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Form 990-PF

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

OMB No 1545 0052

2011

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 ca	lendar year 2011 or tax year beginning	, 2011,	and ending		
	PHENS FAMILY FOUNDATION D BOX 408			Employer identification num 58-6424620	nber
BOLINGBROKE, GA 31004				Telephone number (see the	instructions)
			c	If exemption application is	pending check here
G Ch	eck all that apply Initial return	Initial Return of a form Amended return	ner public charity	1 Foreign organizations chec	k here
H (X Address change Check type of organization X Section 50	Name change (c)(3) exempt private fo	undation	2 Foreign organizations meet here and attach computation	ing the 85% test_check
	Section 4947(a)(1) nonexempt charitable tr		rivate foundation E	If private foundation status under section 507(b)(1)(A)	
· ((from Part II column (c) line 16)	Other (specify) column (d) must be on		If the foundation is in a 60 under section 507(b)(1)(B)	
Part					· · · · · · · · · · · · · · · · · · ·
Line Till.	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable
	columns (b) (c) and (d) may not neces	CAPCINGES POT BOOKING		111001110	purposes
	sarily equal thé amounts in column (a) (see instructions))	1			(cash basis only)
	1 Contributions gifts grants etc received (att sch)				
	2 Ck X if the foundn is not req to att Sch B		······································		
	3 Interest on savings and temporary				
	cash investments	18	18		
	4 Dividends and interest from securities	7,063	7,063	7,063	
	5a Gross rents b Net reptal recome			 	
_	b Net rental income or (loss)		······································		
R E V	6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all				
Ψ	assets on line 6a		<u> </u>		
Ë	7 Capital gain net iricome (from Part IV line 2) 8 Net short term capital gain		7 - 1 - 1 - 7 - 1 - 1 - 1 - 1 - 1 - 1 -		
U	9 Income modifications		···· ·································	-	
Ε	10 a Gross sales less returns and		·····		
	allowances				
	b Less Cost of goods sold				
	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule)				
	12 Total Add lines 1 through 11	7,081	7,081	7,081	
	13 Compensation of officers directors trustees etc	} <u>-</u>			
	14 Other employee salaries and wages 15 Pension plans employee benefits				
	15 Pension plans employee benefits 16 a Legal fees (attach schedule)			 	
Ê	b Accounting fees (attach sch)				
M J	c Other prof fees (attach sch) SEE ST 1	300	300	300	
5 N	17 Interest			1	
PS	18 Taxes (attach schedule)(see mstrs)	*		· · · · · · · · · · · · · · · · · · ·	
OPERAT	19 Depreciation (attach			1 1	
II	sch) and depletion			.4	
N V E	20 Occupancy 21 Travel conferences and meetings	 	· · · · · · · · · · · · · · · · · · ·	 	
_	21 Travel conferences and meetings 22 Printing and publications			 	
AND EXPE	23 Other expenses (attach schedule)	*			
N S	24 Total operating and administrative			+	<u> </u>
E S	expenses Add lines 13 through 23.	300	300	300	
-	25 Contributions gifts grants paid PART XV	9,000			9,000
	26 Total expenses and disbursements Add lines 24 and 25	9,300	300	300	9,000
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-2,219			
	b Net investment income (if negative enter 0)	۷,۷13	6,781		
	C Adjusted net income (if negative enter 0)		0,701	6,781	
	_ Aujusteu net income (il negative enter U)		· ·····	9,701	



