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DLN: 93491262000061

OMB No 1545-0052

Internal Revenue Service

Department of the Treasury

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

**Return of Private Foundation** 

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

2010

	T A mended relation MILY FOUNDATION  reet (or P O box number if mail is i	_	of a former public ch		Final ref	turn	
HANCOCK FAM	MILY FOUNDATION  reet (or P O box number if mail is i						
	reet (or P O box number if mail is i					entification numbe	er
Number and stro-					72-1612871		
HULLIDEL ALIA SUE		not delivered to street address	s) Room/suite		<b>B</b> Telephone nu	ımber (see page 10 d	of the instructions)
1 DIAMOND CA ROOM/SUITE 2					(912) 856-1484	ŀ	
					C If avamption	application is pendin	g shock born b C
SAVANNAH, GA	rate, and ZIP code 31406				•	rganizations, check he	· _
	<del></del>				_		•
	e of organization <b>I ∀</b> Sectior 947(a)(1) nonexempt charita	n 501(c)(3) exempt priva		_		rganizations meeting e and attach comput	
	value of all assets at end		Cash Acci			undation status was t	
	n Part II, col. (c),	Other (specify)	, cusii , Acci	uui		n 507(b)(1)(A), chec	
line 16) <b>►\$</b> 6	68,141	(Part I, column (d) mus	t be on cash basis.)			ation is in a 60-montl n 507(b)(1)(B), chec	
to n	Analysis of Revenue a total of amounts in columns (b), (conecessarily equal the amounts in columns the instructions)	c), and (d) may not	(a) Revenue and expenses per books	<b>(b)</b> N	et investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>1</b> Con	ontributions, gifts, grants, etc , rece	ıved (attach schedule)	100,000				
<b>2</b> Che	neck 🟲 🦵 if the foundation is <b>not</b>	required to attach Sch B					
3 Inte	terest on savings and tempo	rary cash investments					
4 Div	ividends and interest from se	curities	1,915		1,915		
<b>5a</b> Gro	ross rents						
	et rental income or (loss)						
மு <b>6a</b> Net	et gain or (loss) from sale of	-56,271					
ΨΙ	oss sales price for all assets on line						
夏 7 Car	apıtal gaın net ıncome (from l						
- 8 Net	et short-term capital gain .						
-	come modifications	1					
	oss sales less returns and allowance ess Cost of goods sold						
	ross profit or (loss) (attach s						
1	ther income (attach schedule	•					
1	otal. Add lines 1 through 11	•	45,644		1,915		
	ompensation of officers, direc		42,500		425		
<b>14</b> Oth	ther employee salaries and w	vages					
∯ <b>15</b> Per	ension plans, employee bene	fits					
ф <b>16a</b> Leg	egal fees (attach schedule) .						
15 Per 16a Leg	ccounting fees (attach sched	lule)	2,875		29		
	ther professional fees (attacl	h schedule)					
c Oth   17   Into   18   Tax   19   Dep   20   Occ   21   Tra   22   Priii	terest						
技 <b>18</b> Taxe	xes (attach schedule) (see page 14	4 of the instructions)	<b>%</b> 3,365		127		
<b>19</b> Dep	epreciation (attach schedule	) and depletion	256				
를 <b>20</b> oc	ccupancy						
21 Tra	ravel, conferences, and meet	ings					
	rinting and publications						
를 23 Oth	ther expenses (attach sched		240		2		
늆	otal operating and administra	<u>-</u>			==-		
Add	dd lines 13 through 23		49,236		583		0
25 Cor	ontributions, gifts, grants pai		223,969		583		223,969 223,969
	tal expenses and disbursement	ts. Add lines 24 and 25	273,205		583		223,969
	ubtract line 26 from line 12 ccess of revenue over expens	ses and dishursemente	-227,561				
	et investment income (if nega		227,301		1,332		
	djusted net income (if negati						

