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

OMB No 1545-0052

Depart	ment of	the Treasury	l liea	leu as a Frivale	Foundance	ווכ		2011
		ue Service	Note. The foundation may be	e able to use a copy of this r	etum to satisfy sta	ite reporting require	ements	
Ford	alend	dar year 2011 or t	ax year beginning	, and ending				
Nan	ne of fou	indation				A Emplo	yer identification number	
S!	TIN	CHCOMB FA	MILY FOUNDATION, IN	rc.		20-	-4003704	
		•	nber if mail is not delivered to street address)		Room/suite		one number (see instructions)	
		, state, and ZIP code	TTOM DRIVE			6/3	3-364-9716	
	ULU'		GA 30096			C If exen	nption application is pending c	neck here
G C	heck a	all that apply		turn of a former publi	charity	D 1 Fo	reign organizations, check here	▶ _
				d return		1	reign organizations meeting the	
			X Address change Name cl			85	% test check here and attach of	computation
		- · · · -	n X Section 501(c)(3) exempt prival xempt charitable trust Other taxa	te foundation ible private foundatio	n	·	te foundation status was termii i 507(b)(1)(A), check here	nated under
	_	ket value of all as			Accrual	F If the f	oundation is in a 60-month term	nination
		ear (from Part II, o	- •	<u> </u>	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		section 507(b)(1)(B), check her	
	e 16) l		689,231 (Part I, column (d) mus	it be on cash basis)				
	ırt I	Analysis of Re	evenue and Expenses (The total of (b), (c), and (d) may not necessarily equal nn (a) (see instructions))	(a) Revenue and expenses per books		et investment ncome	(c) Adjusted net income	(d) Disbursements for chantable purposes
		·			50			(cash basis only)
	1	*	, grants, etc., received (attach schedule)	192,8	30			·
	3		the foundation is not required to attach Sch. B ligs and temporary cash investments	37,3	162	3,515	37,362	
	4		igs and temporary cash investments Iterest from securities	44,7		44,749	44,749	
	1 5a	Gross rents	itelest from securities			44,743	11,715	<u> </u>
_	b		ental income or (loss)					
ne	6a		sale of assets not on line 10	10,2	250			·
Je l	b	Gross sales price for a						
Revenue	7	="	income (from Part IV, line 2)	•		10,250		
	8	Net short-term of					3,092	
	9	Income modifica	, •			·		
	10a		eturns & allowances					
	b	Less Cost of go	ods sold					
	С		oss) (attach schedule)					
	11		RECEMED SIMT 1	2,	77	2,777	2,777	
	12	Total. Add lines	1 through 11	287,9	88	61,291	87,980	
es	13 14	Compensation of	of officers, idirectors, trustees, etc salaries and wages		0	-		
US	15		employee benefits ()	-	_			·
be	16a		GDEN, UT					
ŭ	Ь		(attach schedule)			-		
۸e	C	•	fees (attach schedule) STMT 2	25,4	140			·-
ati	17	Interest	(Charles Constant)					
Operating and Administrative Expenses	18		edule) (see instructions) STMT 3	1,4	167			
<u>=</u>	19	="	ch schedule) and depletion					
щþ	20	Occupancy	·					
Ă	21	· · · · · · · · · · · · · · · · · · ·	nces, and meetings					
S C	22	Printing and put	olications					
9	23	Other expenses (att s	ch)					
ţi	24	Total operating	g and administrative expenses.					
e L	1	Add lines 13 thr	ough 23	26,		0	0	
ğ	25	Contributions, gifts, gr	ants paid	131,	276			131,276
_	26	Total expenses	and disbursements. Add lines 24 and 25	158,	183	0	0	131,276
	27	Subtract line 26	from line 12					
	a	Excess of reven	ue over expenses and disbursements	129,	305			
	ь	Net investmen	t income (if negative, enter -0-)			61,291		, ,
	С	Adjusted net in	ncome (if negative, enter -0-)	20			87,980	
								222 DE

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2011)

orm 99	0-PF (2011) STINCHCOMB FAMILY FOUNDATION, INC.			Page 2
Part	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of y	/ear
	Stinding be for end-or-year amounts only (see instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing	441,920	245,085	245,085
2	Savings and temporary cash investments			
3	Accounts receivable >	}		
١.	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶	ŀ		
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see			
	instructions)			
7	Other notes and loans receivable (att schedule)			
	Less allowance for doubtful accounts ▶ 0			
8	Inventories for sale or use	 		
9	Prepaid expenses and deferred charges		505 500	
10a	Investments—U S and state government obligations (attach schedule)	525,143	587,082	600,546
b	Investments—corporate stock (attach schedule) SEE STMT 5	1,231,873	1,519,566	1,487,674
С	Investments—corporate bonds (attach schedule) SEE STMT 6	351,461	352,473	355,926
11	investments—land, buildings, and equipment basis			
	Less accumulated depreciation (attach sch)			
12	Investments—mortgage loans			
13	Investments—other (attach schedule) SEE STATEMENT 7	23,072		
14	Land, buildings, and equipment basis			
	Less accumulated depreciation (attach sch)			
15	Other assets (describe ▶)			
16	Total assets (to be completed by all filers—see the	0.550.460	0.704.006	0 600 001
	instructions Also, see page 1, item I)	2,573,469	2,704,206	2,689,231
17	Accounts payable and accrued expenses			
18	Grants payable			
19	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted Temporarily restricted			
24 25	• ,			
26	Permanently restricted Foundations that do not follow SFAS 117, check here			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds	2,573,469		
28	Paid-in or capital surplus, or land, bldg, and equipment fund			
29	Retained earnings, accumulated income, endowment, or other funds		2,704,206	
30	Total net assets or fund balances (see instructions)	2,573,469	2,704,206	
31	Total liabilities and net assets/fund balances (see			
<u> </u>	instructions)	2,573,469	2,704,206	
Part			- [-	
	I net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	igree with		0 550 444
end-	of-year figure reported on prior year's return)		[4	2,573,469

