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Form 990-PF

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

2011

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

For cale	endar year 2011, or tax year beginning	, 2011,	and ending		,		
The V	W. P. "Billy" Langdale Found Box 1547	Α	27-1478096				
	osta, GA 31603-1547			В	Telephone number (see the (229) 244-54	instructions) 00	
 ,		С	If exemption application is	pending, check here			
G Che	eck all that apply Initial return Final return	Initial Return of a for Amended return	mer public charity	D	1 Foreign organizations, che	ck here	
H C	Address change heck type of organization. X Section 501	Name change (c)(3) exempt private f	oundation		2 Foreign organizations mee here and attach computati		
	Section 4947(a)(1) nonexempt charitable t	E	If private foundation statu under section 507(b)(1)(A				
(fi	Fair market value of all assets at end of year (from Part II, column (c), line 16) J Accounting method. X Cash Accrual Other (specify)				If the foundation is in a 60)-month termination	
► \$	(, 4,,,,	column (d) must be or	cash basis)	<u> </u>	under section 507(b)(1)(B), check here	
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) (a) Revenue and expenses per books income			nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1 Contributions, gifts, grants, etc, received (att sch)	100,000.	<i>"</i> a <		Ą	š ,	
	2 Ck If the foundn is not req to att Sch B	An in the second	/% · 3 · 4 · 8	<u> </u>	iden pri	Dr. B.	
	3 Interest on savings and temporary cash investments		3,20)3.		**	
	4 Dividends and interest from securities						
	5a Gross rents. b Net rental income	*****			***	<u> </u>	
P	or (loss) 6a Net gain/(loss) from sale of assets not on line 10	*3* * * * * * * * * * * * * * * * * * *			* * * * * * * * * * * * * * * * * * * *		
RE>EN	b Gross sales price for all	*	*		* * *	Ä.	
¥	assets on line 6a 7 Capital gain net income (from Part IV, line 2).	- 14 N			14 kg - 17 kg 1	A A A A A A A A A A A A A A A A A A A	
Ñ	8 Net short-term capital gain		* `*			**	
Ŭ	9 Income modifications 10a Gross sales less					į į	
	returns and allowances.	*	i i i).	
	b Less Cost of goods sold	\$	***				
	c Gross profit/(loss) (att sch)						
	11 Other income (attach schedule)						
	See Statement 1	3,203.	2 20	12			
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	103,203. 0.	3,20	13.	0.		
	14 Other employee salaries and wages					 	
	15 Pension plans, employee benefits						
A	16a Legal fees (attach schedule)						
D M	b Accounting fees (attach sch) See St 2	195.				195.	
ON	c Other prof fees (attacht sch) VEV 217 Interest QEC 17					<u> </u>	
P S		\				 	
O P E R A T	18 Taxes (attach schedule)(xsee Tristrs) 19 Depréciation (attach sch) and depletions 20 Occupancy					2 20	
1 1	1 SCII) alignoepielloliki is	1				·	
N V G E	20 Occupancy 21 Travel, conferences, and meetings	ــــــــــــــــــــــــــــــــــــــ			<u> </u>		
A E	22 Printing and publications		•				
A E X D P E	23 Other expenses (attach schedule)						
E N S	24 Total operating and administrative		·		-		
S E S	expenses. Add lines 13 through 23	195.				195.	
	25 Contributions, gifts, grants paid Part XV	14,400.				14,400.	
	26 Total expenses and disbursements. Add lines 24 and 25	14,595.		0.	0.	14,595.	
	27 Subtract line 26 from line 12:		*			> **	
	a Excess of revenue over expenses and disbursements	88,608.					
	b Net investment income (if negative, enter -0-)		3,20	3.			
	C Adjusted net income (if negative, enter -0-)	* 1			0.	· .	

