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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

2011

		dar year 2011 or tax year beginning	10-01 , 2011, a	ınd endin	g	09	-30 , 20 12
Na	me of fo	undation			A Employer ide	entification number	· · · · · ·
_ TI	HE WA	ARDLAW FAMILY FOUNDATION, INC.			22-3664	122	
		d street (or PO box number if mail is not delivered to street address)	om/suite	B Telephone number (see instructions)			
		COUNTRY CLUB DRIVE		(706) 333-5555			
Cit	y or town	n, state, and ZIP code		·-	C If exemptio	n application is pending, che	eck here
L	AGRAN	NGE, GA 30240					
G	Check	all that apply Initial return Initial return	of a former public chai	rity	D 1 Foreign	organizations, check here	▶□
		Final return Amended re	turn				
		Address change Name chang	je		2. Foreign check he	organizations meeting the 8 ere and attach computation	5% test,
H	Check	type of organization X Section 501(c)(3) exempt priv	ate foundation			·	
	Secti		axable private foundat	ion	E If private to section 507	undation status was termina (b)(1)(A), check here	ated under
I F	air ma	arket value of all assets at J Accounting method	X Cash A	Accrual	, 		
e	end of	year (from Part II, col. (c), Other (specify)			F If the found under secti	lation is in a 60-month termii on 507(b)(1)(B), check here	nation
li	ne 16)	▶\$ 979,948 (Part I, column (d) must b	e on cash basis)				<u></u>
Pa	rt I	Analysis of Revenue and Expenses (The total of	(-) D				(d) Disbursements
_		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		nvestment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions))	books	ın	come	ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ► X if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					1
	4	Dividends and interest from securities				· 	1
R e	5a	Gross rents	143,992		143,992		1
	ь	Net rental income or (loss)			<u>-</u>		
	6a	Net gain or (loss) from sale of assets not on line 10			-		
v	ь	Gross sales price for all assets on line 6a				· · · · · · · · · · · · · · · · · · ·	
e n	7	Capital gain net income (from Part IV, line 2)					
u	8	Net short-term capital gain				·	
e	9	Income modifications			-		
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold		-	-		
	C	Gross profit or (loss) (attach schedule)				·	
	11	Other income (attach schedule)	11,531		11,531		
	12	Total. Add lines 1 through 11	155,523		155,523		
	13	Compensation of officers, directors, trustees, etc.	200,020				
	14	Other employee salaries and wages					
ď	15	Pension plans, employee benefits					
m		Legal fees (attach schedule)					+
'n	ь	Accounting fees (attach schedule)					
Oi ps	c	Other professional fees (attach schedule)					
e t	17		39,382		39,382		
rr aa t t	18	Tayes (attact Retractive) (see instructions)	9,682		9,682	 	-
t t j i	ŀ	Depreciation (attach schedule) and depletion	11,348		11,348		
ĝί	20	- Inl 101	11,340		22,340		
	21	Travel Sonferences, and meetings					
a E	22	Printing and publications.				·	
<u>g b</u>	23	Other expenses (Gladi Schedule)	61,498		61,498		61,498
Ş'n	24	Total operating and administrative expenses.	01,490		02,430		01,436
≥ 5		Add lines 13 through 23	121,910		121,910		61,498
_s	25	Contributions, gifts, grants paid	19,860		121,910		19,860
	26		141,770		121,910		81,358
<u></u>	27	Total expenses and disbursements. Add lines 24 and 25.	141,//0		141,910		61,338
TABLE MAY BY A SECOND	21	Subtract line 26 from line 12	13,753				
	a L	Excess of revenue over expenses and disbursements .	13,753		22 612		
رزان		Net investment income (if negative, enter -0-)			33,613		
	С	Adjusted net income (if negative, enter -0-)					<u> </u>