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)

2 Enter amount from Part I, line 27a

3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 8

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ►

5 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

6 2,704,206

Form 990-PF (2011)

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income			
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acqu (mo , day, y	1
1a SEE WORKSHEET					
b					
С					
d					
е			L	· · · · · · · · · · · · · · · · · · ·	
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain or (loss)
a					
b					
<u>c</u>					
Complete only for assets showing	gain in column (h) and owned by the four	dation on 12/31/69			
Complete only to decide and the	(j) Adjusted basis		ss of col (i)		ins (Col. (h) gain minus , but not less than -0-) or
(I) F M V as of 12/31/69	as of 12/31/69		(j), if any	L	osses (from col (h))
а					
b					<u></u>
С		_			
d					
e					
2 Capital gain net income or (net ca	If gain, also enter in I If (loss), enter -0- in I	•		2	10,250
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6)	_			
If gain, also enter in Part I, line 8,	column (c) (see instructions) If (loss), ent	er -0- ın			2 002
Part I, line 8 Part V Qualification U	nder Section 4940(e) for Reduc			3	3,092
If "Yes," the foundation does not quali	ion 4942 tax on the distributable amount of under section 4940(e) Do not complete	this part	· · · · · · · · · · · · · · · · · · ·		Yes <u>X</u> No
	each column for each year, see the instruc	tions before making	any entries		
(a) Base penod years Calendar year (or tax year beginning in			(c) ue of nonchantable-use assets		(d) Distribution ratio (col (b) divided by col (c))
2010		,861	2,129,2	17	0.055354
2009	89	,316	1,363,2	35	0.065518
2008		,384	1,366,6 477,9		0.047111 0.068765
2007		,869 ,217	197,2		0.072092
2006 2 Total of line 1, column (d)	-	7531		2	0.308840
3 Average distribution ratio for the	5-year base period—divide the total on line as been in existence if less than 5 years	e 2 by 5, or by the		3	0.061768
•	ble-use assets for 2011 from Part X, line 5			4	2,702,748
5 Multiply line 4 by line 3				5	166,943
	4404 (FD 44 971b)				613
6 Enter 1% of net investment incom	ne (1% of Part I, line 270)			6	
7 Add lines 5 and 6				7	167,556
8 Enter qualifying distributions from If line 8 is equal to or greater than Part VI instructions	n Part XII, line 4 In line 7, check the box in Part VI, line 1b, a	and complete that pa	art using a 1% tax rate	8 See the	131,276
, art vi ilisuocuolis					Form 990-PF (2011)

Form	990-PF (2011) STINCHCOMB FAMILY FOUNDATION, INC. 20-4003704		P	age 4
<u>Pa</u>	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)			_
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	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,	<u> 226</u>
	here ▶ ☐ 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-)			0
3	Add lines 1 and 2		1,	226
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		1,	226
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 1,250			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d		1.	250
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			15
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			9
11	Enter the amount of line 10 to be Credited to 2012 estimated tax 9 Refunded 11			
	irt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a	1.00	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	···		
J	of the instructions for definition)?	1 _b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	"		<u> </u>
	published or distributed by the foundation in connection with the activities			
_	Did the foundation file Form 1120-POL for this year?	1c		х
c d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	10		
u	(1) On the foundation \$ (2) On foundation managers \$			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
е				
2	on foundation managers \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
2		-		-
•	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	,		x
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4a		├ ^
b				Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5_		<u> </u>
_	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		ļ	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	_	₹.	İ
_	conflict with the state law remain in the governing instrument?	6	X	├
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	├
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ GA			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	L
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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"		}	
	complete Part XIV	9_		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X

If "Yes," did it have excess business holdings in 2011 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

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2011?

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 2011)

