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EXTENDED RETURN

Form **990-PF**

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052 2010

For calendar year 2010, or tax year beginning and ending Initial return Final return G Check all that apply: Initial return of a former public charity Amended return Address change Name change Name of foundation A Employer identification number THE TULLY-GRAVES FOUNDATION 62-6356784 Room/suite Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number 901-491-0191 257 SOUTH BELVEDERE BOULEVARD City or town, state, and ZIP code C If exemption application is pending, check here TN D 1. Foreign organizations, check here MEMPHIS, 38104 Foreign organizations meeting the 85% test, check here and attach computation Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year | J Accounting method: under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) F If the foundation is in a 60-month termination 1,904,237. (Part I, column (d) must be on cash basis.) ▶\$ under section 507(b)(1)(B), check here Analysis of Revenue and Expenses (d) Disbursements Part I (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) r charitable purposes (cash basis only) ıncome expenses per books income N/A Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch'B 436 8 Interest on savings and temporary cash investments 38 38 STATEMENT 🤊 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 2 11 121 3 12.83 0 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 133° b Less Cost of a Ñ c Gross profit o 11 Other income 38 38 Total. Add lines 1 0. 3,000 0 Compensation of officers dy Clps (fus less, etc.] 14 Other employee salaries 15 Pension plans, employee benefits 16a Legal fees 3,510. 3,510 0 **b** Accounting fees STMT 6,500 3 0. c Other professional fees 6,500. STMT and Administrative 17 Interest 216. 0. 18 Taxes STMT 4 1,264 0 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 1,385. 0 STMT 5 385 23 Other expenses 24 Total operating and administrative 11,395. 0 15,875 expenses. Add lines 13 through 23 ~ ; . 100. 1,100 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. <u>16,975</u> 0 Add lines 24 and 25 27 Subtract line 26 from line 12: <16,937 8 Excess of revenue over expenses and disbursements 38 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) Form **990-PF** (2010) 023501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

₽.	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	of year
<u> </u>		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	79,026.	63,353.	63,353.
	2	Savings and temporary cash investments			
	3	Accounts receivable -	333 344	13 13 1 4/3	13 41
		Less: allowance for doubtful accounts			
	4	Pledges receivable	感激 (4 / 4 / 4 / 6 / 4 / 4 / 4 / 4 / 4 / 4 / 	(%) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	30, 45, 70, 50
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons		<u> </u>	
	7	Other notes and loans receivable		\$ 377 7 7	
		Less: allowance for doubtful accounts		<u> </u>	
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ÿ	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	11.	/ **	11. 52. 7.
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ►46,172.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	17.7.7.	3478, 206 75
		Less accumulated depreciation STMT 6 > 41,448.	5,988.	4,724.	4,724.
	15	Other assets (describe ► ART COLLECTION)	1,110,404.	1,110,404.	
	16	Total assets (to be completed by all filers)	1,195,418.	1,178,481.	1,904,237.
	17	Accounts payable and accrued expenses		T	
	18	Grants payable			
S	19	Deferred revenue			Property of the
≝	20	Loans from officers, directors, trustees, and other disqualified persons			BOOK SOUTH STORY
Liabilities	21	Mortgages and other notes payable			
=	22	Other liabilities (describe >			
					1 . 77 3 4.1
_	23	Total liabilities (add lines 17 through 22)	0.	0.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
		Foundations that follow SFAS 117, check here			
	İ	and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			医乳头 医外丛
a	25	Temporarily restricted			
Ba	26	Permanently restricted			
בַ	Ì	Foundations that do not follow SFAS 117, check here	ì		
Ę		and complete lines 27 through 31.			
Net Assets or Fund Baland	27	Capital stock, trust principal, or current funds	894,627.	894,627.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	. 0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	300,791.	283,854.	
Š	30	Total net assets or fund balances	1,195,418.	1,178,481.	
_		·			
	31	Total liabilities and net assets/fund balances	1,195,418.	1,178,481.	
<u></u>					
<u> </u>	art	III: Analysis of Changes in Net Assets or Fund B	aid11003		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	T.	
		st agree with end-of-year figure reported on prior year's return)		1	1,195,418.
		r amount from Part I, line 27a		2	<16,937.>
		r increases not included in line 2 (itemize)	•	3	0.
		fines 1, 2, and 3		4	1,178,481.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,178,481.