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Part II Balance Sheets		Ralance Sheets	Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End o	of year	
2.00	3.02.1		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non interest	bearing	-1	·		
	2	Savings and tempora	ary cash investments	112,318	109,942	109,941	
	3	Accounts receivable	>				
	l	Less allowance for d	doubtful accounts ►				
	4	Pledges receivable					
		Less allowance for o	doubtful accounts ►				
	5	Grants receivable					
	6		ers directors trustees and other th schedule) (see instructions)				
	7	Other notes and loans rece	eivable (attach sch).			,	
ŝ	ľ	Less allowance for d	doubtful accounts			<u> </u>	
A S E T	8	Inventories for sale of					
Ť	9	Prepaid expenses ar	nd deferred charges				
S		Investments – U.S.; obligations (attach so	chedule)				
	1	•	stock (attach schedule) STATEMENT 2	58,348	<u>58,347</u>	31,109	
		: Investments — corporate t	oonds (attach schedule)				
	11	Investments – land equipment basis	buildings and				
		Less accumulated deprect (attach schedule)	ation •				
	12	Investments - mortg	, 9				
	13	Investments - other	•	171,029	171,029	69,777	
	14	Land buildings and					
	ĺ	Less accumulated deprect (attach schedule)	-				
		Other assets (describ					
	16	see the instructions	ompleted by all filers – Also_see page 1_item l)	341,694	339,318	210,827	
L	17	Accounts payable an				-	
A	18	Grants payable	·				
B	19	Deferred revenue					
Ľ	20	Loans from officers direct	ors trustees & other disqualified persons				
ļ	21	Mortgages and other notes	payable (attach schedule)				
Ţ	22	Other habilities (descrit	De				
E	23	Total liabilities (add	ines 17 through 22)	0	0		
	-		ow SFAS 117 check here	-			
		and complete lines 2	4 through 26 and lines 30 and 31				
N F E U T N	24	Unrestricted					
T N	25	Temporarily restricted					
	26	Permanently restricted	rot follow SFAS 117 check here ► X				
S B S A		and complete lines 2	7 through 31				
ΕL	27	Capital stock trust n	rincipal or current funds	341,694	339,318		
TA	28		or land building and equipment fund		333,310		
С	29	• • •	lated income endowment or other funds				
OERS	' -		339,318				
	31		et assets/fund balances	341,694	339,318		
Par			ges in Net Assets or Fund Balanc		339,310		
1	Total end c	net assets or fund ba of year figure reported	lances at beginning of year — Part II colun on prior year s return)	nn (a) line 30 (must agre	ee with	341,694	
2	2	-2,219					
3	Other i	ncreases not included in lin	e 2 (Itemize)		3		
4	339,475						
		ses not included in line 2 (i			5	157	
_ 6	Total	net assets or fund ba	lances at end of year (line 4 minus line 5) -	 Part II column (b) line 	30 6	339,318	

Pa		Losses for Tax on Investmen		4		
	(a) List and describ 2 story brick warehou	e the kind(s) of property sold (e.g. re se or common stock 200 shares ML(eal estate C Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month day year)	(d) Date sold (month day year)
1:	a N/A					
	b					
	С					
	d					
	e				<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa		(h) Gain or (e) plus (f) m	
	a					
	b					
	<u> </u>				<u> </u>	
	<u>d</u>				-	
	e					
		ng gain in column (h) and owned by t			(I) Gains (Col	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j) If a		han 0) or Losses (f	
	3					
	b					
	<u> </u>				 	
	d					
	e				ή	
2	Capital gain net income or (net	capital loss) If gain also If (loss) ent	enter in Part I line 7 er 0 in Part I line 7	. 2		
3		oss) as defined in sections 1222(5) a	··· –			
	If gain also enter in Part I line in Part I line 8	8 column (c) (see instructions) If (lo	oss) enter 0	3		
Pai	rt V Qualification Under	r Section 4940(e) for Reduce	d Tax on Net Investm	ent Income		
Was	es the foundation does not quali	ion 4942 tax on the distributable amo fy under section 4940(e) Do not com	plete this part		Yes	No
_1	Enter the appropriate amount in	each column for each year see the	instructions before making a	ny entries	<u></u>	
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable use ass	sets (co	(d) Distribution lumn (b) divided	
	2010					
	2009					
	2008					
	2007					
	2006					
2	Total of line 1 column (d)			2		
3	Average distribution ratio for the number of years the foundation	e 5 year base period – divide the tota has been in existence if less than 5 y	of on line 2 by 5 or by the years	3		
4	Enter the net value of noncharit	able use assets for 2011 from Part X	line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investment inco	ome (1% of Part Liline 27h)		6		
		Sinc (1 /0 Oil art i line 2/U)				
7				7		
8	Enter qualifying distributions fro		me the and appealable that are		av rate. Soo the	
	It line 8 is equal to or greater the Part VI instructions	an line 7 check the box in Part VI li	ne to and complete that pa	intusing a 1% to	an late See the	

