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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

For o	calendar year 2011 or tax year beginning		, and ending		
Nar	me of foundation			A Employer identification	n number
_	SS Foundation			72-1393930	)
	mber and street (or P O box number if mail is not delivered to street a	address)	Room/suite	B Telephone number	
	2.0. Box 1346			6014469900	)
-	y or town, state, and ZIP code Iatchez, MS 39121			C If exemption application is p	pending, check here
	Check all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s check here
	Final return	Amended return	mor public ollarity	To the total grant of game action	o, 01100x 11010
	Address change	Name change		Foreign organizations management 2. check here and attach or	eeting the 85% test, omputation
H_ C	Check type of organization X Section 501(c)(3) exe			E If private foundation sta	_
<u> </u>		Other taxable private founda		under section 507(b)(1	• • •
	air market value of all assets at end of year J Accountin	•	Accrual	F If the foundation is in a	
	rom Part II, col. (c), line 16) Uth \$ 833990 . (Part I, colun	ner (specify) nn (d) must be on cash t	nasis )	under section 507(b)(1	)(B), check here
	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	income	income	for chantable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	200000.		N/A	
	2 Check I if the foundation is not required to attach Sch B				3100 3100 110
	3 Interest on savings and temporary cash investments	2338.	2338.		Statement 1
	4 Dividends and interest from securities	17944.	17944.		Statement 2
	5a Gross rents				
	b Net rental income or (loss)  6a Net gain or (loss) from sale of assets not on line 10	-4707.	<del></del>		
Revenue	b Gross sales price for all 130886 •				
eve	7 Capital gain net income (from Part IV, line 2)		0.	11111 1111 1111 1111 111 111 111 111 1	- 1444   1444
œ	8 Net short-term capital gain				
	9 Income modifications	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Gross sales less returns and allowances	. ,			
	b Less Cost of goods sold				
	c Gross profit or (foss)  11 Other income RECEIVED				<del></del>
	12 Total. Add lines of through 11	215575.	20282.		
	13 Compensation of officers, directors, this (less ) etc. 12		0.		0.
	13 Compensation of officers, directors, this ges 2-ft 12 14 Other employee salaries and wages				
<b>"</b>	15 Pension plans embloyee benefits.				
Se	15 Pension plans employee benefits.  16a Legal fees OGDEN, UT	1.500			
per	b Accounting fees Stmt 3	1500.	825.		675
E E	c Other professional fees				
aţi.	17 Interest 18 Taxes				
Administrative Expenses	18 Taxes   19 Depreciation and depletion			· · · · · · · · · · · · · · · · · · ·	
ä.	20 Occupancy				
Ad	21 Travel, conferences, and meetings				
and	22 Printing and publications				
g	23 Other expenses Stmt 4	12754.	0.		0
rati	24 Total operating and administrative	4.0-4	225		
Operating	expenses. Add lines 13 through 23	14254.	825.		675
-	25 Contributions, giπs, grants paid	32018.	·	<u> </u>	32018
	26 Total expenses and disbursements. Add lines 24 and 25	46272.	825.		32693
	27 Subtract line 26 from line 12	40212	023.	<u> </u>	32073
	a Excess of revenue over expenses and disbursements	169303.			
	b Net investment income (if negative, enter -0-)		19457.		
	c Adjusted net income (if negative, enter -0-)			N/A	
1235 12-02	501 2-11 LHA For Paperwork Reduction Act Notice, see in	nstructions.			Form <b>990-PF</b> (2011)

4

853842.

1135. 852707.