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Part IV Capital Gains	TULLY-GRAVES FOR and Losses for Tax on In	vestment	Income	Lac - '-			62-635	V / V Z	Page 3
	cribe the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs.			(b) H	ow acquired Purchase Donation		te acquired , day, yr.)	(d) Date (mo., da	
1a									
b NO)NE			ļ					
<u>C</u>	 			-		-			
<u>d</u> e	· · · · · · · · · · · · · · · · · · ·			-		_			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale		~		Gain or (loss) lus (f) minus (
8									
<u>b</u>							<u> </u>		
<u>c</u>				+	-				
е									
	ng gain in column (h) and owned by t	he foundation	on 12/31/69		· · · · · · · · ·	(I) Gains	(Col. (h) gain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ֈ), ıf any		c	ol. (k), bu Losse	it not less than es (from col. (1 -0-) or h))	
8				_					
<u>b</u>									
d d				-					
e									·
2 Capital gain net income or (net continue)	(((((ın Part I, line	7 7	}	2				
3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8		d (6):		}	3				
Part V Qualification U	Inder Section 4940(e) for	Reduced	Tax on Net	Inve	stment In	come			
(For optional use by domestic privat	e foundations subject to the section 4	940(a) tax on	net investment in	ncome.)				
If section 4940(d)(2) applies, leave t	this part blank.								
	ction 4942 tax on the distributable ami		•	riod?				Yes	X No
	each column for each year; see instru			es.					
(a) Base period years Calendar year (or tax year beginn	ing in) Adjusted qualifying dist	ributions	Net value of no	(c) onchari	able-use asse	ts	Distrib (col. (b) div	(d) ution ratio ided by col. ((c))
2009		2,071.			$\frac{114,31}{122,52}$				05597
2008		7,583.			128,63				36692 L4509
2007 2006		7,320. 9,274.			220,59 244,84				78718
2005		5,278.	-		289,39				9834
2 Total of line 1, column (d)						2		.93	33861
3 Average distribution ratio for the the foundation has been in existe	5-year base period - divide the total o ence if less than 5 years	in line 2 by 5,	or by the number	of yea	rs	3		.18	36772
4 Enter the net value of noncharital	ble-use assets for 2010 from Part X, i	ine 5				4	1	70,	,001
5 Multiply line 4 by line 3						5		13_	074
6 Enter 1% of net investment incor	me (1% of Part I, line 27b)					6	<u> </u>		0
7 Add lines 5 and 6						7	 -		,074
8 Enter qualifying distributions from	•	1h and com-	lete that part year	ng a 10/	tay rate	8		12	,495
See the Part VI instructions.	n line 7, check the box in Part VI, line	io, and comp	ioto tilat part usiii	.y a 1/0	warate.				

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see i	nstru	ction	ıs)
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)	1 , ,	× `	,	-	` `
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨	1				<u>1.</u>
	of Part I, line 27b	3	3 0	\$ \\\	Ć.,	3.5
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	200		<u> </u>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	(4)
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	<u> </u>			<u>0.</u>
3	Add lines 1 and 2	3				1.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<u> </u>			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	ļ.,			<u>1.</u>
6	Credits/Payments:	1983	1000		2,6,4 . 6	(20)
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a		[·	, , ,	`,	``
b	Exempt foreign organizations - tax withheld at source	1, 400	5 3	2, 5,		44
C	Tax paid with application for extension of time to file (Form 8868)		1			',,,
đ	Backup withholding erroneously withheld . 6d .	→ ¬-	1 m. 3		_ ', '	· ```
7	Total credits and payments. Add lines 6a through 6d	7	<u> </u>			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	<u> </u>			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<u> </u>			1.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	ļ			
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	11	<u> </u>			
	rt VII-A: Statements Regarding Activities					NI.
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervel	ne in			res	No
	any political campaign?			1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			16		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or			· `.	タ ト リハイご
	distributed by the foundation in connection with the activities.			127	-`	l
	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:			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	₹ 	2.0
	(1) On the foundation. \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u>•</u>		*","	?	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					175.
_	managers. > \$ 0.			2	, ->	x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			\ <u>-</u>	72, 1	
•	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	٥r		128	*	1
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	, vi		3	``, *5	x
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	1/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_	.,	5		X
Ū	If "Yes," attach the statement required by General Instruction T.			1980 A	4 3	, 3°
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1976	1 18	135.19
•	By language in the governing instrument, or			150	2.15	1. 14. 16. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st	ate law			\$ 6	(1)
	remain in the governing instrument?			6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			, ,	. ·	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1 4.1	1	13
	TN			134	•	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			₹. `	(4)	- ,
	of each state as required by General Instruction G? If "No," attach explanation			86	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for c	alendar		1	35	`
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? Heave a stack a schedule listing their names and addresses			10	1	X

