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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Department of the Treasury Internal Revenue Service

Treated as a Private Foundation

2010

OMB No. 1545-0052

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2010, or tax year beginning Nov 01, 2010, and ending Oct 31,2011 G Check all that apply. Initial return Initial Return of a former public charity Final return Amended return Address change Name of foundation A Employer identification number THE HARRIS FOUNDATION 58-6032442 Number and street (or P O. box number if mail is not delivered to street address) B Telephone number (see the instructions) Room/suite PO BOX 727 706-543-9074 City or town, state, and ZIP code C If exemption application is pending, check here Winder GA 30680 1 Foreign organizations, check here Check type of organization X Section 501(c)(3) exempt private foundation Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section J Accounting method. X Cash 1 Fair market value of all assets at end of 507(b)(1)(A), check here year (from Part II, col. (c), line 16) Other (specify) If the foundation is in a 60-month termination under section ▶\$ 1,321,625. (Part I, column (d) must be on cash basis.) 507(b)(1)(B), check here Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (The total of amounts in columns (b). (b) Net investment (c) Adjusted net (c), & (d) may not necessarily equal the expenses per for charitable income income purposes amounts in column (a) (see instr)) books (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check ▶ If the foundation is not required to attach Sch B Interest on savings and temp cash investments 2,406. 2,406. 2,406. Dividends and interest from securities . 44,175. 44,175. 5a Gross rents (Net rental income or (loss) 6a Net gain/(loss) from sale of assets not on line 10 (16,899.)Gross sales price for all assets on line 6a 150,601. Capital gain net income (from Part IV, line 2) Net short-term capital gain...... Income modifications Gross sales less rtns & allowances 10a Less Cost of goods sold · · · · · c Gross profit or (loss) (attach schedule)... Other income (attach schedule) 12 Total. Add lines 1 through 11 29,682. 46,581. 46,581. Compensation of officers, directors, trustees, etc Other employee salaries and wages ... SCANNED NOV 3 0 2011
Operating and Administrative Expenses Pension plans, employee benefits 16a Legal fees (attach schedule)...... Accounting fees (attach schedule) 2,925. 1,462. 1,463. Other-professional fees (attach schedule) 17 18 Taxes (attach schedule) (see instructions) Depreciation (attach sch.) and depletion. 19 Occupancy 2.1.2011 8. 20 Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) ... 220. Total operating and administrative expenses. Add lines 13 through 23.... 3,147. 1,462. 1,463. Contributions, gifts, grants paid 65,000. 65,000. 68,147. Total exp & disbursements Add lines 24 and 25 1,462. 1,463. 65,000. Subtract line 26 from line 12: Excess of revenue over expenses (38, 465.)and disbursements b Net investment income (if neg , enter -0-) 45,119 c Adjusted net income (if neg, enter -0-) 45,118.