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Х

N/A

3b

4a

	1990-PF (2011) STINCHCOMB FAM			1003704			_ Page 6
_Pa	art VII-B Statements Regarding	Activities for Which Fo	orm 4720 May Be Re	e quired (contir	nued)		
5a	During the year did the foundation pay or incur	any amount to		<u></u>		ł	
	(1) Carry on propaganda, or otherwise attemp	t to influence legislation (secti	on 4945(e))?	<u> </u>	es X No		1
	(2) Influence the outcome of any specific publi	ic election (see section 4955),	or to carry on,		:		
	directly or indirectly, any voter registration	dnve?		Y	es X No		
	(3) Provide a grant to an individual for travel, s	study, or other similar purpose	s?	Y	es 🗓 No		
	(4) Provide a grant to an organization other the	an a chantable, etc , organizat	tion described in		_		
	section 509(a)(1), (2), or (3), or section 49	40(d)(2)? (see instructions)		_ Y	es 🗓 No	1	
	(5) Provide for any purpose other than religious	is, charitable, scientific, literary	y, or educational	_			-
	purposes, or for the prevention of cruelty to	o children or animals?		Y	es 🗓 No		
b	If any answer is "Yes" to 5a(1)-(5), did any of t	the transactions fail to qualify i	under the exceptions desc	cribed in	_	ŀ	
	Regulations section 53 4945 or in a current not	tice regarding disaster assista	nce (see instructions)?		N/A	5b	
	Organizations relying on a current notice regard	ding disaster assistance chect	k here		>		
С	If the answer is "Yes" to question 5a(4), does t	he foundation claim exemptior	n from the tax]
	because it maintained expenditure responsibility	ty for the grant?		N/A = Y	es No	- 1	
	If "Yes," attach the statement required by Regu	ulations section 53 4945-5(d)				l	
6a	Did the foundation, during the year, receive any	y funds, directly or indirectly, to	o pay premiums		_	ŀ	
	on a personal benefit contract?			Y	es \overline{X} No	ŀ	
b	Did the foundation, during the year, pay premiu	ıms, dırectly or ındirectly, on a	personal benefit contract	?		6b	<u> </u>
	If "Yes" to 6b, file Form 8870						İ
7a	At any time during the tax year, was the foundation	ation a party to a prohibited tax	shelter transaction?	_ `	es X No	ļ	
<u>b</u>	If Yes, did the foundation receive any proceeds				N/A	7b	
Pa	art VIII Information About Office	rs, Directors, Trustees	, Foundation Mana	gers, Highly F	aid Employee	es,	
	and Contractors						
1 1	ist all officers, directors, trustees, foundation	on managers and their comp	pensation (see instruction	ons).			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Evne	nse account,
	(a) Name and address	3	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		allowances
			devoted to position	- ,	compensation	ļ	
MA	TTHEW D STINCHCOMB	PEACHTREE CITY	PT PRESIDENT				
31	2 BRADFORD WAY	GA 30269	5.00	0	0	├ ──	0
JE	NNY STINCHCOMB	PEACHTREE CITY	PT DIRECTOR			}	
31	2 BRADFORD WAY	GA 30269	1.00	0	0	ļ	0
JC	NATHAN STINCHCOMB	KENNER	PT DIRECTOR				
10	10 CHATEAU LAFITTE W	LA 70065	5.00	0	0		0
AI	LISON STINCHCOMB	KENNER	PT DIRECTOR				
_ 10	10 CHATEAU LAFITTE W	LA 70065	1.00	0	0	<u> </u>	0
2	Compensation of five highest-paid employe	ees (other than those includ	led on line 1—see instru	uctions) If none,	enter		
	"NONE"						
			(b) Title, and average		(d) Contributions to employee benefit	(e) Expe	nse account,
	(a) Name and address of each employee paid mor	re than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowances
					compensation		
NC	NE						
			}	,			
				ļ		 -	
			-			 	
			}				
		·····				-	
			1	1			
				<u> </u>		<u> </u>	
ota	I number of other employees paid over \$50,000						0
					F	om 990)-PF (2011)

Form 990-PF (20	O11) STINCHCOMB FAMILY FOUNDATION, INC	20-4003704	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)	dation Managers, Highly Paid E	
3 Five high	est-paid independent contractors for professional services (see instru	uctions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	·		
			
Total number of	others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct chantable activities during the tax year. Include relevant statistical information suct ther beneficianes served, conferences convened research papers produced, etc	ch as the number of	Expenses
1 N/A		<u> </u>	
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instru	uctions)	
	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-re	elated investments. See instructions		
J			

Form 990-PF (2011)

Total. Add lines 1 through 3

	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	131,276
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	·
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	131,276
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 instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	131,276

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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1	Distributed income (see instructions) Distributable amount for 2011 from Part XI, line 7 Undistributed income, if any, as of the end of 2011	(a) Corpus	(b) Years pnor to 2010	(c)	(d)
2	line 7			(c)	(d)
2	line 7	Corpus			
			rears prior to 2010	2010	2011
	Undistributed income, if any, as of the end of 2011				133,911
-			ļ		
	Enter amount for 2010 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2011				
	From 2006 4,545				
	From 2007 8, 969				
	From 2008 10 , 784				
	From 2009 21, 322				
	From 2010 11,951	F2 F21			
	Total of lines 3a through e	57,571			
4	Qualifying distributions for 2011 from Part XII,	:			
_	line 4 ▶ \$ 131,276 Applied to 2010, but not more than line 2a				
	_ ```		-		
U	Applied to undistributed income of prior years (Election required—see instructions)				
c	Treated as distributions out of corpus (Election				
Ū	required—see instructions)				
ч	Applied to 2011 distributable amount				131,276
	Remaining amount distributed out of corpus	·			131,270
5	Excess distributions carryover applied to 2011	2,635			2,635
	(If an amount appears in column (d), the same				2,000
	amount must be shown in column (a))				
3	Enter the net total of each column as				
	indicated below:	1			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	54,936			
b	Prior years' undistributed income Subtract			-	
	line 4b from line 2b				
С	Enter the amount of pnor 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	1			
	amount—see instructions				
е	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount—see				
	Instructions	-			
•	Undistributed income for 2011 Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2012.				0
,	Amounts treated as distributions out of corpus				
,	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
3	Excess distributions carryover from 2006 not				
-	applied on line 5 or line 7 (see instructions)	1,910			
•	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	53,026			
0	Analysis of line 9				•
а	Excess from 2007 8,969				
b	Excess from 2008 10,784	ļ	1		
С	Excess from 2009 21,322	İ			