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orm 990-PF (2010) THE TULLY-GRAVES FOUNDAT			<u>62-63567</u>	84 Page 6
Part VII-B Statements Regarding Activities for Which F	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				7.
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	别 1. /
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,	İ	* · · /
any voter registration drive?		☐ Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	T Ye	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)?		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational ourooses, or t		\	
the prevention of cruelty to children or animals?	or odda.co.a. pa. podos, or		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uno	fer the excentions described i		· ·	
section 53.4945 or in a current notice regarding disaster assistance (see instru		,		5b '
Organizations relying on a current notice regarding disaster assistance check h				7 7 20
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined		
expenditure responsibility for the grant?		I/A 🔲 Ye	s No	4 3 1
If "Yes," attach the statement required by Regulations section 53.4945		./21	,	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			1	
a personal benefit contract?	pay premiums on	□ v _e	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arconal hanafit contract?	۰۰ ـــــ	1-	66 Х
If "Yes" to 6b, file Form 8870.	ersonal penetic contract.			2
7a At any time during the tax year, was the foundation a party to a prohibited tax s	haltar transaction?	□ v _e	s X No	
 b. If "Yes," did the foundation receive any proceeds or have any net income attribute. 		۱۰ نـــــا		7b
Information About Officers Directors Tweet		nagers Highly		70
Part VIII Paid Employees, and Contractors	ses, roundation ma	magers, riigini	,	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	and deferred compensation	account, other allowances
PARNELL S. LEWIS, JR	to position TRUSTEE	`enter'-0-)	compensation	allowalices
PARNELL S. LEWIS, JR 257 SOUTH BELVEDERE BLVD	IKOSIEE			
MEMPHIS, TN 38104	2.00	3,000.	0.	0.
MEMPHIS, IN SOIV4	2.00	3,000.		<u></u>
				1
				
	<u> </u>			
				
-				
Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "		<u> </u>
Compensation of the highest-paid employees (other than those inc		enter NONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
NOVE	devoted to position		compensation	allowances
NONE				
		 		
				
		 		
				
		<u> </u>		
-			•	
· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	<u> </u>	L
Total number of other employees paid over \$50,000				0
			Form	990-PF (2010)

Total, Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fo	undations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	TST	
a	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	71,067.
	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	71,067.
e	Reduction claimed for blockage or other factors reported on lines 1a and	14.	
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	71,067.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,066.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	70,001.
6	Minimum investment return. Enter 5% of line 5	6	3,500.
P	art XI. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here and do not complete this part.)	and certain	
1	Mınımum investment return from Part X, line 6	1	3,500.
2a	Tax on investment income for 2010 from Part VI, line 5	• /- /-	
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,499.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,499.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,499 <u>.</u>
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	126	
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	12,495.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	X::24	
8	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	12,495.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,495.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	n qualifies for	the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

• • • • • • • • • • • • • • • • • • • •	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7			· ·	3,499.
2 Undistributed income, if any, as of the end of 2010	S. 81/2		, , ,	, , , ,
a Enter amount for 2009 only	N. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		0.	· 25 () () () () () () ()
b Total for prior years:		0.		The Aller
3 Excess distributions carryover, if any, to 2010:	, , , , , , , , , , , , , , , , , , , ,	<i>"</i>		1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a From 2005 100, 808.	, , , , ,	, ,	`	, ,
b From 2006 7,148.	,			
c From 2007 36,431.				
dFrom 2008 11,216.			2 2 2	17 6 13 S
e From 2009 6, 403.			1 1 1	13 Sept 14 38
f Total of lines 3a through e	162,006.	; (; (; (;)) y ;		
4 Qualifying distributions for 2010 from		, ,		1 1 1 2 1
Part XII, line 4: ▶\$ 12,495.		, *		, ,
a Applied to 2009, but not more than line 2a	換えてきない か		0.	1, 1/2 × 1
b Applied to undistributed income of prior	G 3374 1			
years (Election required - see instructions)	Similar Co	0.		32 3 3 3 3 3 5 4 4 3 3 3 3 4 4 4 4 3 3 3 4 4 4 4
c Treated as distributions out of corpus		/		
(Election required - see instructions)	0.	,	· · · · · · · · · · · · · · · · · · ·	**************************************
d Applied to 2010 distributable amount				3,499.
e Remaining amount distributed out of corpus	8,996.	, , , , , , , , , , , , , , , , , , , ,		
5 Excess distributions carryover applied to 2010	0.	<u> </u>	, , , , , , , , , , , , , , , , , , ,	0.
(If an amount appears in column (d), the same amount must be shown in column (a))	(, ,	,	,	
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	171,002.	は、グムニア	, , , , , , , , , , , , , , , , , , ,	5 10 45 XX
b Prior years' undistributed income. Subtract				
line 4b from line 2b	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.	1	4343
c Enter the amount of prior years'	131-361		, ,	1000 3000 0000
undistributed income for which a notice of			`` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	154 2007
deficiency has been issued, or on which the section 4942(a) tax has been previously			15 1 - M & V	
assessed	(2) (2) (2)	0.	A - 40 - 50	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
d Subtract line 6c from line 6b. Taxable	THE STATE OF THE S			
amount - see instructions	(1/2)	0.	2.95 / 2 5 5 5	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
e Undistributed income for 2009. Subtract line		413 / 1 ·	0.	
4a from line 2a. Taxable amount - see instr.	, XX , X	, , ,	<u> </u>	<u> </u>
f Undistributed income for 2010. Subtract		- 1	, ,	
lines 4d and 5 from line 1. This amount must		٦	,	0.
be distributed in 2011 7 Amounts treated as distributions out of	· \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,	,	V 285
corpus to satisfy requirements imposed by			`	
	0.		*	
section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2005	<u>.</u>			· ·
not applied on line 5 or line 7	100,808.			
9 Excess distributions carryover to 2011.	100,000	,		1 1
Subtract lines 7 and 8 from line 6a	70,194.			, , , , ,
10 Analysis of line 9:		,		2 1/3
a Excess from 2006 7,148.		1		1
b Excess from 2007 36, 431.	1 1/2 1/2004	, , ,		1, 1, 1,1" 1,
c Excess from 2008 11, 216.	1275/34	,	,	
d Excess from 2009 6, 403.	1', '			'
e Excess from 2010 8,996.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>		1 2 2
				Form 990-PF (2010)