Pa	ırt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	10,436	32,111	32,111
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts	1		
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable.		-	
	6	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)		_	
	′				
A S	١.	Less allowance for doubtful accounts			·
S	8	Inventories for sale or use			
e t	9	Prepaid expenses and deferred charges			
s	1	Investments - U S and state government obligations (attach schedule)		<u>-</u> .	
	ľ	Investments - corporate stock (attach schedule)			
	C	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ 976,074			
		Less accumulated depreciation (attach schSdMil119 > 28,237	955,789	947,837	947,837
	15	Other assets (describe ► STM120)	260	290	
	16	Total assets (to be completed by all filers - see the			
		ınstructions Also, see page 1, item I)	966,485	980,238	979,948
	17	Accounts payable and accrued expenses			
i a	18	Grants payable			
þ	19	Deferred revenue			
-	20	Loans from officers, directors, trustees, and other disqualified persons			
į	21	Mortgages and other notes payable (attach schedule) STM123	712,000	712,000	
ì	22	Other liabilities (describe ►			
e s	23	Total liabilities (add lines 17 through 22)	712,000	712,000	
<u> </u>	1	Foundations that follow SFAS 117, check here	127000		
NF	1	and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted		ļ	•
t n	25				
d	26	Temporarily restricted			
Α		Permanently restricted			
s B s a e I	-				
e a		and complete lines 27 through 31.			
t'a sn	27	Capital stock, trust principal, or current funds			
		Paid-in or capital surplus, or land, bldg , and equipment fund	054 405	0.00 0.00	
C _ e	29	Retained earnings, accumulated income, endowment, or other funds	254,485	268,238	
oe rs	30	Total net assets or fund balances (see instructions)	254,485	268,238	
-	31	Total liabilities and net assets/fund balances (see			
	<u> </u>	instructions)	966,485	980,238	
_	art II			, - ,	
		net assets or fund balances at beginning of year - Part II, column (a), lin			
		of-year figure reported on prior year's return)			254,485
		r amount from Part I, line 27a		2	13,753
3	Othe	r increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		4	268,238
		eases not included in line 2 (itemize) ▶		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30	6	268,238
					Form 000 DE (2011

Fart IV Capital Gains	and Losses for Tax on inve	sunent income	•		
	be the kind(s) of property sold (e.g., real estate, house, or common stock, 200 shs. MLC Co.)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (yr, mo, day)	(d) Date sold (yr , mo , day)
1a					
b					
C					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or ot plus expens			Gain or (loss) (f) minus (g)
а		-			
b					
С					
d	<u> </u>				
е					
Complete only for assets sh	owing gain in column (h) and owned	by the foundation of	n 12/31/69	(I) Gains (Col (h) gain minus
(i) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Excess over col (j),		col (k), but no	t less than -0-) or (from col (h))
а					
b					
С					
d			"		
е					
2 Capital gain net income or (net canital inee)	lso enter in Part I, lii enter -0- in Part I, lii	7 1	2	
3 Net short-term capital gain of	or (loss) as defined in sections 1222(5) and (6).			
If gain, also enter in Part I, I	ine 8, column (c) (see instructions) It	f (loss), enter -0- in	3		
_	• • • • • • • • • • • • • • • • •	•	}	3	
Part V Qualification l	Jnder Section 4940(e) for Re	educed Tax on	Net Investmen	t Income	
If section 4940(d)(2) applies, lea	rivate foundations subject to the sect ave this part blank e section 4942 tax on the distributable to qualify under section 4940(e).	e amount of any yea	ır ın the base period	·	Yes X No
 -	nt in each column for each year; see			ries	
(a) Base period years Calendar year (or tax year beginning i	(b)		(c)	D	(d) istribution ratio i) divided by col (c))
2010	101,	552	272,35		0.37287
2009	17,:		259,23	30	0.066933
2008	1,	600	59,03	33	0.027103
2007	15,0	015	92,88	32	0.161657
2006	12,:	301	102,36	8	0.120165
2 Total of line 1, column (d).				. 2	0.748728
3 Average distribution ratio fo	r the 5-year base period - divide the t	otal on line 2 by 5, o	or by the		
number of years the founda	tion has been in existence if less thai	n 5 years		. 3	0.149746
4 Enter the net value of nonch	naritable-use assets for 2011 from Pa	ort X, line 5	• • • • • • • • •	. 4	272,816
5 Multiply line 4 by line 3				. 5	40,853
6 Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	336
7 Add lines 5 and 6				. 7	41,189
	s from Part XII, line 4				81,358
If line 8 is equal to or greate	er than line 7, check the box in Part V	i, line 1b, and comp	iete that part using	a 1% tax rate S	ee tne