Add lines 1, 2, and 3

3 Other increases not included in line 2 (itemize)

Decreases not included in line 2 (itemize) ▶ Net decrease in stock basis

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

P	art IV Capital Gains a	and Losses for Tax on	Investmen	t Income	-				
		nbe the kind(s) of property sold (e rehouse, or common stock, 200 s			I`P	łow ac - Purch - Dona	nase I	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
la	Merrill Lynch a	#535-04C63						Various	01/18/11
b	Merrill Lynch a	#535-04C63					P	Various	01/18/11
C	Merrill Lynch 7	#535-02097			ļ		P	Various	12/31/11
d	VOC Energy Trus	st	•			]	P	05/05/11	07/21/11
e									
	(e) Gross sales price	(1) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (lo (e) plus (f) minu	
а	8850.			885	0.				0.
b	37443.			3819	0.				-747.
C	60400.	<del></del>		6755	3.				-7153
đ	24193.			2100	0.				3193
e									
	Complete only for assets showin	g gain in column (h) and owned b	y the foundation	n on 12/31/69			(1	) Gains (Col (h) ga	in minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col (i) r col (j), if any			col	(k), but not less to Losses (from co	
a									0 .
b									
E									-7153
d							_		3193
е									
2	Capital gain net income or (net ca	pital loss) { If gain, also ent			}	2			-4707
3	Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		and (6)		}	3		N/	Α
P		nder Section 4940(e) fo	or Reduced	Tax on Net	Inv	estm	ent Inc		
	or optional use by domestic private								N/A
						,			
f s	section 4940(d)(2) applies, leave th	nis part blank							
Na	as the foundation liable for the sect	tion 4942 tax on the distributable a	amount of any y	ear in the base per	rıod?				Yes No
f "	Yes," the foundation does not qual	ify under section 4940(e). Do not	complete this p	art			_		
i		each column for each year, see ins			es		_		
	(a)	(b)	<u> </u>		(c)			Die	(d) ribution ratio
	Base periód years Calendar year (or tax year beginnir	ng in) Adjusted qualifying d	listributions	Net value of no	ncha	rıtable-	use assets		divided by col (c))
	2010								
	2009		_						
_	2008								
	2007								
	2006								
2	Total of line 1, column (d)							2	
3	Average distribution ratio for the 5	5-year base period - divide the tota	al on line 2 by 5	, or by the number	of ye	ars			
	the foundation has been in exister	nce if less than 5 years						3	
4	Enter the net value of noncharitab	ole-use assets for 2011 from Part )	X, line 5					4	
5	Multiply line 4 by line 3							5	
5	Enter 1% of net investment incom	ne (1% of Part I, line 27b)						6	
7	Add lines 5 and 6							7	
В	Enter qualifying distributions from	n Part XII, line 4						8	
	If line 8 is equal to or greater than See the Part VI instructions	ı line 7, check the box in Part VI, lii	ne 1b, and com	plete that part usin	ig a 1	% tax r	rate		