11,951

d Excess from 2010 Excess from 2011

<u>_Pa</u>	rt XIV Private Operating Fou	ı ndations (see ins	structions and Par	t VII-A, question 9)					
1a	If the foundation has received a ruling or o	letermination letter that	it is a private operating	9					
	foundation, and the ruling is effective for 2011, enter the date of the ruling								
þ	Check box to indicate whether the foundar	tion is a private operatii	ng foundation describe	d in section 49	942(j)(3) or 4942	(₁)(5)			
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years					
	income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total			
	investment return from Part X for								
	each year listed								
d	85% of line 2a								
c	Qualifying distributions from Part XII,			 					
•	line 4 for each year listed								
d	Amounts included in line 2c not used directly								
u	for active conduct of exempt activities	in							
^	· .			 					
e	Qualifying distributions made directly								
	for active conduct of exempt activities				i				
_	Subtract line 2d from line 2c								
3	Complete 3a, b, or c for the								
_	alternative test relied upon								
a	"Assets" alternative test—enter			<u> </u>					
	(1) Value of all assets								
	(2) Value of assets qualifying under								
	section 4942(j)(3)(B)(i)					<u> </u>			
b	"Endowment" alternative test—enter 2/3								
	of minimum investment return shown in]						
	Part X, line 6 for each year listed								
c	"Support" alternative test—enter								
	(1) Total support other than gross investment income (interest,								
	dividends, rents, payments on			ļ					
	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			<u> </u>					
	(4) Gross investment income rt XV Supplementary Inform	antion (Complete	Abia mantanti if 6	ha farradatian ha	d 65 000 an ana				
ra	any time during the ye			ne iounuation na	u \$5,000 or more	iii assets at			
_ _	Information Regarding Foundation Ma		10113.]						
' a	List any managers of the foundation who l	•	than 2% of the total co	ntributions received by t	he foundation				
ŭ	before the close of any tax year (but only i				ine roundation				
	JONATHAN STINCHCOMB	, they have continuous	(C	cc 30000011 007 (4)(2))					
b	List any managers of the foundation who	own 10% or more of the	e stock of a corporation	(or an equally large po	rtion of the				
	ownership of a partnership or other entity)		•		-				
	NONE								
2	Information Regarding Contribution, G	rant, Gift, Loan, Scho	olarship, etc., Program	ns:					
	Check here ▶ if the foundation only	makes contributions to	preselected charitable	e organizations and doe	s not accept				
	unsolicited requests for funds. If the found	ation makes gifts, gran	its, etc (see instruction	is) to individuals or orga	ınızatıons under				
	other conditions, complete items 2a, b, c,	and d							
а	The name, address, and telephone number	er of the person to who	m applications should	be addressed					
	MATTHEW STINCHCOMB 6	78-364-9716	i						
	312 BRADFORD WAY PEA	CHTREE CITY	GA 30269						
b	The form in which applications should be	submitted and informat	ion and materials they	should include					
	SEE STATEMENT 9								
С	Any submission deadlines NONE								
	Any restrictions or limitations on awards, s	such as hy dengraphics	al areas, charitable fold	le kinds of institutions	or other				
u	factors	oo as by geographica	a areas, eriaritable liek	is, minos of misulutions,	or other				
	NONE								

Part XV Supplementary Information (co 3 Grants and Contributions Paid During the	ontinued) e Year or Approved for F	uture Payment		
	If recipient is an individual,	Foundation		
Recipient	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	reapient		
a Paid during the year				
SEE STATEMENT 10				
				131,27
		•		
Total	<u> </u>		▶ 3a	131,27
b Approved for future payment				
N/A				
Total			▶ 3b	
DAA				Form 990-PF (201

Part XVI-	A Analysis of Income-Producing Acti	vities				
Enter gross amounts unless otherwise indicated		Unrelate	ed business income	Excluded	by section 512, 513, or 514	(-)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program s	ervice revenue					(See instructions)
a			<u>-</u> -			
			-	ļ		
				 		
	 		-			
				<u> </u>		
f	and contracts from a contract and a			 		<u></u>
-	and contracts from government agencies					
	ip dues and assessments savings and temporary cash investments			14	37,362	
	and interest from securities	 		14	44,749	
	ncome or (loss) from real estate			1	33,735	
	nanced property			† i		
	bt-financed property					
	ncome or (loss) from personal property					
	stment income			14	2,777	····
8 Gain or (lo	ss) from sales of assets other than inventory			18	10,250	
	e or (loss) from special events					
	it or (loss) from sales of inventory					
11 Other reve	nue a					
с						
d						
e				-		
	dd columns (b), (d), and (e)		0	<u> </u> j	95,138	0
	line 12, columns (b), (d), and (e)				13	95,138
	t in line 13 instructions to verify calculations)					
Part XVI-E						
Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purpose					1
N/A	decomplication of the loandation of exempt purpose	es (other than b	y providing lands for si	acii paipe	(Occ matractions	,
		 				
					•	
				•		
						
				-		
						
	<u> </u>					
			 .			
	 					