EEA

Form	990-PF (2011) THE WARDLAW FAMILY FOUNDATION, INC. 22-36641	22	Р	age 4		
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)					
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			336		
	here ► X and enter 1% of Part I, line 27b			_		
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of					
	Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . 2			0		
3	Add lines 1 and 2			336		
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			336		
6	Credits/Payments·		-			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a					
b	Exempt foreign organizations - tax withheld at source 6b			ł		
_	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a through 6d			!		
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			336		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11	Enter the amount of line 10 to be Credited to 2012 estimated tax					
	t VII-A Statements Regarding Activities	_				
			Yes	No		
ıa	participate or intervene in any political campaign?	1a	162			
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	ıa		_X_		
b	of the instructions for definition)?	1b		v		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	10		X		
	published or distributed by the foundation in connection with the activities					
_	Did the foundation file Form 1120-POL for this year?	1c				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	10		_X_		
u						
_						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
_	on foundation managers \$		-	j		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	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 of			l		
4-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u> X</u>		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		_X_		
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X		
_	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			İ		
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					
_	conflict with the state 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? If "Yes," complete Part II, col. (c), and Part XV	7	Х	 ,		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	If the annual is INColl to line 7 has the foundation from the disconnection of the control of th					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
•	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	_X	<u> </u>		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"					
40	complete Part XIV	9		<u>X</u>		
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						

Form	990-PF (2011) THE WARDLAW FAMILY FOUNDATION, INC. 22-36	64122	1	Page 5
Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	. 11		Х
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? .	. 13	Х	
	Website address N/A N/A			
14	The books are in care of CHARLES T. WARDLAW Telephone no	706-3	33-5	555
		0240	_	
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			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	. 16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			1
_	the foreign country	;		
Pa	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	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.	>		1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	disqualified person? Yes X No.			İ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No.	>		!
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	>	1	
	(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)	1	
	(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.	>		
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		ļ	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1b		X
_	Organizations relying on a current notice regarding disaster assistance check here			
С	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?	. <u>1c</u>		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))			1
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and			i
	6e, Part XIII) for tax year(s) beginning before 2011?	'		
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
b				
	(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)	ا ا		
С	all years listed, answer "No" and attach statement - see instructions)	. <u>2b</u>	 -	X
·			1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja				
h	at any time during the year?	'		
	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, Form 4720, to determine if the			
	foundation had excess business holdings in 2011)		┼	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 3b	1	 1,
+a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	. 4a	 	X
U	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?			
	endination perpose trial had not been removed from jeopardy before the first day of the tax year beginning in 20117	4b	1	X