Pär	Ŧ	Attached schedules and amounts in the Balance Sheets description column should be for	Beginning of year		of year
		end-of-year amounts only (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	1,024.	26,096.	26,096.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less ⁻ allowance for doubtful accts ▶	2,475.		
	4	Pledges receivable ▶	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
		Less allowance for doubtful accts. ▶			<u> </u>
	5	Grants receivable		 	
İ	•	Sidnia receivable	 		
	e	Receivables due from officers, directors, trustees, and other			
	6				
	7	disqualified persons (attach schedule) (see the instructions)			L
		receivable (attach schedule) Less allowance for			·
		doubtful accounts			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
آ 1	0a	Investments - U S and state govt obligations (attach schedule).			
	b	Investments - corporate stock (attach schedule)	951,333.	891,889.	1,295,529.
	С	Investments - corporate bonds (attach schedule)			
1	1	Investments - land, buildings, and equipment basis - Less accumulated depreciation (attach schedule)			
ı		Less accumulated depreciation	**		† -
1	2	Investments - mortgage loans			
	3	Investments - other (attach schedule)			
				<u> </u>	<u> </u>
'	7	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
	_				
1		Other assets (describe)	<u> </u>		
1	6	Total assets (to be completed by all filers - see the	054 000	015 005	
	_	ınstructions Also, see page 1, item i)	954,832.	917,985.	1,321,625.
- 1		Accounts payable and accrued expenses			1
	8	Grants payable	<u></u>		_
8 1	9	Deferred revenue			
≝ 4	U	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	1	Mortgages and other notes payable (attach schedule)			
ا ا	2	Other liabilities (describe ►)]
					į
2	3	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here▶			
		and complete lines 24 through 26 and lines 30 and 31.			*
ø 2	4	Unrestricted			-
ည် ₂		Temporarily restricted			1
Net Assets or Fund Balances		Permanently restricted			,
<u>m</u> _	•	Foundations that do not follow SFAS 117, ck. here ▶ 🏻			
ğ		and complete lines 27 through 31.			-
ي ا ا	7	Capital stock, trust principal, or current funds	375,652.	275 652	
0 2			373,032.	375,652.	
sets	_	Paid-in or capital surplus, or land, bldg , and equipment fund	E70 400	045 073	' '
š 2	9	Retained earnings, accumulated income, endowment, or other funds	579,480.	945,973.	
let			055 100	1 201 605	
2 3	0	Total net assets or fund balances (see the instructions)	955,132.	1,321,625.	·
3	1	Total liabilities and net assets/fund balances (see the			
		ınstructions)	955,132.	1,321,625.	,
Part	Ш	Analysis of Changes in Net Assets or Fund Bala	nces		
1 To	tal	net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree	with	
					955,132.
		amount from Part I, line 27a			(38,465.)
				- -	130,100.7
		nes 1, 2, and 3			916,667.
		eases not included in line 2 (itemize)	••••	5	
		net assets or fund balances at end of year (line 4 minus line 5) - Pa	art II column (b) line 30		916,667.
	·ul	2000 or raine balanced at one or your finite 4 million mile by - Pa	ii, co.diiii (b), iiile 30	<u> </u>	710,001.

	(a) List and describe the	e kınd(s) of property sold (e g , real	estate,	(b)How acquired P - Purchase	(c) Date a	cquired	(d) Date sold
	2-story brick warehous	se, or common stock, 200 shs MLC	Co)	D - Donation	(mo , da	(mo , day, yr)	
1 a	1000 SHRS QUES			P	07/30/		11/09/2010
b		R DANIELS MID COR	P	P	02/05/		12/16/2010
С	500 SHRS AGL R			Р		2007	08/29/2011
d	1000 SHRS HEWL			P	01/03/	2011	08/22/2011
е	SEE ATTACHED W	ORKSHEET					
	(e) Gross sales price	(f) Depreciation allowed	(g) Cost or o	ther basis		(h) Gair	n or (loss)
		(or allowable)	plus expens			(e) plus (f) minus (g)
a				18,553.			(1,017.)
_b				21,913.			(2,542.)
С				19,209.	,		1,402.
d				43,388.			(19,006.)
е	68,702.			64,438.			4,264.
	Complete only for assets show	ving gain in column (h) and owned l	by the foundation or	12/31/69	(1) 🤄	ains (Co	l (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess	of col (i)	col (k)	, but not	less than -0-) or
	(I) I W V as 01 12/31/09	as of 12/31/69	over col (j), if any		Losses (f	rom col (h))
_a							(1,017.)
b							(2,542.)
С							1,402.
d							(19,006.)
e							4,264.
_	Capital gain net income or (ne	t constal local	so enter in Part I. lir	ne 7			
2	Capital gain het income of the	If (loss), e	so enter in Part I, lir enter -0- in Part I, lir	ne 7	2		(16,899.)
3	Net short-term capital gain or	(loss) as defined in sections 1222(5) and (6)	_			
	If gain, also enter in Part I, line	e 8, column (c) (see the instructions)	- ス			
		8			3		(21,548.)
Pa		nder Section 4940(e) for R		Net Investm	ent Incor	ne —	
(Fo		ate foundations subject to the section					
			. ,		•		
If se	ection 4940(d)(2) applies, leave	e this part blank					
Was	s the foundation liable for the s	section 4942 tax on the distributable	amount of any vea	r in the base peri	od?		☐ Yes 🏻 No
		ualify under section 4940(e) Do no					
		in each column for each year; see t			ntries		
_	(a)	(b)		(c) let value of		·	(d) ribution ratio
(Base period years Calendar year (or tax year beg	in) Adjusted qualifying distribution	ons nonchar	let value of itable-use assets		Disti	ribution ratio ivided by col (c))
	2009	58,00		1,299,50		55, (5) 5	0.0446
	2008	76,51		1,188,50			0.0644
	2007	85,00		1,648,85			0.0516
	2006	85,00		1,078,05			0.0788
	2005	85,00		1,052,78			0.0807
						T	
2	Total of line 1, column (d)				2		0.3201
		he 5-year base period - divide the to			····		
	•	een in existence if less than 5 years	•	-	3		0.0640
	of years the loundation has be	sen in existence il less than 5 years			·· •	 	0.0010
	Franches and value of nonchar	ritable-use assets for 2010 from Pai	4 V 1.00 E		4	ļ	1 374 047
4	Enter the net value of nonchar	mable-use assets for 2010 from Par	TA, IIIIe 5	•••	···· *	 	1,374,047.
_	A 4 15 1 4 5 1 0				_ ا		07 020
5	Multiply line 4 by line 3				5	<u> </u>	<u>87,939.</u>
		// / 5					4 - 1
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)		•••••	6	_	451.
							00 000
7	Add lines 5 and 6				7		88,390.
		rom Part XII, line 4				<u></u>	65,000.
	If line 8 is equal to or greater t	han line 7, check the box in Part VI	, line 1b, and compl	ete that part usin	g a 1% tax	rate See	the Part VI
	instructions						