Dar	t II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year			of year
		Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book		(c) Fair Market Value
	1	Cash—non-interest-bearing	7,453		68,041	68,041
	2	Savings and temporary cash investments	287,921			
	_	Accounts receivable 🟲				
		Less allowance for doubtful accounts 🟲				
	4	Pledges receivable 🟲			•	
		Less allowance for doubtful accounts 🟲				
	5	Grants receivable			-	
	6	Receivables due from officers, directors, trustees, and other				
	_	disqualified persons (attach schedule) (see page 15 of the				
		instructions)				
	7	Other notes and loans receivable (attach schedule)				
	•					
٨		Less allowance for doubtful accounts 🟲				
2	8	Inventories for sale or use				
î	9	Prepaid expenses and deferred charges				
~   <sub>:</sub>	L0a	Investments—U S and state government obligations (attach schedule)				
	ь	Investments—corporate stock (attach schedule)				
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis • 2,472				
		Less accumulated depreciation (attach schedule) 2,301	427	%	171	100
		Investments—mortgage loans				
		Investments—other (attach schedule)				
		Land, buildings, and equipment basis				
	14	Less accumulated depreciation (attach schedule)				
		· · · · · · · · · · · · · · · · · · ·				
		Other assets (describe)				
	16	Total assets (to be completed by all filers—see the	205.004		co 24:	50.141
		instructions Also, see page 1, item I)	295,801		68,212	· · · · · · · · · · · · · · · · · · ·
		Accounts payable and accrued expenses	1,303		1,275	
		Grants payable				
ŝ	19	Deferred revenue				
[   ∙	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
<b>-</b>   .	22	Other liabilities (describe 🟲)				
_	23	Total liabilities (add lines 17 through 22)	1,303		1,275	
		Foundations that follow SFAS 117, check here 🕨 🦵				
ا م		and complete lines 24 through 26 and lines 30 and 31.				
or Fund Balances	24	Unrestricted				
듄	25	Temporarily restricted				
ទី	26	Permanently restricted				
₽│		Foundations that do not follow SFAS 117, check here 🕨 🔽				
∄∣		and complete lines 27 through 31.				
اة ا	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
Assets	29	Retained earnings, accumulated income, endowment, or other funds	294,498		66,937	7
	30	Total net assets or fund balances (see page 17 of the				
ž		instructions)	294,498		66,937	7
- 1	31	Total liabilities and net assets/fund balances (see page 17 of				_
		the instructions)	295,801		68,212	2
Par	t II		<u> </u>			
	777	, ,		1		
1		Total net assets or fund balances at beginning of year—Part II, column				
_		, 3 , , , , ,		-	1	294,498
2		Enter amount from Part I, line 27a		-	2	-227,561
3		Other increases not included in line 2 (itemize)			3	
4		Add lines 1, 2, and 3		↓	4	66,937
5		Decreases not included in line 2 (itemize)			5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F	Part II. column (b), li	ne 30	6	66,937

		the kınd(s) of property sold (e g , r ouse, or common stock, 200 shs  !	•	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a						
(e	e) Gross sales price	(f) Depreciation allowe		st or other basıs		or (loss)
		(or allowable)	plus e	expense of sale	(e) plus (f	) mınus (g)
a						
ь						
с						
d						
e						
Co	mplete only for assets s	showing gain in column (h) and own				(h) gain minus
(i)	F M V as of 12/31/69	(j) A djusted basis as of 12/31/69	1	xcess of col (1) col (j), if any		less than -0-) <b>or</b> om col (h))
a		30 31 22/02/02		377 27	•	
ь						
С						
d						
e						
2	Capital gain net incor	ne or (net capital loss)	If gain, also ente If (loss), enter -0	r in Part I, line 7 D- in Part I, line 7	2	
3	Net short-term capita	٠ al gaın or (loss) as defined ın sectio	ons 1222(5) and (6	, 6)		
-	·	Part I, line 8, column (c) (see page:	, , , ,	•	}	
Dart		Jnder Section 4940(e) for I	Poducod Tay o	n Not Investme	il 3	
(For opt	cional use by domestic p	private foundations subject to the s	ection 4940(a) ta	x on net investment	income )	
Ifsecti	on 4940(d)(2) applies, l	eave this part blank				
Was the	foundation liable for th	e section 4942 tax on the distribut	able amount of an	v vear in the hase n	eriod?	┌ Yes ┌ No
		ot qualify under section 4940(e) D				165 / 165
<b>1</b> En		unt ın each column for each year, s	ee page 18 of the	ınstructions before		
	(a) e period years Calendar or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	Net value of nonch	antable-use assets	<b>(d)</b> Distributio (col (b) divided	n ratio
	2009					
	2008					
	2007					
	2006					
	2005					
2	<b>Total</b> of line 1, colum	n (d)		[	2	
3		ratio for the 5-year base period—d				
	the number of years t	he foundation has been in existenc	e if less than 5 ye	ars	3	
4	Enter the net value o	f noncharitable-use assets for 201	0 from Part X, line	5	4	
5	Multiply line 4 by line	3			5	
6	Enter 1% of net inves	stment income (1% of Part I, line 2	?7h).		6	
7		,				
,	Aud lines 5 and 6				7	
8	Enter qualifying distr	ibutions from Part XII, line 4			8	
	If line 8 is equal to or	greater than line 7, check the box	ın Part VI, line 1b	, and complete that	part using a 1% tax	rate See

