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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury

e foundation may be able to use a conv of this return to satisfy state renorting requirements

OMB No 1545-0052

For calendary year 2010, or tax year beginning Active all this papers Remodel return Address change Remodel return Address change	internal Revenue Service Note. The Touridation may	be able to use a copy of this to	otarn to batisty state repor	ting requirements.	
Name of Foundation	For calendar year 2010, or tax year beginning		, and ending		
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P. O. BOX 218 City or town, state, and ZP code	Name of foundation			A Employer identification	n number
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Dry or town, state, and ZP code LEBANON	Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	T	
LEBANON, TN 37088-0218 Check type of organization: X Section 591(c)(3) exempt private foundation Section 497(2)(1) nonexpert charitable trust Other facable private foundation Fair market value of all assets at end of year J Accounting method: X Cash Accrual Improved foundation Fair market value of all assets at end of year J Accounting method: X Cash Accrual Improved foundation Fair market value of all assets at end of year J Accounting method: X Cash Accrual Improved foundation Fair market value of all assets at end of year J Accounting method: X Cash Accrual Improved foundation Fair market value of all assets at end of year J Accounting method: X Cash Accrual Improved foundation Fair market value of all assets at end of year Accounting must be on cash bases	P. O. BOX 218			615-444-60)31
Check type of organization: Section 501(x)(3) exempt prevale foundation Section 4947(x)(1) nonexempt charisable trust Other tasks for the first will be of all assets at end of year Accounting method: X Cash Accrual If prave foundation status was terminated under section 501(x)(3), check here If the foundation is an a 60-month termination will be section of the first will be of all assets at end of year Accounting method: X Cash Accrual If the foundation is an a 60-month termination will be section 501(x)(x), check here If the foundation is an a 60-month termination will be section 501(x)(x), check here If the foundation is an a 60-month termination in come expenses for books If the foundation is an a 60-month termination will be set only If the foundation is an a 60-month termination will be set only If the foundation is an a 60-month termination will be set only If the foundation is an a 60-month termination will be set only If the foundation is an a 60-month termination will be set only If the foundation is an a 60-month termination will describe the propose propose will be set only If the foundation is an a 60-month termination will describe the propose propose will be set only If the foundation is an a 60-month termination will describe the propose propose will be set on the foundation of the propose propose propose will be set only If the foundation is an a 60-month termination will describe the propose propose propose propose will be set only If the foundation is an a 60-month termination will describe the propose propose propose propose propose If the foundation is an a 60-month termination will describe the propose propose propose propose If the foundation is an a 60-month termination will describe the propose propose propose If the foundation is an a 60-month termination will describe the propose propose If the foundation is an a 60-month termination will describe the propose propose If the foundation is an additionable through the propose p	City or town, state, and ZIP code			C If exemption application is i	pending, check here
Section 4947(a)(1) nonexempt charitable trust					s, check here 🕨 🔛
Far maket value of all assets at end of year (from Part II, cot.) (c), into 16) S	H Check type of organization: X Section 501(c)(3) ex	empt private foundation		Foreign organizations m check here and attach c	eeting the 85% test, omputation
Far market value of all assets at end of year J Accounting method: I Check (c), him e1 D	Section 4947(a)(1) nonexempt charitable trust	Other taxable private foundati	o <u>n</u>	F If private foundation sta	ntus was terminated
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Contributions, girls, grants, etc., received S7, O11. N/A		mn (d) must be on cash ba	asis.)	under section 507(b)(1)(B), check here
1 Contributions, gifts, grains, etc., received 2 87,011. N/A	Part I Analysis of Revenue and Expenses (The total of amounts in columns (b) (c) and (d) may not				
Check	necessarily equal the amounts in column (a)		income		(cash basis only)
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Sa Gross rents Sa Retail income or (cos) Sa Net rental i	3 Interest on savings and temporary cash investments				STATEMENT 1
Day Net rental income or (loss) Sa	4 Dividends and interest from securities	3,846.	3,823.		STATEMENT 2
Sample S	5a Gross rents				
b asset on line 8 at 115, 139. 7 Capital gain net income (from Part V, line 2) 8 Net short-term capital gain 9 Income modifications 10 and discussions 11 Other income 12 Total. Add lines 1 through 11©CDEN, 11 Other income 13 Compensation of Since Sire Sire Sire Sire Sire Sire Sire Sir	b Net rental income or (loss)				
Not some modifications RECEIVED Income fine spatros, enter -0-) Income modifications Received Receive	6a Net gain or (loss) from sale of assets not on line 10	3,504.	<u> </u>		
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1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts ► Saminar scoreovable 6 Receivables due from officers, directors, trustees, and other desqualated persons 7 concarrent stats nearth Less: allowance for doubtful accounts ► Si Investments: - U.S. and state government obligations 3 Investments: - Corporate stock 5 Investments: - Corporate stock 5 Investments: - Corporate stock 5 Investments: - Corporate stock 1 Inve	P	art	Balance Sheets Attached schedules and amounts in the description	<u> </u>	Beginning of year		<u> </u>
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18 Grants payable Deferred revenue 20 Leans from officers, directors, trustees, and other discqualified persons 21 Mortgages and other notes payable 22 Other liabilities (add lines 17 through 22) O. O. O.					300,010.	042,700.	003,002.
19 Deferred revenue 20 Loans form officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe ▶) 23 Total liabilities (add lines 17 through 22) 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Permanently restricted income, endowment, or other funds 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances 31 Total liabilities and net assets/fund balances 4 Depart III Analysis of Changes in Net Assets or Fund Balances 5 80,010. 642,760. 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 3 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decreases not included in line 2 (itemize) ▶ 5 0 Decrease not included in line 2 (itemize) ▶ 5 0 Decrease not included in line 2 (itemize) ▶ 5 0 Decrease not included in line 2 (itemize) ▶		l					
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31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 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) Enter amount from Part I, line 27a 2 62,750. 3 Other increases not included in line 2 (itemize) 3 0. 4 Add lines 1, 2, and 3 4 642,760. 5 Decreases not included in line 2 (itemize) 5 0.	lan	25	Temporarily restricted		· · · · · · · · · · · · · · · · · · ·		
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31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 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) Enter amount from Part I, line 27a 2 62,750. 3 Other increases not included in line 2 (itemize) 3 0. 4 Add lines 1, 2, and 3 4 642,760. 5 Decreases not included in line 2 (itemize) 5 0.	Ϋ́						
31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 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) Enter amount from Part I, line 27a 2 62,750. 3 Other increases not included in line 2 (itemize) 3 0. 4 Add lines 1, 2, and 3 4 642,760. 5 Decreases not included in line 2 (itemize) 5 0.	ţ	i .		ļ			
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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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 O.	ž	30	Total net assets or fund balances	<u> </u>	580,010.	642,760.	
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(must agree with end-of-year figure reported on prior year's return)1580,010.2Enter amount from Part I, line 27a262,750.3Other increases not included in line 2 (itemize)30.4Add lines 1, 2, and 34642,760.5Decreases not included in line 2 (itemize)50.	F	art	III Analysis of Changes in Net Assets or Fu	nd Balai	nces		
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Oc.	1	Tota	net assets or fund balances at beginning of year - Part II, column (a	a), line 30			
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 Oc.						1	580,010.
3 Other increases not included in line 2 (itemize) ► 3 0. 4 Add lines 1, 2, and 3 4 642,760. 5 Decreases not included in line 2 (itemize) ► 5 0.	2	•				2	
5 Decreases not included in line 2 (itemize) ▶	3	Othe	r increases not included in line 2 (itemize)				0.
5 Decreases not included in line 2 (itemize) ▶						4	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II. column (b). line 30			•				
Form 990-PF (2010)	<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Pa	rt II, columi	n (b), line 30	6	