Fo	m 990-PF (2010) THE HARRIS FOUNDATION 58	3-603	3244	2 р	age 4
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see t	the instr	uction	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ & enter "N/A" on line 1				-
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐	ı		90)2.
	and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter				
	4% of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2		0	
3	Add lines 1 and 2	3		90)2.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4	,		0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5		90)2.
6	Credits/Payments ⁻				
а	2010 estimated tax payments and 2009 overpayment credited to 2010				
	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) 6c	İ			
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d	,	_ 1	,15	<u>,4.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	3			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9)			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0		25	2.
	Enter the amount of line 10 to be Credited to 2011 estimated tax 252. Refunded ▶ 11	1			
	art VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate of			Yes	No
	ıntervene ın any political campaign?		_1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for				
	definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d			
	or distributed by the foundation in connection with the activities			<u></u>	
	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ► \$ (2) On foundation managers ► \$				
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	· ••••••	_2		X
•	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
40	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				X
	If "Yes," has it filed a tax return on Form 990-T for this year?			-	X
•	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	• • • • • • • •	5		 ^ ,
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
•	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions				
	that conflict with the state law remain in the governing instrument?			X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and P		6	X	
	Enter the states to which the foundation reports or with which it is registered (see the instructions)	aπ xv	7		
ou.	Enter the states to which the foundation reports of with which it is registered (see the instructions)				
h	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		0 L	X	ļ ¹
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or	••••	8b	- 1	ļ
-	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV in instructions)?	lf "Voo "			
	complete Part XIV				X
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		9_		- ``
	names and addresses		10		Х
		• • • • •	10		

	1990-PF (2010) THE HARRIS FOUNDATION 58-60324	42	Pa	age 5
Pa	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes"attach schedule (see instructions)			
	If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract			
	before August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		X	
	Website address ▶			
14	The books are in care of ▶ L E RICE Telephone no ▶ 706	-54	3-9	074
	Located at ▶ PO BOX 8065 GA ATHENS ZIP+4 ▶ 30603			
15	Ot 4047(-)(4)			•
	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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the			
	foreign country >			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No			ļ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		ĺ	
	If the foundation agreed to make a grant to or to employ the official for a period			ļ
	after termination of government service, if terminating within 90 days)		- [
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			T
С	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		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2010? Yes X No			ļ
	If "Yes," list the years ▶ 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			- 1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement - see the instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			ļ
	enterprise at any time during the year?			l
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation			1
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved		- 1	j
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)		Ì	1
	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		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable			
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		X

