NONE | NA | CARE OF THE HOMELESS | \$ 20,000. |
| AFLAC CANCER CENTER 1687 TULLIE CIRCLE ATLANTA, GA 30329 | NONE | NA | CANCER RESEARCH | 130,000. |
| TEEN CHALLENGE OF GA 2021 SIXTH AVENUE COLUMBUS, GA 31904 | NONE | NA | YUCCHI PROJECT | 15,000. |
| JOHNS HOPKINS VASCULITIS CENTER 4940 EASTERN AVENUE BALTIMORE, MD 21224 | NONE | NA | FINANCIAL SUPPORT IN HONOR OF DR.HELLMANN | 50,000. |
| ASBURY THEOLOGICAL SEMINARY 204 N. LEXINGTON AVENUE WILMORE, KY 40390 | NONE | NA | EDUCATION | 1,065,000. |
| PAWS COLUMBUS, INC. PO BOX 8964 COLUMBUS, GA 31908 | NONE | NA | CRISIS STRAY ANIMALS | 5,000. |
| ASIAN ACCESS PO BOX 200 SAN DIMAS, CA 91773 | NONE | NA | JAPAN MINISTRIES | 100,000. |
| CUMBERLAND COLLEGE 6191 COLLEGE STATION DRIVE WILLIAMSBURG, KY 40769 | NONE | NA | FINANCIAL SUPPORT | 250,000. |
| TREES COLUMBUS, INC. P.O. BOX 1531 COLUMBUS, GA 31902 | NONE | NA | FINANCIAL SUPPORT | 50,000. |
| COLUMBUS MUSEUM 1251 WYNNTON ROAD COLUMBUS, GA 31906 | NONE | NA | BENEFACTOR | 8,750. |
| MUSCOGEE EDUCATIONAL EXCELLENCE FOUNDATION 214 10TH STREET COLUMBUS, GA 31901 | NONE | N/A | EDUCATION | 1,000. |
| YOUNG LIFE OF COLUMBUS 1137 LOCKWOOD AVENUE COLUMBUS, GA 31906 | NONE | NA | FINANCIAL SUPPORT | 10,000. |

STATEMENT 11 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|-------------------------|------------|
| FELLOWSHIP CHRISTIAN-UGA 1080 MILLEDGE AVENUE ATHENS, GA 30605 | NONE | NA | FINANCIAL SUPPORT | \$ 35,000. |
| COLUMBUS STATE UNIVERSITY ATHLETIC FOUND 4225 UNIVERSITY AVENUE COLUMBUS, GA 31907 | NONE | N/A | FINANCIAL SUPPORT | 10,000. |
| MUSCOGEE COUNTY LIBRARY FD 3000 MACON ROAD COLUMBUS, GA 31906 | NONE | NA | FINANCIAL ASSISTANCE | 5,000. |
| SPRINGER OPERA HOUSE 103 10TH STREET COLUMBUS, GA 31901 | NONE | N/A | FINANCIAL SUPPORT | 2,500. |
| ST FRANCIS FOUNDATION 2122 COLUMBUS MANCHESTER EXPW COLUMBUS, GA 31904 | NONE | NA | FINANCIAL ASSISTANCE | 5,000. |
| DUKE DIVINITY SCHOOL PO BOX 90968 DURHAM, NC 30097 | NONE | NA | FINANCIAL ASSISTANCE | 150,000. |
| ATLANTA YOUTH PROJECT 680 W PEACHTREE ST NW ATLANTA, GA 30308 | NONE | NA | FINANCIAL ASSISTANCE | 75,000. |
| SALVATION ARMY 3126 VETERANS PKWY COLUMBUS, GA 31904 | NONE | NA | FINANCIAL ASSISTANCE | 25,000. |
| ST THOMAS EPISCOPAL CHURCH 2100 HILTON AVE COLUMBUS, GA 31906 | NONE | NA | FINANCIAL ASSISTANCE | 20,000. |
| BROOKSTONE SCHOOL 440 BRADLEY PARK DRIVE COLUMBUS, GA 31904 | NONE | NA | FINANCIAL ASSISTANCE | 5,000. |
| FOURTH STREET BAPTIST CHURCH 222 5TH AVENUE COLUMBUS, GA 31901 | NONE | NA | FINANCIAL SUPPORT | 25,000. |
| ATLANTA YOUTH ACADEMIES FOUNDATION 2120 FORREST PARK ROAD ATLANTA, GA 30315 | NONE | NA | FINANCIAL ASSISTANCE | 20,000. |