	990-PF(2011) SSS Foundation							<u> 3930</u>		age 4
	t VI Excise Tax Based on Investment Income (Section 4940				or 4	948 -	- see	instru	ctior	ıs)
	Exempt operating foundations described in section 4940(d)(2), check here $lackbr{ extbf{X}}$ and er									
	Date of ruling or determination letter (attach copy of letter if nec							/	_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	لـــا	an	d enter 1%		1	ļ	N/Z	A	<del></del>
	of Part I, line 27b									
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%									
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers e	nter	r <b>-0-</b> )		2_				
	Add lines 1 and 2					3				
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only O	thers e	ente	r <del>-</del> 0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-					5				
	Credits/Payments	1 -	1							
	2011 estimated tax payments 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	$\rightarrow$							
	Backup withholding erroneously withheld	6d		-21-54		_				^
	Total credits and payments Add lines 6a through 6d					7	<del></del>			0.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is atta	ched				8				0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					9		_	-	<u> </u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			1		10				
	Enter the amount of line 10 to be Credited to 2012 estimated tax			Refunde	d <b>&gt;</b>	11	Ļ		-	
	rt VII-A Statements Regarding Activities								Yes	No
	During the tax year, did the foundation attempt to influence any national, state, or local legis	iation	oro	ild it participate or int	ervene	III		10	163	X
	any political campaign?	/		and an advance for definit	on)3			1a 1b		$\frac{X}{X}$
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpor							10		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an	а сор	nes	or any materials pu	DIISH	ea or				
	distributed by the foundation in connection with the activities.							10		Х
	Did the foundation file Form 1120-POL for this year?							''		
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the				0.					
	(1) On the foundation > \$ 0. (2) On foundation managers					•				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend managers $\blacktriangleright$ \$ 0 •	itur <del>a</del> ta	ax II	nposed on roundation	ļ					
		000						2	; ;	х
Z	Has the foundation engaged in any activities that have not previously been reported to the I	10,								
•	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing	netrur	man	t articles of incornor	ation (	nr.				
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		11611	it, articles of incorpor	, v	,		3		Х
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year							4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?					N	I/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,					•	5		Х
J	If "Yes," attach the statement required by General Instruction T							"		· · · · · · ·
£	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither								
J	By language in the governing instrument, or									
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandator</li> </ul>	v dired	ctio	ns that conflict with th	e state	e law				
	remain in the governing instrument?	,						6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?							7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.							-		
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns)	<b>&gt;</b>							
Ju	MS	,	_	_						
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorne	y G	eneral (or designate)			_	_		
	of each state as required by General Instruction G? If "No," attach explanation		•					8b	X	<u></u>
9	is the foundation claiming status as a private operating foundation within the meaning of se	ection -	494	2(j)(3) or 4942(j)(5)	or cal	endar				
-	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," o							9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a sched							10	X	

<u>orm</u>	990-PF (2011) SSS Foundation 72-1393	<u> 1930</u>		Page 5
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		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► Hugh I. Stahlman III Telephone no ► 601442	2731	8	
	Located at ▶ 75 Melrose Montebello Parkway, Natchez, MS ZIP+4 ▶39	<u>)120</u>		—
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. / ¬ ▶	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	1.	Yes	No
	securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			
n-	country	ــــــ		
۲٤	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>	Vaa	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	INO
1 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			
	(-) 3-3 3 3			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	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			
ŀ	or If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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)?  N/A	1b		1
	Organizations relying on a current notice regarding disaster assistance check here			
0	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?	10		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))			
á	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	1		
	If "Yes," list the years			
t	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 ) N/A	2b	ļ	ļ
(	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>)</b>			
3	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
ı	o If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	۱ ـ.	-	1
	Form 4720, to determine if the foundation had excess business holdings in 2011)  N/A	3b	-	X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	<b>├</b> ^
ı	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	46	}	y
	nad not neen removed from leanardy haters the first day of the tay year healthing in 2011-12	ı An	1	

Form 990-PF (2011) SSS Foundation			72-13939	30 Page <b>6</b>
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be P	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
' (1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ectly,		
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., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		T Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?	• • •		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instru	· · · · · · · · · · · · · · · · · · ·	·	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned		
expenditure responsibility for the grant?		/A Ye	s 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				
a personal benefit contract?	pa, pro	□ Y <sub>F</sub>	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		ľ	6b X
If "Yes" to 6b, file Form 8870.	order derivative derivative			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ γ <sub>ε</sub>	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			<u> </u>	7b
The state of the s		nagers, Highly		
Part VIII Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	compensation.	-		
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
H.I. Stahlman, III	President	,		
75 Melrose-Montebello Parkway				
Natchez, MS 39120	1.00	0.	0.	0.
Judith E. Stahlman	Vice Presiden	t		
75 Melrose-Montebello Parkway		ļ		
Natchez, MS 39120	1.00	0.	0.	0.
Jacquelyn M. Stahlman	Secretary/Tre			
75 Melrose-Montebello Parkway				
Natchez, MS 39120	1.00	0.	0.	0.
11.0011037 11.001100	2000			
· · · · · · · · · · · · · · · · · · ·				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	·	
(-) No	(b) Title, and average	( ) 0	(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				
	1			
	1	j		
	1			
Total number of other employees paid over \$50,000			<b>&gt;</b>	0

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Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
	_	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
<u> </u>		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	cal information such as the	Expenses
1 N/A	1000,000	·
1 47/11	<u> </u>	
2		<del></del> .
3		
4		
Det N. D. C.		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on life.	ence 1 and 2	Amount
77 / 7	illes i aliu z	Aillouit
1 N/A		
2		
<u> </u>		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.