Part XIV Private Operating F	oundations (see ins	structions and Part VI	I-A, question 9)	N/A	0350764 Tage
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2010, enter the date of t	he ruling	>		
b Check box to indicate whether the found	dation is a private operatir	ng foundation described	in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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			<u> </u>	·	
used directly for active conduct of					
exempt activities					
•					
e Qualifying distributions made directly	[ĺ	
for active conduct of exempt activities.					Ì
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			ļ	 	
alternative test relied upon:					
a "Assets" alternative test - enter:	ļ				
(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	1				
shown in Part X, line 6 for each year listed				Ī	
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,				İ	
dividends, rents, payments on			1	1	
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 Info	rmation (Comple	to this part only	if the foundation	n had \$5,000 or	more in assets
at any time during			ii tile loulluatio	11 11aa 40,000 01	more in assets
1 Information Regarding Foundation					
a List any managers of the foundation wh	•	than 2% of the total con	tributions received by th	e foundation before th	e close of any tax
year (but only if they have contributed i					o orogo or arry rarr
NONE					
b List any managers of the foundation wh			(or an equally large port	ion of the ownership o	of a partnership or
other entity) of which the foundation ha	is a 10% or greater interes	St.			
NONE					
2 Information Regarding Contribut					
Check here ► X if the foundation of					
the foundation makes gifts, grants, etc.	```		· · · · · · · · · · · · · · · · · · ·	complete items 2a, b, c	c, and d.
a The name, address, and telephone num	iber of the person to whor	n applications should be	addressed:		
N/A					
				·	
b The form in which applications should N/A	be submitted and informat	tion and materials they s	hould include:		
c Any submission deadlines:					··· <u>·</u> ··
N/A					
d Any restrictions or limitations on award	e such as hy geographic	al areas, charitable fields	kinds of institutions or	other factors:	
N/A	o, audit as by geographica	a arvas, criarravie lielus,	, amus oi msuaduns, Ui	oator tuotoro.	
					000 DE
023601 12-07-10					Form 990-PF (2010

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year 100. TIGER SCHOLARSHIP FUND PUBLIC TO PROVIDE 119 ATHLETIC OFFICE CHARITY SCHOLARSHIPS MEMPHIS, TN BUILDING 38152 MCNAIRY COUNTY PUBLIC 1,000. TO PROVIDE BOOKS TO IMAGINATION LIBRARY CHARITY CHILDREN PO BOX 391 SELMER, TN 38375 **▶** 3a 1,100. Tota! b Approved for future payment NONE 0. Total