•							
Form 990-PF'(2011) THE WARDLAW FAMILY F	OUNDATION, INC				22-3	664122	Page 6
Part VII-B Statements Regarding Activitie			May Be F	Requir	ed (continued)	
5a During the year did the foundation pay or incur any a				•		i Çindeyi	**
(1) Carry on propaganda, or otherwise attempt to inf	fluence legislation (se	ction 4945	(e))?		Yes X N	lo Principal	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(2) Influence the outcome of any specific public elec-	tion (see section 495	5), or to ca	rry on,	'			
directly or indirectly, any voter registration drive?					Yes X N	lo gang	
(3) Provide a grant to an individual for travel, study,	or other similar purpo	ses?			Yes X N	lo 🦂	9
(4) Provide a grant to an organization other than a c	harıtable, etc , organı	zation desc	cribed in	'			
section 509(a)(1), (2), or (3), or section 4940(d)(2)	2)? (see instructions)				Yes X N	lo 🥳	
(5) Provide for any purpose other than religious, cha	ırıtable, scientific, liter	ary, or edu	cational	,		15	
purposes, or for the prevention of cruelty to child	ren or animals?				Yes X N	lo sice	APPROPRIES
b If any answer is "Yes" to 5a(1)-(5), did any of the train							74 4 4
Regulations section 53 4945 or in a current notice re		-				. 5b	· · · · · · · · · · · · · · · · · · ·
Organizations relying on a current notice regarding d					▶ [1386	12 A
c If the answer is "Yes" to question 5a(4), does the fou		_				7	
because it maintained expenditure responsibility for t]	Yes N	lo Sala	2000 TO 100
If "Yes," attach the statement required by Regulation			• • • • •	• • •		3.4	3300
6a Did the foundation, during the year, receive any fund	•	•	emilims			7.40 and	3
on a personal benefit contract?					Yes X N	lo ÷49	4
b Did the foundation, during the year, pay premiums, d					les V	. 6b	
If "Yes" to 6b, file Form 8870	meetry or maneetry, or	a persone	ai benent c	Unitacti	• • • • • • •		X X
7a At any time during the tax year, was the foundation a	narty to a prohibited	tav chaltar	trancactio	2	Yes X N	قائل خیا مصادم معرف خدا ما	THE STATE OF
b If yes, did the foundation receive any proceeds or ha				-			-115 (G) C)
Part VIII Information About Officers, Dire							<u> </u>
and Contractors	ctors, mustees,	Tourida	LIOII IVIAI	iayeis	, nigiliy Fal	u Emplo	yees,
1 List all officers, directors, trustees, foundation mar	nagers and their com	noneation	n /soo inst	tions			
- List all olliotis, allostors, trasters, roundation mar	lagers and then con						
	(b) Title, and average		pensation		Contributions to	(e) Eyne	inse account
(a) Name and address	hours per week	(c) Comp (if not pa	pensation id, enter	(d) emplo	Contributions to yee benefit plans		nse account, illowances
	hours per week devoted to position	(c) Comp (if not pa	pensation	(d) emplo	Contributions to		
CHARLES T WARDLAW	hours per week devoted to position	(c) Comp (if not pa	pensation id, enter I-)	(d) emplo	Contributions to yee benefit plans med compensation	other a	illowances
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240	hours per week devoted to position TREASURER 4	(c) Comp (if not pa	pensation id, enter	(d) emplo	Contributions to yee benefit plans med compensation		
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW	hours per week devoted to position TREASURER 4 VICE CHAIRMAN	(c) Comp (if not pa	pensation vid, entier H)	(d) emplo	Contributions to yee benefit plans rred compensation	other a	ollowances O
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240	hours per week devoted to position TREASURER 4	(c) Comp (if not pa	pensation id, enter I-)	(d) emplo	Contributions to yee benefit plans rred compensation	other a	illowances
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW	hours per week devoted to position TREASURER 4 VICE CHAIRMAN	(c) Comp (if not pa	pensation vid, entier H)	(d) emplo	Contributions to yee benefit plans rred compensation	other a	ollowances O
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW	hours per week devoted to position TREASURER 4 VICE CHAIRMAN	(c) Comp (if not pa	pensation vid, entier H)	(d) emplo	Contributions to yee benefit plans rred compensation	other a	ollowances O
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW	hours per week devoted to position TREASURER 4 VICE CHAIRMAN	(c) Comp (if not pa	pensation vid, entier H)	(d) emplo	Contributions to yee benefit plans rred compensation	other a	ollowances O