Part X 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 729723. a Average monthly fair market value of securities 1a 155712. b Average of monthly cash balances 1b c Fair market value of all other assets 1 c 885435. 1 d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and \_ 1e\_ 0. 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 885435. 3 3 Subtract line 2 from line 1d 13282. Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 872153. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 43608. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 

and do not complete this part ) 43608. Minimum investment return from Part X, line 6 2a 2a Tax on investment income for 2011 from Part VI, line 5 b Income tax for 2011 (This does not include the tax from Part VI) 2b 20 c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 43608 5 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 43608 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 32693. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-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 3a a Suitability test (prior IRS approval required) 3b **b** Cash distribution test (attach the required schedule) 32693. Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b 5 32693. Adjusted qualifying distributions. Subtract line 5 from line 4 6 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

Form **990-PF** (2011)

4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	( <b>d)</b> 2011
1 Distributable amount for 2011 from Part XI.				
line 7				43608.
2 Undistributed income, if any, as of the end of 2011	, ' '''   '''   '''   '''   '''   '''   '''   '''   '''   ''''   '''   ''''   ''''   ''''   ''''   ''''   ''''   ''''   ''''   '''''   '''''   ''''''	· · · · · · · · · · · · · · · · · · ·	<u>., ,, ,,</u> ,	<del></del>
a Enter amount for 2010 only			0.	
h Total for prior years		1.1.11.1.1111		
·		0.		
3 Excess distributions carryover, if any, to 2011	·- , , , , , · · · · · · · · · · · · · ·	111111111111111111111111111111111111111	177	
a From 2006 3276.				
<b>b</b> From 2007				
¢ From 2008				
d From 2009 10727.				
e From 2010 1189.				
f Total of lines 3a through e	15192.			
4 Qualifying distributions for 2011 from				
Part XII, line 4 ► \$ 32693.				
a Applied to 2010, but not more than line 2a			0.	A
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.	1.1.1111		
d Applied to 2011 distributable amount				32693.
e Remaining amount distributed out of corpus	0.		1772	
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	10915.			10915.
6 Enter the net total of each column as indicated below:	***			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	4277.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2010 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	4277.			
10 Analysis of line 9				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009 3088.				
d Excess from 2010 1189.				
e Excess from 2011			<u> </u>	1

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year Adams Co. Chapter American Red Cross 500. Adams County Council on Aging 500. Addie McBryde Rehab To support charitable activities 1000. Natchez, MS 39120 Caring Bridge Catholic Charities 1000. See continuation sheet(s) **▶** 3a 32018. Total b Approved for future payment None 0. Total

#### Part XVI-A **Analysis of Income-Producing Activities**

Form 990-PF (2011)

Enter gross amounts unless otherwise indicated	Unrelated I	ousiness income		by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code		code	Amount	- Idileton meomo
a	_				<del></del>
b					<del></del>
C		<del></del>			<del></del>
d	_				
	_		<del></del>		
g Fees and contracts from government agencies	-		-  -  -		<del></del>
2 Membership dues and assessments					<del></del>
3 Interest on savings and temporary cash investments			14	2338.	
4 Dividends and interest from securities		· <del>-</del>	14	17944.	
5 Net rental income or (loss) from real estate	-	<del></del>			
a Debt-financed property					
b Not debt-financed property		•			
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					-4707.
9 Net income or (loss) from special events					•
10 Gross profit or (loss) from sales of inventory	<u> </u>				
11 Other revenue					
a Return of Principal			14		
b					
C					
d					
e					
12 Subtotal Add columns (b), (d), and (e)	<u> </u>	(	0.	20282.	-4707.
13 Total. Add line 12, columns (b), (d), and (e)				13	15575.
(See worksheet in line 13 instructions to verify calculations	)				