Part IV			LIN S. & JIM) <u>r</u>	ND.		<u> </u>	<u>Z-154</u>	9282	Page 3
Part IV			osses for Tax on In		t income	T/63 I	Jow aggrees	a 1				
	(a) List and desc 2-story brick wa	ribe the k arehouse;	and(s) of property sold (e.g. or common stock, 200 shs	, real estate, . MLC Co.)		P D	low acquire - Purchase - Donation	۱ (c) Date a (mo., da	acquired ay, yr.)	(d) Date (mo., da	
1a FIR	ST TENNESSE	E BR	OKERAGE - SE	E ATTA	CHED							
	TEMENT						P	7	/ARI	OUS	VARIO	OUS
	ST TENNESSE	E BR	<u> OKERAGE - SE</u>	E ATTA	CHED	<u> </u>						
	TEMENT					-	P		ARI	OUS	VARIO	<u>ous</u>
e CAP	ITAL GAINS				<u> </u>	<u> </u>						
(e)	Gross sales price	(f)	Depreciation allowed (or allowable)	10/	st or other basis expense of sale					ain or (loss) (f) minus (
<u>a</u> b	50,600.				46,99)5.					3	605.
C												
d	64,509.				64,64	0.						-131.
<u>e</u>	30.	L								_		30.
Compl	ete only for assets showir		column (h) and owned by to		-					ol. (h) gain		
(i) F.I	M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		col. (j), if any		<u> </u>			ot less thar (from col. (
<u>a</u>	==						,					
b											3	<u>605.</u>
C			-									404
<u>d</u>												<u>-131.</u>
_е						$\overline{}$	ľ					30.
2 Capital o	gain net income or (net ca	ioital loss	If gain, also enter (loss), enter -0-	in Part I, line	7 7	$ \cdot $	2				3	504.
	•		•		•	ノ h						304.
	nt-term capital gain or (los also enter in Part I, line 8,		ined in sections 1222(5) and	J (6):		٦١						
	<u>, enter -0- in Part I, line 8</u>)	0).			<u>}</u>	3			N/A		
Part V	Qualification U	nder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estment	Inco	me			
(For option	al use by domestic private	foundati	ons subject to the section 4	940(a) tax on	net investment in	come	.)					
If postupe 4	040/d\/2\ applian appli	nia nart h	la alı									
11 50011011 43	940(d)(2) applies, leave ti	iis part b	diik.									
Was the fou	ındatıon liable for the sec	tion 4942	tax on the distributable amo	ount of any ye	ear in the base per	riod?					Yes [X No
			section 4940(e). Do not cor									
1 Enter th		each colu	mn for each year; see instru	ctions before	making any entri	es.			_		, n	
	(a) Base period years		(b)	ributiono	Not value of no	(c)			l .	Distrib	(d) ution ratio	
Calendar	year (or tax year beginni	ng in)	Adjusted qualifying distr		Net value of no	ncnar			+	col. (b) div	ded by col.	
	2009			0,825.			509,0					0911
	2008			2,325.			487,4					5800
	2007			0,431.			487,3					2966
	2006			0,616.			436,3					7242
	2005		Т.	5,166.			383,8	<u>34/.</u>	├		. 04	2116
2 Total of	line 1, column (d)										2.5	0025
	• • •	5.voar ha	se period - divide the total o	n line 2 hv 5	or by the number	of voc). TO		2			9035
	idation has been in existe			ii iiile 2 by 5,	or by the number	UI yea	115		3		.05	1807
4 Enter the	e net value of noncharitab	le-use as	sets for 2010 from Part X, II	ne 5					4		610,	600.
5 Multiply	line 4 by line 3								5			633.
	•	(40/ -4	Dord Live 07h)								<u> </u>	
	6 of net investment incon	it (1% 01	rait I, line 270)						6			<u>57.</u>
7 Add line	s 5 and 6								7		31,	690.
	ialifying distributions fron								8		29,	840.
If line 8 See the	is equal to or greater than Part VI instructions.	line 7, cl	neck the box in Part VI, line	1b, and comp	plete that part using	g a 1%	6 tax rate.					
022524 42 0	7 10									r.	000 P	E (0040)