Form	990-PF(2010) THE HARRIS FOUN	IDATION		58-603	32442	Page 6
Par	VII-B Statements Regarding Acti	vities for Which F	orm 4720 May Be R	Required (continue	d)	
5a	During the year did the foundation pay or incu	r any amount to	 -			
	(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	n (section 4945(e))?	Yes 🛛 N	10	
	(2) Influence the outcome of any specific publi	ic election (see section	4955), or to carry			
	on, directly or indirectly, any voter registra	tion drive?		∏ Yes 🏻 N	No l	
	(3) Provide a grant to an individual for travel,				No	
	(4) Provide a grant to an organization other th	· ·	•			
	in section 509(a)(1), (2), or (3), or section		=	Yes 🛛 N	lo l	
	(5) Provide for any purpose other than religiou		·	L		
	educational purposes, or for the prevention		,	Yes 🛛 N	10	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	*				
-	Regulations section 53 4945 or in a current no		•		5b	
	Organizations relying on a current notice regain		•	· —		
c	If the answer is "Yes" to question 5a(4), does	=				
·	tax because it maintained expenditure respons			Yes N	10	
	If "Yes," attach the statement required by Reg	=		les 1	•	
6-	Did the foundation, during the year, receive an		` '			
oa	- ·	•	• • •		.	
	premiums on a personal benefit contract? .				10	
D	Did the foundation, during the year, pay premi	ums, airectly or indirect	lly, on a personal benefit o	contract?	6b	<u> X</u>
	If "Yes" to 6b, file Form 8870				_	
	At any time during the tax year, was the found				}	
_	If "Yes," did the foundation receive any proceed					
Par	Information About Officers	, Directors, Truste	es, roundation Ma	nagers, Hignly Pai	ia Empioy	ees,
4 1	and Contractors	n management and their		!A		
1 L	ist all officers, directors, trustees, foundation	(b) Title, and average			1	
	(a) Name and address	hours per week	(c) Compensation	(d) Contributions to employee benefit plans		se account,
		hours per week devoted to position	(c) Compensation (If not paid, enter -0-)			se account, owances
	ON E RICE	hours per week	(If not paid, enter -0-)	employee benefit plans		•
E	ON E RICE PO BOX 8065 ATHENS GA	hours per week devoted to position MANAGER		employee benefit plans		•
E	ON E RICE O BOX 8065 ATHENS GA BESSIE STELL	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans		•
E	ON E RICE PO BOX 8065 ATHENS GA	hours per week devoted to position MANAGER	(If not paid, enter -0-)	employee benefit plans		•
E	ON E RICE O BOX 8065 ATHENS GA BESSIE STELL	hours per week devoted to position MANAGER	(If not paid, enter -0-)	employee benefit plans		•
E	ON E RICE O BOX 8065 ATHENS GA BESSIE STELL	hours per week devoted to position MANAGER	(If not paid, enter -0-)	employee benefit plans		•
E	ON E RICE O BOX 8065 ATHENS GA BESSIE STELL	hours per week devoted to position MANAGER	(If not paid, enter -0-)	employee benefit plans		•
F	ON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA	hours per week devoted to position MANAGER TRUSTEE	(If not paid, enter -0-) 0	employee benefit plans and deferred comp		•
F F F F F F F F F F F F F F F F F F F	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee	hours per week devoted to position MANAGER TRUSTEE	(If not paid, enter -0-) 0	employee benefit plans and deferred comp		•
F F F F F F F F F F F F F F F F F F F	ON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA	hours per week devoted to position MANAGER TRUSTEE	(If not paid, enter -0-) 0	employee benefit plans and deferred comp		
2 C	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee inone, enter "NONE."	hours per week devoted to position MANAGER TRUSTEE	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit	other all	owances
2 C	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit	(e) Expen	owances se account,
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee inone, enter "NONE."	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,
2 C (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week hours per week	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,
2 CC III (a)	CON E RICE PO BOX 8065 ATHENS GA BESSIE STELL PO BOX 727 WINDER GA Compensation of five highest-paid employee none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position MANAGER TRUSTEE s (other than those in hours per week devoted to position	(If not paid, enter -0-) 0 0 cluded on line 1 - see th	e instructions). (d) Contributions to employee benefit plans and deferred	(e) Expen	owances se account,

Form 990-PF (2010)

All other program-related investments. See instructions.