Part X	Relationship of Activities to the Accomplishment of Ex	empt Purposes
Line No.	No. Explain below how each activity for which income is reported in column (e) of Part XVI-A the foundation's exempt purposes (other than by providing funds for such purposes)	contributed importantly to the accomplishment of
7	Provides funds for operating costs	
8	Provides funds for operating costs	

Part XVII			fers To a	nd Transactions	and Relations	hips With Non	charitable	
1 Did the c	Exempt Organiz		SAL SALLANIA				ļ I	Voo No
	rganization directly or indirec			·		ion 501(c) of		res No
	(other than section 501(c)(3				nizations?			
	s from the reporting foundation	on to a nonchantabl	e exempt org	janization of			4-41	v
(1) Casi							1a(1)	$\frac{X}{X}$
(2) Other							1a(2)	<u> </u>
b Other tra			_				45/4	х
	s of assets to a noncharitable						1b(1)	$\frac{X}{X}$
	chases of assets from a nonct		gamzation				1b(2)	$\frac{X}{X}$
	tal of facilities, equipment, or nbursement arrangements	other assets					1b(3)	X
٠,	ns or loan guarantees						1b(4)	$\frac{X}{X}$
	ormance of services or memb	harehin or fundraleii	na colicitatio	ne			1b(5) 1b(6)	$\frac{x}{x}$
	of facilities, equipment, mailin						10(0)	$\frac{x}{x}$
	swer to any of the above is "Ye	=		•	lwave chow the fair r	market value of the a		
	es given by the reporting four		_			-		ισ,
	(d) the value of the goods, oth				1 (0)			
(a) Line no	(b) Amount involved	(c) Name of n		exempt organization	(0) Description	n of transfers, transaction	is, and sharing arra	ngements
			N/A		<u> </u>			
					· · · · · · · · · · · · · · · · · · ·			
	-							<del></del>
			···-					
				·····				
			·					
							•	
	undation directly or indirectly			• •	nizations described		г <del></del> ] ,,	<b>୮</b> ♥
	n 501(c) of the Code (other th		3)) or in sect	ion 52/7			Yes	X No
b it Yes,"	complete the following schedi (a) Name of organ			(b) Type of organization		(c) Description of rel	ationship	
	N/A	1120(1011	<del></del>	(b) Type of Organization	<del> </del>	(b) bescription of fer	ationship	
	11, 11				<del> </del>			
,								
	er penalties of perjury, I declare tha						May the IRS di	scuss this
Sign   📐	bellef, it is true, correct, and comple	2	Jarer (Other than	r (axpayer) is based on all inition			return with the shown below (	preparer see <u>instr</u> )?
Here	11/1/	Chima	in =	8/2/12	President	dent	_ X Yes	☐ No
Si	nature of officer <del>or trustée</del>		<del></del>	Daté /	Title	• -		
	Print/Type preparer's name	e	Preparer's si	gnature	Date		PTIN	
D - 1 - 1			Druil	Mi 10 Am	- 07/07/10	self- employed	D000011	
Paid	Lauren B Mi		jumi?	JIMOKKU O	07/27/12	1	P009848	
Preparer	l .	errron Gr	Loup,	PLLC		Firm's EIN ► 26	-248086	))
Use Only	Firm's address ▶ P . O	Boy 110	7.3	<del></del>	<del></del>	<del>                                     </del>		
		chez, MS				Dhona no 60	01-446-6	5681
	Nac	CHCZ, HO	JJIZI			Phone no 60		PF (2011)

#### 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

Employer identification number Name of the organization 72-1393930 SSS Foundation Organization type (check one): Section: Filers of: \_\_ 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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

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

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

SSS Foundation

Employer identification number 72-1393930

## Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

7 441 7 7	Official State (See matricular). Ose depicate copies of fact in act		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Stafco Limited Partnership  75 Melrose-Montebello Parkway  Natchez, MS 39120	\$\$	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer Identification number