	990-PF (2	2010) T F	<u>IE EVE</u>	LYN S	S. &	JIM	HORNE	HANK	INS	FND.				<u> 1549</u>			Page 4
Par		Excise Tax									4940(e),	or 4	948 -	- see i	nstrı	ıctio	ns)
1a E	xempt o	perating foundation	ons described	d in sectio	n 4940(d)(2), chec	k here 🕨 🗀	and ent	er "N/A	N° on line 1.)						
		ılıng or determınat														_	
		foundations that i	meet the sec	tion 4940((e) require	ements in	Part V, check	k here 🕨	L 8	and enter 1	%		1			1	<u>14.</u>
	of Part I, I																
		domestic foundation									ol. (b). 丿						^
		r section 511 (don	nestic sectio	n 4947(a)	(1) trusts	and taxab	ole foundation	ns only. Oth	ers ent	ter -0-)			2			1	$\frac{0.}{14.}$
	Add lines			- 40.47(-)	(4) 4		bla farradatra	04		O)			3				
		(income) tax (doi						-	iers en	iter -U-)			4			1	$\frac{0.}{14.}$
		d on investment i	ncome. Sub	tract line 4	i irom line	3 3. 11 zero	or iess, ente	:r -u-					5				14.
		ayments:				tod to 001	10	1	ا ءء								
		mated tax paymen				160 to 50 t	10	}	6a								
		oreign organizatioi				0000)		ł	6b								
	-	with application fo			ne (Form	0000)		ł	6c								
		ithholding errone			د ۲			L	6d				_				^
		dits and payments.		-		l. basa	٦ ،،، oo	000 .a attacl					7				0.
		penalty for under						ZZU IS ATTACI	160				8			1	14.
		If the total of lines											9				14.
		nent. If line 7 is m						rerpaid			Defunda		10 11				
		amount of line 10 Statemer					<u> </u>				Refunde		11				
		e tax year, did the					unal etata or	local locuela	tion or	did it parti	sinate or inte	r (ono	ın		Ι	Yes	No
	-	cal campaign?	iounuation a	illempt to	IIIIIueiice	any nano	mai, State, Of	iocai icyisia	uon oi	uiu it partii	sipale of file	ii veiie	ш		1a		X
		nd more than \$10	O during the	vear (eith	er directly	or indire	ctly) for noliti	cal nurnoca	e /eaa	inetriiction	e for definiti	nn\2			1b		X
		swer is "Yes" to											d or		· · ·		
		ed by the found						villes and	copies	s Or arry in	ateriais put	JIISHE	u ui				
		oundation file Form				acavaces	•								1c		х
		amount (if any) of		•		ection 401	55) imposed (during the s	oar.								
		ne foundation.										0.					
		reimbursement (if									n foundation						
		s. > \$		_		ing the ye	car for pointies	ai experient	ii o tax	imposca oi	i iodiidation						
		oundation engage			nave not r	reviously	heen reporte	ed to the IRS	32						2		х
		attach a detaile					boom roporto	, a 10 1110 1110	•						├		
	•	oundation made ai	-				e IRS. in its ai	overnina in:	strume	ent, articles	of incorpora	tion. c	ır				
		or other similar ins			-		_	_			o,oo. po. u	, .	•		3		X
	-	oundation have un						_							4a		X
		as it filed a tax reti		-									N	/A	4b		
		e a liquidation, teri					action during	the vear?						•	5		X
		attach the state	•	-			-										
	•	equirements of sec	•	•				satisfied eith	er:								
		juage in the gover					,										
		e legislation that e			overning	ınstrume	nt so that no	mandatory	directio	ons that co	nflict with th	e state	law		İ		
	remain	in the governing i	instrument?	_											6	X	
7 [old the fo	oundation have at I	least \$5,000	ın assets a	at any tim	e during t	the year?								7	Х	
1	f "Yes,"	complete Part I	l, col. (c), ar	nd Part X	v .												
8a 8	nter the	states to which th	e foundation	reports o	r with wh	ich it is re	gistered (see	instruction	s) 🕨	NON	E					'	
_							<u> </u>										
ЬĪ	f the ans	wer is "Yes" to line	7, has the fo	oundation	furnished	l a copy o	f Form 990-P	F to the Att	orney (General (or	designate)			_			
(of each st	tate as required by	General In	struction	G? If "N	lo," attac	ch explanatio	on							_8b	X	
9 1	s the fou	indation claiming s	status as a pi	vate oper	ating fou	ndation w	rithin the mea	ning of sec	tion 49	42(j)(3) or	4942(j)(5) fo	or cale	ndar				
3	ear 2010	0 or the taxable ye	ar beginning	ın 2010 (s	see instru	ctions for	Part XIV)? II	f "Yes," co	mplet	e Part XIV					9	ļ	_X_
10 [Did any p	ersons become si	ubstantial co	ntributors	during th	e tax year	? If "Yes," attac	ch a schedule	listing t	their names a	nd addresses				10]	X

orm 990-PF (2010) THE EVELYN S. & JIM HORN	E HANKINS FNI).	62-15492	82 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,		
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		s X No	[
(4) Provide a grant to an organization other than a charitable, etc., organization				[
509(a)(1), (2), or (3), or section 4940(d)(2)?	ii dosoribed iii seetioii	□ v	es X No	
			S LAL NU	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		[1]	
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5 b
Organizations relying on a current notice regarding disaster assistance check h	nere		▶∐	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	ined		
expenditure responsibility for the grant?		I/A 🔲 Ye	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494		. —	. —	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay promiums on		es X No	
•		10		n. 37
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal denetit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b if "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	magers, Highly	y	
Faid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and defenred compensation	account, other allowances
BRENDA H. CALLIS	TRUSTEE			
O BOX 218	INODIBL			
LEBANON, TN 37088-0218	0.25	0.	0.	^
		0.	0.	0.
	TRUSTEE			
P O BOX 218		_	_	
JEBANON, TN 37088-0218	0.25	0.	0.	0.
	TRUSTEE			
P O BOX 218				
JEBANON, TN 37088-0218	0.25	0.	0.	0.
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	L	
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	account, other
NO.170	devoted to position		compensation	allowances
NONE				
]			
]			
	1	1		
····· · · · · · · · · · · · · · · ·		 		
	1			
	L			
Total number of other employees paid over \$50,000				0
			Form	990-PF (2010)

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Form 990-PF (2010) THE EVELYN S. & JIM HORNE HANKINS FND.	62-	1549282 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Management Paid Employees, and Contractors (continued)	gers, Highly	•
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
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.	Sucil as tile	Expenses
1 N/A		
2		
3		
<u> </u>		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		•
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<u> </u>	0.
		Form 990-PF (2010)