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0	(c) Com; (lf not pa	pensation id, enter) 0	(d) emploi and defe	Contributions to yee benefit plans med compensation	O O	ollowances O
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0	(c) Com; (lf not pa	pensation id, enter) 0	(d) emploi and defe	Contributions to yee benefit plans med compensation	O O	ollowances O
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0	(c) Com; (lf not pa	pensation id, enter) 0	(d) emploi and defe	Contributions to yee benefit plans med compensation	other a	ollowances O
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other "NONE."	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0 er than those include (b) Title, and a	(c) Com (If not pa -0	pensation id, enter (-) () () () () () () () () () () () () ()	(d) emplo and defe	Contributions to yee benefit plans med compensation as). If none, en employee benefit plans med compensation	other a	0 0
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0	(c) Com (if not pa -0	pensation id, enter) 0	(d) emplo and defe	Contributions to yee benefit plans med compensation as). If none, en (d) Contributions to employee benefit plans and deferred	other a	0 0
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0 er than those include (b) Title, and a hours per week	(c) Com (if not pa -0	pensation id, enter (-) () () () () () () () () () () () () ()	(d) emplo and defe	Contributions to yee benefit plans med compensation as). If none, en employee benefit plans med compensation	other a	0 0
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other "NONE."	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0 er than those include (b) Title, and a hours per week	(c) Com (if not pa -0	pensation id, enter (-) () () () () () () () () () () () () ()	(d) emplo and defe	Contributions to yee benefit plans med compensation as). If none, en (d) Contributions to employee benefit plans and deferred	other a	0 0
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0 er than those include (b) Title, and a hours per week	(c) Com (if not pa -0	pensation id, enter (-) () () () () () () () () () () () () ()	(d) emplo and defe	Contributions to yee benefit plans med compensation as). If none, en (d) Contributions to employee benefit plans and deferred	other a	0 0
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CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0 er than those include (b) Title, and a hours per w	(c) Com (if not pa -0	pensation id, enter (-) () () () () () () () () () () () () ()	(d) emplo and defe	Contributions to yee benefit plans med compensation as). If none, en (d) Contributions to employee benefit plans and deferred	other a	0 0
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0 er than those include (b) Title, and a hours per w	(c) Com (if not pa -0	pensation id, enter (-) () () () () () () () () () () () () ()	(d) emplo and defe	Contributions to yee benefit plans med compensation as). If none, en (d) Contributions to employee benefit plans and deferred	other a	0 0
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0 er than those include (b) Title, and a hours per w	(c) Com (if not pa -0	pensation id, enter (-) () () () () () () () () () () () () ()	(d) emplo and defe	Contributions to yee benefit plans med compensation as). If none, en (d) Contributions to employee benefit plans and deferred	other a	0 0
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CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0 er than those include (b) Title, and a hours per w	(c) Com (if not pa -0	pensation id, enter (-) () () () () () () () () () () () () ()	(d) emplo and defe	Contributions to yee benefit plans med compensation as). If none, en (d) Contributions to employee benefit plans and deferred	other a	0 0
CHARLES T WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 NANCY D WARDLAW 1004 COUNTRY CLUB DRIVE, GA 30240 2 Compensation of five highest-paid employees (other "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TREASURER 4 VICE CHAIRMAN 0 (b) Title, and hours per week devoted to position	(c) Com (if not pa -0	pensation id, enter (-) 0	(d) emplo and defe	contributions to yee benefit plans med compensation (d) Contributions to employee benefit plans and deferred compensation	other a	0 0

