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Form 990-PF

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

Treated as a Private Foundation

OMB No 1545-0052 2010

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2010, or tax year beginning 2010, and ending 20 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 TELFORD FAMILY FOUNDATION, A Employer identification number aka GORDON M TELFORD, SR 58~2053506 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see page 10 of the instructions) 399 CROSS CREEK DR City or town, state, and ZIP code C If exemption application is pending, check here TOCCOA, GA 30577 1. Foreign organizations, check here H Check type of organization X Section 501(c)(3) exempt private foundation 2. Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here I Fair market value of all assets at X Cash J Accounting method Accrual end of year (from Part II, col (c). Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis) line 16) ▶ \$ 826,883 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment for chantable amounts in columns (b), (c), and (d) may not necessarily equal (c) Adjusted net expenses per purposes books income income the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1 Check ► X if the foundation is not required to attach Sch B 2 3 Interest on savings and temporary cash investments · · · · 55,429 55,429 Dividends and interest from securities 4 5a Gross rents b Net rental income or (loss) R Net gain or (loss) from sale of assets not on line 10 · · · · 6a Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) · · · 7 8 Net short-term capital gain ... q Income modifications · · · · 10a Gross sales less returns and allowances Less Cost of goods sold · · · · · · · b C Gross profit or (loss) (attach schedule) · · · · · 11 Other income (attach schedule) · · · · · 12 Total, Add lines 1 through 11 55,429 55,429 13 Compensation of officers, directors, trustees, etc · · · Other employee salaries and wages · · · 14 A d 15 Pension plans, employee benefits · · · · · 16a Legal fees (attach schedule) · · · · · · STM108 Accounting fees (attach schedule) · · · · 1,530 1,530 b O Other professional fees (attach schedule) . . C 17 485 485 18 Taxes (attach schedule) (see page 14 of the instructions) . 19 Depreciation (attach schedule) and depletion 20 Travel, conferences, and meetings · · · · · · · 21 Printing and publications · · · · · · · · STM103 23 Other expenses (attach schedule) · · · · · · · n-24 Total operating and administrative expenses. s 2 2,015 2,015 35,650 35,650 26 Total expenses and disbursements. Add lines 24 and 25 · 37,665 2,015 35,650 *2*7 Subtract line 26 from line 12 17,764 Ψa Excess of revenue over expenses and disbursements · · 53,414 Net investment income (if negative, enter -0-) · · · · · · Adjusted net income (if negative, enter -0-) · · · · · · ·

For Pagerwork Reduction Act Notice, see page 30 of the instructions.

Form 990-PF (2010)

