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Form 990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

roi	Calei	idal year 2011 of tax year beginning		, and ending		
Na	me o	f foundation			A Employer identification	number
_	ינני א	DIEC COMMUTA DELL EON	INTO A THE CAN		27 4204420	
_		RLES & CYNTHIA BELL FOU	27-4384428			
		BOX 30320	B Telephone number 6019881700	•		
		own, state, and ZIP code				
		ISON, MS 39130-3032			C If exemption application is p	ending, check here
		call that apply: Initial return	Initial return of a f	ormer public charity	D 1 Foreign organizations	chack hara
•	J1166F	Final return	Amended return	ormer public charity	D I roleigh organizations	, check liefe
		Address change	Name change		Foreign organizations me 2 check here and attach co	eting the 85% test,
H (hock	type of organization: X Section 501(c)(3) ex			7	
'i'	_		Other taxable private found	ation	E If private foundation state under section 507(b)(1)	
 		arket value of all assets at end of year 3 Account		Accrual	7	• •
			ther (specify)	L Accidal	F If the foundation is in a (
-	·\$	800,398. (Part I, colu	ımn (d) must be on cash	basis)	under section 507(b)(1)	(b), check here
	art I		(a) Revenue and		(a) Advicted not	(d) Disbursements
	41 6 1	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	800,000.	87 × 8/37	N/A	(cash basis only)
	2	Check if the foundation is not required to attach Sch. B	200,000		WWA.	7, 77, 74
	3	Interest on savings and temporary	161.	161	· · · · · · · · · · · · · · · · · · ·	STATEMENT . 1",
	4	cash investments Dividends and interest from securities	237.	237		STATEMENT 2
	1 .	Gross rents	257.	237	<u> </u>	
	1	Net rental income or (loss)	E	5.3	100 St. 100 St.	1.75 × 1.
	1 -	Net gain or (loss) from sale of assets not on line 10	0.	Strain Control	3,2,2	* ***
<u>ne</u>	l la	Gross sales price for all 250 210		3, 32, 1	***************************************	A 1357
Ze Z	7	assets on line 6a 230, 210. Capital gain net income (from Part IV, line 2)		0.	7,7766	3.0
(E)	,	Net short-term capital gain	13.50		1 100	
2 B	0	Income modifications		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
فر	10a	Gross sales less returns	Market Control	2.34 5 5	135, 13.	2 33 3
2	104	and allowances Less Cost of goods sold		77 C 20 10 10 10 10 10 10 10 10 10 10 10 10 10	The state of the s	70 77/3 4 4 55 C
III I V Revenue	٦	Gross profit or (loss)		A. 18	**************************************	2502
_	11	Other income		7 5 66 55		- 2. 3.2. 20.0
APR	12	Total. Add lines 1 through 11	800,398.	398		
-	13	Compensation of officers, directors, trustees, etc	0.	0		0.
e T	14	Other employee salaries and wages				
٠ د	15	Pension plans, employee benefits			† · · · · · · · · · · · · · · · · · · ·	
es E		Legal fees				
ens	Ь	Accounting fees			RECE	IVED
X	1	Other professional fees				18
Š.	17	Interest			APR 1	6 2012 9
6. and Administrative Expens	18	Taxes			121	18
iist	19	Depreciation and depletion			0000	NI LIT
Ë	20	Occupancy			- OCDE	14.01
Ad	21	Travel, conferences, and meetings				
Ē	22	Printing and publications				
lg a	23	Other expenses				
atir	24	Total operating and administrative				
Operating	}	expenses. Add lines 13 through 23	0.	_ 0		0.
Ō	25	Contributions, gifts, grants paid	500,000.	美國政策》。於		500,000.
	26	Total expenses and disbursements.				
	L_	Add lines 24 and 25	500,000.	0	<u>. </u> _	500,000.
	27	Subtract line 26 from line 12:	***************************************	A TOTAL OF THE E	· · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	a	Excess of revenue over expenses and disbursements	300,398.		The same of the sa	1 2 m
	b	Net investment income (if negative, enter -0-)	· · · · · · · · · · · · · · · · · · ·	398		· 1000 1000 1000 1000 1000 1000 1000 10
	C	Adjusted net income (if negative, enter -0-)	The state of the s	《秦西湖》 "台湾市。	N/A	10 to 18 13 18 18