Form	990-PF (2010)			age <b>4</b>					
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)						
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)								
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check								
c	here Fand enter 1% of Part I, line 27b								
2	Tourisday control (4) (domentic control 4047(c)/4) truste and tought foundations only. Others onter (6)								
3	3 Add lines 1 and 2								
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)								
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			27					
6	Credits/Payments								
а	2010 estimated tax payments and 2009 overpayment credited to 2010 <b>6a</b>								
b	Exempt foreign organizations—tax withheld at source 6b								
c	Tax paid with application for extension of time to file (Form 8868)  6c 38								
d	Backup withholding erroneously withheld 6d								
7	Total credits and payments Add lines 6a through 6d			38					
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here T if Form 2220 is attached.								
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9								
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			11					
11	Enter the amount of line 10 to be Credited to 2011 estimated tax 0 Refunded 11			11					
Par	t VII-A Statements Regarding Activities		1						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No					
	it participate or intervene in any political campaign?	. 1a		No					
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of	١							
	the instructions for definition)?	. 1b		No					
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials								
_	published or distributed by the foundation in connection with the activities.  Did the foundation file Form 1120-POL for this year?	1c		No					
ا	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	10		No					
d	(1) On the foundation $\blacktriangleright$ \$ (2) On foundation managers $\blacktriangleright$ \$								
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed								
_	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		No					
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles								
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. з		No					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No					
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b							
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No					
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  • By language in the governing instrument, or								
	• By state legislation that effectively amends the governing instrument so that no mandatory directions								
	that conflict with the state law remain in the governing instrument?	. 6		No					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes						
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶GA, MO								
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney								
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes						
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)								
	or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on								
	page 27)? If "Yes," complete Part XIV	. 9		No					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No					

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►HTTP //WWW HANCOCKFAMILYFOUNDATION ORG			l
14		\ 856-	1/8/	
14	The books are in care of ►LINDSAY H HARLANDER  Located at ►1 DIAMOND CSWY STE 21 282 SAVANNAH GA  ZIP+4 ►3140674		1404	
		30		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here		'	-
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over			ı
	a bank, securities, or other financial account in a foreign country?	16		
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		Ι
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
<b>1</b> a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	for the benefit or use of a disqualified person)?			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes V No			
ь	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here	<del></del> -		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
_	that were not corrected before the first day of the tax year beginning in 2010?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years 🕨 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
_	If the foundation had excess business holdings in 2010.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	l 4b	1	l No

	n 990-PF (2010)									Page <b>6</b>
	rt VII-B Statements Rega		_		ich Form 4720	May Be R	equired <i>(cont</i>	inued	<u>)                                    </u>	
5a	During the year did the foundatio							_		
	(1) Carry on propaganda, or othe						┌ Yes ┌	/ No		
	(2) Influence the outcome of any							_		
	on, directly or indirectly, any		<del>-</del>				· · ·			
	(3) Provide a grant to an individu						┌ Yes ┌	/ No		
	(4) Provide a grant to an organize				· -			_		
	ın section 509(a)(1), (2), or (					structions).	Yes	/ No		
	(5) Provide for any purpose other							_		
	educational purposes, or for t									
Ь	If any answer is "Yes" to 5a(1)-(									
	Regulations section 53 4945 or						_	_	5b	
	Organizations relying on a currer						►∣			
С	If the answer is "Yes" to question	-			· ·			_		
	tax because it maintained expen						Yes	No		
	If "Yes," attach the statement requ									
6a	Did the foundation, during the year	•	•	•	• • • • •			_		
	premiums on a personal benefit o									
b	Did the foundation, during the year	ar, pa	y premiums, directly	orı	ndirectly, on a perso	onal benefit o	contract?	.	6b	No
	If "Yes" to 6b, file Form 8870.							_		
7a	At any time during the tax year, w									
ь	If yes, did the foundation receive								7b	
Pa	rt VIII and Contractors	t Of	ficers, Directors	s, Tı	rustees, Founda	ition Mana	agers, Highly	Paid	Empl	oyees,
	and Contractors  List all officers, directors, trustee	s for	indation managers a	nd t	hair componention (	coo page 22	of the instruction	ne\		
	List an officers, directors, trustee	_	Title, and average		c) Compensation (		ntributions to			
	(a) Name and address	`-'	hours per week		If not paid, enter	1	e benefit plans		•	e account, wances
		d€	evoted to position		-0-)		ed compensation	- 0111		
			RESIDENT 0 00		42,500		0			0
	IAMOND CAUSEWAY SUITE 21	30 (	, ,							
282 SAV	'ANNAH,GA 31406									
	н сох 📆	TRE	ASURER		0		0			0
	98 S 71 HIGHWAY	0 00			J		J			J
	NDVIEW, MO 64030									
	D HANCOCK 📆	DIR	ECTOR		0		0			0
	98 S 71 HIGHWAY	0 00								
	NDVIEW, MO 64030									
2	Compensation of five highest-paid	d emp	oloyees (ot her t han	t hos	e included on line 1–	-see page 23	of the instruction	ons).		
	If none, enter "NONE."		T		1					
/-	) Name and address of each emplo	v.o.o	(b) Title, and aver	age		1 ' '	ontributions to ployee benefit	(a) E	vnanc.	e account,
(4	paid more than \$50,000	yee	hours per week		(c) Compensation	n i '	s and deferred			wances
	· ,		devoted to positi	on —		I '	mpensation			
пои	N E									
			1							
			1							
			-							
Tot:	al number of other employees paid	over	50,000 <b>.</b>				🕨			
	in the second se	•								