Parl	11	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
			(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash — non-interest	-			
		= -	ary cash investments	237,810.	326,418.	
	3	Accounts receivable				
	_	Less: allowance for	doubtful accounts			
	4	Pledges receivable	, · [
	_	Less allowance for	doubtful accounts			
	5	Grants receivable				
	6	Receivables due from offic disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions).			
Α.	7	Other notes and loans rec	eivable (attach sch)			
ŝ		Less: allowance for	doubtful accounts ►			
A S S E T	8	Inventories for sale		<u></u>		
Ţ	9	Prepaid expenses a	1			
S	10a	Investments – US. obligations (attach s	and state government			
	l t	Investments — corporate	stock (attach schedule) .			
	(: Investments - corporate	bonds (attach schedule)			
	11	Investments – land, equipment: basis	, buildings, and		. • *	*
		Less: accumulated depred (attach schedule)	elation >			
	12	Investments - mort	gage loans			
	13	Investments - other	r (attach schedule)			
	14	Land, buildings, and e	equipment: basis 🕒		(4	,
		Less accumulated depred (attach schedule)	ciation -			
		Other assets (descri	be \(\sum_{\text{completed by all filers}} \)			
		see the instructions	Also, see page 1, item I)	237,810.	326,418.	0.
Ļ	17	Accounts payable as	nd accrued expenses		<u>-</u>] , , ,]
Å	18	Grants payable] "
A B	19	Deferred revenue				
Ĺ	20	Loans from officers, direc	ctors, trustees, & other disqualified persons			,
! T	21	Mortgages and other note	s payable (attach schedule)			
i	22	Other liabilities (desci	ribe)]
E S	23	Total liabilities (add	Lines 17 through 22)	0.	0.	
		Foundations that fo	Illow SFAS 117, check here 24 through 26 and lines 30 and 31.	<u>. </u>		
<u>N</u> F	24	Unrestricted		237,810.	326,418.	
N F E U T N	25	Temporarily restricte	ed]
ח	26	Permanently restrict				
A B A L A		Foundations that do and complete lines	o not follow SFAS 117, check here P			
EL	27		principal, or current funds			
SNC	28	·	, or land, building, and equipment fund			1
0 E	29	•	ulated income, endowment, or other funds		205 412	
RS	30		fund balances (see instructions) net assets/fund balances	237,810.	326,418.	
	31	(see instructions)	net assets/fund balances	237,810.	326,418.	
Par	t III	<u> </u>	iges in Net Assets or Fund Balanc		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
1	Tota	I net assets or fund b	alances at beginning of year — Part II, colu	ımn (a), line 30 (must ad	aree with	
	end-	of-year figure reporte	d on prior year's return)	, , , , , , , , , , , , , , , , , , ,	1	237,810.
2		r amount from Part I,			2	88,608.
3		increases not included in li	ine 2 (itemize)		3	
4		lines 1, 2, and 3			4	326,418.
5		ases not included in line 2		<u>_</u>	5	206 172
6_	Tota	I net assets or fund b	alances at end of year (line 4 minus line 5)	- Part II, column (b), li	ne 30 6	326,418.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