023611 12-07-10

Part XVI-A	Analysis of Income-Producing	Activities

nter gross amounts unless otherwise indicated.	Unrelated	business income		ided by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
c	1 1				
d					
e	l l				
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	38.	
Dividends and interest from securities					
Net rental income or (loss) from real estate:	, .	S	1.	2 6 1 3	12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income			T-		
Gain or (loss) from sales of assets other					
than inventory			1		
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a			1		
b					
c	1 1				
d	1		1		
e					
Subtotal. Add columns (b), (d), and (e)	\$4.5	0		38.	0
Total. Add line 12, columns (b), (d), and (e)	<u></u>			13	38
See worksheet in line 13 instructions to verify calculations	.)			_	
Part XVI-B Relationship of Activities	·	mplichment of E		t Purposes	
Telationship of Activities	s to the Acco	inpusiment of E	yemh	t ruiposes	
ine No. Explain below how each activity for which ii			A contril	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other the foundation)	nan by providing fun	ds for such purposes).			
N/A					
					
	·				
 					
					· · · · · · · · · · · · · · · · · · ·

Form 990-PF (2		ULLY-GRAV						635678		age 13
Part XVII	」 Information Re Exempt Qrgan		isfers To	and Transactions	and Rela	ations	hips With No	ncharitab	le	
	rganization directly or indi (other than section 501(c	rectly engage in any				d in secti	on 501(c) of	()	Yes	No
	from the reporting found				,			2 m		14
(1) Cash								1a(1	1	X
(2) Other								1a(2	<u>}</u>	X
b Other tran			•					355	.) 	
	s of assets to a noncharita							1b(1		X
	hases of assets from a no al of facilities, equipment,		organization				•	1b(2 1b(3		X
* -	ibursement arrangements							1b(4		X
	s or loan guarantees	•						1b(5		X
	ormance of services or me	embership or fundra	ising solicitation	ons				1b(6		X
	of facilities, equipment, ma							10		X
or service column (c	wer to any of the above is is given by the reporting f if) the value of the goods,	oundation. If the fou other assets, or ser	indation receiv vices received.	ed less than fair market v	alue in any tra	ansaction	or sharing arrange	ement, show in		
(a) Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) c	Description	of transfers, transacti	ons, and sharing	arrangem	ents
			N/A				 			
	 - · · ·	ļ		·						
		 		· ····································						
					 					
		ļ. ———								
	·									
	 	-								
· 		 								
		-			_					
		 								
in section	ndation directly or indirect 501(c) of the Code (othe omplete the following sch	r than section 501(c	•	· -	anizations des	scribed		Ye	s 🔯	No.
<u> </u>	(a) Name of org			(b) Type of organization	n j		(c) Description of r	elationship		
	N/A									
		<u></u>								
				<u> </u>						
Sign Here	er penalties of perjury, I declar complete. Declaration of preparation	arer (other then taxpaye	his feturn, includ or flaticizary) is b	assistion all information of white	and statements	any knowle TF	RUSTEE	ge and belief, it is	true, com	ect,
	Signature of officer or tri		Preparer's s	Date	Date	<u> </u>	itle f	PTIN		
	WILLIAM G.			_	,	۱ ۱	self- employed	' ' ' '		
Paid	GRIESBECK		\w\\$,	Swesters	_ /1/9					
Preparer Use Only		NOLDS BON	TE & GR	IESBECK PLO	- 	1	Firm's EIN	.l	<u></u>	
•	Firm's address ▶ 51	.00 WHEELI	S DRIV	E, SUITE 30	0			<u> </u>		
		MPHIS, TN					Phone no.	901)68 Form 9 9		