### SSS Foundation

72-1393930

(-)			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<del></del>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			<del></del>
(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
		<b>\$</b>	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I			
			•

lame of orga	nization		Page 4 Employer identification number					
Part III	undation  Exclusively religious, charitable, etc., indivi- year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	e following line entry. For organizatio , contributions of <b>\$1,000 or less</b> for	72-1393930  (7), (8), or (10) organizations that total more than \$1,000 for the ns completing Part III, enter the year (Enter this Information once)  \$\Bigsir \frac{100}{5} \text{ information once} \Bigsir \frac{1}{5}					
(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	d 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, an	d 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					
	Torontoroolo nomo addoso an	(e) Transfer of gif	Relationship of transferor to transferee					
	Transferee's name, address, an	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 gif	<u> </u>					

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

n Year (Continuation)			
If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
any foundation manager or substantial contributor	recipient	CONTRIBUTION	
			100
			6
			300
			50
			25
			200
	any foundation manager or substantial contributor	any foundation manager or substantial contributor status of recipient	any foundation manager or substantial contributor recipient Contribution

Part XV Supplementary Information	1			
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
Make a Wish Foundation				500
D Anderson Cancer Center			To support charitable activities	
Natchez, MS 39120				1000
Methodist Rehabilitation				
Middle MS Chapter Alzheimer's Assoc				500
				301
MS Chapter Arthritis Foundation				
Natchez Adams Humane Society				200
Natchez Community Stewpot				200
Natchez Festival of Music				100
Natchez Habitat for Humanity				100
Natchez Literary Arts Festival				4.6.5
Total from continuation sheets				100

Part XV Supplementary Information			72 13	93930
Minimum T T T T T T T T T T T T T T T T T T			<del> </del>	<u> </u>
3 Grants and Contributions Paid During the Y	·	<u>.</u>		
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		
Pleasant Acre Day School				250
Preservation Society of Ellicot Hill				100
Recording for the Blind & Dyslexic				100
				100
Relay for Life				50
Shriners Hospitals				
				100
Special Olympics Mississippi		<del>.</del>		20
St. Joseph Arts				
				5(
St. Judes Children's Research				100
St. Mary Basilica Family Life Center				
				200
Sunshine Shelter Center				100

Part XV Supplementary Information				Т
3 Grants and Contributions Paid During the Ye	ar (Continuation)			
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)	or substantial contributor	recipient		
The Smile Train				500.
Search & Rescue Charitable Foundation				500
Wilson Research Foundation Meth Rehab				
Center				1000
Women's Fund of the Community				500
				300
<del></del>				
Total from continuation sheets		<u> </u>		

Form 990-PF	Interest on Sav	ings a	nd Temp	porary C	ash Ir	nvestments	Statement	1
Source							Amount	
Merrill Lync Merrill Lync Wunderlich #	n #535046C							147. 229. 962.
Total to Form	m 990-PF, Part I	, line	3, Co	lumn A			2:	338.
Form 990-PF	Dividen	ds and	Inter	est from	Secur	rities	Statement	2
Source			Gross	Amount		ital Gains ividends	Column (A	A)
Merrill Lync Wunderlich #				16624. 1320.		0.		624. 320.
Total to Fm	990-PF, Part I,	ln 4		17944.		0.	179	944.
Form 990-PF		Ac	counti	ng Fees			Statement	3
Description		Expe	a) enses Books	(b) Net Inv ment In		(c) Adjusted Net Incom		
			1500.		825.			675.
To Form 990-	PF, Pg 1, ln 16b		1500.		825.			675.
Form 990-PF		C	ther E	xpenses	-		Statement	4
Description		Expe	a) enses Books	(b) Net Inv ment In		(c) Adjusted Net Incom		
Investment E	xpense		12754.	***************************************	0.	<del></del>		0.
To Form 990-	PF, Pg 1, ln 23		12754.	-	0.			0.
					<del></del>		<del></del>	

Form 990-PF	Corporate Stock		Statement !
Description		Book Value	Fair Market Value
		694049.	675332
Total to Form 990-PF, Part I	I, line 10b	694049.	675332
Form 990-PF	Corporate Bonds		Statement (
Description		Book Value	Fair Market Value
Description		Book Value 0.	