7

Form 990-PF (2011) The W. P. "Billy" Langdale Foundation		1478096		Р	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494		instruction	is)		
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line					
Date of ruling or determination letter: (attach copy of letter if necessary — see i	instrs)				
b Domestic foundations that meet the section 4940(e) requirements in Part V,		1			64.
check here. ► and enter 1% of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, colu	mn (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				·	
foundations only Others enter -0-)		2			<u> 0 . </u>
3 Add lines 1 and 2	•	3			64.
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		·· ····	64.
6 Credits/Payments:					
a 2011 estimated tax pmts and 2010 overpayment credited to 2011		*	Ŷ		
b Exempt foreign organizations — tax withheld at source .		. *	•	•	
c Tax paid with application for extension of time to file (Form 8868) .		- 48	>		
d Backup withholding erroneously withheld . 6d					
7 Total credits and payments Add lines 6a through 6d		7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached	8			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			64.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax.	Refunded >	11			
Part VII-A Statements Regarding Activities			,		
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	distation or did it			Yes	No
participate or intervene in any political campaign?	giologica di Circ		1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	oses				ĺ
(see the instructions for definition)?			1 b		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies	of any materials ou	blished	4	4 9	, 4
or distributed by the foundation in connection with the activities.	or any materials pe				
c Did the foundation file Form 1120-POL for this year?			1c		Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the		•			
(1) On the foundation \$\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	► Ş	<u> </u>]	i	ĺ '
 e Enter the reimbursement (if any) paid by the foundation during the year for political expension foundation managers ► \$ 0. 	iditure tax imposed	on	•		2 3
2 Has the foundation engaged in any activities that have not previously been reported to the	IRS?		2		Х
If 'Yes,' attach a detailed description of the activities	. 11.0		*	,,,	<u>**</u>
,			.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy	g instrument, articles	5	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year.	-			Х	
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	al '		4a	X	
•			4b	~	v
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	94	X
If 'Yes,' attach the statement required by General Instruction T			l. * I		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	eitner		*	^	4
 By language in the governing instrument, or 			*	,	
 By state legislation that effectively amends the governing instrument so that no mandato 	ory directions that co	onflict			
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, column (c),			7	X	L
8a Enter the states to which the foundation reports or with which it is registered (see instructing GA	ions)				
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 <i>General Instruction G? If 'No,' attach explanation</i>			8b	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning of s	section 4942(i)(3) or	4942(1)(5)			
for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV	')? If 'Yes,' complete	Part XIV	9		Х
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a sci	hedule listina their n	ames			
and addresses.			10		Х
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Par	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)			11		<u>x</u> _
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqual advisory privileges? If 'Yes,' attach statement (see instructions)	ified perso	on had	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address ► N/A	n applicat	tion?	13	X	
14	The books are in care of ► William P. Langdale, III Telephon			244	-540	0
15	Located at • 1007 North Patterson Street Valdosta GA ZIP + 4 • Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		, nT	.N/A		
	and enter the amount of tax-exempt interest received or accrued during the year .	_	15		Yes	N/A No
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other abank, securities, or other financial account in a foreign country?	authority o	ver a	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the r foreign country ►	ame of th	e 			*
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required				-	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly)	_			ر ر	*
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo	*	3	3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo	()	,	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?(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		_	,	pa í	, 🕸
	for the benefit or use of a disqualified person)?	Yes	X No	***	~ ¥	9 9
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' 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	XNo		,%	
t	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 instructions)?		1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	•			× 0	, , , ,
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 2011?	•		1 c		Х
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))			****	· .	* .~
a	a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?	Yes	XNo	12.5%	Á	
	If 'Yes,' list the years ► 20 , 20 , 20	ш		. 4.	*	
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 494, (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942)			*	ţ	
	all years listed, answer 'No' and attach statement - see instructions)			2b	N,	/A
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years 20 , 20_ , 20_ , 20	here		, «	*	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No		*	
ŧ	If 'Yes' did it have excess husiness holdings in 2011 as a result of (1) any nurchase by the foundation	<u> </u>				
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve 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	ed				
_	determine if the foundation had excess business holdings in 2011.)			3b	N.	/A
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
t	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?			4b		X (2211)
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Form 990-PF (2011) The W. P. "Billy"			27-14	78096 Page
Part VII-B Statements Regarding Activit		<u>1 4720 May Be Req</u>	uired (continued)	
5a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt	•	un (section 4945(e))?	☐ Yes X	No
(2) Influence the outcome of any specific pub	•	, , , , , , , , , , , , , , , , , , , ,		
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,	ation drive?	•	Yes X	No No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	han a charitable, etc. o	rganization described		No
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific	c, literary, or	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	, 5Ы N/A
Organizations relying on a current notice rega	arding disaster assistan	ce check here		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim exisibility for the grant?	emption from the	N/A Yes] No
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5-5(d)		
6a Did the foundation, during the year, receive a on a personal benefit contract?			∐Yes X]No
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	ilums, directly or indirec	tly, on a personal bene	fit contract?	6b X
7a At any time during the tax year, was the found	dation a party to a prof	ubited tax shelter transa	action? Yes X	No S
b If 'Yes,' did the foundation receive any proceed				N/A 7b
<u>Part VIII</u> Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	Employees,
1 List all officers, directors, trustees, foundation	on managers and their	rompensation (see inst	ructions)	
1 Elst an onicers, unectors, trustees, touridance	(b) Title, and average		(d) Contributions to	(e) Expense account
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
See Statement 3				
		0.	0.	0.
				