Only	30-11 (2011) STELLIERS TREATED TOORDISTION	71210			<u> </u>	ago -
Par	t VI Excise Tax Based on Investment Income (Section 4940(a) 4940(b) 4940(e), or 4948 - see ii	nstruct	(enoc			
1 a	Exempt operating foundations described in section 4940(d)(2) check here		•			
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V	1			1	36
	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 column (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					_
	foundations only Others enter 0)	2				0
_	Add lines 1 and 2	3			1	36
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter 0)	4				0_
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter 0.	5		,,	1	.36
	Credits/Payments					
	2011 estimated tax pmts and 2010 overpayment credited to 2011 6a					
	Exempt foreign organizations — tax withheld at source 6b Tax paid with application for extension of time to file (Form 8868) 6c					
	· · · · · · · · · · · · · · · · · · ·					
		7				0
	Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here	8				
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due If the total of lines 5 and 8 is more than line 7 enter amount owed	9			1	.36
		10				
	Enter the amount of line 10 to be Credited to 2012 estimated tax	11				
	t VII-A Statements Regarding Activities	**		-		
					Yes	No
	During the tax year did the foundation attempt to influence any national state or local legislation or did it participate or intervene in any political campaign?		-	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			1Ь		Х
	If the answer is Yes to 1a or 1b, attach a detailed description of the activities and copies of any materials public or distributed by the foundation in connection with the activities	shed				
С	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 year (1) On the foundation \$\begin{align*} \begin{align*} \sigm* \\ \\ \\ \\ \\ \\ \\ \\ \\ \end{align*} \begin{align*} \begin{align*} \delta \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed or		<u> </u>			
	foundation managers \$ 0					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		Į	2		X
	If Yes attach a detailed description of the activities					
3	Has the foundation made any changes not previously reported to the IRS in its governing instrument articles		ŀ	١,		v
_	of incorporation or bylaws or other similar instruments? If Yes attach a conformed copy of the changes		ŀ	3 4a	_	X
	Did the foundation have unrelated business gross income of \$1 000 or more during the year?		ŀ	4a 4b	N	/A
	If Yes has it filed a tax return on Form 990 T for this year?		Ì	5	- 11	X
9	Was there a liquidation termination dissolution or substantial contraction during the year? 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					
		flict				
_	By state legislation that effectively amends the governing instrument so that no mandatory directions that con with the state law remain in the governing instrument?	iiiiCt		6 7	X	Х
	Did the foundation have at least \$5 000 in assets at any time during the year? If Yes complete Part II column (c) and Part XV					
ва	Enter the states to which the foundation reports or with which it is registered (see instructions) N/A		-			
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 ² If No attach explanation			86	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If Yes complete	942(j)(9 Part XI	;) 'V	9		х
10	Did any persons become substantial contributors during the tax year? If Yes attach a schedule listing their na and addresses			10		X
RAA	and addresses		Fo	rm 99	0 PF	