023622 04-26-11

2010 DEPRECIATION AND AMORTIZATION REPORT

FORM 9	FORM 990-PF PAGE 1						990-PF	 				}		
Asset	Description	Date Acquired	Method	Life	No C ×	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	FILE CABINET - 2 DRAWER 1 LATERAL FIRE PROOF	08/02/99	7S	10.00	9 TAH	1,418.				1,418.	1,418.		.0	1,418.
		10/28/99	SI	78°0	HX16	2,847.	~ (· · · ·		2,847.	2,847.		· · · · · · · · · · · · · · · · · · ·	2,847.
•					,									
••	3 AUTHORING STUDIO	01/01/00	: TS		9 TAN (448.	,		`	448.	448	**************************************	• (,	448.
	4 SOPTWARE - SW MAC OS RTL-USA	01/01/00	SL	3.00	HX16	117.	. `	,	./	117.	117.		0	117.
					-1						037		c	034
-·	006 9	01/01/00	ı ı	- N - C		46 y	<i>*</i>	`	A STATE OF THE STA	* No # 17.7	* 60#	35.08	,	
(x ,	6 COMPUTER LIBOOK	01/01/00 SL	*>	%0°;	्रि म .	1,731.	,`	:		* 1,731	1,731		, , , ,	1,731.
	7 DISC DRIVE	01/01/00	SI	5.00	HV16	307.	·	,	``	307.	307.	3		307.
-, 0. √, ;	COMPUTER CARD-AIRPORT	.01/01/00 SE	/ ^	2,00	HY116	107.01 107.01	;;			(A) (107.)	107.		· • • • • • • • • • • • • • • • • • • •	107.
-	COMPUTER CARD-AIRPORT	,			,	,	,		,	, t		,		
<u>ی</u> م	9 CARD-USA	01/01/00	SL	5.00	HX16	107.		>	,	107.	107.		-	107.
10	COMPUTER - IMAC 400MHZ SPECIAL DEDITION	01/01/00	ΣΓ	2.00	HZ16	1,922.	7			1,922	1,922.		•	1,922.
11	1 AIRPORT BASE STATION	01/01/00	SL	5.00	HX16	324.			,	324.	324.	,	0	324.
12	SOFTWARE	01/01/00	ŠĽ	3.00		146.	<i>'</i> ,,			146.	146.	· ()	.0,	146.
i -										r				
13	3 AIRPORT BASE STATION-USA	01/01/00	SL	2.00	HY16	324.	`			324.	324.	```	0	324.
, , ,	14 SOPTWARE	01/01/00	SL	3,00	HY16	431.			` ` `	431.	431.		0	431.
ਜ , 	15 COMPUTER -POWER MAC G4	01/01/00	SL	2.00	HX16	3,480.	**			3,480.	3,480.	-	•	3,480.
, 1,è	MONITOR-APPLE CINEMA DISPLAY	01/01/00	, IS	5.00°	HX16	4,275.	. ;		, `,	4,275,	4,275;		, o	4,275.
	17 COMPUTER-CPU	04/11/00	SL	5.00	HXT 6	4,392.			`	4,392.	4,392.		•	4,392,
, , , 1.8	FILE CABINET - 2 DRAWÉR FIRE PROOF	01/18/01 St	Šī	10.00		\$. \$19.		Ś		, 519,	441.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	. 52.	493.