123501 12-02-11 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2011) CHARLES & CYNTHIA BELL		00-PF (2011) CHARLES & CYNTHIA BELL		27-	4384428 Page 2
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	500,000.		
	Į.	Savings and temporary cash investments	, , , , , , , , , , , , , , , , , , , ,	800,398.	800,398.
	3	Accounts receivable			
		Less: allowance for doubtful accounts	() ==== (77.	
	4	Pledges receivable -	1 1 1 1 1 1 1 1	*******	
		Less: allowance for doubtful accounts			
	1 -	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	1 118 113 111 1	A*2 ,	
	7	Other notes and loans receivable		272	,
		Less: allowance for doubtful accounts	 -		
Assets	1	Inventories for sale or use			
Ass	1	Prepaid expenses and deferred charges			
•	ì	Investments - U.S. and state government obligations	ļ		
	1	Investments - corporate stock			
	١	Investments - corporate bonds		1 7 7 7 8 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	11	Investments - land, buildings, and equipment basis		Same of the	, ,
	1	Less accumulated depreciation			
	I	Investments - mortgage loans			
	13	Investments - other	2.77 1 20xx 2		
	14	Land, buildings, and equipment basis			*
	4.5				
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers)	500,000.	800,398.	800,398.
_		Accounts payable and accrued expenses	300,000.	000,330.	000,390.
	18	Grants payable			5 315
	19	Deferred revenue			art State
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	1	Mortgages and other notes payable			
Ë		Other liabilities (describe)			· **
		Ciriot ilabilities (decertion			
	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.			
ės	24	Unrestricted	500,000.	800,398.	
anc	25	Temporarily restricted	300,700		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Ba		Permanently restricted			
ם		Foundations that do not follow SFAS 117, check here			200
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds		_	
Vet	30	Total net assets or fund balances	500,000.	800,398.	
_					
	31	Total liabilities and net assets/fund balances	500,000.	800,398.	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
Г	art	Analysis of Changes in Net Assets or Fund E	Balances		
\equiv					
-		net assets or fund balances at beginning of year - Part II, column (a), lini	e 30		
		at agree with end-of-year figure reported on prior year's return)		. 1	500,000.
_		amount from Part I, line 27a		2	300,398.
-		r increases not included in line 2 (itemize)			0.
-		lines 1, 2, and 3	•	4	800,398.
-		eases not included in line 2 (itemize)	- olumn /b) !: 00		0.
<u>6</u>	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (p), line 30		800,398. Form 990-PF (2011)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(b) F	D - Donation		;) Date a (mo., da		(d) Date s (mo., day,	
1a FEDERATED PRIME MGT				VARIOUS			09/30/11			
<u>b</u>		 		-						
<u>c</u> d				 		_				
e										
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					ın or (loss (f) mınus		
a 250,210.			250,21	LO.						0.
<u>b</u>				-						
d d				_				_		
е			·							
Complete only for assets showing								ol. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			COI. (I	Losses (ot less tha from col. ((h)) 	
a										0.
<u>b</u>				-						
d d					·					
е										
2 Capital gain net income or (net cap		enter in Part I, line er -0- in Part I, line		}	2					0.
3 Net short-term capital gain or (loss			•			_				
If gain, also enter in Part I, line 8, o		o, una (o).]						
If (loss), enter -0- in Part I, line 8 Part V Qualification Ui	nder Section 4940(e)	for Poducos	I Tay on Not	1	3	lnoo		<u>N/A</u>	<u> </u>	
f section 4940(d)(2) applies, leave th Was the foundation liable for the secti f "Yes," the foundation does not quali Enter the appropriate amount in e	on 4942 tax on the distributabl fy under section 4940(e). Do no	ot complete this pa	ırt.						Yes 🖸	K No
(a) Base period years	(b)		Net value of no	(c)	ıtable-use a	esets		Distril	(d) bution ratio	
Calendar year (or tax year beginnin 2010	g (ii) Tajasta qaariyii ş	0.	100 100 01 110	-		042.	(col. (b) divided by col. (c))			
2009										
2008										
2007							 -			
2006			L				\vdash			
2 Total of line 1, column (d)							2		00	0000
3 Average distribution ratio for the 5		otal on line 2 by 5,	or by the number	r of ye	ars			-		
the foundation has been in existen	ce if less than 5 years	÷					3		.00	0000
4 Enter the net value of noncharitable	e-use assets for 2011 from Par	rt X, line 5					4		430,	<u> 161.</u>
5 Multiply line 4 by line 3							5			0.
5 Enter 1% of net investment incom	e (1% of Part I, line 27b)				-		6			4.
7 Add lines 5 and 6							7			4.
B Enter qualifying distributions from		-					8_		500,	000.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI	, line 1b, and com	plete that part usin	ng a 1'	% tax rate.					