Pair X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	lion	s, see the instructions
Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	1,357,284.
	1b	37,688.
c Fair market value of all other assets (see the instructions)	1c	
d Total (add lines 1a, b, and c)	1d	1,394,972.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	1,394,972.
Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,		
see the instructions)	4	20,925.
Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,374,047.
F		68,702.
Part XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating foundation	ions	
and certain foreign organizations check here ▶ and do not complete this part)		
Minimum investment return from Part X, line 6	1	68,702.
2 a Tax on investment income for 2010 from Part VI, line 5 2a 902.		0071021
b Income tax for 2010. (This does not include the tax from Part VI)		
c Add lines 2a and 2b	20	902.
B Distributable amount before adjustments Subtract line 2c from line 1	_	67,800.
Recoveries of amounts treated as qualifying distributions	_	
 	5	67,800.
Some transfer and	-	07,000.
	7	67,800.
	1	07,000.
Part XII Qualifying Distributions (see the instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc -total from Part I, column (d), line 26	1a	65,000.
· • · · · · · · · · · · · · · · · · · ·	1b	
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
	3b	
	4	65,000.
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	\dashv	
	5	
<u>-</u>	6	65,000.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four		
qualifies for the section 4940(e) reduction of tax in those years	·uai	NVII

Form 990-PF (2010)

1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
	line 7				67,800.
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only			63,893.	
b	Total for prior yrs . 20, 20 , 20				
3	Excess distribs carryover, if any, to 2010.	•			
а	From 2005				
b	From 2006				
C	From 2007				
d	From 2008				
е	From 2009				
f	Total of lines 3a through e				
4	Qualifying distributions for 2010 from Part XII,				
	line 4 \triangleright \$ 65,000.				
а	Applied to 2009, but not more than line 2a	•		63,893.	
b	Applied to undistributed income of prior				
	years (Election required - see the instr)				
C	Treated as distributions out of corpus				
	(Election required - see the instructions)				
d	Applied to 2010 distributable amount				1,107.
е	Remaining amt. distributed out of corpus				
5	Excess distribs carryover applied to 2010				
	(If an amount appears in column (d), the				
	same amount must be shown in col (a)) .				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, & 4e Subtract line 5				
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 the instructions				
е	Undistributed income for 2009 Subtract				
	line 4a from line 2a Taxable amount -				
	see the instructions	·			
f	Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1. This amount				
_	must be distributed in 2011	·			66,693.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see the				
_	instructions)	 .			
8	Excess distributions carryover from 2005				
	not applied on line 5 or line 7 (see the				
	Instructions)				
3	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a				
10	F				
	Analysis of line 9 Excess from 2006				
	Excess from 2006				
	Excess from 2007				
	Excess from 2009				
	Excess from 2010				

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

GENERALLY RESTRICTED TO THE NORTH GEORGIA AREA

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount .
Name and address (home or business) a Paid during the year BARROW COUNTY BOARD OF EDUCATION WINDER, GA 30680	N/A	N/A	EDUCATIONAĻ	65,000.
			•	
Total			► 3a	65,000.
b Approved for future payment			•	
Total			▶ 3h	