2 Compensation of five highest-paid employee	es (other than those inc	luded on line 1— see ir	nstructions). If none, e	nter 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None			compensation	
Total number of other employees paid over \$50,000	TEEA0306L	12/05/11		Form 990-PF (2011
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Form 990-PF (2011) The W. P. "Billy" Langdale Foundation [Part VIII Information About Officers, Directors, Trustees, Foundation Managers, and Contractors (continued)	27-1478096 Page: Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, e	nter 'NONE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of s	
None	
T-1-1	
Total number of others receiving over \$50,000 for professional services	<u> </u>
1 Lowndes County Partnership for Health 2 Salvation Army 3 Valwood School Boys Scouts	
Partix B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2. Amount
1	
<u>N/A</u>	
2	
4	
All other program-related investments. See instructions	
3	
·	
Total. Add lines 1 through 3	P 0
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·· · · ·	1 OHH 220-FF (2)

Form **990-PF** (2011)

Adjusted qualifying distributions. Subtract line 5 from line 4

27-1478096 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 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 1 a **b** Average of monthly cash balances 1 b 281,698. c Fair market value of all other assets (see instructions) 1 c 281,698. d Total (add lines 1a, b, and c) 1 d e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0. (attach detailed explanation) 1 e Acquisition indebtedness applicable to line 1 assets 2 0. Subtract line 2 from line 1d 3 281,698. Cash deemed held for charitable activities Enter 1-1/2% of line 3 4,225. (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 277,473. Minimum investment return. Enter 5% of line 5 6 13,874. Part Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \rightharpoonup and do not complete this part.) Minimum investment return from Part X, line 6 1 13,874. 2a Tax on investment income for 2011 from Part VI, line 5. 2a **b** Income tax for 2011 (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b 2 c 64. 3 Distributable amount before adjustments. Subtract line 2c from line 1 13,810. 3 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 13,810. Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 13,810. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26. 1 a 14,595. **b** Program-related investments — total from Part IX-B 1 b 2 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 **b** Cash distribution test (attach the required schedule) 3 b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V. line 8, and Part XIII, line 4 4 14,595. 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

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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Form 990-PF (2011)

14,595

6

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 fr	rom Part XI,				13,810.
2 Undistributed income, if any, as of the e	nd of 2011:	· · · · · · · · · · · · · · · · · · ·			
a Enter amount for 2010 only				0.	
b Total for prior years: 20, 20	, 20		0.		
3 Excess distributions carryover, if any, to					4
a From 2006					
b From 2007					
c From 2008					
d From 2009				*	
e From 2010	6,935.				
f Total of lines 3a through e		6,935.			
4 Qualifying distributions for 2011	from Part	剝	,		
XII, line 4: ► \$	14,595.				
a Applied to 2010, but not more t	han line 2a			0.	
b Applied to undistributed income (Election required — see instruc	of prior years ctions)		0.	Stews	· •
c Treated as distributions out of c	corpus				
(Election required – see instruc		0.			
d Applied to 2011 distributable an	F F	<u> </u>	<u>· @ </u>	* * * * * * * * * * * * * * * * * * *	13,810.
e Remaining amount distributed of	' h	785.		* ,	
5 Excess distributions carryover applied to (If an amount appears in column		0.			0.
same amount must be shown ii	n column (a))	<u> </u>	*		
6 Enter the net total of each colu	mn as				
indicated below: a Corpus Add lines 3f, 4c, and 4e. Subtra	rt line 5	7,720.	£4.		
	Ī	7,120.		*	
b Prior years' undistributed incom line 4b from line 2b	ie Subtract		0.		
c Enter the amount of prior years	undistribut-				
ed income for which a notice of has been issued, or on which the				*	*
4942(a) tax has been previously			0.		
d Subtract line 6c from line 6b Ta	axable				
amount - see instructions			0.	, · · · · · · · · · · · · · · · · · · ·	y
e Undistributed income for 2010 Subtract				_	
line 2a. Taxable amount — see instructi	ons			_0.	
f Undistributed income for 2011.	Subtract lines			×	
4d and 5 from line 1. This amou					
distributed in 2012					0.
7 Amounts treated as distribution corpus to satisfy requirements in the corpus to satisfy requirements.					
by section 170(b)(1)(F) or 4942	(g)(3)	•]	
(see instructions)	}	0.		1	
8 Excess distributions carryover fapplied on line 5 or line 7 (see	rom 2006 not instructions).	0.			
9 Excess distributions carryover Subtract lines 7 and 8 from line	to 2012.	7,720.			
10 Analysis of line 9:	. 54	1,120.			
a Excess from 2007					
b Excess from 2008					
c Excess from 2009					
d Excess from 2010	6,935.				
e Excess from 2011	785.				
2 = A0000 (10111 2011				<u> </u>	