	<u> </u>					
						

orm 990	-PF (201	1) STINCHOOM	MR FAMI	LY FOUNDA	TION, IN	IC. 20-40	003704		Pa	age 13
Part >		Information Reg	_	ansfers To and	Transaction	s and Relation	ships With	n Noncharitable		
1 Did	the orga	nızatıon directly or ındı	rectly engage	in any of the follow	ing with any other	er organization descr	nbed		Yes	No
		1(c) of the Code (other								
org	anization	s?		,,,,,	•					İ
		om the reporting founda	ation to a non	charitable exempt o	organization of					
	Cash							1a	1)	X
	Other as	eeste						<u>1a</u>		X
, ,	er transa							101	- /	+
			.hla a					41.		- V
		assets to a noncharita	•	_				1 <u>b</u>		X
		es of assets from a no		• •				1 <u>b</u>		-
		f facilities, equipment,		ets				<u>1b</u>		X
		rsement arrangements						<u>1b</u>		X
		r loan guarantees						<u>1b</u>	5)	X
(6)	Perform	ance of services or me	mbership or	fundraising solicitat	ions			<u> 1b</u>	<u>6)</u>	X
c Sha	anng of fa	icilities, equipment, ma	uling lists, oth	ier assets, or paid e	employees			<u> </u>	<u>: </u>	X
d If th	ne answei	r to any of the above is	"Yes," comp	lete the following so	chedule Column	(b) should always s	how the fair m	narket		
valı	ue of the	goods, other assets, or	r services giv	en by the reporting	foundation If the	e foundation received	d less than fai	r market		
vali	ue in any	transaction or sharing	arrangement	, show in column (d	i) the value of the	e goods, other asset	s, or services	received		
(a) Lir	ne no	(b) Amount involved	(c) Nam	e of nonchantable exemp	t organization	(d) Descript	on of transfers, tra	ansactions, and shanng arrange	ments	
A\V			Ì							
								•		
			İ		·			.		
			 					· · · · · · · · · · · · · · · · · · ·		
			-							
			 -				-			
			 							
			 							
			 							
			1							
2a Is t	he founda	ation directly or indirect	lly affiliated w	ith, or related to, on	ne or more tax-ex	empt organizations				
des	scribed in	section 501(c) of the C	Code (other th	nan section 501(c)(3)) or in section (527?			Yes 3	K No
b If"	Yes," com	plete the following sch	nedule							-
		a) Name of organization		(b) Type of or	rganization		(c) Descrip	otion of relationship		
N/2	Ą		-							
							•			
	Under pen	alties of penury I declare that	at I have examin	ed this return, including a	accompanying sched	l ules and statements, and	to the best of my	knowledge and belief, it is true		
		nd complete Declaration of p						May the IRS discuss the		
		1						with the preparer show		
		1/1 4	1		.=	/ /		(see instructions)?	Yes	No
Sign	. 1	JANKS TO	$\neg \langle \langle \rangle \rangle$			19/R .	P			
lere	/	10,	<u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>		177	' ' '	1150	(SCN)		
	▼ Signa	ature of officer or trustee			Date		Title	· · ·		
	Print/Ty	pe preparer's name			Preparer's signatur	e		Date	Check	—— k п
aid	1					10		<i></i>		mployed
reparer	DONAL	LD S. TOTH			1 Doual	D 5. 1 Ah	CPA	07 June 20	12	
Jse Only	/ Firm's n	ame ► SMITE	H, ADCO		MPANY				1361	
•	1						Firm's EIN ▶ 58-0	7908	30	

Phone no

ATLANTA, GA

30342

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Employer identification number

STINCHCOMB FAMILY FOUNDATION. INC 20-4003704 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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 Check if your organization is covered by the General Rule or a Special Rule Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990.

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Page 1 of 1 of Part I

Name of organization
STINCHCOMB FAMILY FOUNDATION, INC.

Employer identification number

20-4003704

	Contributors (see instructions). Use duplicate copies of		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JONATHAN STINCHCOMB 1010 CHATEAU LAFITTE W KENNER LA 70065	s 190,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total 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) Total 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) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