STATEMENT 11 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|--|-----------------------|---------------------------|-------------------------|------------|
| TWIN CEDARS YOUTH SERVICES INC COLUMBUS, GA 31904 | NONE | NA | FINANCIAL ASSISTANCE | \$ 10,000. |
| COLUMBUS REGIONAL MEDICAL FOUNDATION 707 CENTER STREET COLUMBUS, GA 31901 | NONE | PUBLIC | FINANCIAL SUPPORT | 81,960. |
| HOPE HARBOUR, INC P.O. BOX 4182 COLUMBUS, GA 31914 | NONE | NA | FINANCIAL ASSISTANCE | 5,000. |
| RONALD MCDONALD HOUSE OF WEST GEORGIA 1959 HAMILTON RD COLUMBUS, GA 31904 | NONE | NA | FINIANCIAL SUPPORT | 10,000. |
| ALZHEIMERS ASSOCIATION 1214 1ST AVE STE 160 COLUMBUS, GA 31901 | NONE | NA | FINANCIAL SUPPORT | 1,000. |
| NORTH POINT MINISTRIES 4350 NORTHPOINT PARKWAY ALPHARETTA, GA 30022 | NONE | NA | FINANCIAL ASSISTANCE | 150,000. |
| SCAD -ATLANTA 1600 PEACHTREE ST. NW ATLANTA, GA 30309 | NONE | NA | FINANCIAL ASSISTANCE | 50,000. |
| HISTORIC COLUMBUS FOUNDATION P.O. BOX 5312 COLUMBUS, GA 31906 | NONE | NA | FINANCIAL ASSISTANCE | 3,750. |
| MIDTOWN INC 1236 WILDWOOD AVE COLUMBUS, GA 31906 | NONE | NA | FINANCIAL ASSISTANCE | 2,500. |
| EMORY UNIVERSITY 201 DOWMAN DRIVE ATLANTA, GA 30307 | NONE | NA | FINANCIAL ASSISTANCE | 200,000. |
| COLUMBIA INTERNATIONAL 7435 MONTICELLO ROAD COLUMBIA, SC 29203 | NONE | NA | FINANCIAL ASSISTANCE | 25,000. |
| INTERNATIONAL FRIENDSHIP MINISTRY 3404 UNIVERSITY AVE COLUMBUS, GA 31907 | NONE | NA | FINANCIAL ASSISTANCE | 20,000. |

STATEMENT 11 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|-------------------------|-------------|
| WORLD WIDE WORD, INC. 24162 ROCHESTER LANE ALDIE, VA 20105 | NONE | NA | FINANCIAL ASSISTANCE | \$ 150,000. |
| CORA REID GREENE HOME FOR CHILDREN P.O. BOX 3601 PHENIX CITY, AL 36868 | NONE | NA | FINANCIAL ASSISTANCE | 25,000. |
| FRIENDS OF FOSTER CARE 1340 THURLENE STREET COLUMBUS, GA 31904 | NONE | NA | FINANCIAL ASSISTANCE | 1,000. |
| GOOD SAMARITAN HEALTH CENTER 1015 DONALD LEE HOLLOWELL PKWY ATLANTA, GA 30318 | NONE | NA | FINANCIAL ASSISTANCE | 50,000. |
| WELLSPRING LIVING, INC. 140 HOWELL ROAD STE C-2 TYRONE, GA 30290 | NONE | NA | FINANCIAL ASSISTANCE | 50,000. |
| THE GATEHOUSE OUTREACH MISSION, INC. 94 BLYTHE STREET JUNCTION CITY, GA 31812 | NONE | NA | FINANCIAL ASSISTANCE | 7,000. |
| LAUSANNE COMMITTEE FOR WORLD EVANGEL P.O. BOX 9020 SAN DIMAS, CA 31773 | NONE | NA | FINANCIAL ASSISTANCE | 500,000. |
| LIFESHAPE, INC 411 SAWMILL ROAD HAMPTON, GA 30228 | NONE | NA | FINANCIAL ASSISTANCE | 5,000. |
| RANSOMED HEART MINISTRIES P.O. BOX 51065 COLORADO SPRINGS, CO 80949 | NONE | NA | FINANCIAL ASSISTANCE | 50,000. |
| GEORGIA METH PROJECT P.O. BOX 724436 ATLANTA, GA 31139 | NONE | NA | FINANCIAL ASSISTANCE | 10,000. |
| KINGDOM CATALYSTS 585 SOUTH GREER STREET #700 MEMPHIS, TN 38111 | NONE | NA | FINANCIAL ASSITANCE | 50,000. |