er gros	ss amounts unless otherwise indicated	Unrelat	ed business income	Excluded b	y section 512, 513, or 514	(e)
		(a) Business	(b) Amount	(c) Excl	(d) Amount	Related or exer function incom (See the
	gram service revenue	code		code		instructions)
				+ +		
				+		
				++		
				+		 _
	es and contracts from government agencies					
	mbership dues and assessments					
	est on savings and temporary cash investments		-	14	2,406.	
Divi	idends and interest from securities			14	45,793.	
Net	rental income or (loss) from real estate					
Deb	ot-financed property					
Not	debt-financed property					
Net	rental income or (loss) from personal propert	y				
Oth	er investment income					
Gain	or (loss) from sales of assets other than inventory			18	(16,899.)	
Net	income or (loss) from special events					
Gro	ess profit or (loss) from sales of inventory .					
Oth	er revenue a					
Sub Tot	ototal Add columns (b), (d), and (e)	 ons)			13	31,30
Sub Tot work	ototal Add columns (b), (d), and (e)	ons) the Acco	omplishment of E	xempt P) of Part X	urposes VI-A contributed importa	intly to the
Sub Tote work	ototal Add columns (b), (d), and (e)	ons) the Acco	omplishment of E	xempt P) of Part X	urposes VI-A contributed importa	intly to the
Sub Tote work	ototal Add columns (b), (d), and (e)	ons) the Acco	omplishment of E	xempt P) of Part X	urposes VI-A contributed importa	intly to the
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Sub Tot work	ototal Add columns (b), (d), and (e)	ons) the Acco	omplishment of E	xempt P) of Part X	urposes VI-A contributed importa	intly to the
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Sub Tot work	ototal Add columns (b), (d), and (e)	ons) the Acco	omplishment of E	xempt P) of Part X	urposes VI-A contributed importa	intly to the
Sub Tot work	ototal Add columns (b), (d), and (e)	ons) the Acco	omplishment of E	xempt P) of Part X	urposes VI-A contributed importa	intly to the
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e Sub Tot e work	ototal Add columns (b), (d), and (e)	ons) the Acco	omplishment of E	xempt P) of Part X	urposes VI-A contributed importa	intly to the

Page 13

Form 990-PF (2010) THE HARRIS FOUNDATION 58-6032442 Pa Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did th	e organization directly or	r indirectly engag	e in any of the following with	any other org	anization described in section	Yes	s No
	501(c)) of the Code (other than	section 501(c)(3) organizations) or in section	527, relating	to political organizations?		
а	Trans	fers from the reporting fo	oundation to a no	ncharitable exempt organiza	tion of			ė l
	(1)	Cash					. 1a(1)	X
	(2)	Other assets						X
b	Other	transactions					المن شخص	
	(1)	Sales of assets to a non	charitable exemp	ot organization			1b(1)	Х
							1b(1)	X
				=			1b(2)	$\frac{1}{X}$
								X
								$\frac{1}{X}$
								X
								<u> </u>
ď						nould always show the fair market		
						ed less than fair market value in a	ny transaction	n
	or sha	aring arrangement, show	in column (d) the	e value of the goods, other as	ssets, or servi	ces received		
								
<u>(a)</u>	Line no	(b) Amount involved	(c) Name of nor	ncharitable exempt organizat	ion (d)Desc	of transfers, transactions, and sha	ring arranger	nents
							_	
						-		
_		-		······································		·		
					 			
								
								
		<u> </u>						
_								
2a	Is th	ne foundation directly or i	ndirectly affiliated	d with, or related to, one or n	ore tax-exem	pt organizations described in		
				n 501(c)(3)) or in section 527			∏ Yes 🏻	No.
b		es," complete the follow		,,,,,			٠٠٠ ا	
		(a) Name of organizat		(b) Type of organize	ation	(c) Description of rela	tionship	
				(=/ ·)po o o o gener		(5) 2000.151.011.01.101.0	полотир	
					-			
								
			·-					
		l i lada masakina a		4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -				
Sig		Under penalties of best of my knowle	r perjury, I declar doe and belief. it	e that I have examined this re is true, correct, and complet	eturn, includini e. Declaration	g accompanying schedules and stood of preparer (other than taxpayer of	atements, and	to the
He	re	on all information	of which prepare	r has any knowledge		Concretian taxpayer C	. maddialy) is	Justiu
		``	ν (/	17/11 / 17		
			On 1	Vice	11//	1 / Turs	Ece >	
_		Signature of officer of	or trustee		Date	Title		
Pa	id	Print/Type prepa	arer's name	Preparer's signature	, 0	Date Check If	PTIN	
		T. F. DICE		7 4414	ere 11		0106951	1 Ĝ
	epare	Francis and a	▶RICE AN	D GILES P C		Firm's EIN ▶ 58 – 1		
US	e On	Firm's address	▶220 COL		18	Phone no 706-5		4
_		_ 11 5 4001033		GA 30601	_ -		orm 990-PF (2	
				-			V	,_,