6786B			•						
Form 990-PF	Capital Gains and Losses for	or Tax on Investment Inc	ome	2011					
For cale	endar year 2011, or tax year beginning	, and ending							
Name		, , , , , , , , , , , , , , , , , , ,	Employer Ider	itification Number					
STINCHCOMB FAMII	Y FOUNDATION, INC.		20-4003	704					
(a) List and desc 2-story brick v	ribe the kind(s) of property sold, e.g., real estate, warehouse, or common stock, 200 shs. MLC Co	(b) How acquired P-Purchase D-Donation	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)					
(1) CISCO SYSTEMS	22000 SH	P	04/07/01	02/03/83					
(2) FEDERAL NATL M	TG ASSN 51,000 SH	P	04/01/10	01/20/11					
(3) FEDERAL NATL M	TTG ASSN 2000 SH	P	04/01/10	01/20/11					
4) FANNIE MAE 56,	000 SH	P	01/20/11	11/28/11					
5) GENERAL ELECTR	RIC CORP 22000 SH	P	04/07/10	02/09/11					
6) JP MORGAN CHAS	SE & CO 21,000 SH	P	04/07/10	01/19/11					
7) MERRILL LYNCH	& CO 1,000 SH	P	06/22/10	05/31/11					
8) BANK OF AMERIC	A CORP 21,000 SH	P	04/01/10	04/07/11					
9) FEDERAL NTAL M	TG ASSN 47,000 SH	P	08/11/10	09/15/11					
10) GOLDMAN SACHS	GRP 21,000 SH	P	04/01/10	08/12/11					
11) MERRILL LYNCH	& CO 21,000 SH	P	04/07/10	05/31/11					
12) TIME WARNER CA	BLE 21,000 SH	P	04/07/10	10/13/11					
13) US TREASURY NO	TES 39,000 SH	P	04/01/10	05/24/11					
14) US TREASURY NO									
15) US TREASURY NO	TES 1000 SH	P	04/01/10	12/07/11 12/07/11					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)						
23,838		22,810		1,028					
2) 51,976		51,834		142					
3) 2,038		2,038							
4) 56,577		55,945		632					
5) 23,229		22,472		757					
6) 22,501		22,002		499					
7) 1,063		1,029		34					
8) 21,666		21,451		215					
9) 48,939		48,725		214					
10) 21,521		21,341		180					
11) 22,322		21,736		586					
12) 23,357		22,153		1,204					
13) 44,801		42,435		2,366					
14) 2,253		1,924		329					
15) 1,063		995		68					
Complete only for assets show	ng gain in column (h) and owned by the foun	dation on 12/31/69	(1)						
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) Of Losses (from col. (h))						
1)				1,028					
(2)				142					
3)									
4)				632					
(5)				757					
6)			<u> </u>	499					
(7)			 	34					

(7) (8) (9) (10)

(11) (12) (13) (14)

(15)

6786B		•		•	•	
Form 990-PF		apital Gains and Losses	s for Tax on In		ome	2011
Name	For calend	lar year 2011, or tax year beginning		, and ending	Employer	dentification Number
Name					Employer	dentification Number
STINCHCOMB	FAMILY	FOUNDATION, INC.			20-40	03704
(a)	List and describe	e the kind(s) of property sold, e.g., real estate, ehouse, or common stock, 200 shs. MLC Co		(b) How acquired P-Purchase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
				D-Donation	(ino, day, yr)	(filo , day, yr)
		CT #0A737-17 CT #2416G-19		<u> </u>		
(2) SMITH BAF (3)	WEI AC	C1 #2410G-19			-	
(4)			····			
(5)						
(6)						
(7)			· · · · · · · · · · · · · · · · · · ·	<u> </u>		
(8)						
(9) (10)				-		_
(11)						
(12)						
(13)						
(14)						
(15)				<u> </u>	<u> </u>	
		-				
(e) Gross sales pric	e	(f) Depreciation allowed (or allowable)	(g) Cost or at plus expense	her basis e of sale	(h) (e) plu:	Sain or (loss) s (f) minus (g)
(1) 1 ,	223		-			1,223
(2)	773					773
(3)						
(4)						· · · · · · · · · · · · · · · · · · ·
(5)		. —				
(6) (7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13) (14)			· ··		 	
(15)	•	·		·	†	· · · · · · · · · · · · · · · · · · ·
			· · · · · · · · · · · · · · · · · · ·			
Complete only for as	sets showing	gain in column (h) and owned by the f	oundation on 12/31/69			
(I) FMV as of 12/31/	69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (of col (i)	(I) Gains col (k), but not	(Col (h) gain minus less than -0-) Of rom col (h))
/1\	_	89 OF 1573 1103	over col (J), ii asiy	Losses (f	1,223
(1) (2)						773
(3)					<u> </u>	
(4)						
(5)						
(6)				 .		
(7)		· · · · · · · · · · · · · · · · · · ·			 	
(8)					 	
(9) (10)					 	
(11)					1	
					+	

(12)

(13) (14) (15)

6786B Stinchcomb Family Foundation, Inc.

20-4003704 FYE: 12/31/2011

Federal Statements

	Adjusted Net Income	\$ 1,396 1,381 \$ 2,777		Charitable Purpose	S	\$		Charitable Purpose	U)-	\$
er Income	Net Investment Income	\$ 1,396 1,381 \$ 2,777	ofessional Fees	Adjusted Net	જ	\(\sigma_{\sigma} \)	<u>laxes</u>	Adjusted Net	٠	\$
1 - Form 990-PF, Part I, Line 11 - Other Income	Revenue per Books	\$ 1,396	rm 990-PF, Part I, Line 16c - Other Professional Fees	Net Investment	V)-	0 s	ent 3 - Form 990-PF, Part I, Line 18 - Taxes	Net Investment	v,	\$
Statement 1 - Form 990-P				Total	\$ 6,430 5,617 6,735 6,658	\$ 25,440	Statement 3 - Form 99	Total	\$ 559	\$ 1,467
Sta	Description	SMITH BARNEY REBATE INCOME SMITH BARNEY REBATE INCOME TOTAL	Statement 2 - For	Description	INVESTMENT FEES INVESTMENT FEES ACCOUNTING/TAX FEES INVESTMENT FEES	TOTAL		Description	TAXES & LICENSES FOREIGN TAXES	TOTAL

6786B Stinchcomb Family Foundation, Inc.