EEA

D	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		Ena or	year
	art ii	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	25,206	39,5	539	39,539
	2	Savings and temporary cash investments · · · · · · · · · · · · · · · · · · ·				
	3	Accounts receivable >				
	Í	Less allowance for doubtful accounts			İ	
	4	Pledges receivable				
		Less allowance for doubtful accounts			Ì	
	5	Grants receivable · · · · · · · · · · · · · · · · · · ·				
	6	Receivables due from officers, directors, trustees, and other			\dashv	
	-	disqualified persons (attach schedule) (see page 15 of the				
Α		instructions) · · · · · · · · · · · · · · · · · · ·				
ŝ	7	Other notes and loans receivable (attach schedule)				
S	'	Less allowance for doubtful accounts		ė ,	ŀ	•
e t		Inventories for sale or use · · · · · · · · · · · · · · · · · · ·				
s	8				\longrightarrow	
	9	Prepaid expenses and deferred charges · · · · · · · · · · · · · · · · · · ·	-	<u></u>	\longrightarrow	<u> </u>
		Investments - U S and state government obligations (attach schedule)				
		Investments - corporate stock (attach schedule) · · · · STM137	939,466	943,7	09	787 <u>,</u> 344
	С	Investments - corporate bonds (attach schedule) · · · · · · · ·				
	11	Investments - land, buildings, and equipment basis			İ	
	İ	Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans · · · · · · · · · · · · · · · · · · ·				
	13	Investments - other (attach schedule) · · · · · · · · · · · · · · · · · · ·				
	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 the				
	•	instructions Also, see page 1, item I) · · · · · · · · · · · · · · · · · ·	964,672	983,2	48	826,883
	17	Accounts payable and accrued expenses			\neg	
i a	18	Grants payable · · · · · · · · · · · · · · · · · · ·			$\neg \neg$	
Б	19	Deferred revenue · · · · · · · · · · · · · · · · · · ·		-		
į	20	Loans from officers, directors, trustees, and other disqualified persons				
į	21	Mortgages and other notes payable (attach schedule) · · · · · · ·				
t i	22	Other liabilities (describe >				
e s	23	Total liabilities (add lines 17 through 22) · · · · · · · · ·	0	···		
<u>-</u>	25				Ŭ	•
		Foundations that follow SFAS 117, check here · · · · · • I and complete lines 24 through 26 and lines 30 and 31.				
N _F	24	Unrestricted · · · · · · · · · · · · · · · · · · ·			}	
e u		Temporarily restricted · · · · · · · · · · · · · · · · · · ·			\neg	
۲ n		Permanently restricted · · · · · · · · · · · · · · · · · · ·	.,		$\neg \neg$	
Α		Foundations that do not follow SFAS 117, check here · · ▶ X				
Sp		and complete lines 27 through 31.				
s a e i	1	Capital stock, trust principal, or current funds				
t '	28	Paid-in or capital surplus, or land, bldg , and equipment fund			-	
s a	29	Retained earnings, accumulated income, endowment, or other funds	964,672	983,2	48	
C	30	Total net assets or fund balances (see page 17 of the				!
o e	1	Instructions)	964,672	983,2	148	
rs	1.	•	304,072	303,2		
	31	Total liabilities and net assets/fund balances (see page 17	964,672	983,2	,,,	
_	<u></u>	of the instructions)		963,2	40	
	a rt II Total	Analysis of Changes in Net Assets or Fund Balanc net assets or fund balances at beginning of year - Part II, column (a), Irr		- 1	- - 1	
•		of-year figure reported on prior year's return) · · · · · · · · · · · · · · · · · · ·			1	964,672
2	Enter	amount from Part I, line 27a · · · · · · · · · · · · · · · · · · ·			2	17,764
		rincreases not included in line 2 (itemize) STM115			3	812
		ines 1, 2, and 3 · · · · · · · · · · · · · · · · · ·		 	4	983,248
		eases not included in line 2 (itemize)		,	5	
		net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (h) line 30	 }	6	983,248
0	iotal	net assets of fulld balances at end of year (line 4 fillings line 5) - Part II,	committely, mie 30 · · ·			303,240

Parriv Capital Gains	and Losses for Tax on inve	estmen	<u>t income</u>			
	e the kınd(s) of property sold (e g , real estate, nouse, or common stock, 200 shs MLC Co)			(b) How acquired P-Purchase D-Donation	(c) Date acquire (yr , mo , day)	ed (d) Date sold (yr, mo, day)
1a						
b						
_с					•	
d						
e						
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		(g) Cost or oth plus expense			h) Gain or (loss) plus (f) minus (g)
a		<u> </u>				
b						
С		<u> </u>				
d		ļ				
е						
Complete only for assets sho	owing gain in column (h) and owned	by the fo	undation on	12/31/69	Д . Со.	ns (Cal. (b) gain minus
(i) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69		(k) Excess o over col (j),		col (k), bu	ns (Col. (h) gain minus it not less than -0-) or ses (from col. (h))
а						
b						
С						
d		† — — —				
e		İ				
2 Capital gain net income or (n	net capital loss) { If gain, a	lso enter enter -0-	ın Part I, lın ın Part I, lını	e 7 e 7 }	2	
3 Net short-term capital gain o	r (loss) as defined in sections 1222(
	ne 8, column (c) (see pages 13 and) :: }	3	
	Inder Section 4940(e) for Re		Tay on N	let Investme		
If section 4940(d)(2) applies, lear Was the foundation liable for the If "Yes," the foundation does not	section 4942 tax on the distributable qualify under section 4940(e) Do no	e amount ot comple	t of any year	in the base peri	od?	Yes X No
	it in each column for each year, see	page 18	of the instru	ctions before ma	king any entrie	
(a) Base penod years Calendar year (or tax year beginning ii			Net value of nor	(c) nchantable-use assets	3 (cc	(d) Distribution ratio I (b) divided by col (c))
2009	38,4			903,4		0.042561
2008	41,4			777,3		0.053255
2007	39,	797		860,0	35	0.046274
2006						
2005						
					2	0.142089
	the 5-year base period - divide the to ion has been in existence if less than				3	0.028418
4 Enter the net value of nonch	arıtable-use assets for 2010 from Pa	art X, line	5		4	959,352
5 Multiply line 4 by line 3 · ·					5	27,263
6 Enter 1% of net investment i	ncome (1% of Part I, line 27b) · · ·	• • • •			6	534
7 Add lines 5 and 6 · · · ·					7	27,797
	from Part XII, line 4 · · · · · · · · r than line 7, check the box in Part V					35,650
Part VI instructions on page		ı, iiile 10,	, and comple	ere mat half agu	yaı/olaxiale	Ose the