STATEMENT 11 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|--|-----------------------|---------------------------|-------------------------|------------|
| COLUMBUS RESEARCH FOUNDATION 3 BRADLEY PARK COURT STE F COLUMBUS, GA 31904 | NONE | NA | FINANCIAL ASSISTANCE | \$ 25,000. |
| BOY SCOUTS OF AMERICA 1237 1ST AVENUE COLUMBUS, GA 31901 | NONE | NA | FINANCIAL ASSISTANCE | 5,000. |
| ST. ANNE'S OUTREACH CENTER 2000 KAY CIRCLE COLUMBUS, GA 31907 | NONE | NA | FINANCIAL ASSISTANCE | 25,000. |
| REFORMED THEOLOGICAL SEMINARY 1580 TERRELL MILL ROAD MARIETTA, GA 30067 | NONE | NA | FINANCIAL ASSISTANCE | 10,000. |
| CHILDREN'S AT SCOTTISH RITE 1001 JOHNSON FERRY ROAD NE ATLANTA, GA 30342 | NONE | NA | FINANCIAL ASSISTANCE | 500. |
| FOUNDATION OF WESLEY WOODS 1817 CLIFTON ROAD, NE ATLANTA, GA 30329 | NONE | NA | FINANCIAL ASSISTANCE | 125,000. |
| THE STUDY HALL, INC. 1010 CREW STREET ATLANTA, GA 30315 | NONE | NA | FINANCIAL ASSISTANCE | 50,000. |
| THE FULLER CENTER FOR HOUSING 701 S. MARTIN LUTHER KING BLVD. AMERICUS, GA 31719 | NONE | NA | FINANCIAL ASSISTANCE | 25,000. |

TOTAL \$ 4,190,510.

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 are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns*

| | | |
|--|--|--------------------------------|
| Type or print File by the due date for filing your return. See instructions. | Name of exempt organization | Employer identification number |
| | THE DANIEL P. AMOS FAMILY FOUNDATION | 58-2005391 |
| | Number, street, and room or suite number. If a P.O. box, see instructions. | |
| | POST OFFICE BOX 5346 | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. | |
| | COLUMBUS, GA 31906 | |

Enter the Return code for the return that this application is for (file a separate 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-EZ | 03 | Form 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 |

- The books are in the care of ► JEANNIE CHOBOTIUK

Telephone No. ► _____ 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.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15, 20 11, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☒ calendar year 20 10 or
- ☐ tax year beginning _____, 20 _____, and ending _____, 20 _____

- 2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

| | | | |
|--|-----------|----|---------|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | \$ | 50,000. |
| 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. | 3b | \$ | 50,000. |
| 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 | \$ | 0. |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.**BAA For Paperwork Reduction Act Notice, see Instructions.**Form **8868** (Rev. 1-2011)

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

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)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

| | | |
|---|--|--------------------------------|
| Type or print | Name of exempt organization | Employer identification number |
| | THE DANIEL P. AMOS FAMILY FOUNDATION | 58-2005391 |
| | Number, street, and room or suite number If a P.O. box, see instructions | |
| File by the extended due date for filing the return. See instructions | WITT, CALLIER & PRESTLEY, CPAS, LLP 7290 NORTH LAKE DRIVE SUITE 503 | |
| | City, town or post office, state, and ZIP code For a foreign address, see instructions COLUMBUS, GA 31909 | |

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

04

| 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 (section 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.

- The books are in care of JEANNIE CHOBOTIUK
Telephone No. _____ 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 11/15, 2011.

5 For calendar year 2010, or other tax year beginning _____, 20____, and ending _____, 20____.

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 RESPECTFULLY REQUESTS ADDITIONAL TIME TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN.

| | | | |
|---|----|----|---------|
| 8a 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. | 8a | \$ | 0. |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. | 8b | \$ | 50,000. |
| c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 8c | \$ | 0. |

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 Tamara Callier

Title CYA

Date 7/5/2011

BAA

FIF20502L 11/15/10

Form 8868 (Rev 1-2011)