Form 990-PF (2011) The W. P. "Billy				27-147809	
Part XIV Private Operating Founda					N/A
1a If the foundation has received a ruling or is effective for 2011, enter the date of the	ruling	•		_	—
b Check box to indicate whether the founda		erating foundation		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	42.0010	Prior 3 years	(4) 0000	/-> ▼ -4-1
investment return from Part X for each year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
b 85% of line 2a		_		<u> </u>	
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of 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					
a 'Assets' alternative test – enter					
(1) Value of all assets (2) Value of assets qualifying under					
section 4942(j)(3)(B)(i). b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X,					
line 6 for each year listed c 'Support' alternative test — enter:			 		
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 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					
assets at any time during the Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they hav None	igers: have contributed m	nore than 2% of the	e total contributions e section 507(d)(2).)	received by the foun	dation before the
b List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more of foundation has a	of the stock of a co 10% or greater inte	orporation (or an equerest.	ually large portion of	the ownership of
2 Information Regarding Contribution, Gra Check here ► X if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	makes contributionses gifts, grants, etc	s to preselected ch , (see instructions)	iaritable organization to individuals or org	janizations under oth	ept unsolicited ler conditions,
a The name, address, and telephone numb	er of the person to	whom applications	s should be addresse	ed	
b The form in which applications should be	submitted and info	rmation and mater	ials they should inclu	ude	
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geograp	ohical areas, charit	able fields, kinds of	ınstitutions, or other	factors

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	substantial contributor	- Tecipient					
a Paid during the year							
See Statement 4							
		•					
		1					
		i					
	•						
		:					
		·					
Total	L. <u></u> .	L	► 3a	15,000.			
		1		13,000.			
b Approved for future payment							
				1			
			1				
		1					
Total			► 3b	l			

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		Unrelate	ed business income	Excluded	by section 512, 513, or 514	(e)	
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)	
•	ram service revenue:			code		<u> </u>	
				 			
			 .	1			
					-		
f							
_	and contracts from government agencies						
	bership dues and assessments.						
	st on savings and temporary cash investments						
	ends and interest from securities ental income or (loss) from real estate	2					
	-financed property	<u> </u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		** (
	lebt-financed property						
	ntal income or (loss) from personal property						
	r investment income	900001	3,203.	1			
8 Gain o	r (loss) from sales of assets other than inventory		· · · · · ·				
9 Net 11	ncome or (loss) from special events						
10 Gross	s profit or (loss) from sales of inventory						
11 Other	r revenue:	\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				1.5%	
		_					
		-					
d				 			
12 Subtr	otal Add columns (b) (d) and (e)	\$1.50 m	3 203	第 名: :			
	otal Add columns (b), (d), and (e)	Military Control	3,203.	第 次:	13	3 203	
13 Total	Add line 12, columns (b), (d), and (e)		3,203.	秦 次(: 1	13	3,203.	
13 Total See works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate	ons.)				3,203.	
13 Total See works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		
13 Total See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate -B Relationship of Activities to the	ons.) e Accompli	shment of Exemp	t Purpo	oses		