Oill	330-1 (2010) IMM OND FAMILIT FOODDATION, INC. S8-2033	300		rage 4
Pai	t VI . Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the in	nstruct	ions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check			534
	here ▶ X and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·			
С	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			534
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			534
6	Credits/Payments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 · · 6a			
b	Exempt foreign organizations - tax withheld at source • • • • • • • • • • 6b			
С	Tax paid with application for extension of time to file (Form 8868) · · · · · 6c			
d	Backup withholding erroneously withheld · · · · · · · · · · · · · · · · · · ·			_
7	Total credits and payments Add lines 6a through 6d · · · · · · · · · · · · · · · · · ·			
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed · · · · · · · · · ▶ 9			534
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid · · · · · · · • 10			
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign? • • • • • • • • • • • • • • • • • • •	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)? $\cdots \cdots	1b		Х
	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			_
Ç	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$ (2) On foundation managers \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed]
	on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
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	3		<u> X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? · · · · · · · · · · · · · · · · · · ·	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
_	If "Yes," attach the statement required by General Instruction T			
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?			
_	Commet with the state law remain in the governing instrument.	6	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	7	Χ	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of 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		1,	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	_8b_	Х	
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 on page 27)? If "Yes," complete Part XIV			.,
10		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		v
	Hallies and addresses	10		_X

1 0111	1996-F1 (2010), 1511-000 FAMILI FOUNDATION, INC. 56-2053	200	•	age 5
Pa	rt 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 page 20 of the instructions)	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? • •	13	Х	
	Website address N/A			
14	The books are in care of ▶ GORDON M. TELFORD, SR. Telephone no ▶ 706-	491-6	572	
	Located at ▶ 399 Cross Creek Dr TOCCOA, GA ZIP+4 ▶ 305	77		
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			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X_
	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			
Pa	rt 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.	L	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? · · · · · · · Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? · · · · · · · · · · · · · · · · · · ·			li
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? · · · · · · Yes X No			!
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? · · · · · · L Yes X No	İ	ļ	:
	(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)? · · · · · · · · · · · · · · · · · · ·			
	(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			i
	termination of government service, if terminating within 90 days) · · · · · · · · · · · · · · Yes 💢 No			1
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			اً
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? • • • • • • •	1b		
	Organizations relying on a current notice regarding disaster assistance check here · · · · · · · · · ▶ ☐			1
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		
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))			
а	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? Yes No	1		
	If "Yes," list the years			
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 page 22 of the instructions)	2b	<u> </u>	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1		
	·			'
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
	at any time during the year? · · · · · · · · · · · · · · · · · · ·			'
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		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? • • • •	4a		<u>X</u>
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