Form **.8868** 

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you a	re filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			➤ X	
	re filing for an Additional (Not Automatic) 3-Month Ex			this form).			
Do not c	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	ly filed Fo	rm 8868		
	c filing (e-file) You can electronically file Form 8868 if y		•	•		rporation	
	o file Form 990-T), or an additional (not automatic) 3-mo						
	file any of the forms listed in Part I or Part II with the exe						
	Benefit Contracts, which must be sent to the IRS in pap	•					
	irs.gov/efile and click on e-file for Charities & Nonprofits		,			•	
Part I	Automatic 3-Month Extension of Time		ubmit original (no copies ne	eded).			
	ition required to file Form 990-T and requesting an autor						
Part I only						▶ 🔲	
All other o	corporations (including 1120-C filers), partnerships, REM	IICs. and t	rusts must use Form 7004 to reques	t an exten	sion of time		
	ome tax returns.						
Type or	Name of exempt organization or other filer, see instru	ctions.		Employe	r identification nu	mber (EIN) or	
print						` ,	
<b>,</b>	SSS Foundation			X	X 72-1393930		
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions		curity number (S		
filing your	P.O. Box 1346					,	
return See instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.				
	Natchez, MS 39121	g a.a.	, , , , , , , , , , , , , , , , , , , ,				
		• •					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
		<b>,</b>	,				
Applicati	on	Return	Application			Return	
ls For		Code	Is For			Code	
Form 990	1	01	Form 990-T (corporation)			07	
Form 990		02	Form 1041-A			08	
Form 990		01	Form 4720			09	
Form 990		04	Form 5227			10	
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069		<del></del>	11	
	)-T (trust other than above)	06	Form 8870			12	
1 01111 330	Hugh I. Stahlma						
• The h	poks are in the care of > 75 Melrose Mon			ez. M	S 39120		
	none No. ► 6014427318	<u> </u>	FAX No. ▶	<del>,</del>			
•	organization does not have an office or place of business	e in the Llr			<del></del>		
	is for a Group Return, enter the organization's four digit			if this is fo	r the whole arour	check this	
box ►		-	<del></del>				
	quest an automatic 3-month (6 months for a corporation				ers the extension	13 101.	
1 I re	- 15 0010		tion return for the organization name		The extension		
- In f	or the organization's return for:	n Organiza	tion return for the organization hame	eu above.	THE EXTENSION		
	X calendar year 2011 or						
			dondina				
	tax year beginning	, all	d ending		<u> </u>		
2  f t	ne tax year entered in line 1 is for less than 12 months, o	shock rose	on: Initial return	Final retur	70		
2 "	Change in accounting period	IIICUN ICAS	on initial return	rinarietui	11		
_	Change in accounting period						
32 If #1	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6060	nter the tentative tay loss any	T	_		
	• •	∪ı ∪∪0¥, €	inter the terrialive tax, less arry	3a	<b>s</b>	0.	
	nrefundable credits. See instructions.	ontor or:	refundable gradite and	38	<del>*</del>		
	nis application is for Form 990-PF, 990-T, 4720, or 6069,			21-		0.	
	imated tax payments made. Include any prior year over			3b	\$		
	lance due. Subtract line 3b from line 3a. Include your pa			3с	\$	0.	
	using EFTPS (Electronic Federal Tax Payment System).				—, <del>, , , , , , , , , , , , , , , , , , ,</del>		
Caution.	If you are going to make an electronic fund withdrawal	with this F	omi oodo, see rom 6453.50 and F	OITH 00/9	EU for payment i	เอเเนตเดียกร.	