Page 6

Form	990-PF	(2011)

THE WARDLAW FAMILY FOUNDATION, INC.

22-3664122

Page 7

and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see		."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
		
	· · · · · · · · · · · · · · · · · · ·	
otal number of others receiving over \$50,000 for professional services		
		ı
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in	formation such as the number of	Expenses
organizations and other beneficiaries served, conferences convened, research papers produced, etc		
		1
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see ins	ructions)	
		A
Describe the two largest program-related investments made by the foundation during the tax year on lines	l and 2	Amount
1		
2		
All other control of the control of		
All other program-related investments. See instructions		
3		

Pai	TX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ındatio	ns,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	21,274
С	Fair market value of all other assets (see instructions)	1c	967,697
d	Total (add lines 1a, b, and c)	1d	988,971
е	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	712,000
3	Subtract line 2 from line 1d	3	276,971
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	4,155
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	272,816
6	Minimum investment return. Enter 5% of line 5	6	13,641
Pai	rt XI 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)		
1	Minimum investment return from Part X, line 6	1	13,641
2a	Tax on investment income for 2011 from Part VI, line 5 2a 336		
b	Income tax for 2011 (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	2c	336
3	Distributable amount before adjustments Subtract line 2c from line 1	3	13,305
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	13,305
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	13,305
Da			
Га	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	81,358
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4.	4	81,358
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	336
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	81,022
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	the fou	ndation
	qualifies for the section 4940(e) reduction of tax in those years		

	·	DLAW FAMILY FOUN	DATION, INC.		22-366412	2 Page 9
Pai	rt XIII Undistributed Inco	ome (see instructions)		<u></u>	 	
1	Distributable amount for 2011 from		(a) Corpus	(b) Years pnor to 2010	(c) 2010	(d) 2011
2	Undistributed income, if any, as of					13,305
a	Enter amount for 2010 only					
b	Total for prior years					
3	Excess distributions carryover, if	any to 2011				
	From 2006	uny, to 2011				
ь	From 2007					
c	From 2008				İ	
d	From 2009					
e	From 2010	87,934				
f	Total of lines 3a through e		87,934			
4	Qualifying distributions for 2011 fi					
		358				
а	Applied to 2010, but not more that					
	Applied to undistributed income of	——				
	(Election required - see instruction	· •			;	
С	Treated as distributions out of co	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
	required - see instructions)	· · ·				
d	Applied to 2011 distributable amo					13,305
e	Remaining amount distributed ou		68,053	-		
5	Excess distributions carryover ap	· · · · · · · · · · · · · · · · · · ·	,			
•	(If an amount appears in column	· —				
	amount must be shown in column					
6	Enter the net total of each colu	1	ŀ			
-	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	155,987			
	Prior years' undistributed income)				
_	line 4b from line 2b					
c	Enter the amount of prior years' u	· · · · · · · · · · · · · · · · · · ·			 	
•	income for which a notice of defic	i				
	been issued, or on which the sec	- I				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Tax	· · · · · · · · · · · · · · · · · · ·			<u> </u>	
-	amount - see instructions	1				
е	Undistributed income for 2010	· · · · · · · · · —				
Ŭ	4a from line 2a Taxable amount					
	instructions					
f	Undistributed income for 2011 Si				····	
•	4d and 5 from line 1 This amoun					
	distributed in 2012					c
7	Amounts treated as distributions	<u></u>	-			
•	to satisfy requirements imposed I	·				
	170(b)(1)(F) or 4942(g)(3) (see in	-			1	
8	Excess distributions carryover fro					
-	applied on line 5 or line 7 (see ins	l l				
9	Excess distributions carryover	· —				
•	Subtract lines 7 and 8 from line 6		155,987			
10	Analysis of line 9					
	Excess from 2007					
b	Excess from 2008					
c	Excess from 2009					
ď	Excess from 2010	87,934				
	Excess from 2011	68,053				
		-,	j.		i I	