Form 990-PF (2011) The W. P. "Billy" Langdale Foundation 27-1478096 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								- 1 ~ ~ ~ ~ ~	Yes No
d	escribe	irganization directly (d in section 501(c) o o political organizati	f the Code (ot	ngage in any of the follow her than section 501(c)(3	ring with any of organization	other organization ns) or in section 5	า 27,		
a T	ransfers	from the reporting	foundation to	a noncharitable exempt o	rganization o	f [,]			
(1	I) Cash	1						1a (1)	Х
(2	(2) Other assets							1a (2)	X
b C	b Other transactions								·*. ·
(1	I) Sale:	s of assets to a none	charitable exei	mpt organization	•			1b(1)	Х
(2	(2) Purchases of assets from a noncharitable exempt organization							1 b (2)	Х
(3) Rental of facilities, equipment, or other assets								1b (3)	X
(4	1) Reim	bursement arrangen	nents					1b(4)	X
<u> </u>								1 b (5)	X
(6	6) Perfo	ormance of services	or membershi	p or fundraising solicitation	ons			1b (6)	X
c S	haring	of facilities, equipme	nt, mailing lis	ts, other assets, or paid e	employees			1c	Х
d If th a (a) Line	ne good ny trans	swer to any of the at s, other assets, or se saction or sharing ar (b) Amount involved	ervices given l rangement, sh	complete the following sci by the reporting foundation low in column (d) the valuation of t	n If the foun ue of the good	nn (b) should alwadation received leds, other assets, o	ess than fair ma or services rece	rket value in ived	
N/A	, 110.	(b) ranount involved	(C) Name o	Thomaticable exempt organizate	1011	bescription of trains	ners, dansacdons, a	nd sharing arrain	igeniena
	<u> </u>								
•					_				
				<u> </u>					-
-					"				
							_		
						_			
d	escribe	undation directly or indication directly or indication 501(c) occupied the following	f the Code (ot	ited with, or related to, or her than section 501(c)(3)	ne or more ta:)) or in sectio	x-exempt organiz n 527?	ations	Yes	XNo
	(a)	Name of organization	on	(b) Type of organ	ızatıon	(c)	Description of i	elationship	
N/A									
						ļ <u>.</u>			
						ļ	 		
	Under pe	enalties of perjury, I declare and complete Declaration of	that I have examinate preparer (other to	ned this return, including accompa nan taxpayer) is based on all infor	inying schedules a	and statements, and to breparer has any knowle	the best of my knowledge	edge and belief, it	is true,
Sign Here				1	•	President		this return	RS discuss i with the shown below
ICIC	Signat	ure of officer or trustee		l Date		Title		— (see <u>inst</u> ri	uctions)?
	1 9	Print/Type preparer's nam	ie 🔨	↑ Preparer's signature		Date	Check I	DTIM	Yes No
Da: d		Julie L. Min	$\bigcup X \downarrow$	Julie L. Mir	nick	7-31-1	9	P00512	732
Paid				Minick & Associa		· • • • • • • • • • • • • • • • • • • •	self-employed Firm's EIN > 58-		134
Prepa				terson Street	1.0	•	inusem - 30	2302104	
Use C	nıy			GA 31601			Phone no 229	9-244-464	11
BAA				O.1. 01001	<u>.</u>		THOREHU ZZ		0-PF (2011)
								rorm 991	U-FF (ZVII)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2011