14

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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FORM	FORM 990-PF PAGE 1				ł		990-PF		İ					
Asset	Description	Date Acquired	Method	Life	No c >	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
. 	19 COMPUTER-POWER BOOK 500	03/01/01	SL	5.00	HX16	4,897.				4,897.	4,897.	,	0	4,897.
~~~	20 COMPUTER - APPLE G4 733	03/19/01	'SI'	5.00	, H <del>V</del> 16	3,894.				3,894.	3,894.		0	3,894.
~	DVD-R FOR APPLE SUPER DRIVE	04/02/01	SI	5.00	HX16	130.		<u>-</u>		130.	130.	```	0,	130.
. , 7	22 SOFTWARE LINVENTORY PROGRAM	18, 80/10/60	`SI,	કું. છે. દ	HY	7,825.		`		7,825.	7,825.			7,825.
~	23 APPLE COMPUTER & EQUIPMENT	12/09/09 SL	SL	5.00	HX16	6,062.	• • • •			6,062.	152.		1,212.	1,364.
	* TOTAL 990-PF PG 1 DEPR	, ,			<u>`</u> `	46,172.		,	, , , , , , , , , , , , , , , , , , ,	46,172	40,184.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1,264.	41,448.
				Sec.	- 1 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (		- ,		***					
4 Å		* )	\$ 740° 7 E	September	A (2)		` ` `							, ,
			1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 to 1000 t		3.73	* ,	,	- ,						
					35 3 8					15-74 15-74	,	```	, , ,	
		**	· .	6.0			,		÷ ,		· · · · · · · · · · · · · · · · · · ·			
				7.7						_		,	,	
028111 05-01-10	0					(D) - Asset disposed	peso		•	ITC, Salvage,	Bonus, Comm	ercial Revital	<ul> <li>ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone</li> </ul>	ion, GO Zone

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH II	NVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
REGIONS BANK			_	38.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	LUMN A	=	38.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
RON NORTHINGTON - TAX PREPARATION	3,510.	0.		3,510.
TO FORM 990-PF, PG 1, LN 16B	3,510.	0.		3,510.
FORM 990-PF (	OTHER PROFES	SIONAL FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
DAVID SMITH - SET UP SOFTWARE	6,500.	0.		6,500.
TO FORM 990-PF, PG 1, LN 16C	6,500.	0.		6,500.
FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL INCOME TAX	216.	0.		0.
TO FORM 990-PF, PG 1, LN 18	216.	0.		0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE		
INFORMATION TECHNOLOGY - SUPPORT	1,385.		0.	1,385.
TO FORM 990-PF, PG 1, LN 23	1,385.		0.	1,385.
FORM 990-PF DEPRECIATION OF	ASSETS NOT	HELD FOR	INVESTMENT	STATEMENT 6
DESCRIPTION		T OR BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FILE CABINET - 2 DRAWER LATERAL FIRE PROOF SAFE		1,418. 2,847.	1,418. 2,847.	0.
SOFTWARE -QUICKTIME VR AUTHORING STUDIO SOFTWARE - SW MAC OS RTL-USA		448. 117.	448. 117.	0.
PRINTER-EPSON STYLUS COLOR 900 COMPUTER -IBOOK DISC DRIVE	)	469. 1,731. 307.	469. 1,731. 307.	0. 0. 0.
COMPUTER CARD-AIRPORT CARD-USA COMPUTER CARD-AIRPORT CARD-USA COMPUTER-IMAC 400MHZ SPECIAL		107. 107.	107. 107.	0.
EDITION AIRPORT BASE STATION SOFTWARE		1,922. 324. 146.	1,922. 324. 146.	0. 0. 0.
AIRPORT BASE STATION-USA SOFTWARE		324. 431.	324. 431.	0.
COMPUTER -POWER MAC G4 MONITOR-APPLE CINEMA DISPLAY USA		3,480. 4,275.	3,480. 4,275.	0.
COMPUTER-CPU FILE CABINET - 2 DRAWER FIRE		4,392.	4,392.	0. 26.
PROOF COMPUTER-POWER BOOK 500 COMPUTER - APPLE G4 733 DVD-R FOR APPLE SUPER DRIVE		519. 4,897. 3,894.	493. 4,897. 3,894.	0.
5PK SOFTWARE -INVENTORY PROGRAM APPLE COMPUTER & EQUIPMENT		130. 7,825. 6,062.	130. 7,825. 1,364.	0. 0. 4,698.
TOTAL TO FM 990-PF, PART II, I	LN 14	46,172.	41,448.	4,724.

# 4562

Department of the Treasury Internal Revenue Service (99

Name(s) shown on return

# **Depreciation and Amortization** 990-PF (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

| Business or activity to which this form relates

2010

Attachment Sequence No 67

identifying number

THE TULLY-GRAVES FOUNDATION FORM 990-PF PAGE 1 62-6356784 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) ..... ..... 500,000. 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation 3 2,000,000. 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instruc (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) <u> 264</u> MACRS Depreciation (Do not include listed property.) (See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2010 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and year placed (d) Recovery period (a) Classification of property (g) Depreciation deduction in service 3-year property 19a b 5-year property 7-year property C 10-year property 15-year property е 20-year property S/L 25-year property 25 yrs g 27.5 yrs. MM S/L h Residential rental property 27.5 yrs. MM S/L ММ 39 yrs S/L i Nonresidential real property ММ S/L Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System Class life S/L 20a ь 12-year 12 yrs S/L 40-year 40 yrs. ММ S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. .264 Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 016251 12-21-10 LHA For Paperwork Reduction Act Notice, see separate instructions. Form 4562 (2010)

Note: For any vehicle for which you are using the standard misage rate or deducting lease expense, complete only 24s, 24b, columns (a) through (c) of Section A. Depreciation and Other Information (Caution: See the instructions for limits for passenger automobilies.)  24a. Dry you have deducted to support the bubiness/investment use claimed? Ves. No. 24b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written? Ves. No. 32b if Yes, is the evidence written. Ves. No. 32b if Yes, is the evidence written. Ves. No. 32b if Yes, is the evidence written. Ves. No. 32b if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes if Yes	Part V Listed Proper amusement )	rty (Include a	utomobiles, c	ertain oth	ner vehic	cles, cer	taın com	puters	s, and pro	perty use	ed for er	ntertainm	ent, rec	reation,	or	
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28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1  29 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1  29 Section B - Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person  If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  (a) (b) (c) (d) (e) (f)  Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Vehic		<del>                                     </del>							<del> </del>	<del>,</del>		<del> </del>		12	٠,	