Part	Private Operating Four	ndations (see instru	ictions and Part VII-A,	question 9)		
1a	If the foundation has received a ruling	or determination letter	that it is a private oper	rating		
	foundation, and the ruling is effective f	or 2011, enter the date	of the ruling)	>	
ь	Check box to indicate whether the four	ndation is a private ope	erating foundation desc	cribed in section	4942(j)(3) or 4	942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	each year listed					
b	85% of line 2a					
_						
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			-		
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in				-	
С	Part X, line 6 for each year listed "Support" alternative test - enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Pari	Supplementary Informa	tion (Complete th	nis part only if the	e foundation had	\$5,000 or more in	n assets at
	any time during the yea	r - see instructio	ns.)			
1	Information Regarding Foundation	Managers:	•			
а	List any managers of the foundation w before the close of any tax year (but or					
	CHARLES T. WARDLAW, NANCY	D. WARDLAW,				
b	List any managers of the foundation w	ho own 10% or more o	f the stock of a corpor	ation (or an equally lar	ge portion of the	
	ownership of a partnership or other en	tity) of which the found	ation has a 10% or gre	eater interest		
2	Information Regarding Contribution	. Grant, Gift, Loan, So	cholarship, etc., Proc	ırams:		
_	Check here ▶ ☐ If the foundation on				does not accort	
	unsolicited requests for funds. If the fo other conditions, complete items 2a, b	undation makes gifts, g				
а	The name, address, and telephone nu		whom applications sho	ould be addressed		
	990APP					
b	The form in which applications should	be submitted and infor	mation and materials t	they should include		
С	Any submission deadlines					
d	Any restrictions or limitations on award factors	ds, such as by geograp	hical areas, charitable	fields, kinds of instituti	ons, or other	

Form 990-PF (2011) THE WARDLAW FAMILY FOR Supplementary Information (continued)

3 Grants and Contribu	tions Pa	id During th	e Year or Approved	for Future P	ayment	
Recip		If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)			or substantial contributor	recipient		
a Paid during the year				•		
FRANKLIN FAMILY WORS		NTER		i	TO FUND CHARITY	
2092 WHITESVILLE ROL						
LAGRANGE	GA	30240	NONE			5,015
FIRST BAPTIST CHURC	u				TO OPERATING NEED	
100 BROAD STREET	•				OF CHURCH	
LAGRANGE	GA	30240	NONE		OF CHOKEN	5,381
		50210			1	3,301
EMAUS HOUSE					TO FUND CHARITY	
321 GREENVILLE ST						
LAGRANGE	GA	30240	NONE			2,734
						·
SELF HELP HARBOR					TO FUND CHARITY	
909 STONEWALL ST						
LAGRANGE	GA	30240	NONE			2,170
HOPE HARBOR					TO FUND CHARITY	
611 SEMINOLE RD						
LAGRANGE	GA	30240	NONE			2,734
TN MOUGH WINTERDING						
IN TOUCH MINISTRIES					TO FUND CHARITY	
POBOX 7900	C3	20257	NOVE			4 045
ATLANTA	GA	30357	NONE			1,047
TWIN CEDERS					TO FUND CHARITY	
701 LINCOLN ST						
LAGRANGE	GA	30240	NONE			565
					1	
LAMP LIGHTER					TO FUND CHARITY	
1115 NORTH ABINGTON	ROAD					
WAVERLY	PA	18471	NONE			214
Total						10.000
b Approved for future paymer		• • • • • • •	·······	· · · · · · · · · · · · · · · · · · ·		19,860
b Approved for future paymer	IL					
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					i i	
					i i	
					j i	
	 -			<u> </u>		
Total					▶ 3b	