Name of the organization	Employer identification number	
The W. P. "Billy" Langda	27-1478096	
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organizated 4947(a)(1) nonexempt charitable trust not 527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust trees 501(c)(3) taxable private foundation	eated as a private foundation
Check if your organization is covered be Note. Only a section 501(c)(7), (8), or	y the General Rule or a Special Rule (10) organization can check boxes for both the Genera	al Rule and a Special Rule See instructions.
General Rule		
	, 990-EZ, or 990-PF that received, during the year, $\$5$	5,000 or more (in money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi), and	n filing Form 990 or 990-EZ that met the 33-1/3% suppreceived from any one contributor, during the year, a 90, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Com	contribution of the greater of (1) \$5,000 or
total contributions of more than \$1.	organization filing Form 990 or 990-EZ that received 000 for use <i>exclusively</i> for religious, charitable, scient or animals. Complete Parts I, II, and III.	from any one contributor, during the year, tific, literary, or educational purposes, or
contributions for use exclusively for If this box is checked, enter here the	organization filing Form 990 or 990-EZ that received religious, charitable, etc, purposes, but these contribute total contributions that were received during the year parts unless the General Rule applies to this organ	outions did not total to more than \$1,000. ar for an <i>exclusively</i> religious, charitable, etc.
religious, charitable, etc, contribution	ons of \$5,000 or more during the year	► \$
990-PF) but it must answer 'No' on Pai	vered by the General Rule and/or the Special Rules d rt IV, line 2, of its Form 990; or check the box on line meet the filing requirements of Schedule B (Form 99	H of its Form 990-EZ or on Part I, line 2, of its
BAA For Paperwork Reduction Act N 990EZ, or 990-PF.	otice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2011

Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2011)	Page	1 of 1 of Part 1
_	P. "Billy" Langdale Foundation	' '	478096
Part I.	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Langdale Industries P O Box 1088	\$ <u>100,000.</u>	Person X Payroll Noncash (Complete Part II if there
(a) Number	Valdosta, GA 31603 (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) Number	(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) Number	(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) Number	(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) Number	(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)

Page

L to

1 of Part II

Name of organization

The W. P. "Billy" Langdale Foundation

Employer identification number 27-1478096

The w.	P. "Billy" Languale Foundation		8096
Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	f additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

BAA

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2011)

1 to_

1 of Part III

N/A

Name of organization
The W. P. "Billy" Langdale Foundation

Employer identification number

		27-14780 <u>9</u> 6
Parit III	Exclusively religious, charitable, etc, individual contributions to section 501(c)(7	'), (8), or (10)
	organizations that total more than \$1,000 for the year. Complete cols (a) through (e) and	I the following line entry.
	For organizations completing Part III, enter total of <i>exclusively</i> religious, charitable, etc, contributions of \$1,000 or less for the year (Enter this information once See instructions.) Use duplicate copies of Part III if additional space is needed.	► \$

	- 550 dapriodic copies of fait in it additional			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	N/A			
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e)		
	Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
				

(Rev January 2012

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ► X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits Part Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print The W. P. "Billy" Langdale Foundation X 27-1478096 File by the due date for Number, street, and room or suite number. If a P O box, see instructions Social security number (SSN) filing your return See P O Box 1547 City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions Valdosta, GA 31603-1547 04 Enter the Return code for the return that this application is for (file a separate application for each return) Application is For Return **Application** Return Code Is For Code Form 990 01 Form 990-T (corporation) 07 02 Form 990-BL Form 1041-A 08 Form 990-EZ 01 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 • The books are in the care of ► William P. Langdale, III Telephone No ►_(229)_244-5400____ FAX No. ► (229) 244-0453 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box I. If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 8/15 _ _ , 20 12 _ , to file the exempt organization return for the organization named above The extension is for the organization's return for: X calendar year 20 11 or tax year beginning _____, 20 ____, and ending _____, 20 ____. 2 If the tax year entered in line 1 is for less than 12 months, check reason | Initial return Final return Change in accounting period

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using

payments made. Include any prior year overpayment allowed as a credit

EFTPS (Electronic Federal Tax Payment System). See instructions

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

nonrefundable credits. See instructions

64.

64.