Form	990-PF (2010) TELFORD FAMILY FOUND	DATION	, INC				58-20	53506	F	Page 6		
Par	t VII-B Statements Regarding Activities	es for V	Which Forn	า 4720	May Be I	Requir	ed (continued)				
5a	During the year did the foundation pay or incur any	amount t	0			•						
	(1) Carry on propaganda, or otherwise attempt to in	fluence l	egislation (sec	tion 494	·5(e))? · ·		Yes X No			1		
	(2) Influence the outcome of any specific public ele-	ction (se	e section 4955), or to o	carry on,							
	directly or indirectly, any voter registration drive		• • • • • •				Yes X No	.				
	(3) Provide a grant to an individual for travel, study,	or other	similar purpos	es? · ·			Yes X No	.				
	(4) Provide a grant to an organization other than a continuous	charitable	e, etc , organiz	ation de	scribed in							
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see	page 22 of the	e instruc	tions) · · ·		Yes X No	.	1			
	(5) Provide for any purpose other than religious, ch	arıtable,	scientific, litera	iry, or ed	ducational			- 1				
	purposes, or for the prevention of cruelty to child			•			Yes X No	.				
b	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 page 22 of the instructions)? • • • 5b											
	Organizations relying on a current notice regarding of			•	. •			1	<u> </u>	 		
С	If the answer is "Yes" to question 5a(4), does the for						_	'				
•	because it maintained expenditure responsibility for		· ·				Yes No	.		li		
	If "Yes," attach the statement required by Regulation											
6a	Did the foundation, during the year, receive any fund		, ,		oromiume				1			
va	on a personal benefit contract? • • • • • • • • • • • • • • • • • • •		-	to pay			Yes X No					
h	•				nal banafit a	ontroot?		1 7		\'		
D	Did the foundation, during the year, pay premiums, o	unectly o	r manechy, on	a perso	nar benenit c	ontract	•••••	· 6b		X		
_	If "Yes" to 6b, file Form 8870	4. 4.			4 4 -	- 0						
_	At any time during the tax year, was the foundation a						Yes X No			<u> </u>		
b	If yes, did the foundation receive any proceeds or ha							• 7b	<u> </u>	<u> </u>		
<u>Par</u>	t VIII Information About Officers, Dire	ectors,	Trustees, I	Found	ation Ma	nagers	s, Highly Paid	l Emplo	yees	,		
	and Contractors				<u> </u>							
1 L	ist all officers, directors, trustees, foundation ma							<u>). </u>				
	(a) Name and address		e, and average rs per week		mpensation paid, enter		Contributions to byee benefit plans		ense aco allowano			
		† 	d to position		-0-)	and defe	erred compensation					
	OON M TELFORD SR	CHAIR			_		_			_		
	Cross Creek Dr TOCCOA, GA 30577		1		0		0					
	GARET S TELFORD	VICE-										
	Cross Creek Dr TOCCOA, GA 30577	ļ	0		0		0					
	OON M TELFORD JR	TREAS	URER									
5312	Legends Dr BRASELTON, GA 30577		0		0		0			0		
MAR	T PIGGOTT	SECRE	TARY									
	Deerfield Lane, NC 27896	<u> </u>	0		0		0					
2 C	ompensation of five highest-paid employees (oth	er than t	those include	d on lin	e 1 - see pa	ge 23 o	f the instruction	s).				
lf	none, enter "NONE."							<u>.</u>				
			(b) Title, and a	verage			(d) Contributions to	1				
	(a) Name and address of each employee paid more than \$50,000		hours per we	eek	(c) Compe	nsation	employee benefit plans and deferred		ense aco allowanc			
			devoted to pos	เนอก			compensation					
NONE												
	-											

Part VIII Information About Officers, Directors, Trustees, Fo	oundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional services (see p	page 23 of the instructions). If non-	e, enter "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
4.1		
otal number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical organizations and other beneficianes served, conferences convened, research papers produced, etc.	nformation such as the number of	Expenses
1		
'		
2		
-		
3		
4		
		,
Part IX-B Summary of Program-Related Investments (see page	e 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
1		
2		
All other program-related investments See page 24 of the instructions		
3		
Total. Add lines 1 through 3		
orai, Aud inies i unough s		l

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	ındatıo	ns,
	see page 24 of the 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	941,588
b	Average of monthly cash balances	1b	32,373
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	973,961
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·		
2	Acquisition indebtedness applicable to line 1 assets · · · · · · · · · · · · · · · · · · ·	2	0
3	Subtract line 2 from line 1d · · · · · · · · · · · · · · · · · ·	3	973,961
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of]	
_	the instructions)	4	14,609
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 · ·	5	959,352
6	Minimum investment return. Enter 5% of line 5 · · · · · · · · · · · · · · · · · ·	6	47,968
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private op	erating)
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	47,968
2a	Tax on investment income for 2010 from Part VI, line 5 · · · · · · · 2a 534		
b	Income tax for 2010 (This does not include the tax from Part VI) · · · · 2b		
С	Add lines 2a and 2b	2c	534
3	Distributable amount before adjustments Subtract line 2c from line 1 · · · · · · · · · · · · · · · · · ·	3	47,434
4	Recoveries of amounts treated as qualifying distributions · · · · · · · · · · · · · · · · · · ·	4	
5	Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·	5	47,434
6	Deduction from distributable amount (see page 25 of the instructions) · · · · · · · · · · · · · · · · · · ·	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	7	47,434
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·	1a	35,650
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 ·	4	35,650
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 page 26 of the instructions) · · · · · · · · · · · · · · · · · · ·	5	534
6	Adjusted qualifying distributions. Subtract line 5 from line 4 · · · · · · · · · · · · · · · · · ·	6	35,116
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	the fou	indation
	qualifies for the section 4940(e) reduction of tax in those years		