Pa	rt 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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If Yes—attach statement (see instructions).	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Х	
14	The books are in care of ► WENDY S KING Telephone no ►			
	Located at ► 147 GLENEAGLES CIRCLE MACON GA ZIP + 4 ► 31210			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 PF in lieu of Form 1041 — Check here	N/A	. ▶	
	and enter the amount of tax exempt interest received or accrued during the year		Yes	N/A No
16	At any time during calendar year 2011 did the foundation have an interest in or a signature or other authority over a bank securities or other financial account in a foreign country?	16	103	X
	See the instructions for exceptions and filing requirements for Form TD F 90 22.1. If Yes enter the name of the foreign country ►			<u></u>
Pai	R 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	a During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from lend money to or otherwise extend credit to (or accept it from) a disgualified person? Yes X No			
	(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? X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(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 X No			
t	b If any answer is. Yes, to 1a(1) (6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d) 3 or in a current notice regarding disaster assistance (see instructions)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here			
(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?	1c		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
ā	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 X No			
	If Yes list the years ► 20 20 20 20			
t	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed answer. No and attach statement — see instructions.)	2b	N	/A
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a list the years here			
	► 20 20 20 20			
32	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			
ŀ	olf 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 beguest or			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest or (3) the lapse of the 10 15 or 20 year first phase holding period? (Use Schedule C Form 4720 to determine if the foundation had excess business holdings in 2011).	3b	N	/A
4 6	a Did the foundation invest during the year any amount in a manner that would jeopardize its	4a		Х
	charitable purposes?	79		† <u>"</u>
ŧ	b Did the foundation make any investment in a prior year (but after December 31 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		x
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Part VII-B Statements Regarding Activit		n 4/20 May Be Red	uired (continued)		
5a During the year did the foundation pay or incuition (1) Carry on propaganda or otherwise attemptions.	•	n (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publion directly or indirectly any voter registra	lic election (see section	4955) or to carry	☐ Yes [X]	No	
(3) Provide a grant to an individual for travel		ourposes?		No	
(4) Provide a grant to an organization other the in section 509(a)(1) (2) or (3) or section	nan a charitable etc or 4940(d)(2)? (see instruc	ganization described ctions)	Yes X	No	
(5) Provide for any purpose other than religion educational purposes or for the prevention	us charitable scientific n of cruelty to children o	literary or or animals?	Yes X	No	
b If any answer is Yes to 5a(1) (5) did any of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5b	N/A
Organizations relying on a current notice regain	ding disaster assistanc	e check here	▶ [
c If the answer is Yes to question 5a(4) does to tax because it maintained expenditure response If Yes attach the statement required by Regulation	sibility for the grant?	·	N/A Yes	No	
6a Did the foundation during the year receive ar on a personal benefit contract?	•	• • •		No	
b Did the foundation during the year pay premi If Yes to 6b file Form 8870	ums directly or indirect	ly on a personal benefi	t contract?	6b	X_
7a At any time during the tax year was the found	ation a party to a prohil	bited tax shelter transac	tion? Yes X	No	
b If Yes did the foundation receive any proceed				У/А 7ь	1
Part VIII Information About Officers, D	rectors, Trustees	, Foundation Mana	gers, Highly Paid	Employees	5,
1 List all officers directors trustees, foundation	managers and their co	mneneation (see instru	ctions)		
List all officers directors dustees, foundation	T		(d) Contributions to	(e) Expense	account
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid enter 0)	employee benefit plans and deferred compensation	other allov	
JERRY L STEPHENS		0	0		0
P O BOX 408	0				
BOLINGBROKE, GA 31004					
LINDA B STEPHENS		0	0		0
P O BOX 408	0				
BOLINGBROKE, GA 31004					
WENDY S KING		0	0	ļ	0
P O BOX 408	0				
BOLINGBROKE, GA 31004				ļ	
DAWN M KENNEDY		0	0		0
P O BOX 408	0				
BOLINGBROKE, GA 31004		1 1		NONE	
2 Compensation of five highest paid employees					
(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 other allow	
NONE					
					