20-4003704 FYE: 12/31/2011

Federal Statements

<u>ts</u>	Fair Market Value \$ 600, 546 \$ 600, 546		Fair Market Value \$ 1,487,674 \$ 1,487,674		Fair Market Value \$ 355, 926 \$ 355, 926		Fair Market Value
nent Investmen	Basis of Valuation	Investments	Basis of Valuation	Investments	Basis of Valuation	ments	Basis of Valuation
US and State Governr	End of Year \$ 587,082 \$ 587,082	90-PF, Part II, Line 10b - Corporate Stock Investments	End of Year \$ 1,519,566 \$ 1,519,566	990-PF, Part II, Line 10c - Corporate Bond Investments	End of Year \$ 352,473	Line 13 - Other Invest	End of Year
Statement 4 - Form 990-PF, Part II, Line 10a - US and State Government Investments	Beginning of Year \$ 525, 143 \$ 525, 143	orm 990-PF, Part II, Line	Beginning of Year \$ 1,231,873 \$ 1,231,873	orm 990-PF, Part II, Line	Beginning of Year \$ 351,461	Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments	Beginning of Year \$ 23,072 \$
Statement 4 - Form 9	GOVT BONDS TOTAL	Statement 5 - Form 9	Description MUTUAL FUNDS TOTAL	Statement 6 - Form 9	Description CORPORATE BONDS TOTAL	Statement	Description INTERNATIONAL BONDS TOTAL

6786B Stinchcomb Family Foundation, Inc.

Federal Statements

FYE: 12/31/2011

Statement 8 - Form 990-PF, Part III, Line 3 - Other Increases

	 Amount					
ADJUSTMENT	FROM	PRIOR	YEAR	ACCUMULATED	INCOME	\$ 932
TOTAL						\$ 932

6786B Stinchcomb Family Foundation, Inc. Federal Statements 20-4003704 FYE: 12/31/2011 Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000 Name of Manager Amount JONATHAN STINCHCOMB TOTAL Form 990-PF, Part XV, Line 1b - Managers Who Own 10% or More Stock Name of Manager **Amount** NONE 0 TOTAL Statement 9 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents Description LETTER TO MR. STINCHCOMB EXPLAINING THE PURPOSE OF THE GRANT AND NATURE OF THE APPLICANT'S ORGANIZATION Form 990-PF, Part XV, Line 2c - Submission Deadlines Description NONE

Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description

NONE

6786B Stinchcomb Family Foundation, Inc.

20-4003704 FYE: 12/31/2011

Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the	Year

	Amount	7	004117	200	2.500		1,750	5,000	200	000'750	720		3,000	•	1,000		97	50.000		2,000	C	O Ø	009	131,276
	Purpose	ODERATING CRANT	CENTING GIVENT	OPERATING GRANT	OPERATING GRANT		OPERATING GRANT	OPERATING GRANT	OPERATING CBANT		OPERATING GRANT		OPERATING GRANT		OPERATING GRANT		OF ERRITING GRAINI	OPERATING GRANT		OPERATING GRANT	ENKED UNITERATED		OPERATING GRANT	
Address	Relationship Status	3125 PRESIDENTIAL PKWY	1126 SENOIA ROAD	0.147.00	4000 DENALB IECH PRWI	8701 LEEDS ROAD	200 HENRY CLAY AVENUE		1201 METAIRIE ROAD	324 N. RHODES ST.		PO BOX 2483		729 PRINCETON MILL RUN		1857 OAK GROVE RD NE	7650 RIVERTOWN RD		50 SOUTHEAST BROAD ST		ZUS WILLOW BEND ROAD	375 HIGHWAY 74 S #A		
Name	Address	GEORGIA TRANSPLANT FDN ATLANTA GA 30340	WAY OF LIFE COMMUNITY CH	TYRONE GA 30290	SECIAL CLIMEICS GEORGIA ATLANTA GA 30340	FELLOWSHIP CHRISTIAN	KANSAS CIII MO 04129 CHILDREN'S HOSPITAL	NEW ORLEANS LA 70115	MUNHOLLAND UMC METATRIE I.A 20005	UNION POINT METHODIST	UNION POINT GA 30669	YOUNG LIFE FAYETTE COUNTY	PEACHTREE CITY GA 30269	LUO INC	MARIETTA GA 30068	OAK GROVE PTO	ANTIOCH METHODIST CHURCH	FAIRBURN GA 30213	CAMPAIGN IMPACT	FAIRBURN GA 30213	FIRST BAPTIST OF PEACHTREE CITY PEACHTREE CITY		PEACHTREE CITY GA 30269	TOTAL