Pai	rt XIII Undistributed Income (see page 26	of the instructions)			, ago o
		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7				47,434
2	Undistributed income, if any, as of the end of 2010.				-
а	Enter amount for 2009 only · · · · · · · · ·				
b	Total for prior years				
3	Excess distributions carryover, if any, to 2010				
а	From 2005 · · · · · · 12,812				
b	From 2006 • • • • • • • •	1			
Ç	From 2007 • • • • • • • •	j			
d	From 2008 · · · · · 20,771				
е	From 2009 • • • • • • •				
f	Total of lines 3a through e	33,583			
4	Qualifying distributions for 2010 from Part XII,				
	line 4 > \$ 35,650				
а	Applied to 2009, but not more than line 2a · · ·				
	Applied to undistributed income of prior years				
~	(Election required - see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election			<u> </u>	
·	required - see page 26 of the instructions) • • •				
d	Applied to 2010 distributable amount				35,650
e	Remaining amount distributed out of corpus · · ·				33,030
5	Excess distributions carryover applied to 2010 •	11,784			11,784
5	(If an amount appears in column (d), the same	11,704			11,704
	amount must be shown in column (a))				
6	Enter the net total of each column as				
6					
_	indicated below:	21,799			
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5 •	21,799			
D	Prior years' undistributed income Subtract				,
	line 4b from line 2b · · · · · · · · · · · · · · · · · ·				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				1
	tax has been previously assessed · · · · · ·				
d	Subtract line 6c from line 6b Taxable				1
	amount - see page 27 of the instructions · · · ·				
е	Undistributed income for 2009 Subtract line				i
	4a from line 2a Taxable amount - see page				
_	27 of the instructions · · · · · · · · · · · · · · · · · · ·			ļ <u>-</u>	
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1. This amount must be				_
_	distributed in 2011			-	0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the			1	
_	instructions) · · · · · · · · · · · · · · · · · · ·				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				
_	instructions) · · · · · · · · · · · · · · · · · · ·	1,028			
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a · · · · · ·	20,771			
10	Analysis of line 9				
а	Excess from 2006 · · · · ·	<u> </u>			
b	Excess from 2007 · · · ·				
С	Excess from 2008 20,771				
d	Excess from 2009 · · · ·]			
е	Excess from 2010 · · · · ·				

<u>Part</u>	XIV Private Operating Foun				on 9)	
1a	If the foundation has received a ruling of	or determination letter	that it is a private ope	rating		
	foundation, and the ruling is effective for	r 2010, enter the date	of the ruling · · · ·		▶	
b	Check box to indicate whether the foun	dation is a private ope	erating foundation desi	cribed in section	4942(J)(3) or 4	942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	each year listed · · · · · · · ·		.,,	(-,		
b	85% of line 2a					
	ŀ					
С	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					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c · · · ·					<u>.</u>
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"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	•				
_	"Support" alternative test - enter					
С	(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 Informat	ion (Complete th	nis part only if the	e foundation had	\$5.000 or more in	assets at
	any time during the year	•	•		, .,	
1	Information Regarding Foundation M					
а	List any managers of the foundation wh	o have contributed m	ore than 2% of the total	al contributions receive	ed by the foundation	
	before the close of any tax year (but on	ly if they have contrib	uted more than \$5,000)) (See section 507(d)	(2))	
b	List any managers of the foundation wh	o own 10% or more o	of the stock of a corpor	ation (or an equally lai	ge portion of the	
-	ownership of a partnership or other enti				go portion of the	
			J			
2	Information Regarding Contribution,	Grant Gift Loan S	cholarshin etc. Prod	arams.		
-	ř.		• • • • • • • •			
	Check here Lif the foundation only					
	unsolicited requests for funds. If the four	_		20 of the instructions)	to individuals of	
	organizations under other conditions, or The name, address, and telephone num			ould be addressed		
а		iber of the person to	whom applications she	ould be addressed		
	990APP					
						
b	The form in which applications should be	e submitted and info	rmation and materials	tney should include		
	······································					
С	Any submission deadlines					
		 		<u> </u>		 -
d	Any restrictions or limitations on awards	s, such as by geograp	onical areas, charitable	tields, kinds of institu	tions, or other	
	factors					

Part XV Supplementary Information (continued)