Part VIII Information About Officers, Directors, Tr and Contractors (continued)	ustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional servi	ices (see page 23 of the instructions). If none, e	enter "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional servi	ces	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include organizations and other beneficiaries served, conferences convened, research papers		Expenses
1		
		1
		1
2		
		1
		1
3		-
4		
Part IX-B Summary of Program-Related Investmen	its (see page 24 of the instructions)	
Describe the two largest program-related investments made by the foundation de	uring the tax year on lines 1 and 2	A mount
<b>1</b> N/A		
2		
		]
		1
All other program-related investments See page 24 of the instruc	tions	
3		
		1
		1
		1

Form	990-PF (2010)		Page <b>8</b>
Pa	<b>Minimum Investment Return</b> (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	143,961
b	A verage of monthly cash balances	1b	37,747
c	Fair market value of all other assets (see page 24 of the instructions)	<b>1</b> c	0
d	Total (add lines 1a, b, and c)	1d	181,708
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	A cquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	181,708
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see page 25		
	of the instructions)	4	2,726
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V , line 4	5	178,982
6	Minimum investment return. Enter 5% of line 5	6	8,949
Par	<b>Distributable Amount</b> (see page 25 of the instructions) (Section 4942(j)(3) and (j)(		
	foundations and certain foreign organizations check here 🕨 📗 and do not complete t		
1	Minimum investment return from Part X, line 6	1	8,949
2a	Tax on investment income for 2010 from Part VI, line 5 2a 27	_	
b	Income tax for 2010 (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	2c	27
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8,922
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,922
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	8,922
Par	Qualifying Distributions (see page 25 of the instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	223,969
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	223,969
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	223,969
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the section 4940(e) reduction of tax in those years	her the	

ľ	ondistributed income (see page	26 of the mstruct	ions)		
		<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2009	<b>(c)</b> 2009	( <b>d)</b> 2010
1	Distributable amount for 2010 from Part XI, line 7				8,922
	Undistributed income, if any, as of the end of 2010				
	Enter amount for 2009 only				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2010				
	From 2005				
	From 2006				
	From 2007				
	From 2008				
е	From 2009 298,561				
f	Total of lines 3a through e	1,316,233			
	Qualifying distributions for 2010 from Part				
	XII, line 4 🕨 \$ 223,969				
а	Applied to 2009, but not more than line 2a				
Ь	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
C	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				0.022
	Applied to 2010 distributable amount	245.047			8,922
	Remaining amount distributed out of corpus	215,047			
5	Excess distributions carryover applied to 2010				
	(If an amount appears ın column (d), the same amount must be shown ın column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,531,280			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions				
е	Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount—see page 27				
	of the instructions				
f	Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1 This amount must				
	be distributed in 2011				0
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27				
	of the instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				
	ınstructions)				
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	1,531,280			
10	Analysis of line 9	_, <b>/</b>			
	Excess from 2006 179,471				
	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
	Excess from 2010				
_			l .		

P	art XIV Private Operating Fou	n <mark>dations</mark> (see p	page 27 of the in	structions and Pa	rt VII-A, questior	า 9)
1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2					
b	Check box to indicate whether the organiz	ation is a private (	operating foundation	n described in secti	on <b>「</b> 4942(j)(3) (	or <b>Г</b> 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
	income from Part I or the minimum	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for each	(a) 2010	(6) 2009	(6) 2008	(u) 2007	
_	year listed					
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
А	Amounts included in line 2c not used directly					
u	for active conduct of exempt activities					
e	Qualifying distributions made directly					
	for active conduct of exempt activities					
_	Subtract line 2d from line 2c			+		
3	Complete 3a, b, or c for the alternative test relied upon					
-	"Assets" alternative test—enter					
a	(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			1		
С	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information				ion had \$5,000	or more in
	assets at any time during		page 27 of the	instructions.)		
1	Information Regarding Foundation Manag		th 20/ -fth-			
а	List any managers of the foundation who have before the close of any tax year (but only i					idation
	before the close of any tax year (but only i	rency nave contin	batta more than \$5	,000, (000 5000)	1307(4)(2)	
	NONE					
ь	List any managers of the foundation who o	wn 10% or more o	f the stock of a corp	poration (or an equa	ılly large portion of t	:he
	ownership of a partnership or other entity)				, , ,	
	NONE					
2	Information Regarding Contribution, Gran	t, Gift, Loan, Scho	larship, etc., Progra	ms:		
	Check here F if the foundation only ma	kes contributions	to preselected chai	rıtable organızatıon:	s and does not acce	pt
	unsolicited requests for funds If the found					
	under other conditions, complete items 2a	, b, c, and d				
а	The name, address, and telephone numbe	r of the person to	whom applications :	should be addresse	d	
	HANCOCK FAMILY FOUNDATION					
	1 DIAMOND CSWY STE 21 282					
	SAVANNAH,GA 314067436					
	(912) 856-1484					
b	The form in which applications should be s	submitted and info	rmation and materi	als they should incl	ude	
	SEE STATEMENT FOR LINE 2A					
С	Any submission deadlines					
	SEE STATEMENT FOR LINE 2A					
	Any restrictions or limitations on awards,	such as hy deodr:	aphical areas chari	table fields, kinds o	finstitutions or oth	er
u	factors	_ ac., ab b, geogle	car arcas, chair	LLDIO HOIGO, KIIIGO		· <del>-</del> ·
	SEE STATEMENT FOR LINE 24					