Total number of other employees paid over \$50 000	<u> </u>			ł	0
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and Contractors (continued) 3 Five highest paid independent contractors for professional services (see inst	nuctions) If none enter NONE	
(a) Name and address of each person paid more than \$50 000	(b) Type of service	(c) Compensation
NONE	(b) Type of service	(c) compensation
Total number of others receiving over \$50 000 for professional services.		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served conferences convened research papers produced etc.	information such as the number of	Expenses
a NT/R		
1 N/A		
2		
3		
4		
	1	
Part IX-B Summary of Program-Related Investments (see Instru	ctions)	
Describe the two largest program related investments made by the foundation during	ng the tax year on lines 1 and 2	Amount
1		
<u>N/A</u>		
2		
All other program related investments. See instructions		
3		
		·
Total Add lines 1 through 3	•	0
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Part X Minimum Investment Return (All domestic foundations must complete this part F see instructions)	oreigr	1 foundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		110.000
a Average monthly fair market value of securities	1a	119,002
b Average of monthly cash balances	1b	115,902
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a b and c)	1 d	234,904
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		•
2 Acquisition indebtedness applicable to line 1 assets	2	0
3 Subtract line 2 from line 1d	3	234,904
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount see instructions)	4	3,524
5 Net value of noncharitable use assets Subtract line 4 from line 3. Enter here and on Part V. line 4.	5	231,380
6 Minimum investment return Enter 5% of line 5.	6	11,569
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	atıng	foundations
and certain foreign organizations check here ► and do not complete this part)		
1 Minimum investment return from Part X line 6	1	11,569
2a Tax on investment income for 2011 from Part VI line 5	1 1	
b Income tax for 2011 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	136
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	11,433
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	11,433
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII line 1	7	11,433
Part 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	9,000
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 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	9,000
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part 1 line 27b (see instructions)	5	
6 Adjusted qualifying distributions Subtract line 5 from line 4	6	9,000
Note The amount on line 6 will be used in Part V column (b) in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years	the four	ndation
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI				
Inne 7 2 Undistributed income if any as of the end of 2011				11,433
a Enter amount for 2010 only			0 060	
b Total for prior years 20 20 20		0	8,869	
3 Excess distributions carryover if any to 2011		<u>-</u> -		
a From 2006]	1	
b From 2007			Ī	
c From 2008			Ī	
d From 2009			1	
e From 2010			1	
f Total of lines 3a through e	0		1	
4 Qualifying distributions for 2011 from Part				······································
XII line 4 ► \$ 9,000				
a Applied to 2010 but not more than line 2a			8,869	
b Applied to undistributed income of prior years (Election required — see instructions)		0		
c Treated as distributions out of corpus	0			
(Election required — see instructions) d Applied to 2011 distributable amount	0			131
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2011	0			0
(If an amount appears in column (d) the				
same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f 4c and 4e Subtract line 5	0			
b Prior years undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years undistribut ed income for which a notice of deficiency				
has been issued or on which the section 4942(a) tax has been previously assessed		0		
d Subtract line 6c from line 6b Taxable amount — see instructions		0		
e Undistributed income for 2010 Subtract line 4a from			0	
line 2a Taxable amount — see instructions			U	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				11,302
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed			!	
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0			
8 Excess distributions carryover from 2006 not				
applied on line 5 or line 7 (see instructions)	00			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2007			1	
b Excess from 2008			1	
c Excess from 2009				
d Excess from 2010			1	
e Excess from 2011				

Part XV Supplementary Information (continued)

Recipient	If recipient is an individual show any relationship to any foundation manager or status of		Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year SAVE-A-PET, INC BOLINGBROKE, GA	NONE	N/A	HUMANE - ANIMAL CONTROL	2,000
THE SMILE TRAIN WASHINGTON DC,	NONE	N/A	CHARITABLE	1,500
SAMITARIANS PURSE P O BOX 3000 BOONE, NC 28607	NONE	N/A	CHARITABLE	1,500
HEIFER INTERNATIONAL 1 WORLD AVENUE LITTLE ROCK, AR 72202	NONE	N/A	CHARITABLE	1,780
MUSEUM OF ARTS & SCIENCES MACON, GA 31210	NONE	N/A	CHARITABLE	1,220
GEORGIA INDUSTRIAL CHILDRENS HOME MACON, GA 31210	NONE	N/A	CHARITABLE	1,000
Total		T	► 3a	9,000
b Approved for future payment				
			► 3b	