3 Grants and Contribut	<u>ions Pa</u>	id During the		for Future Pa	ayment	
Recipi			If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (I	nome or	business)	or substantial contributor	reapient		
a Paid during the year						
BOYS AND GIRLS CLUB 401 WHITMAN ST					OPERATING	
	C.N	30577				2 222
Toccoa	GA	30377				2,000
NANCY HART LITERACY					OPERATING	
110 BENSON ST					OFERMING	
Hartwell	GA	30643				500
						300
STEPHENS CO HIGH SCH	OOL				OPERATING	
WHITE PINE RD						
Toccoa	GA.	30577				500
TOCCOA ROTARY CLUB					OPERATING	
BOX 485						
Toccoa	GA	30577				3,100
						•
CANCER RELAY FOR LIF	E				OPERATING	
2365 THOMPSON BRIDGE	RD					
Gainesville	GA	30501	li .			2,000
ALLENS METHODIST CHU	RCH				OPERATING	
15655 HWY 106						
Carnesville	GA	30521				2,000
GA TECH SCHOOL					OPERATING	
150 BOBBY DODD WAY						
Atlanta	GA	30332				400
CASA					OPERATING	
221 N BROAD ST		20577				1 000
Toccoa	G A	30577			}	1,000
Total · · · · · · · · · ·		. .	<u>.</u>		.	
b Approved for future payment	•				▶ 3a	
b Approved for future payment	·					
				•		
Total · · · · · · · · ·	• • • •	· · · · · · · · · ·			▶ 3b	

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Ye

3 Grants and Contribution	ns Pa	id During the	e Year or Approved	for Future Pa	ayment	
Recipier	nt		If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (ho	me or	business)	or substantial contributor	reapient		
a Paid during the year						
ST CO LIBRARY					OPERATING	
DRAWER L						
Toccoa	GA	30577				1,000
SALVATION ARMY					OPERATING	
306 E FRANKLIN ST						
Toccoa	GA	30577				1,000
ST CO UNITED WAY					OPERATING	
1 HUNTINGTON RD						
Athens	GA	30606				1,500
ST CO YMCA					OPERATING	
115 BIG A RD		20577				500
Toccoa	GA	30577				500
COMPASSION					OPERATING	
12290 VOYAGER PARKWAY					OPERATING	
		80921				500
Colorado Springs	СО	80921				500
EAGLE RANCH					OPERATING	
5500 UNION CH RD					OPERATING	
	63	30542				1 000
Flowery Branch	GA	30542				1,000
SMILE TRAIN					OPERATING	
P O BOX					012111111111111111111111111111111111111	
Washington	DC	20024				250
SPECIAL OLYMPICS				`	OPERATING	
400 DEKALB PARKWAY						
Atlanta	GA	30340			:	100
Total · · · · · · · · · · · · · · · · · · ·	• • • •				▶ 3a	
b Approved for future payment						
		•				
					1	
Total · · · · · · · · ·					▶ 3b	

Part*XV Supplementary Information (continued)

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

Reci	pient		If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business) a Paid during the year		or substantial contributor	recipient			
• •						
OUR NEIGHBOR INC					OPERATING	
P O BOX 908483						
Gainesville	GA	30501				2,500
INITARA IN TARAME	50				OPERATING	
UNITED WAY FORSYTH P O BOX	CO				OPERATING	
Cumming	GA	30040				1,000
Cumming	GA	30040				1,000
HOSCHTON BAPTIST CH	HURCH				OPERATING	
P O BOX						
Hoschton	GA	30548				500
FRIENDS OF BRASELTO	ON LIBRA	RY			OPERATING	
P O BOX						
Braselton	GA	30517				1,500
GWINNETT CHILDRENS	SHELTER				OPERATING	
P O BOX 527						
Buford	GA	30515				1,000
FRANKLIN COUNTY OPI	PORTUNIT	у но			OPERATING	
P O BOX	63	20521				1 000
Carnesville	GA	30521				1,000
CHALLENGED CHILD A	או בים הא	ne			OPERATING	
2360 MURPHY BLVD	ND FRIEN	55			ordinaring .	
Gainesville	GA	30504				4,000
						,
SUSAN KORMAN CANCER	R FUND				OPERATION	
P O BOX						
Dallas	TX	75202				500
					<u> </u>	
Total · · · · · · · ·		• • • • • • •			▶ 3a	
b Approved for future payme	ent					
						1
						1
				i		i
					ŀ	

Part XV Supplementary Information (continued)