3 Grants and Contributions Paid	During the Year or App	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
	or substantial contributor	recipient	Contribution	
Name and address (home or business)  a Paid during the year See Additional Data Table	any foundation manager or substantial contributor	recipient	contribution	Amount
Total				223,96
b Approved for future payment				

	-PF (2010)  I-A Analysis of Income-Produc	ina Activitie	<u> </u>			Page <b>1</b> 2
	ss amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
	1 Program service revenue		( <b>b)</b> A mount	(c) Exclusion code	(d) A mount	Related or exemp function income (See page 28 of the instructions)
b	s and contracts from government agencies ership dues and assessments ton savings and temporary cash investments ands and interest from securities			1	1,915	
11 Other b c d e 12 Subtor 13 Total. (See )	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  worksheet in line 13 instructions on page 2  Explain below how each activity for whi	28 to verify calc	ulations) plishment of E	1 Exempt Purpos	es	-54,356
Line No.	the accomplishment of the organization page 28 of the instructions )  THE INTEREST-BEARING MONEY MAR	n's exempt purp	oses (other than b			
	1					

Form 9	90-PF (2	2010)							Рa	ge <b>13</b>
Part	XVII	Information R Noncharitable			Transac	ctions and Relations	hips With			
<b>1</b> Did 1	the organi			of the following with any o	other organiz	zation described in section			Yes	No
501(	(c) of the	Code (other than section	501(c)(3) orga	nızatıons) or ın section 527,	relating to p	political organizations?				
<b>a</b> Tra	nsfers fr	om the reporting fou	ndation to a i	noncharitable exempt o	organizatio	on of				
(1) Cash										No
(2)	Othera	issets						1a(2)		No
<b>b</b> Oth	er trans	actions								
(1)	Sales o	fassets to a noncha	arıtable exem	pt organization				1b(1)		No
(2)	Purcha	ses of assets from a	noncharitab	e exempt organization				1b(2)		No
(3)	Rental	of facilities, equipme	ent, or other a	ssets				1b(3)		No
(4)	Reimbu	ırsement arrangemei	nts					1b(4)		No
								1b(5)		No
								1b(6)		No
			•	_		S		<u> </u>		No
						olumn (b) should always				
of t	he goods	, other assets, or se	rvices given	by the reporting found	atıon Ifth	he foundation received les ne goods, other assets, or	s than fair mark	et value		
(a) Line	No	( <b>b)</b> Amount involved	(c) Name of	noncharitable exempt organ	nization	(d) Description of transfers,	ransactions, and sha	arıng arra	ngemer	nts
						<u> </u>				
		•	•	ed with, or related to, c er than section 501(c)		re tax-exempt organizatio	ns	$\Gamma_{V}$	s F	<b>-</b> N. a
		nplete the following:		er than section 501(c)	(3)) 01 111	section 527		., 16		NO
<b>D</b> 11	163, 601	(a) Name of organizatio		(b) Type of	organization	n   (c)	Description of relati	onship		
	Under			at I have examined this	e return u	ncluding accompanying s	hedules and sta	tement	c and	+o
	l .				,	eclaration of preparer (otl			,	
			which prepa	rer has any knowledge		1				
	h	* * * *				2011-09-27	*****			
	<b>F</b> Sig	nature of officer or t	rustee			Date	Title			
22						Date		PTIN		
<u> </u>							Check if self-			
Ė			N F BROXTE	RMAN		2011-08-26	employed 🕨			
Sign Here	~~	Signature <b>F</b>				2011-08-20				
(A)	Paid Preparer's Use Only	Firm's name 🕨		COCHRAN HEAD V	ICK & CO	PC	Fırm's EIN ►			
	ကြီး ကို မွာ			6700 ANTIOCH RD	STE 460					
	40			3733 ARTIOCH RD	3,2,400		D1 (77)		440-	
		Firm's address 🕨		OVERLAND PARK, F	KS 66204	41200	Phone no (913	3/8-	1100	