$\overline{}$	m 990-PF (2011) CHARLES & CYNTHIA BELL FOUNDATION art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	<u> 27 -</u>	4384	1428	otion	age 4
	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		7	1115111	Clioi	13)
14	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		ļ ·			
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	ľ			4.
	of Part 1, line 27b		1.			_ _
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				4.
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				4.
6		-	;			
á	a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a		. ,.			
ı	b Exempt foreign organizations - tax withheld at source 6b) ;			
(c Tax paid with application for extension of time to file (Form 8868)	•	2.2			
(d Backup withholding erroneously withheld 6d		1 2	•		
7	Total credits and payments. Add lines 6a through 6d	7	<u> </u>			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9	\square			4.
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	11	<u> </u>			
Pa	art VII-A Statements Regarding Activities					
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	IN			Yes	No
	any political campaign?			1a		_X_
t	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		<u>X</u> _
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or		′ ′		
	distributed by the foundation in connection with the activities.					
0	c Did the foundation file Form 1120-POL for this year?			1c		<u>X</u> _
C	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			ļ		٠,
	(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$ O .					_
•	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			,		
	managers. > \$0.			"		-
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u>
	If "Yes," attach a detailed description of the activities.					-
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	ſ		(-, *
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u> _
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		<u>X</u> _
_ b	b If "Yes," has it filed a tax return on Form 990-T for this year?	1	I/A	4b		
5	• • • • • • • • • • • • • • • • • • • •			5		_X_
_	If "Yes," attach the statement required by General Instruction T.			* 33	,	
6	, , , , , , , , , , , , , , , , , , , ,					37.5
	By language in the governing instrument, or			30, 57		' ~
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law		5.5	17	. %
_	remain in the governing instrument?	-		6	X	
7				7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			*		
88	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE			1, 15,		1 4
	If the angular is "Vac" to line 7, has the foundation furnished a copy of Farm 000 DF to the Attorney Consult for June 11			1:53		1
0	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			آ المدادة	v	1 133
0		nder		8b	X	- 37
9	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	Hudi		\	\ ` `	v
40		ПУП	n 2	9	x	<u> </u>
<u> 10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S	TMT	<u> </u>	<u> </u>	\triangle	Ц

Form 990-PF (2011) CHARLES & CYNTHIA BELL F Part VII-B Statements Regarding Activities for Which I			27 – 43844 ved)	128 Page 6
5a*During the year did the foundation pay or incur any amount to:	Join	quii ou (contin	1	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); of				
any voter registration drive?	Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		1	
509(a)(1), (2), or (3), or section 4940(d)(2)?		☐ Ye	s 🗶 No 🏃	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?		Ye	s 🗓 No 📗	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described i	in Regulations	ľ	/
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere		▶∟⊥│	`
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ıned		
expenditure responsibility for the grant?	N	I/ A	s L No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d)		}	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	_	['
a personal benefit contract?		Ye	s X No	·
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s 🗶 No	<u> </u>
b if 'Yes,' did the foundation receive any proceeds or have any net income attribu		••	N/A	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>'</i>	
List all officers, directors, trustees, foundation managers and their	compensation			
plot all officero, all octors, a dotters, realization managero and atom	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
CHARLES R BELL JR	RESIDENT, DIR	· · · · · · · · · · · · · · · · · · ·		
111 JOHNSTONE DR	,	1		į
MADISON, MS 39110	0.00	0.	0	0.
CYNTHIA A BELL	DIRECTOR			
111 JOHNSTONE DR				
MADISON, MS 39110	0.00	0.	0	. 0.
		ļ		1
2 Compensation of five highest-paid employees (other than those inc	duded on time 4) If some	onto- INONE II		<u> </u>
Compensation of the ingliest-paid employees totale than those inc		enter NONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
NONE	devoted to position	 	compensation	allowalices
NONE				
				
				
			<u>-</u>	
		<u> </u>		
		<u> </u>	L	1
Total number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·			0
			Forn	n 990-PF (2011)