P	art X Minimum Investment Return (All domestic foundations r	nust complete this pa	rt. Foreign four	ndations, sei	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	le, etc., purposes:	-		
a	Average monthly fair market value of securities			1a	274,330.
b	Average of monthly cash balances			1b	345,568.
C	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	619,898.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	619,898.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	t, see instructions)		4	9,298.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o	n Part V, line 4		5	610,600.
6	Minimum investment return. Enter 5% of line 5			6	30,530.
P	Distributable Amount (see instructions) (Section 4942(j)(3) a foreign organizations check here and do not complete this part.		g foundations an	id certain	
1	Minimum investment return from Part X, line 6			1	30,530.
2a	Tax on investment income for 2010 from Part VI, line 5	2a	114.		
b	Income tax for 2010. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	114.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	30,416.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	30,416.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part	t XIII, line 1		7	30,416.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur	poses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	29,840.
þ	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	ble, 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, a			4	29,840.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inve	estment			_
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	29,840.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years v	when calculating whether	the foundation of	qualifies for th	e 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,	<u> </u>	, , , , , , , , , , , , , , , , , , ,		30,416.
2 Undistributed income, if any, as of the end of 2010				30,410.
a Enter amount for 2009 only			6,264.	
b Total for prior years:			0,2041	
		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: ► \$ 29,840.				
a Applied to 2009, but not more than line 2a			6,264.	
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				23,576.
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:				
8 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 instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				6,840.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				Form 000 PE (0040)

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Form **990-PF** (2010)

		IM HORNE HA			549282 Page 10
Part XIV Private Operating Fo				N/A	· · · · ·
1 a If the foundation has received a ruling or			'		
foundation, and the ruling is effective for	•	-	▶ └┌─	1.0.00(1/0)	
b Check box to indicate whether the found		ing foundation described		4942(j)(3) or4	<u>1942(j)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year	(1) 0000	Prior 3 years	T (4) 0007	(a) Tabal
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
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					ŧ
exempt activities					•
e Qualifying distributions made directly				1	
for active conduct of exempt activities.			i		
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					1
512(a)(5)), or royalties)			i		
(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				<u> </u>	
Part XV Supplementary Info	mation (Comple	ete this part only	/ if the foundation	n had \$5.000 or m	ore in assets
at any time during the			,		
1 Information Regarding Foundation			···	-	
a List any managers of the foundation who	_	than 2% of the total co	ntributions received by the	a foundation hafara the ol	nea of any tay
year (but only if they have contributed m			ililibulions received by th	e toutidation before the ci	use of any lax
NONE					
 b List any managers of the foundation who other entity) of which the foundation has 			i (or an equally large port	ion of the ownership of a	partnership or
••	a 1070 of greater intere	556			
NONE	 				
2 Information Regarding Contribution			-		
Check here ► ☐ If the foundation of					
the foundation makes gifts, grants, etc. (see instructions) to indi	ividuals or organizations	under other conditions, c	complete items 2a, b, c, ar	id d.
a The name, address, and telephone number		om applications should b	e addressed:		
C. EDWARD CALLIS, TR	USTEE				
P.O.BOX 218, LEBANON	<u>, TN 37088-</u>	-0218			
b The form in which applications should be	e submitted and inform	ation and materials they	should include:		
WRITTEN OR ORAL APPL	ICATION WIT	TH PROOF OF	501 (C) (3) STATUS	
c Any submission deadlines:					
NONE					
d Any restrictions or limitations on awards	, such as by geographi	cal areas, charitable field	s, kinds of institutions, or	other factors:	
NO FORMAL LIMITATION					N COUNTY, TN
023601 12-07-10					Form 990-PF (2010)

0.

▶ 3b

Total 023811 12-07-10

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
· ·	Code				
a b	-				
	1		 		••
<u> </u>	1		 - -		
d	l l				
e	-				· · -
f		-			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,040.	
4 Dividends and interest from securities			14	3,846.	
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					
8 Gain or (loss) from sales of assets other					• , ,
than inventory			18	3,504.	
9 Net income or (loss) from special events				•	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
ab	-				•
c	1				
d					
In Cubtatal Add calumns (b) (d) and (a)	-	0.		8,390.	0
12 Subtotal. Add columns (b), (d), and (e)		0.			
13 Total. Add line 12, columns (b), (d), and (e)				13	8,390
(See worksheet in line 13 instructions to verify calculations.)	·				
Part XVI-B Relationship of Activities	to the Acco	emplishment of Ex	cempt Pu	ırposes	
					1.1
Explain below how each activity for which industrial the foundation's exempt purposes (other that			contributed	importantly to the accomp	disnment of
the foundation's exempt purposes (other tha	ii oy provioniy iui	ius ioi sucii purposes).		· ·	
					
					 -
					
					
		-		-	<u> </u>

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	i							
2a Is th	ne foun	dation directly or indirectly affiliated with, or	related to, one or more ta	x-exempt organi	zations described			
		501(c) of the Code (other than section 501(c		- · · · · · · · · · · · · · · · · · · ·			Yes	X No
		mplete the following schedule.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
<u> </u>	00, 00	(a) Name of organization	(b) Type	of organization	(c) Description of rel	ationship	
		N/A			`	<u>,</u>		
		21/22						
							-	
								
					•			
	Unde	penalties of perjury Leclare that I have exampled	his return, including accompa	nving schedules an	l d statements, and to the	best of my knowledge	and belief, it is true	. correct.
Sign		omplete Declaration of preparer (other than taxpaye					,	
Here		1 Show all las		15-5-	2011 \ -	104		
	 	Signature of officer or trustee		Date		<i>f RMS 147</i> tle		
	<u> </u>	Print/Type preparer's name	Preparer's signature	Date			PTIN	
		Fillio Type preparer S hame	richardi 2 Signature	^	1 - 1	self- employed	1 1114	
Daid			RHR	()	CD0 11 22 1	a cin cinpioyed		
Paid		LYNETTE B. RUEGER	& Jynull -	Rueges	UM TAHI			
Prepa		Firm's name ► KRAFTCPAS,	PLLC	Ø		Firm's EIN		
Use C	וחי	105 BAY COT	JRT _					

(615)449-2334

Firm's address ► LEBANON, TN 37087

Phone no.