Schedule B	Schedule of Contributors		OMB No 1545-0047					
(Form 990, 990-EZ, or 990-PF) Department of the Treasury nternal Revenue Service	2010							
Name of organization HANCOCK FAMILY FOUNDATI	ON	Employer ide	entification number					
Organization type (che	eck one)	72-161287	1					
Filers of:	Section:							
Form 990 or 990-EZ	501(c)( ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private founda	tion						
	527 political organization							
Form 990-PF	√ 501(c)(3) exempt private foundation							
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or mony one contributor. Complete Parts I and II	ore (in money or						
under sections 5	1(c)(3) organization filing Form 990 or 990-EZ, that met the 33 <sup>1</sup> /3% support test of 609(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the ,000 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ	year, a contributi						
during the year,	1(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from an aggregate contributions of more than \$1,000 for use <i>exclusively</i> for religious, char, or educational purposes, or the prevention of cruelty to children or animals. Cor	arıtable,						
during the year, or not aggregate to the year for an eapplies to this or	1(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from an contributions for use exclusively for religious, charitable, etc., purposes, but thes more than \$1,000. If this box is checked, enter here the total contributions that we exclusively religious, charitable, etc., purpose. Do not complete any of the parts uiganization because it received nonexclusively religious, charitable, etc., contribut	se contributions dere received during the series of \$5,000 or	id ing a <b>l Rule</b>					
990-EZ, or 990-PF), but i	on that is not covered by the General Rule and/or the Special Rules does not file S t <b>must</b> answer "No" on Part IV, line 2 of its Form 990, or check the box on lin H o 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Sche	of its						

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As Filed Data -

DLN: 93491262000061

Name of organization HANCOCK FAMILY FOUNDATION Employer identification number

72-1612871

Part I	Contributors (see Instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DAVID H HANCOCK 12498 S 71 HWY  GRANDVIEW, MO 64030	\$ <u>100,000</u>	Person
(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 if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_		\$	Person

Name of organization
HANCOCK FAMILY FOUNDATION

Employer identification number

72-1612871

Part II Nonc	ash Property (see Instructions)		
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
n) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization HANCOCK FAMILY FOUNDATION Employer identification number

72-1612871

contributions of <b>\$1,000 or less</b> for the year (b)	(Enter this information once See insti	ructions ) 🟲 \$
Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gift ZIP + 4 Relatio	nship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gift ZIP + 4 Relatio	nship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gift ZIP + 4 Relatio	nship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, and	(e) Transfer of gift ZIP + 4 Relatio	nship of transferor to transferee
	(b) Purpose of gift  Transferee's name, address, and  (b) Purpose of gift  Transferee's name, address, and  (b) Purpose of gift	Transferee's name, address, and ZIP + 4  (b) Purpose of gift  Transferee's name, address, and ZIP + 4  (c) Use of gift  Transfer of gift  Transfer of gift  (e) Transfer of gift  Relatio  (c) Use of gift  Transfer of gift  Relatio  (e) Transfer of gift  Relatio  (b) Purpose of gift  Transferee's name, address, and ZIP + 4  (e) Transfer of gift  Relatio  (b) Purpose of gift  (c) Use of gift  (c) Use of gift  Transfer of gift  Relatio