Part XVI-A	Analy	sis of	Income-F	Producing	Activities

Ente	gross amounts unless otherwise indicated Unrelated business income		business income	Excluded by	section 512 513 or 514	(e)
1	Program service revenue	(a) Business code	(b) Amount	(c) Exclu sion code	(d) Amount	Related or exempt function income (See instructions)
а						
b						
c						
d						
е						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	18_	
4	Dividends and interest from securities			14	7,063	
5	Net rental income or (loss) from real estate					
а	Debt financed property					
b	Not debt financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income			<u> </u>		
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue					
а						
ь						
c						
d						
е			···-			
12	Subtotal Add columns (b) (d) and (e)				7,081	
13	Total Add line 12 columns (b) (d) and (e)				13	7,081
(See	worksheet in line 13 instructions to verify calculation	ns)			 	· <u>-</u>

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Pui	rposes	1
---	--------	---

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) (See instructions)
N/A	
	

Part XVII	Information Regarding	Transfers To and	Transactions and	Relationships	With Noncharitable
	Evennt Organizations				

Use C	nlv Firm's address 🟲 💄		BOX ONE 202-0001	Phone	no (478) 746-6277
Paid Prepa		MCNAIR, MCLE	EMORE, MIDDLEBROOKS	111111	f employed P00366730 EIN ► 58-1094351
Sıgn Here	Under penalties of perjury I declaration Market Declaration Signature of officer or trustee Print/Type preparer s no	King	this return including accompanying so taxpayer) is based on all information	Tritle Date Ch	May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No
N/A	(a) Name of organizat	tion	(b) Type of organization	(c) Desc	ription of relationship
d	s the foundation directly or escribed in section 501(c) Yes complete the follow	of the Code (other	with or related to one or mother than section 501(c)(3)) or in	ore tax exempt organizations section 527?	Yes X No
		<u> </u>			
(a) Line	e no (b) Amount involved	(c) Name of no	ncharitable exempt organization	(d) Description of transfers tra	ansactions and sharing arrangements
tr	ne goods other assets or ny transaction or sharing a	services given by arrangement show	the reporting foundation. If the in column (d) the value of the	Column (b) should always sho e foundation received less than e goods other assets or servi	n fair market value in ces received
		•	other assets or paid employe		
(6	6) Performance of services	s or membership o	-		1b (6) X 1c X
•	 Reimbursement arrange Loans or loan guarantee 				1 b (4) X 1 b (5) X
(3	Rental of facilities equi	pment or other as	, ,		1 b (3) X
	 Sales of assets to a nor Purchases of assets fro 	•	-		1 b (1) X 1 b (2) X
•	Other transactions				
•	l) Cash 2) Other assets				1 a (1) X 1 a (2) X
	· · · · · · · · · · · · · · · · · · ·		oncharitable exempt organiza	tion of	
ď	lid the organization directly escribed in section 501(c) elating to political organiza	of the Code (other	ge in any of the following with than section 501(c)(3) organi	any other organization zations) or in section 527	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Exempt Organi	LUCTOTIS			Yes No