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.

THE EVELYN S. & JIM HORNE HANKINS FND.

OMB No 1545-0047

2010

Name of the organization

Employer identification number

62-1549282

Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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, chantable, 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 its 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)

LHA 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	RVELVN	ς.	S.	MTT.	HORNE	HANKTNS	FND.

62-1549282

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	OPAL L. SMITH CLAT P.O.BOX 218 LEBANON, TN 37087	\$ 87,011.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II of there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

of Part II

Name of organization

Employer identification number

THE EVELYN S. & JIM HORNE HANKINS FND.

62-1549282

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
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	

Name of organization

of Part III

rt III	ELYN S. & JIM HORNE HA Exclusively religious, charitable, etc., ir more than \$1,000 for the year. Complet Part III, enter the total of exclusively religions \$1,000 or less for the year. (Enter this inf	ndividual contributions to section e columns (a) through (e) and the fo ous, charitable, etc., contributions o	62-1549282 501(c)(7), (8), or (10) organizations aggregating illowing line entry. For organizations completing
No.	\$1,000 or less for the year. (Enter this in	ormation once See instructions.)	\$
om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ -		(e) Transfer of gift	
-	Transferee's name, address, a		Relationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
art I -			
-		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
-			
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
— -			
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZiP + 4	Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVI	NGS AND T	EMPORARY C	ASH II	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
FIRST TENNESSEE BANK FIRST TENNESSEE BROKERAGE						17. 23.
TOTAL TO FORM 990-PF, PART I,	LINE 3,	COLUMN A			1,0	40.
FORM 990-PF DIVIDEND	S AND INT	EREST FROM	SECUI	RITIES	STATEMENT	2
SOURCE	GRO	SS AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
FIRST TENNESSEE BROKERAGE FIRST TENNESSEE BROKERAGE		3,873.	***************************************	30.	3,8	43. 3.
TOTAL TO FM 990-PF, PART I, L	N 4	3,876.		30.	3,8	46.
FORM 990-PF	ACCOUN'	ring fees			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOK		EST-	(C) ADJUSTED NET INCOM		
KRAFT CPAS	84	0.	0.		8	40.
TO FORM 990-PF, PG 1, LN 16B	84	0.	0.		8	40.
FORM 990-PF O	THER PROF	ESSIONAL F	EES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOK	(B) NET INV S MENT IN		(C) ADJUSTED NET INCOM		
FTB ACCOUNT FEE	2,68	3. 2	,683.			0.
TO FORM 990-PF, PG 1, LN 16C	2,68	3. 2	,683.			0.

FORM 990-PF	TAX	ES	<u></u>	STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
INTERNAL REVENUE SERVICE FOREIGN TAXES PAID	127. 1.	0 1		0.
TO FORM 990-PF, PG 1, LN 18	128.	1.		0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
FIRST TENNESSEE BROKERAGE			268,611.	291,653.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		268,611.	291,653.

	AND CONTRIBUTIONS DURING THE YEAR	STAT	EMENT 7
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
BROOKS HOUSE P O BOX 1222 LEBANON, TN 37087	NONE PROVIDE SHELTER & AID TO THE HOMELESS	PUBLIC	5,000.
CUMBERLAND UNIVERSITY ONE CUMBERLAND SQUARE LEBANON, TN 37087	NONE FOR BETTY SMALLWOOD SCHOLARSHIP FUND	PUBLIC	3,000.
FIRST UNITED METHODIST CHURCH 415 WEST MAIN STREET LEBANON, TN 37087		PUBLIC	3,000.
LEBANON KIWANIS LITTLE LEAGUE P O BOX 281 LEBANON, TN 37088-0281	NONE SUPPORT BASEBALL PROGRAM FOR CHILDREN IN LEBANON	PUBLIC	2,000.
LEBANON-WILSON COUNTY LIBRARY 108 SOUTH HATTON LEBANON, TN 37087	NONE SUPPORT LIBRARIES IN LEBANON & MT JULIET	PUBLIC	2,000.
MT JULIET HELP CENTER 3425B MT JULIET ROAD MT JULIET, TN 37122	NONE ASSIST NEEDY FAMILIES IN MT JULIET	PUBLIC	2,500.
NATIONAL ATAXIA FOUNDATION 2600 FERNBROOK LANE, STE 119 MINNEAPOLIS, MN 55447	NONE FOR RESEARCH TO FIND A CURE FOR ATAXIA	PUBLIC	4,000.
WILSON BOOKS FROM BIRTH 149 PUBLIC SQUARE LEBANON, TN 37087	NONE PROVIDE BOOKS FOR YOUNG CHILDREN IN WILSON COUNTY	PUBLIC	2,000.

THÈ EVELYN S. & JIM HORNE HANKI	NS FND.		62-1549282
WILSON COUNTY COMMUNITY HELP CENTER 203 WEST HIGH BYPASS LEBANON, TN 37087	NONE ASSIST NEEDY FAMILIES IN WILSON COUNTY	PUBLIC	2,500.
KENTUCKY-TENNESSEE KIWANIS DISTRICT FOUNDATION 1035 STRADER DRIVE SUITE 150-1 LEXINGTON, KY 40505	NONE SUPPORT COLLEGE SCHOLARSHIPS	PUBLIC	1,000.
KIWANIS INTERNATIONAL FOUNDATION 3636 WOODVIEW TRACE INDIANAPOLIS, IN 46268	NONE SUPPORT THEIR ELIMINATE PROJECT	PUBLIC	1,000.
KIWANIS CLUB OF LEBANON FOUNDATION P O BOX 281 LEBANON, TN 37088-0281	NONE ASSIST CHILDREN AND YOUTH OF WILSON COUNTY	PUBLIC	1,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		29,000.