# Software ID: Software Version:

**EIN:** 72-1612871

Name: HANCOCK FAMILY FOUNDATION

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
<b>a</b> Paid during the year				
KANSAS STATE UNIVERSITY 104 FAIRCHILD HALL MANHATTAN,KS 66506	NONE	N/A	SCHOLARSHIPS	8,908
UNIVERSITY OF KANSAS OFFICE OF FINANCIAL AID 1450 JAYHAWK BLVD LAWRENCE, KS 66045	NONE	N/A	SCHOLARSHIPS	18,721
EMPORIA STATE UNIVERSITY FINANCIAL AID OFFICE 1200 COMMERCIAL ST EMPORIA,KS 66801	NONE	N/A	SCHOLARSHIPS	7,166
UNIVERSITY OF CENTRAL MISSOURI 108 W SOUTH STREET WARRENSBURG, MO 64093	NONE	N/A	SCHOLARSHIPS	3,150
JOHNSON CNTY COMM COLLEGE FINANCIAL AID OFFICE 12345 COLLEGE BLVD OVERLAND PARK,KS 66210	NONE	N/A	SCHOLARSHIPS	550
AMERICA'S SECOND HARVEST OF COASTAL GEORGIA 2501 E PRESIDENT STREET SAVANNAH,GA 31404	NONE	N/A	MOBILE FOOD PANTY, KIDS CAFE	40,846
SOCIAL APOSTOLATE PO BOX 8703 SAVANNAH,GA 31401	NONE	N/A	FOOD PANTRY/ UNIFORM PROGRAM	15,000
FAMILY ADVANCEMENT MINISTRIES 570 HIGH PLACE MACON,GA 31201	NONE	N/A	CHRISTMAS MEALS/ LIFESKILLS PRO GAM	18,260
SAVANNAH RED CROSS 41 PARK OF COMMERCE WAY SAVANNAH,GA 31405	NONE	N/A	EMERGENCY COMMUNITY SERVICES PROGRAM	30,000
CHILDREN'S CENTER FOR THE VISUALLY IMPAIRED 3101 MAIN ST KANSAS CITY,MO 64111	NONE	N/A	PRESCHOOL/KINDERGARTEN PROGRAM	28,000
DEEP CENTER INC PO BOX 5582 SAVANNAH,GA 31414	NONE	N/A	2010 FALL SEMESTER LITERACY PROGRAM	5,000
RAYTOWN EMERGENCY ASSISTANCE PROGRAM 9300 E 75TH STREET RAYTOWN,MO 64138	NONE	N/A	RENT ASSISTANCE FOR FAMILIES	5,000
JC COLEMAN FOUNDATION INC 106 OGLETHORPE PROFESSION SAVANNAH,GA 31406	NONE	N/A	SUMMER PROGRAM ASSISTANCE	5,555
THE CHILDREN'S PLACE 2 E 59TH STREET KANSAS CITY,MO 64113	NONE	N/A	DAY TREATMENT SERVICES PROGRAM	10,000
GILLIS CENTER 8150 WORNALL ROAD KANSAS CITY,MO 64114	NONE	N/A	CHILDREN'S EMERGENCY SHELTER	16,640
Total				223,969

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BOGGS MOUNTAIN HUMANE SHELTER PO BOX 249 TIGER,GA 30576	NONE	N/A	ANIMALINOCULATIONS	5,000
VOLUNTEERS FOR LITERACY OF HABERSHAM COUNTY 166D COMMERCE PKWY CORNELIA, GA 30531	NONE	N/A	PRE-SCHOOL READINESS PROGRAM	2,128
COYOTE HILL CHRISTIAN CHILDREN'S HOME PO BOX 1 9501 COYOTE HILL ROAD HARRISBURG, MO 65256	NONE	N/A	FOOD PURCHASES	2,000
GROVES HIGH SCHOOL 100 PRISCILLA D THOMAS W SAVANNAH,GA 31408	NONE	N/A	BOOK PURCHASE PROGRAM	2,045
Total				223,969

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**Depreciation and Amortization** 

(Including Information on Listed Property)