		ns and Losses for Ta					50 6022446
Name:	THE HARRIS FOUNDATI	.ON		(b) How		ib number:	58-6032442
				acquired			
				purchase			
Ref	(a) List and describe t	he kınd(s) of property sold		donation	(c) Da	te acquired	(d) Date sold
	800 SHRS CISCO SYS			P		8/1997	09/29/203
	200 SHRS CGMI		_	P		1/2000	09/29/203
1H	650 SHRS LOWES CO I	NC		P		3/2003	09/08/20:
	200 SHRS LOWES CO I			P		3/2003	09/29/201
1J	600 SHRS NUSTAR ENE	RGY LP		P	05/1	4/2010	10/26/201
		(f) Depreciation	(g) Cos	st or other b	asis		
Ref	(e) Gross sales price	allowed or (allowable)	plus e	xpense of s		(h)	Gain or (loss)
1F	12,709.				507.		8,202.
1G	3,177.				163.		(6,986.
1H	12,523.		 	12,	161.		362. 184.
1I 1J	3,926. 36,367.	·		33,	742. 865.		2,502.
Total .							4,264
	Complete only for assets showing						
	(i) FMV	(j) Adjusted basis		ess of col (ı)	over		
Ref 1 F	as of 12/31/1969	as of 12/31/1969		ol (j), if any		(1)_(Sains or losses $8,202$.
1G	 		 			<u> </u>	16 986
1 <u></u> 1H	+		 	······································			(6,986. 362.
1I			 				184.
1J							2,502

ATTACHMENT TO 2010 FORM 990-PF, PART II, LINE 10B **INVESTMENTS--CORPORATE STOCKS**

			BOOK VALUE	F	AIR MARKET VALUE
SHARES	DESCRIPTION		10/31/11		10/31/11
1,500	AGL RESOURCES	\$	35,047.97	\$	41,940.00
1,400	ASTRAZENECA PLC SPON		78,018.49		67,074.00
2,000	BANK OF AMERICA CORP		40,495.65		13,660.00
2,000	BB & T CORP		36,269.36		46,680 00
1,280	BRISTOL MYERS SQUIBB CO		34,763.77		40,435.20
1,000	CENTURYLINK INC		26,530.81		35,260 00
1,000	CISCO SYSTEMS, INC		17,099 00		18,530 00
1,800	CSX CORP		28,485 01		39,978 00
1,000	EXPRESS SCRIPTS INC.		47,569.15		45,770.00
2,000	DUKE ENERGY CORP*		33,771.50		40,840.00
2,000	EXXON CORP		4,217.88		156,180.00
1,000	FISERV INC		49,121.72		58,870.00
5,000	GENERAL ELECTRIC CO		31,068.17		83,550.00
700	HOME DEPOT INC		6,288.17		25,060.00
1,680	JOHNSON & JOHNSON		76,349 98		108,175.20
600	KELLOGG CO		30,116.51		32,526 00
2,300	MERCK & CO		38,288.58		79,350.00
2,400	MICROSOFT CORP		14,315 51		63,912 00
1,000	PETROLEO BRASILEIRO		33,248 00		25,290.00
1,400	PG&E CORP		55,110.31		60,060 00
1,700	PROGRESS ENERGY CORP		68,289.67		88,570.00
1,300	SEMPRA ENERGY		70,996.42		69,849.00
1,000	SPECTRA ENERGY		17,465 25		28,630.00
1,000	SUNTRUST CAP IV 7.875%		18,962.23		25,340 00
	TOTALS	\$	891,889.11	\$	1,295,529.40

58-6032442

	JS 990	Accounting Fees			201
CCE AND GILES, PC 2,935. 1,462. 1,463.	December	Expenses	Net investment		Charitable
2,925. 1,462. 1,463.	CE AND GILES, PC	2 . 925 .	1.462	1.463	purposes
		2,925.	1,462.	1,463.	
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Name: THE HARRIS FOUNDATION	ю: 58-6032442	
Description:		
Туре	Amount	
OST OFFICE BOX RENT	220	
Total	220	
IULAI	,	