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JIM HORNE & EVELYN S HANKINS FOU BRENDA HANKINS CALLIS P O BOX 218 LEBANON TN 37088

POLLO GROUP INC CL A / 037604105

ARD C R INC / 067383109

IOGEN IDEC INC / 09062X103

11/11/10

02/10/10

06/10/10

10/15/10

12/10/09

01/14/10

01/14/10

02/10/10

Customer Service 901-818-6000

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335.22 f

830 48 f

601 43 f

1,494 85 f

2,325.33

-115 35

-16 60

-58 84

28 19

	Additio	onal Informati	on	Amount
This detail	I information is not reported to	the IRS. It may assist	you in tax return preparation	
count Fees				2,683 25
ort-Term Realized Gain/Loss .				3,605 42
ng-Term Realized Gain/Loss		·		-131 13
Detail Information	Ac	count Fees		
escription			Date	Amoun
This detail	information is not reported to	the IRS It may assist	you in tax return preparation	
ANAGEMENT FEE			01/11/10	662 70
ANAGEMENT FEE			04/09/10	753 95
ANAGEMENT FEE Q2			07/12/10	754 63
NAGEMENT FEE Q1			08/16/10	678 48
NAGEMENT FEE Q2			08/16/10	678 18
NAGEMENT FEE Q1			08/16/10	-753 95
NAGEMENT FEE Q2			08/16/10	-754 63
NAGEMENT FEE Q3			10/19/10	663 89
			Total Account Fees	2,683.25
etail Information	Short-Term	Realized Gair	n/Loss	
escription/CUSIP	Quantity	Proceeds	Cost Basis	Gain/Loss(-)
			all adjustments necessary for tax reports	
This detail	information is not reported to t	he IRS It may assist	you in tax return preparation	VI F
ETNA INC NEW COM / 00817Y108	•	-	·	
10/14/09 03/10/10	11 000	349 36	287 43 f	61 93
NALOG DEVICES INC / 032654105				
12/10/09 01/14/10	54 000	1,586 49	1,642 12 f	-55 63

219 87

813 88

1,436 01

2,249.89

629 62

6 000

10 000

18 000

USD Subtotal

11 000

2010 Supplemental Information						
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ЛМ HORNE & EVELYN S HANKINS FOU BRENDA HANKINS CALLIS P O BOX 218 I FBANON 1N 37088

Customer Service 901-818-6000

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Detail Information		Short-Term I	Realized Gain/L	oss		
Description/CUSIP Date Acquired	Date Sold	Quantity	Proceeds	Cost Basis		Camil and
		d holding period information rej				Gain/Loss(-
200. 220.0,		nformation is not reported to th				ing purposes
BRISTOL MYERS SO	QUIBB / 110122108		, ,	, ,		
05/19/09	02/10/10	17 000	407 69	346 97	7 f	60 72
05/13/10	09/10/10	11 000	297 01	264 63) f	32 38
		USD Subtotai	704.70	611.60)	
C H ROBINSON WO	RLDWIDE INC COM NE	W / 12541W209				
12/10/09	09/10/10	12 000	809 86	690 96	i f	118 90
CIGNA CORP / 12550	09109					
03/10/10	08/12/10	50 000	1,666 47	1,722 50	f	-56 03
COACH INC / 189754	1104					
02/10/10	10/15/10	15 000	669 09	521 55	f	147 54
COGNIZANT TECH S	SOLUTIONS CORP / 192	2446102				
09/11/09	08/12/10	20 000	1,177 38	740 71	f	436 67
CONOCOPHILLIPS /	20825C104					
10/22/09	08/12/10	20 000	1,106 58	1,054 79	f	51 79
10/22/09	10/15/10	19 000	1,150 62	1,002 04	f	148 58
		USD Subtotal	2,257.20	2,056.83		
DIRECTV COM CL A	/ 25490A101					
12/10/09	11/11/10	12 000	515 89	393 46	f	122 43
EMCCORPMASS/	268648102					
various	01/14/10	143 000	2,572 77	2,282 99	f	289 78
06/10/10	08/12/10	28 000	522 33	512 40	f	9 93
06/10/10	12/13/10	143 000	3,255 79	2,616 90	f	638 89
		USD Subtotal	6,350.89	5,412.29		
EQUITY RESIDENTIA	L / 29476L107					
01/14/10	07/15/10	12 000	534 35	402 60	f	131 75
GOLDMAN SACHS GI	ROUP INC / 38141G104					
07/13/09	06/10/10	2 000	265 03	298 30	f	-33 27
HOST HOTELS & RES	SORTS INC COM / 4410	7P104				33 _,
12/21/09	02/10/10	2 000	21 84	20 92	f	0 92
HUDSON CITY BANC	ORP INC / 443683107					
07/15/10	11/11/10	127 000	1,482 14	1,612 73	ſ	-130 59
LLINOIS TOOL WORI	KS / 452308109					
06/10/10	10/15/10	11 000	536 80	490 53	f	46 27
various	11/11/10	62 000	2,966 04	2,764 49		201 55
		USD Subtotal	3,502.84	3,255.02		231 00
NTEL CORP / 458140	100			.,		
01/14/10	06/10/10	184 000	3,755 60	3,919 20	f	-163 60
			•	-, 3 20	•	.55 00

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JIM HORNE & EVELYN S HANKINS FOU BRENDA HANKINS CALLIS P O BOX 218 LEBANON TN 37088