DLN: 93491262000061

OMB No 1545-0172

Department of the Treasury

Form 4562

Attachment

See separate instructions. Attach to your tax return. Sequence No 67 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates **Identifying number** HANCOCK FAMILY FOUNDATION INDIRECT DEPRECIATION 72-1612871 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 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 9 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 (see instructions) 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 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 ) (See instructions ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 **15** Property subject to section 168(f)(1) election **15 16** Other depreciation (including ACRS) 256 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2010 17 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 (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method period property deduction service use only—see instructions) 19a 3-year property **b** 5-year property c 7 - year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L 27 5 yrs ММ S/L h Residential rental property 27 5 yrs мм S/L 39 yrs мм S/L i Nonresidential real property ΜМ S/L Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System **20a** Class life S/L **b** 12-year 12 yrs S/L **c** 40-year ММ S/L 40 yrs 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 Enter here 22 256 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V
Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	Caution	: See	the i	nstruct	tions fo	or limi	its fo	or pa	sseng	er au	tomot	iles.)
<b>24a</b> Do you have evider	nce to support	the business/inv	estment u	ise claime	d? <b>┌</b> Yes	Гпо		24	<b>lb</b> If "Ye	s," is th	e ev i	dence	written?	Гүе	sГN	)
<b>(a)</b> Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost or bas	rother	(busines	(e) r deprecia ss/investr se only)		<b>(f)</b> Recovery period	( <b>c</b> Meth Conve	nod/	С	( <b>h</b> ) Depreck deduc	ation/		(i) Electe section 1 cost	179
<b>25</b> Special depreciation allo 50% in a qualified busi			rty placed	ın service (	during the	tax year	and u	ised more	e than	25						
<b>26</b> Property used more	e than 50%		business	use												
		%												+-		
		%														
<b>27</b> Property used 50%	orless in a		ıness us	е					la u							
		%							S/L - S/L -					-		
		%							S/L -							
28 Add amounts in c	olumn (h), lır	nes 25 throug	h 27 En	ter here a	and on lı	ne 21, <sub>l</sub>	page	1 .	28							
29 Add amounts in c	olumn (ı), lın	e 26 Enterhe	ere and o	n line 7,	page 1							29				
				_Infor												
Complete this section If you provided vehicles to														e vehic	les	
30 Total business/in	vestment mi	les driven dur	una the	_	a)		<b>)</b>		(c)		(d)	-	-	<b>≘</b> )		f)
year ( <b>do not</b> inclu			•	Vehi	ıcle 1	Vehi	cle 2	V e	hicle 3		ehic	le 4	Vehi	cle 5	Vehi	cle 6
<b>31</b> Total commuting	milas drivan	during the ve	25							+						
32 Total other person																
33 Total miles driver	•															
through 32																
<b>34</b> Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Yes	No	Ye	es	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle u		by a more th	nan 5%													
owner or related p <b>36</b> Is another vehicle		r porconal uc	• •		1						$\dashv$					+
		stions for		vore W	ho Dro	vida \	/ohi	clas f	or He	hy 7	Γha	ir En	anlov			
Answer these questio 5% owners or related	ns to determ	ine if you mee	et an exc												<b>not</b> mo	re thai
<b>37</b> Do you maintain a employees?		y statement											our •	Y	es	No
30 D											I			_		
<b>38</b> Do you maintain a employees? See t												, our				
39 Do you treat all us	se of vehicle:	s by employee	es as per	sonal us	e? .											
<b>40</b> Do you provide movehicles, and reta		•	•	oyees, o	btaın ınfo	ormatio •	n froi	m your e	employe	ees ab	out t	he us	e of the	3		
<b>41</b> Do you meet the r	equirements	concerning q	ualified a	automobi	ıle demoi	nstratio	n us	e? (See	ınstruc	tions )	) .					
<b>Note:</b> If your ansv	ver to 37, 38	, 39, 40, or 4	1 is "Yes	s," do no	t comple	te Sect	ion E	for the	covere	d vehi	cles					
	rtization	, , ,		,	•											
(a) Description of c		(b) Date amortization begins	1	(c A mort a mo	ızable		(	( <b>d)</b> Code ection	p.	(e) ortizat eriod o rcentai	r			( <b>f</b> ) rtızatıc hıs yea		
42 A mortization of co	sts that beg		ur 2010	tax year	(see ins	truction	ns)									
				•	-		-									
43 A mortization of co	sts that beg	an before you	ır 2010 t	ax year		•				4	3					
44 Total. Add amoun	ts ın column	(f) See the in	nstructio	ns for wh	ere to re	port				4	4					

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## **TY 2010 Accounting Fees Schedule**

Name: HANCOCK FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	2,875	29		

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-		

## **TY 2010 Compensation Explanation**

Name: HANCOCK FAMILY FOUNDATION

Person Name	Explanation
LINDSAY H HARLANDER	
KEITH COX	
DAVID HANCOCK	

DLN: 93491262000061

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## **TY 2010 Depreciation Schedule**

Name: HANCOCK FAMILY FOUNDATION

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAPTOP	2006-08-28	2,472	2,045	200DB	5 0000	256			

DLN: 93491262000061

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2010 Gain/Loss from Sale of Other Assets Schedule

Name: HANCOCK FAMILY FOUNDATION

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Met hod	Sales Expenses	Total (net)	Accumulated Depreciation
500 SH NASB FINCL INC	2009-01	DONATION	2010-01		11,495	13,082			-1,587	
1500 SH NASB FINCL INC	2009-12	DONATION	2010-01		34,486	35,543		86	-1,143	
4500 SH NASB FINCL INC	2009-12	DONATION	2010-02		91,084	106,628		186	-15,730	
800 SH NASB FINCL INC	2009-12	DONATION	2010-07		11,600	18,956		55	-7,411	
1000 SH NASB FINCL INC	2009-12	DONATION	2010-07		13,460	23,695		55	-10,290	
900 SH NASB FINCL INC	2009-12	DONATION	2010-07		13,050	21,326		55	-8,331	
1300 SH NASB FINCL INC	2009-12	DONATION	2010-07		19,083	30,804		58	-11,779	

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## **TY 2010 Investments - Land Schedule**

Name: HANCOCK FAMILY FOUNDATION

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
MACHINERY AND EQUIPMENT	2,472	2,301	171	100

## **TY 2010 Other Expenses Schedule**

Name: HANCOCK FAMILY FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
OFFICE SUPPLIES	240	2		

## **TY 2010 Taxes Schedule**

Name: HANCOCK FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	3,251	33		
LICENSES & REGISTRATION	20			
EXCISE TAXES	94	94		