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29 Add amounts in column (i), line 26. Enter here and on line 7, page 1  Section 8 - Information on Use of Vehicles  Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person if you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.  30 Total business/investment miles driven during the year (4o not include commuting miles)  31 Total commuting miles driven during the year 22 Total other personal (noncommuting) miles driven during the year Add lines 30 through 32 2  34 Was the vehicle available for personal use during off-duty hours?  35 Total miles driven during by a more than 5% owner or related person?  36 Is another vehicle available for personal used use?  37 Do you maintain a written policy statement that prohibits all personal use of vehicles used by employees who are not more than 5% owners or related persons.  37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  38 Do you treat all use of vehicles by employees as personal use of vehicles, except commuting, by your employees?  39 Do you treat all use of vehicles by employees as personal use of vehicles, except commuting, by your employees?  40 Do you meet the requirements concerning qualified automobile demonstration use?  41 Do you meet the requirements concerning qualified automobile demonstration use?  42 Amortization of costs that begins during your 2010 tax year.  43 Amortization of costs that begins buring your 2010 tax year.  44 Amortization of costs that begins before your 2010 tax year.	28 Add amounts in colum	n /h) lines 25			e and or	1 line 21	nage 1		<del></del>	10/1	28				,	
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Form **8868** (Rev. January 2011)

Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

ightharpoons If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization Employer identification number print THE TULLY-GRAVES FOUNDATION 62-6356784 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 257 SOUTH BELVEDERE BOULEVARD instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. MEMPHIS, TN 38104 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Is For Code Is For Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL Form 1041-A 80 Form 990-EZ 03 Form 4720 09 Form 990-PF Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 05 11 Form 990-T (trust other than above) Form 8870 DONNA DICKEY • The books are in the care of ▶ PO BOX 304 - ADAMSVILLE, TN 38310 Telephone No. ► 731-632-0121 FAX No. If the organization does not have an office or place of business in the United States, check this box _______ • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______. If this is for the whole group, check this . If it is for part of the group, check this box > and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 _____, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2010 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions. For Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev. 1-2011)

Form 8868 (Rev. 1-2011					Page 2
	Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II and check this be	ox	X
	art II if you have already been granted an				
<ul> <li>If you are filing for an</li> </ul>	Autòmatic 3-Month Extension, comple	te only Pa	art I (on page 1).		
Part II Addition	onal (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no c	opies needed).	
Name of ex	empt organization			Employer identification	number
Type or print myra mili					
THE TOL	LY-GRAVES FOUNDATION	<del> </del>		62-6356784	<del></del>
extended Number, Str	reet, and room or suite no. If a P.O. box, s		tions.		
IIIING YOUR	TH BELVEDERE BOULEVA			···	
i	or post office, state, and ZIP code. For a for	oreign add	fress, see instructions.		
MEMPHIS	3, TN 38104			· · · · · · · · · · · · · · · · · · ·	
Enter the Return code for	or the return that this application is for (file	e a separa	te application for each return)		0 4
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Application		Return	Application		Return
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Form 990-BL		01	Form 1041-A		
Form 990-EZ	<del></del>	02	Form 4720	<del></del>	08
Form 990-PF		03	Form 5227		10
Form 990-T (sec. 401(a)	or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other		06	Form 8870	<del></del>	12
	e Part II if you were not already granted	1	<del></del>	isly filed Form 8868	
	DONNA DICKEY		nado o monar extension en a provios		
The books are in the	care of ▶ PO BOX 304 - Al	DAMSV	ILLE. TN 38310		
	31-632-0121		FAX No.		<del></del>
	es not have an office or place of busines	s in the Ur	nited States, check this box		
	Return, enter the organization's four digit				heck this
box 🕨 🔲 . If it is for	part of the group, check this box	and atta	ich a list with the names and EINs of all	members the extension is	for.
4 I request an additi	ional 3-month extension of time until	NOVEM	BER 15, 2011.		
	2010, or other tax year beginning		, and ending		·
_ <del></del>	ered in line 5 is for less than 12 months, c	heck reas	on: Initial return	Final return	
	ccounting period				
	you need the extension				
	ATION IS AWAITING ADI			IS NEEDED TO	·
FILE A CO	MPLETE AND ACCURATE I	KETURI	N •	·	
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• •	is for Form 990-BL, 990-PF, 990-T, 4720, (	or 6069, e	nter the tentative tax, less any		0
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	is for Form 990-PF, 990-T, 4720, or 6069, de. Include any prior year overpayment all	-			
previously with Fo	• • • • • • • • • • • • • • • • • • • •	owed as a	credit and any amount paid	8b \$	0.
	stract line 8b from line 8a. Include your pa	vment wit	h this form if required by using	80 9	<u> </u>
	Federal Tax Payment System). See instru	-	it this form, in required, by daining	8c \$	0.
E o (Elootioino			d Verification	<u> </u>	
Under penalties of periury.	declare that I have examined this form, includ			e best of my knowledge and he	elief.
t is true, correct, and comp	lete, and that I am authorized to prepare this fo	rm.	and to the	ar my momongo and a	,
Signature >	Title 🕨			Date <b>&gt;</b>	
				Form <b>8868</b> (Re	ev. 1·2011)