2011	FEDERAL STATEMENTS	PAGE 1
CLIENT 1217028	STEPHENS FAMILY FOUNDATION	58 6424620
10/22/12		09 22AN
STATEMENT 1 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
TAX RETURN PREPARATION	EXPENSES INVESTMENT ADJUSTED CHAR	(D) ITABLE POSES 0
STATEMENT 2 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STO	скѕ	
CORPORATE STOCKS	VALUATION BOOK FAIR METHOD VALUE VAI	
150 SH GOLDMAN SACHS GROUP 72 SHARES CME GROUP INC	COST \$ 20,840 \$ COST 37,507	13,565 17,544 31,109
STATEMENT 3 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER		
OTHER INVESTMENTS	VALUATION BOOK FAIR M <u>METHOD</u> <u>VALUE</u> <u>VAL</u>	
GUGGENHEIM ENHANCED EQUITY 2046 SH COLUMBIA TECH FUND 2500 SH ALPINE TOTAL DYNAMIC	COST 21,029 1	0,800 8,027 0,950
	TOTAL \$ 171,029 \$ 6	59,777
STATEMENT 4 FORM 990-PF, PART III, LINE 5 OTHER DECREASES		
FEDERAL INCOME TAXES	TOTAL \$	157 157

STATEMENT 5 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM

NAME

CARE OF

STREET ADDRESS CITY, STATE, ZIP CODE TELEPHONE

WENDY S KING

P O BOX 408 BOLINGBROKE, GA 31004

2011

FEDERAL STATEMENTS

PAGE 2

CLIENT 1217028

STEPHENS FAMILY FOUNDATION

58-6424620

10/22/12

09 22AM

STATEMENT 5 (CONTINUED) FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

FORM AND CONTENT

WRITTEN REQUEST OUTLINING NEED TO ASSISTANCE ALONG WITH

DOCUMENTATION OF COST/UNMET NEED

SUBMISSION DEADLINES RESTRICTIONS ON AWARDS



Form OOOO (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

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	• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box						
	e filing for an Additional (Not Automatic) 3-Mont		· · · · · · · · · · · · ·				
Do not com	<i>plete Part II unless</i> you have already been grante	d an autom	atic 3 month extension on a previously f	led Form 8868			
request an e Associated \	Iling (e-file) You can electronically file Form 8868 required to file Form 990 T) or an additional (not extension of time to file any of the forms listed in With Certain Personal Benefit Contracts which ming of this form visit www.irs.gov/efile and click of	: automatic) Part I or Pa ust be sent	3 month extension of time. You can ele art II with the exception of Form 8870. In to the IRS in paper format (see instruction	ctronically file Form formation Return for	8868 to		
Part I A	utomatic 3-Month Extension of Time O	nly subm	it original (no copies needed)				
	n required to file Form 990 T and requesting an a			complete Part I only	▶ □		
	porations (including 1120 C filers) partnerships		nd trusts must use Form 7004 to request		ne to file		
	Name of exempt organization or other filer see instructions			Employer identification n			
Type or print	STEPHENS FAMILY FOUNDATION			X 58-642462	0		
File by the	Number street and room or suite number If a P O box see in	structions		Social security num			
due date for filing your return See	P O BOX 408				•		
return See instructions	City town or post office state and ZIP code For a foreign addi	ress see instru	chons	<u> </u>			
	BOLINGBROKE, GA 31004			•••			
Enter the Re	eturn code for the return that this application is fo	r (file a sep	parate application for each return)		04		
Application Is For		Return Code	Application Is For		Return Code		
Form 990		01	Form 990 T (corporation)		07		
Form 990 BI		02	Form 1041 A		08		
Form 990 E	Z	01	Form 4720	-	09		
Form 990 PI	F	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) 06 Form 8870					12		
Telephon If the org If this is check the external the external the content of t	ganization does not have an office or place of bus for a Group Return enter the organization's four	FAX No siness in the digit Group heck this bo	Exemption Number (GEN) If particular in the partin the particular in the particular in the particular in the parti	this is for the whole mes and EINs of all	•		
until _ The ex ► X ►	8/15 20 12 to file the exempt orgotension is for the organization's return for calendar year 20 11 or tax year beginning 20	anization re	eturn for the organization named above				
	ax year entered in line 1 is for less than 12 mont ange in accounting period	hs check re	eason	al return			
	application is for Form 990 BL 990 PF 990 T 47 undable credits. See instructions.	720 or 6069	enter the tentative tax less any	3a \$	0		
payme	application is for Form 990 PF 990 T 4720 or 60 nts made. Include any prior year overpayment all	lowed as a	credit	3b \$	0		
	te due Subtract line 3b from line 3a Include your be (Electronic Federal Tax Payment System) See			3c \$	0		
Caution If y payment ins	rou are going to make an electronic fund withdray tructions	val with this	Form 8868 see Form 8453 EO and For	m 8879 EO for			