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndatioi	ns, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	436,712.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	436,712.
e	Reduction claimed for blockage or other factors reported on lines 1a and	1.	
·	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	436,712.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,551.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	430,161.
6	Minimum investment return. Enter 5% of line 5	6	21,508.
_	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.)	nd certa	
1	Minimum investment return from Part X, line 6	1	21,508.
	Tax on investment income for 2011 from Part VI, line 5	<u> </u>	21,500.
2a	Income tax for 2011. (This does not include the tax from Part VI.)		
b	Add lines 2a and 2b	2c	4.
C	Distributable amount before adjustments. Subtract line 2c from line 1	3	21,504.
3	Recoveries of amounts treated as qualifying distributions	4	21,304.
4		5	21,504.
5	Add lines 3 and 4 Padustics from distributable amount (see instructions)		21,504.
6	Deduction from distributable amount (see instructions)	7	21,504.
<u>_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		21,504.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	500,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	Ź,	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	500,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1	
	income. Enter 1% of Part I, line 27b	5	4.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	499,996.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifie	s for the section
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2010	2010	2011
1 Distributable amount for 2011 from Part XI,	-			
line 7				21,504.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			2,052.	
b Total for prior years:				
	,	0.		
3 Excess distributions carryover, if any, to 2011:			*	
a From 2006	」 ∶			
b From 2007	- ;·	: ','	, ,	
c From 2008	<u> </u> , <u>, </u>	* .		
d From 2009	<u>.</u>	± ',		
e From 2010				
f Total of lines 3a through e	0.	,	- /	
4 Qualifying distributions for 2011 from	1. Company		· ^,`	
Part XII, line 4: ► \$ 500,000.		, , , ,		,
a Applied to 2010, but not more than line 2a		`\$ /~ '	2,052.	· · · · · · · · · · · · · · · · · · ·
b Applied to undistributed income of prior			* "	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	. √°,	19 1	01 504
d Applied to 2011 distributable amount			\$\frac{\pi_{\sigma}}{\pi_{\sigma}} \tag{\pi_{\sigma}}	21,504.
e Remaining amount distributed out of corpus	476,444.	, ,	48	
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount	0.	- <	,	0.
must be shown in column (a))			4, 1, 1	
6 Enter the net total of each column as indicated below:	223	1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		,
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	476,444.			,
b Prior years' undistributed income. Subtract			4.3	, ,
line 4b from line 2b	6 X 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	0.	₹ % & \$	
c Enter the amount of prior years'			* * * * * * * * * * * * * * * * * * *	
undistributed income for which a notice of				7.00
deficiency has been issued, or on which the section 4942(a) tax has been previously	1.433 ·		,4 ×4,7 ±	5.3
assessed	A Salar	0.		
d Subtract line 6c from line 6b. Taxable				, , , ,
amount - see instructions	ALCONO.	0.		
e Undistributed income for 2010. Subtract line		100 Ang		¥ , , , ,
4a from line 2a. Taxable amount - see instr.		\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	0.	٠. ۶.٤٠٦
f Undistributed income for 2011. Subtract		*.	, , , , , , , , , , , , , , , , , , , ,	
lines 4d and 5 from line 1. This amount must		· · · · · · · · · · · · · · · · · · ·	مرز دختی	
be distributed in 2012		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.
7 Amounts treated as distributions out of		A STATE OF THE STA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$ 19th 1
corpus to satisfy requirements imposed by	_		***	٠
section 170(b)(1)(F) or 4942(g)(3)	0.	(V. 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		* * * * * * * * * * * * * * * * * * * *
8 Excess distributions carryover from 2006		6.13		
not applied on line 5 or line 7	0.	The State of	£ 5,50,50	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9 Excess distributions carryover to 2012.	476 444	Service Control of the Control of th		
Subtract lines 7 and 8 from line 6a	476,444.	377.20	* * * * * * * * * * * * * * * * * * * *	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
10 Analysis of line 9: a Excess from 2007			* * 1.	
b Excess from 2008			, , , , , ,	
c Excess from 2009				
d Excess from 2010			1 Capacity	
e Excess from 2011 476, 444.	· (2)	- The state of the		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<u> </u>	140 - 4			1