Customer Service 901-818-6000

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Detail Information		Short-Term Realized Gain/Loss				
escription/CUSIP						
ate Acquired	Date Sold	Quantity	Proceeds	Cost Basis		Gain/Loss(-)
Cost basis, re	alized gain and loss, and ho	iding period information rep mation is not reported to th	orted may not reflect all a	adjustments necessary in tax return preparation	for tax report	ing purposes
NTERCONTINENTAL	LEXCH INC / 45865V100	mason is not reported to th	e mo may assist you	iii tax returri preparatio	•	
07/13/09	06/10/10	2.000	234 59	175 57	f	59 02
IASTERCARD INC	L A / 57636Q104					
11/12/09	02/10/10	8 000	1,816 88	1,909 35	f	-92 47
Wash Sale Disallowe	ed Loss		0 00	-92 47		92 47
12/10/09 §§	09/10/10	3 000	588 08	784 90	f	-196 82
		USD Subtotal	2,404.96	2,601.78		
IEDCO HEALTH SOI	LUTIONS INC / 58405U102					
12/10/09	01/14/10	21 000	1,392 35	1,362 17	f	30 18
ICROSOFT CORP /	594918104					
02/10/10	03/10/10	34 000	986 34	954 33	f	32 01
URPHY OIL CORP /	626717102					
01/14/10	02/10/10	31 000	1,585 46	1,780 02	f	-194 56
II HLDGS INC NEW	/ 62913F201					
06/12/09	06/10/10	2 000	73 86	41 90	f	31 96
EPSICO INC / 71344	8108					
O3/10/10	06/10/10	8 000	507 99	515 60	f	-7 61
FIZER INC / 7170811	03					
/arious	05/13/10	93 000	1,542 90	1,633 44	f	-90 54
SICELINE COM INC	COM NEW / 741503403					
)5/13/10	09/10/10	1 000	324 41	215 26	f	109 15
)5/13/10	10/15/10	2 000	705 38	430 52	f	274 86
		USD Subtotal	1,029.79	645.78		
JALCOMM INC / 747	525103					
arious /	06/10/10	30 000	1,033 81	1,258 67	f	-224 86
OCKWELL COLLINS	INC / 774341101					
arious	02/10/10	34 000	1,797 55	1,252 69	f	544 86
HLUMBERGER LIM	ITED COM STK USD0 01 /	806857108				
arious	09/10/10	32 000	1,903 67	2,052 86	f	-149 19
XAS INSTRUMENT	S INC / 882508104					
16/10/10	11/11/10	130 000	3,991 00	3,162.96	f	828 04
IERMO FISHER SCI	ENTIFIC INC / 883556102					
1/14/09	01/14/10	28 000	1,358 89	1,024 93	f	333 96
IITED TECHNOLOG	IES CORP / 913017109					
8/13/09	06/10/10	17 000	1,102 88	971 38	f	-131 50
O ENERGY INC EXC	CHANGED FOR 7098 / 983	385X106				
arious	01/14/10	19 000	905 53	710 38	f	195 15
				÷		

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JIM HORNE & EVELYN S HANKINS FOU BRENDA HANKINS CALI IS P O BOX 218 LEBANON IN 37088

Customer Service 901-818-6000

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Short-Term Realized Gain/Loss

Description/CUSIP

Date Acquired Date Sold

Quantity

Proceeds

Cost Basi

Gain/Loss(-)

Cost basis, realized gain and loss, and holding period information reported may not reflect all adjustments necessary for tax reporting purposes

This detail information is not reported to the IRS It may assist you in tax return preparation

Short-Term Realized Gain

5,149 01

Short-Term Realized Loss

-1,636 06

Short-Term Realized Disallowed Loss

92 47

Total Short-Term Realized Gain/Loss

3,605.42

§§ - Adjusted due to previous wash sale disallowed loss

f - FIFO (First-in, First-out)

Amortization, accretion, and similar adjustments to cost basis are not provided for short-term instruments, unit investment trusts, or securities of foreign issuers

Detail Information		Long-Term I	Realized Gain/L	oss		
Description/CUSIP Date Acquired	Date Sold	Quantity	Proceeds	Cost Basis		Gain/Loss(-
Cost basis, realize		olding period information rep ormation is not reported to th				ng purposes
AFLAC INC / 001055102 01/28/09	10/15/10	38 000	2,053 89	955 58		1,098 31
AOL INC COM USD0 01 / various	00184X105 01/14/10	3 999	103 51	137 94	f	-34 43
AETNA INC NEW COM / 09/26/08	00817Y108 03/10/10	58 000	1,842 05	2,241 40	f	-399 35
ALLERGAN INC / 018490 04/17/09	102 07/15/10	28 000	1,829 93	1,393 47	f	436 46
ALLSTATE CORP / 02000 various	02101 12/13/10	68 000	2,115 75	1,879 76	f	235 99
APOLLO GROUP INC CL 07/13/09	A / 037604105 11/11/10	19 000	696 24	1,238 54	f	-542 30
APPLE INC / 037833100 04/21/06	07/15/10	3 000	754 78	202 93	f	551 85
BAXTER INTL INC / 0718 ⁻ 07/13/09	13109 11/11/10	36 000	1,868 82	1,937 52	f	-68 70
BOEING CO / 097023105 10/31/07	03/10/10	8 000	563 43	782 20	f	-218 77
various	04/15/10	38 000	2,743 36	3,443 48	•	-700 12
		USD Subtotal	3,306.79	4,225.68		
BRISTOL MYERS SQUIBE 11/14/08	3 / 110122108 02/10/10	66 000	1,582 80	1,295 58	f	287 22

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JIM HORNE & EVELYN S HANKINS FOU BRENDA HANKINS CALLIS P O BOX 218 LEBANON TN 37088