					~~~~
Form <b>8868</b>	(Rev 1 2012)				Page 2
	are filing for an Additional (Not Automatic) 3-Month	h Extensio	n, complete only Part II and check th	is box	► 🛛
	complete Part II if you have already been granted				
	are filing for an Automatic 3-Month Extension, con				
	Additional (Not Automatic) 3-Month Exte			o copies needed)	
				entifying number, see ii	nstructions
	Name of exempt organization or other filer see instructions			mployer identification number (	
Tuno or					
Type or print	STEPHENS FAMILY FOUNDATION		<b> </b> [	X 58-6424620	
	Number street and room or suite number. If a P.O. box, see instr	ructions		Social security number (SSN)	
File by the extended due date for filing the	MCNAIR, MCLEMORE, MIDDLEBROOKS POST OFFICE BOX ONE		اً	٦	
return See instructions	City town or post office state and ZIP code For a foreign addres	s see instructi	ons		
	MACON, GA 31202-0001				
	1				
Enter the f	Return code for the return that this application is fo	r (file a sep	parate application for each return)		04
Applicatio Is For	n	Return Code	Application Is For		Return Code
Form 990		01		· · · · · · · · · · · · · · · · · · ·	
Form 990 I	BL.	02	Form 1041 A		08
Form 990 I	EZ	01	Form 4720		09
Form 990 I	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)	06	Form 8870		12
STOP' Do	not complete Part II if you were not already grante	ed an auton	natic 3-month extension on a previo	usly filed Form 8868	
Teleph  If the c	organization does not have an office or place of busis for a Group Return enter the organization's four	digit Group	e United States check this box Exemption Number (GEN)		► □
whole grou	up check this box 🕒 📗 If it is for part of the gro	oup check t	his box 🏲 🔛 and attach a list with	the names and EINs o	f all
members t	the extension is for				
5 For 6 If the C	uest an additional 3 month extension of time until calendar year 2011 or other tax year beginning tax year entered in line 5 is for less than 12 mont change in accounting period and the extension TAXP. THER INFORMATION NECESSARY TO FI	9 hs check r	SPECTFULLY REQUESTS ADD		- )
	s application is for Form 990 BL 990 PF 990 T 47 efundable credits. See instructions.	720 or 6069	enter the tentative tax less any	8a \$	0_
paym	s application is for Form 990 PF 990 T 4720 or 60 nents made Include any prior year overpayment all Form 8868	069 enter a lowed as a	any refundable credits and estimated credit and any amount paid previous	tax ly <b>8b</b> \$	0_
c Balaı EFTF	nce due Subtract line 8b from line 8a Include you S (Electronic Federal Tax Payment System) See	r payment v	with this form if required by using	8c \$	0
Under penaltie	Signature and Verificates of perjury I declare that I have examined this form including accomplete, and that I am authorized to prepare this form.		st be completed for Part II on edules and statements and to the best of my kno		

	plete and that am authorized to	prepare this form	Affahlam Bilal amare	Middlebrooks & Co LLC	and benefit it is true	
Signature ►	Nellam	A-Epsim	P.O Box One	Macon, Georgia 31202	Date AUG	1 4 2012
ВАА		10/	FIFZ0502L 07/29/11		Form <b>8868</b>	(Rev 1 2012)