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

3 Grants and Contributio	<u>ns Pa</u>	<u>id During the</u>	Year or Approved	<u>for Future F</u>	Payment	, _
Recipier			If reapient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (ho	me or	business)	or substantial contributor	Toupion.		
a Paid during the year				İ	ODDD MENG	
ZION BAPTIST CHURCH P O BOX					OPERATING	
Braselton	GA	30517				1,000
FRANKLIN COMMUNITY PLA	AYERS				OPERATING	
P O BOX						
Carnesville	GA	30521				300
FIRST PRESBYTERIAN CHU	TRCH				OPERATING	
414 SUNSET RD P O BOX]	01212112110	
Wilson	NC	27895				3,000
WILSON CO INTERFAITH S 309 GOLDSBORO ST	SERVIC	CES			OPERATING	
Wilson	NC	27894				1,000
						İ
WILSON HEALTHCARE FOUR	DATIO	ON			OPERATING	
1705 TARBORO ST					1	
Wilson	NC	27893			i	1,000
					<u> </u>	
					1	
	• • • •	· · · · · · · · · · · · · · · · · · ·	 	1	3a	35,650
b Approved for future payment						
					-	
						:
				}		
				1		
Total · · · · · · · · · · ·					3b	

Enter gross amounts unless otherwise indicated			Sustandard business	540 540 544	(0)
Program service revenue	(a) Business	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income (See page 28 of
a	code		code	-	the instructions)
h					
c	 				
d		·			
е			· - 		-
f			- - -		-
g Fees and contracts from government agencies · · ·			1	- -	<u> </u>
2 Membership dues and assessments · · · · · · · · ·			1 1		
3 Interest on savings and temporary cash investments •					
4 Dividends and interest from securities · · · · · · · ·	+		14	55,429	
5 Net rental income or (loss) from real estate					
a Debt-financed property			†t		
b Not debt-financed property · · · · · · · · · · · · · · · · · · ·			<u> </u>		
6 Net rental income or (loss) from personal property · · ·					
7 Other investment income · · · · · · · · · · · · · · · · · · ·					
8 Gain or (loss) from sales of assets other than inventory-					
9 Net income or (loss) from special events · · · · · ·					
10 Gross profit or (loss) from sales of inventory · · · · ·					
11 Other revenue a					
b					
С					
d					
e					
12 Subtotal Add columns (b), (d), and (e)				55,429	
13 Total. Add line 12, columns (b), (d), and (e)		• • • • • • • •		13	55,429
(See worksheet in line 13 instructions on page 29 to verify ca				<u> </u>	
Part XVI-B Relationship of Activities to the					
Line No. Explain below how each activity for which in					
accomplishment of the foundation's exempt	purposes (oth	er than by providii	ng funds for such	purposes) (Şee page	29 of the
instructions)					
<u> </u>					
		=			
			 .		
					
				<u> </u>	
			·		_
				· · · · · · · · · · · · · · · · · · ·	 :
					
					
 ·					
			<u></u>		
			 	-	
	-				
					<u></u>
					

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Or	ganizations						
1	Did the o	rganization dire	ctly or indirectly eng	age in any of the following with a	ny other organiz	ation described		Yes	No
	ın sectior	501(c) of the (Code (other than sec	ction 501(c)(3) organizations) or i	n section 527, re	lating to political			
	organızat	ions?						1 3	
а	Transfers	from the repor	ting foundation to a	noncharitable exempt organization	on of				
	(1) Cash						1a(1)		<u>x</u>
	(2) Other	assets · · ·					1a(2)	_	X
b	Other tra	nsactions					,,	\vdash	
	(1) Sales	of assets to a	noncharitable exem	pt organization · · · · · · ·			1b(1)		_x_
				le exempt organization · · · ·				_	X
				ssets · · · · · · · · · · · · · · · · · · ·				_	X
									X
									X
				or fundraising solicitations • •				_	X
				, other assets, or paid employees					X
			-	omplete the following schedule C				<u>. </u>	$\Box \Delta$
		-		•		·			
		-		given by the reporting foundation					
		-		nent, show in column (d) the value		, ,			
(a) Lin	eno (b)	Amount involved	(c) Name of non	chantable exempt organization	(d) Description	of transfers, transactions, and shar	ng arrangei	ments	
									
					·				
				· · · · · · · · · · · · · · · · · · ·					
			•						
				_					
	_								
2a	Is the fou	ndation directly	or indirectly affiliate	ed with, or related to, one or more	tax-exempt orga	anizations			
				er than section 501(c)(3)) or in se			Ye	s x	No
			llowing schedule	· // //			لسا		ה
		(a) Name of organi	_	(b) Type of organization		(c) Description of relati	nehin		
		(a) Italiic of organi	200011	(b) Type of organization		(b) Description of relati			
									