Customer Service 901-818-6000

CORRECTED 03/01/2011 C=CORRECTED

Detail Information		Long-Term Realized Gain/Loss				
Description/CUSIP Date Acquired	Date Sold	Quantity	Proceeds	Cost Basis		Gain/Loss(-)
Cost basis, realize	ed gain and loss, and holding This detail informati	period information rep on is not reported to the	orted may not reflect all e IRS It may assist you	adjustments necessary ın tax return preparation	for tax repon	ting purposes
CATERPILLAR INC / 1491		,	•			
02/22/05	04/15/10	10 000	683 78	449 20	f	234 58
various	07/15/10	6 000	396 47	284 11		112 36
01/19/07	09/10/10	6 000	425 63	357 06		68 57
various	10/15/10	5 000	397 24	307 64	f	89 60
		USD Subtotal	1,903.12	1,398.01		
CHESAPEAKE ENERGY	CORPORATION OKLAHON	MA / 165167107 26 000	548 69	1,236 97	f	-688 28
08/20/08	10/15/10	48 000	1,098 41	2.283 65		-1.185 24
00/20/08	10/13/10	USD Subtotal	1.647.10	3,520.62	•	1,700 = 1
		OSD Subtotal	1,047.10	0,020.02		
CHEVRON CORP NEW / 03/16/04	166764100 09/10/10	7 000	548 86	307 68	f	241 18
COACH INC / 189754104 various	10/15/10	35 000	1,561 23	953 04	f	608 19
COMCAST CORP NEW C						C4 50
06/17/05	09/10/10	21 000	384 38	445 90	ī	-61 52
DOW CHEMICAL CO / 26				200.00		132 15
11/14/08	04/15/10	14 000	440 15	308 00		132 13
11/14/08	10/15/10	19 000	556 78	418 00	1	130 70
		USD Subtotal	996.93	726.00		
EL PASO CORP COM / 28 09/20/07	3336L109 03/10/10	33 000	374 88	569 15	f	-194 27
various	07/15/10	190 000	2.348 36	2,821 19	f	-472 83
74.1045	J. 10.10	USD Subtotal	2,723.24	3,390.34		
EQUITY RESIDENTIAL / 2	004761407					
04/17/09	05/13/10	10 000	473 19	222 50	f	250 69
04/17/09	07/15/10	23.000	1,024 17	511 75	f	512 42
		USD Subtotal	1,497.36	734.25		
EXPEDIA INC DEL COM / 06/18/08	30212P105 05/13/10	64 000	1,507 18	1,321 62	f	185 56
GENZYME CORP COM FO	ORMERLY COM-GEN DIV 1 01/14/10	TO / 372917104 29 000	1,550 90	1,414 69	f	136 21
GOLDMAN SACHS GROU 07/13/09	JP INC / 38141G104 10/15/10	2 000	303 13	298 30	f	4 83
HOST HOTELS & RESOR 02/13/08	TS INC COM / 44107P104 02/10/10	108.000	1,179 38	1,870 71	f	-691 33

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JIM HORNE & EVELYN S HANKINS FOU BRENDA HANKINS CALI IS P O BOX 218 LEBANON 1N 37088

Customer Service 901-818-6000

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Detail Information		Long-Term I	Realized Gain/L	oss		
Description/CUSIP Date Acquired	Date Sold	Quantity	Proceeds	Cost Basis		Gain/Loss(-)
Cost basis, rea	lized gain and loss, and ho This detail infor	lding period information rep mation is not reported to th	oorted may not reflect all a e IRS - It may assist you	adjustments necessary ın tax return preparatio	for tax reports	ng purposes
JOHNSON & JOHNSO 05/13/04	N / 478160104 12/13/10	9 000	556 19	493 67	f	62 52
KIMBERLY CLARK CO various	RP / 494368103 11/11/10	38 000	2,360 92	2,223 68	f	137 24
LOWES COMPANIES A	/ 548661107 07/15/10	64 000	1,330 53	1,350 32	f	-19 79
MCKESSON CORP / 5 11/14/08	8155Q103 06/10/10	8 000	554 39	282 73	f	271 66
MICROSOFT CORP / 5 03/16/04	594918104 03/10/10	183 000	5,308.84	4,629 90	f	678 94
MORGAN STANLEY / 6 various	517446448 11/11/10	18 000	476 30	924 97	f	-448 67
NII HLDGS INC NEW / various	62913F201 03/10/10	10 000	399 69	762 24	f	-362 55
01/15/08	06/10/10	10 000 USD Subtotal	369 29 768.98	474 43 1,236.67	f	-105 14
NATIONAL OILWELL V 03/20/07	ARCO INC / 637071101 11/11/10	11 000	654 81	418 84	f	235 97
IEXEN INC COM NPV 09/26/08	ISIN #CA65334H1029 / 65 01/14/10	334H102 64 000	1,495 46	1,551 23	f	-55 77
ORFOLK SOUTHERN 08/23/06	CRP / 655844108 05/13/10	8 000	480 07	341 46	f	138 61
various	09/10/10	34 000	1,989 82	1,417 64	f	572 18
		USD Subtotal	2,469.89	1,759.10		
RACLE CORPORATIO	ON / 68389X105 10/15/10	19 000	545 23	221 35	f	323 88
03/16/04	12/13/10	24 000 USD Subtotal	727 05 1,272.28	279 60 500.95	f	447 45
EPSICO INC / 7134481 various	08 06/10/10	53 000	3,365 44	3,400 81	f	-35 37
FIZER INC / 717081103 01/14/09	3 04/15/10	35.000	594 63	601 83	f	-7 20
01/14/09	05/13/10	35 000 USD Subtotal	580 66 1,175.29	601 82 1,203.65		-21 16

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JIM HORNE & EVELYN S HANKINS FOU BRENDA HANKINS CALLIS P O BOX 218 LEBANON TN 37088

Customer Service 901-818-6000

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Petail Information		Long-Term F	Realized Gair	n/Loss	
escription/CUSIP	Date Sold	Quantity	Proceeds	Cost Basis	Gain/Loss(-)
Cost basis, realize				t all adjustments necessary for tax rep you in tax return preparation	orting purposes
ROCTER & GAMBLE CO various	0 / 742718109 03/10/10	10 000	630 89	572 81 f	58 08
various	08/12/10	10 000	599 83	662 03 f	-62 20
10/31/07	10/15/10	7 000	438 12	486 35 f	-48 23
		USD Subtotal	1,668.84	1,721.19	•
UALCOMM INC / 747525 various	103 06/10/10	62 000	2,136 53	2,728 41 f	-591 88
FATE STREET CORP / 8 various	357477103 06/10/10	48 000	1,774 69	2,933 33 f	-1,158 64
ME WARNER INC NEW /arious	COM NEW / 887317303 04/15/10	43.999	1,451 60	1,966 36 f	-514 76
ME WARNER CABLE IN 32/14/07	C COM / 88732J207 09/10/10	7 000	389 05	455 84 f	-66 79
NITED TECHNOLOGIES /arious	CORP / 913017109 06/10/10	28 000	1,816 51	1,882 61 f	-66 10
O ENERGY INC EXCHA	NGED FOR 7098 / 98385 01/14/10	5X106 32 000	1,525 10	1,086 32 f	438 78
				Long-Term Realized Gain	9,091 76
				Long-Term Realized Loss	-9,222 89
			Lon	g-Term Realized Disallowed Loss	0 00
			Total 1	Long-Term Realized Gain/Loss	-131.13

FIFO (First-in, First-out)

nortization, accretion, and similar adjustments to cost basis are not provided for short-term instruments, unit investment trusts, or securities of foreign issuers