3a \$

3b \$

11	Federal State	ements		Page
	The W. P. "Billy" Langda		27-1478096	
Statement 1 Form 990-PF, Part I, Line 11 Other Income				
	_	Revenue Inv		(c) Adjusted et Income
Other Investment Income	. <u>\$</u> Total <u>\$</u>	3,203. 3,203.\$	0.\$	0.
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees	(a)	(b) Net	(c)	(d)
	Expenses per Books	Investment Income N	Adjusted let Income	Charitable Purposes
	Total \$ 195	· <u>\$ 0.</u> <u>\$</u>	0. \$	195
Statement 3 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Truste	Total \$ 195 ees, and Key Employees Title an Average Ho	d urs Compen-	Contri- bution to	Expense Account/
Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Truste Name and Address William P. Langdale, Jr.	Total \$ 195 ees, and Key Employees Title an Average Ho Per Week Dev	d urs Compen- voted sation	0. \$ Contri-	Expense Account/Other
Name and Address William P. Langdale, Jr. P O Box 1547 Valdosta, GA 31603-1547 William P. Langdale, III	Total \$ 195 ees, and Key Employees Title an Average Ho Per Week Dev President 0 Secretary	d urs voted \$	Contri- bution to EBP & DC	Expense Account/ Other
Name and Address William P. Langdale, Jr. P O Box 1547 Valdosta, GA 31603-1547 William P. Langdale, III P O Box 1547 Valdosta, GA 31603	Total \$ 195 ees, and Key Employees Title an Average Ho Per Week Dev President 0	d urs Compen- voted sation	Contribution to EBP & DC	Expense Account/ Other
Name and Address William P. Langdale, Jr. P O Box 1547 Valdosta, GA 31603-1547 William P. Langdale, III P O Box 1547	Total \$ 195 ees, and Key Employees Title an Average Ho Per Week Dev President 0 Secretary 0	d urs Compen- voted sation	Contribution to EBP & DC 0. \$ 0.	Expense Account/ Other
Name and Address Name and Address William P. Langdale, Jr. P O Box 1547 Valdosta, GA 31603-1547 William P. Langdale, III P O Box 1547 Valdosta, GA 31603 Robert H. Langale 811 Pine Point Circle	Total \$ 195 ees, and Key Employees Title an Average Ho Per Week Dev President 0 Secretary 0 Director	d urs Compen- voted sation	Contribution to EBP & DC 0. \$ 0.	Expense Account/ Other
Name and Address Name and Address William P. Langdale, Jr. P O Box 1547 Valdosta, GA 31603-1547 William P. Langdale, III P O Box 1547 Valdosta, GA 31603 Robert H. Langale 811 Pine Point Circle Valdosta, GA 31602 Elizabeth Langdale Haun 1135 N. Lakeshore Drive	Total \$ 195 ees, and Key Employees Title an Average Ho Per Week Dev President 0 Secretary 0 Director 0	d Compen- voted sation	Contribution to EBP & DC 0. \$ 0. 0. 0.	Expense Account/Other

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Federal Statements

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The W. P. "Billy" Langdale Foundation

27-1478096

Statement 3 (continued)
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title an Average Ho Per Week De	ours	Compen- sation	but	ontri- tion to BP & DC	Expens Account Other	-/
Julie Langdale Minick 2551 Moore Crossing Road Valdosta, GA 31606	Director 0	\$	0	. \$	0.	\$	0.
		Total \$	0	. \$	0.	\$	0.

Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose o Grant	of <u>Amount</u>
Lowndes County Partnership for Health P O Box 1782 Valdosta, GA 31603	Unrelated	501 (c) 3	Gift	\$ 5,000.
Fellowship of Christian Athletes 8701 Leeds Road Kansas City, MO 64129	Unrelated	501 (c) 3	Gift	2,500.
Valwood School Highway 41 Hahira, GA 31632	Unrelated	501 (c) 3	Gift	1,000.
Salvation Army St. Augustine Valdosta, GA 31602	Unrelated	501 (c) 3	Gift	2,200.
The University of North Carolina P O Box 309 Chapel Hill, NC 27514	Unrelated	501 (c) 3	Gift	500.
The Haven P O Box 5382 Valdosta, GA 31603	Unrelated	501(c)3	Gift	2,200.
The University of Georgia 394 South Milledge Avenue Athens, GA 30602	Unrelated	501(c)3	Gift	1,000.
Habitat for Humanity Cypress Street Valdosta, GA 31601	Unrelated	501 (c) 3	Gift	600.
			:	Total \$ 15,000.