6786B Stinchcomb Family Foundation, Inc. **Federal Statements** 20-4003704 FYE: 12/31/2011 <u>Taxable Interest on Investments</u> Unrelated Exclusion Postal Amount Business Code Code Code Obs (\$ or %) Description SMITH BARNEY ACCT #2413G-16 \$ 3,515 3,515 TOTAL Tax-Exempt Interest on Investments Unrelated Exclusion Postal InState Amount Business Code Code Code Muni (\$ or %) Description MORGAN STANLEY ACCT 2413G-16 \$ 33,847 \$__ 33,847 TOTAL **Tax-Exempt Dividends from Securities** Unrelated Exclusion Postal InState Amount Business Code Code Code Muni (\$ or %) Description 14 SMITH BARNEY ACCT #2413G-16 TOTAL **Taxable Dividends from Securities** Unrelated Exclusion Postal US Description Amount Business Code Code Code Obs (\$ or %) SMITH BARNEY ACCT# 1106D 21 14 SMITH BARNEY ACCT# 74460 14 SMITH BARNEY ACCT# 0A737 31,633 14 SMITH BARNEY ACCT# 2413G 14 13,087 SMITH BARNEY ACCT# 2416G 44,749 TOTAL Other Investment Income

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal <u>Code</u>
SMITH BARNEY REBATE INCOME SMITH BARNEY REBATE INCOME	\$ 1,396 1,381		14 14	
TOTAL	\$ 2,777			

Form **8868**(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2012)

•	X

 If you are 	tiling for an Automatic 3-Month Extension, complete	e only Part i	and check this box			▶ [X]
 If you are 	filing for an Additional (Not Automatic) 3-Month Ext	ension, con	plete only Part II (on page 2 of this for	m)		
Do not comp	plete Part II unless you have already been granted an	automatic 3-i	month extension on a previously filed Fo	rm 8868		
Electronic fil	ling (e-file). You can electronically file Form 8868 if you	need a 3-m	onth automatic extension of time to file (6 months f	or	
a corporation	required to file Form 990-T), or an additional (not autor	natic) 3-mon	th extension of time. You can electronical	ally file For	m	
	est an extension of time to file any of the forms listed in					
Return for Tra	ansfers Associated With Certain Personal Benefit Contr	acts, which r	nust be sent to the IRS in paper format (see		
	For more details on the electronic filing of this form, visi	•	• •	•		
Part I	Automatic 3-Month Extension of Time.					
A corporation	required to file Form 990-T and requesting an automat		······································			
Part I only						▶ □
•	orations (including 1120-C filers), partnerships, REMIC	and trusts	must use Form 7004 to request an exter	nsion of tim	1e	- Ш
to file income		,				
	tax rotario		Enter filer	's identify	ing number, see i	instructions
Type or	Name of exempt organization or other filer, see instr	uctions	Eliter mer	T	er identification numb	
print	rame of exempt organization of other mer, see mon	dollons		Linplo	rer identification name	ici (Elity or
File by the	STINCHCOMB FAMILY FOUNDAT	ION, I	INC.	X 20	-4003704	
due date for	Number, street, and room or suite no. If a P.O. box,	see instructi	ons	Social	security number (SSN	 I)
filing your return See	312 BRADFORD WAY				, ,	•
instructions	City, town or post office, state, and ZIP code For a	oreign addre	ess, see instructions		. =	-
	PEACHTREE CITY GA	30269)			
Enter the Det			hankar for oneh sekuan)			04
	urn code for the return that this application is for (file a s	ерагате арр	ilication for each return)			04
Application	n	Return	Application			Return
ls For		Code	is For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990-E	BL	02	Form 1041-A			08
Form 990-E	Z	01	Form 4720			09
Form 990-F	PF	04	Form 5227			10
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other than above)	06	Form 8870			12
	SMITH, ADCOCK & COMPA	MY, CPA	.'S			
	90 WEST WIEUCA ROAD S	SUITE 10	0			
 The books 	are in the care of ATLANTA				GA 303	42
Telephon	e No ▶ 404-252-2208	FAX No	▶ 404-255-0841			
_	anization does not have an office or place of business in		•			▶
 If this is for 	or a Group Return, enter the organization's four digit Gr			this is		
	group, check this box If it is for part of	the group, cl	neck this box	ch		
	names and EINs of all members the extension is for			-		
	st an automatic 3-month (6 months for a corporation re-					
	$08/15/12^{\circ}$, to file the exempt organization return	for the orga	inization named above. The extension is			
	organization's return for					
► X	calendar year 2011 or					
. \Box						
▶ 📙	tax year beginning , and ending					
	ex year entered in line 1 is for less than 12 months, chec	k reason	Initial return Final return			
	Change in accounting period	COCO antart	he tentature toy loca any	<u> </u>		
	upplication is for Form 990-BL, 990-PF, 990-T, 4720, or	ooos, enter t	ne tentative tax, less ally	20		1,250
	undable credits. See instructions	tor any safe	adable credits and	3a	\$	1,230
	ipplication is for Form 990-PF, 990-T, 4720, or 6069, er ted tax payments made. Include any prior year overpayi	·=		3ь	•	0
	ce due. Subtract line 3b from line 3a Include your payments			30	\$	
	6 (Electronic Federal Tax Payment System) See instruc		, ii required, by dainig	3с	\$	1,250
	ou are going to make an electronic fund withdrawal with		368. see Form 8453-EO and Form 8879.			
	gening to mand an electronic forte microrawal with		200, 000 1 01111 0 100 EO ana 1 01111 00/ 3	pa	,	

For Privacy Act and Paperwork Reduction Act Notice, see Instructions. $^{\rm DAA}$