123581 12-02-11

Tarray Supplementary Information			····	 -
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
BROADMOOR BAPTIST CHURCH	NONE	501(C)(3)	MINISTRY, G3 CAMPAIGN	
1531 HIGHLAND COLONY PKWY	HONE	501(0)(3)	MINISTRI, G3 CAMPAIGN	
MADISON, MS 39110				500,000.
			1	
			1	
Total	_ 1			
b Approved for future payment			<u>▶ 3a</u>	500,000,
• Approved for factore payment				
NONE				
			}	
Total			▶ 3b	0.
			- 00	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)	
-	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		code	Amount	- Idilication income	
a						
b						
C		· · · · · · · · · · · · · · · · · · ·				
d		· · · · · · · · · · · · · · · · · · ·	+-			
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments					161.	
4 Dividends and interest from securities			_1		237.	
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property		<u> </u>				
7 Other investment income						
8 Gain or (loss) from sales of assets other			}			
than inventory	<u> </u>	_	_			
9 Net income or (loss) from special events	 					
O Gross profit or (loss) from sales of inventory	 					
1 Other revenue:			Ì			
<u>a</u>			_			
b						
c	 		_{			
d						
2 Subtotal. Add columns (b), (d), and (e)			7.	0.	398.	
3 Total. Add line 12, columns (b), (d), and (e)				· 	398.	
See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities to	o the Acco	mplishment of	Evamo	at Durnoses		

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).								
_									

Form 99 Part			ES & CYNTH] egarding Transfe					384428 charitable		ige 13
		ganization directly or indi (other than section 501(c	rectly engage in any of th	-	-		on 501(c) of		Yes	No
(1) (2)	Cash Other	from the reporting found assets sactions:	lation to a noncharitable e	exempt organiz	ation of:			1a(1) 1a(2)		X
(2) (3) (4)	Purch Renta Reim	of assets to a noncharita nases of assets from a no al of facilities, equipment, bursement arrangements s or loan guarantees	oncharitable exempt orga or other assets	nization				1b(1) 1b(2) 1b(3) 1b(4) 1b(5)		X X X X
c Sh d Ift or	aring o he ansv service	rmance of services or me f facilities, equipment, ma wer to any of the above is s given by the reporting f	ailing lists, other assets, o "Yes," complete the follo oundation. If the foundat	or paid employe wing schedule. ion received les	Column (b) should alv				sets,	X
(a) Line r		(b) Amount involved			npt organization	(d) Description	of transfers, transactions,	and sharing an	rangeme	ents
		idation directly or indirect				tations described		Yes		
<u>b lf "</u>	/es, <u>"</u> co	mplete the following sch (a) Name of org		(b)	Type of organization	((c) Description of rela	tionship		
		N/A								
-		penalties of perjury, I declare						May the IRS	discuss	this
Sign Here		ature of officer or trustee	Ley a	er (other than taxp	ayer) is based on all inform 4/4/12 Date	PRESIC	-	return with the shown below	e prepa (see in:	rer
Paid Prepa		Print/Type preparer's na TODD A. BO Firm's name ► BOO	oolos, CPATO		relast Cf	Date 4 04/02/12	self- employed	TIN P00105 -09001)
Use Only Firm's address ► 1007 MISSION PARK DR.										

123622 12-02-11

13

VICKSBURG, MS 39180

15560402 134256 274384428

Phone no.

601-636-6996

Schedule B

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

Employer identification number CHARLES & CYNTHIA BELL FOUNDATION 27-4384428 Organization type (check one): Filers of: Section: ___ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 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** 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, chantable, 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)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule 8 (Form 990, 990-EZ, or 990-PF) (2011)

Employer identification number

CHARLES & CYNTHIA BELL FOUNDATION

27-4384428

Part I	Contributors (see instructions) Use duplicate copies of Part I	if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES AND CYNTHIA BELL 111 JOHNSTONE DRIVE MADISON, MS 39110	\$ <u>800,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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 of 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 rf 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)

Employer identification number

CHARLES & CYNTHIA BELL FOUNDATION

27-4384428

art II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed.	
(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 !	(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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		*	

Name of organ	nization	Employer identification number				
	S & CYNTHIA BELL FOUNI	DATION	27-4384428			
Part III	Exclusively religious, charitable, etc., ind year. Complete columns (a) through (e) and the total of exclusively religious, charitable, educate copies of Part III if addition	tc., contributions of \$1,000 or less for the	, (8), or (10) organizations that total more than \$1,000 for the completing Part III, enter year. (Enter this information once)			
(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, a	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, a	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			

FORM 990-PF INTEREST ON SAVINGS A	ND TEMPORARY C	ASH INVESTMENTS	STATEMENT 1
SOURCE			AMOUNT
MORGAN KEEGAN			161.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		161.
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
MORGAN KEEGAN	237.	0.	237.
TOTAL TO FM 990-PF, PART I, LN 4	237.	0.	237.
-	TANTIAL CONTRI	BUTORS	STATEMENT 3
NAME OF CONTRIBUTOR	ADDRESS		
CHARLES & CYNTHIA BELL	111 JOHNSTON	E DR	

MADISON, MS 39110