						 			
				/		<u> </u>			
	Under	enalties of negury	declare that I have evant	ned this return, including accompanying s	chedules and stateme	ents, and to the hest of my knowled	ne and		
Sigi				preparer (other than taxpayer or fiduciary)					
_	1.	///	11 Ma /1		(.12-70)	/A CUATDWAN			
Her		1 1 0 1 1	12/1/	19/12	3 / 101	CHAIRMAN			
_	Sign	ature of officer or tr	 		ate	Title	T DTILL		
Paid	4	Print/Type prepar		Preparer's signature	Date	Check X If	PTIN	. ــــــــــــــــــــــــــــــــــــ	_
		RONALD L		Fronal Hotel	5-1	- Voi self-employed		5010	<u> </u>
	parer	Firm's name		AYES CPA (7	Firm's EIN 58-7	0077	47	
Use	Only	Firm's address	·	RANKLIN CH RD		Phone no			
			Canon GA 30	0520		706-356	-4824		
					FFA		Form 99	30-PF	(2010)

,	Federal Supporting Statements	2010 _{PG 01}
Name(s) as shown on return		FEIN
TELFORD FAM:	ILY FOUNDATION, INC	58-2053506

Statement #115

Form 990PF, Part III, Line 3
Other Increases Schedule
Correct previous year book values 812 Total 812

> Form 990PF, Part II, Line 10(b) Investments: Corporate Stock Schedule

PG 01 Statement #137

Category	BOY	Book Value	EOY FMV
FIRST CITIZENS JEFFERIES	236,861 218,253		
GE	,	46,463	36,580
CON EDISON COUSINS MERRILL LYNCH EDWARD JONES	100,629 100,000 79,893	100,629	29,790
FIRST CITIZENS FORD MOTORS FEDERAL NATIONAL MORTGAGE SUN TRUST CAP MBIA BB&T	203,830	203,830 46,750 25,000 20,256 25,027 52,924	203,830 61,678 515 25,810 18,690 53,610
SUN TRUST CAP WELLS FARGO DUKE ENERGY SUN TRUST CAP COUSINS MERRILL LYNCH		10,430 14,966 55,252 109,884 125,145 107,153	25,810 16,579 55,211 112,919 49,431 96,891
Totals	939,466	943,709	787,344

		Federal Su	Federal Supporting Statements	nents	2010 PG 01	
Name(s) as shown on return TELFORD FAMILY FOUNDATION, INC					Your Social Security Number 58~2053506	Number
	Form 990P	Form 990PF, Part I, Line 23	- Other Expenses Schedule	chedule	Statement #103	.03
Description	Revenue and expenses	Net investment	Adjusted net income	Charıtable purpose		
SUPPLIES BROKERS FEE	0	0 0	0	0 0		
Totals	0	0	0	0		
	Form 990PF, Part I,		Line 16(b) - Accounting Fees Schedule	s Schedule	Statement #108	80:
Description ACCOUNTING FEES MERRILL LYNCH SECT OF STATE	Revenue and expenses 1,200 300	Net investment 1,200 300	Adjusted net income 0	Charıtable purpose 0 0		
Totals	1,530	1,530	0	0		
						-

		Federal Su	Federal Supporting Statements	nents	2010 PG 01	. 01
Name(s) as shown on return TELFORD FAMILY FOUNDATION, INC					Your Social Securit 58-2053506	uniy Number 6
	Form	Form 990PF, Part I, Line 18	ne 18 - Taxes Schedule	ule	Statement #110	#110
Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose		
TAXES	485	485	0	0 0		

Federal Supporting Statements 2010 PG 01 Name(s) as shown on return TELFORD FAMILY FOUNDATION, INC 58-2053506

Form 990PF, Part XV, Line 2
Application Submission Information

990APP

Grant Program

Applicant Name GORDON M TELFORD SR

Address
399 Cross Creek Dr

TOCCOA

GA 30577

Telephone 706-491-6572

Form & Content NONE SPECIFIC

 $\frac{\texttt{Submission Deadline}}{\texttt{NONE}}$

 $\frac{\textbf{Restrictions on Award}}{\text{NONE}}$

, 9 9 0	Overflow Statement	2010 Page 1
Name(s) as shown on return		FEIN
TELFORD FAMILY F	OUNDATION, INC	58-2053506

DIVIDENDS & INTEREST

Description		,	Amount
COUSINS		\$	1,281
GE			840
MERRILL LYNCH			5,537
SUNTRUST			14,704
MBIA			1,600
GMAC	-		3,437
FORD	`		3,625
BB&T			4,495
WELLS FARGO	· · · · · · · · · · · · · · · · · · ·		773
CON EDISON			863
FIRST CITIZENS			16,306
SUN TRUST			1,968
	Total:	\$	55,429