	s amounts unless otherwise indicated	Unrelated	business income	Excluded by sec	tion 512, 513, or 514	(e)
1 Progra	m service revenue	(a) Business code	(b) Amount	(C) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a	55. 1.55 1.575.1.45					
b			-			·
c						
d						
е						
f						
	es and contracts from government agencies					
	ership dues and assessments					
	et on savings and temporary cash investments .					
	nds and interest from securities					
	ot-financed property	531390		16	33,613	
	debt-financed property	00200			33,023	
	ntal income or (loss) from personal property	- 1				····
	investment income		•			
	r (loss) from sales of assets other than inventory					
9 Net inc	come or (loss) from special events					
10 Gross	profit or (loss) from sales of inventory					
11 Other i	revenue a					
b						
c						
d						
e					22.612	<u> </u>
	al Add columns (b), (d), and (e)				33,613	33,613
	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculations)	• • • • • •	• • • • • • • • •		13	33,613
OCC MOINS	sticet in line 13 instructions to verify calculations /					
Part XV		Accompli	shment of Ever	mnt Purnos		
	I-B Relationship of Activities to the					the
Line No.	I-B Relationship of Activities to the	come is repor	ted in column (e) of	Part XVI-A cor	ntributed importantly to	
	I-B Relationship of Activities to the Explain below how each activity for which income	come is repor	ted in column (e) of	Part XVI-A cor	ntributed importantly to	
Line No.	I-B Relationship of Activities to the Explain below how each activity for which income	come is repor	ted in column (e) of	Part XVI-A cor	ntributed importantly to	
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Use Only

Firm's address

▶ 531 Newnan St Ste 3

Carrollton GA 30117

			MILY FOUNDATION,				3664122		age 13
Part X\			ansfers To and Tran	sactions and	d Relationsh	ips With I	Noncharit	able	
4 0.4		rganizations	C 11 C 11-				1	T.,	
			age in any of the following		-			Yes	No
	anizations?	Code (other than sec	ction 501(c)(3) organizatio	ns) or in section	527, relating to	oonnear			
_		uting foundation to a	noncharitable exempt org	anization of			Ì		ł
	•	-	· · · · · · · · · · · · · · · ·				10/		
									X
	er transactions			• • • • • • • •		• • • • •		-	_X
		noncharitable exem	pt organization				1b(<u>.</u>	Х
			le exempt organization .						X
			issets						X
									X
			• • • • • • • • • • • • •						X
			or fundraising solicitation						X
			, other assets, or paid em						X
			omplete the following sche						,
			given by the reporting for						
valu	ie in any transaction	or sharing arrangem	nent, show in column (d) t	he value of the g	oods, other asse	ets, or servic	es received		
(a) Line no	(b) Amount involved	(c) Name of non-	charitable exempt organization	(d) De	scription of transfers,	transactions, an	d sharing arrange	ments	
					-				
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		 	·	-					
2a Is th	ne foundation direct	lv or indirectly affiliate	ed with, or related to, one	or more tax-exen	not organization	<u> </u>			
		•	er than section 501(c)(3))		. •		🗆	es X	No
	es," complete the fo		· · · · //						P
	(a) Name of organ	ization	(b) Type of organi	zation		(c) Description of	of relationship		
			,						
	/								
	Under penalties of perjuty, t is true, correct, & comple	I declare that Thave examin te Declaration of preparer (ed this return, including accompar other than taxpayer) is based on a	iying schedules & state Il information of which	ements, & to the best preparer has any kno	of my knowledge wiedge	e & belief		
Sign	/////	/1/. 1	15/12/1	>		_	May the IRS disc	ss this ret	um
Here	1 - m	vul.	~ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	TRUSTE	E	١,	with the preparer (see inst.)?	shown bel	
	Signature of officer or t		Date	Title	Lau				χ
Paid	Print/Type prepa		Preparer's signature	CPA	Date	i	X F PTIN		
	ROBERT M			Pansons	05-09-2013		loyed P009	50192	
Prepai	rer Firm's name	▶ Robert M Pa	arsons and Company	Y	Fir	m's EIN			

Phone no

770-836-8380

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2011

	ment of the Treasury al Revenue Service (99)	► See separate	instructions		Attach to y	our tax retur	n.		Attachment Sequence No	179
Name(s) shown on return		_	Business o	r activity to which	this form relates			Identifying number	
THE	E WARDLAW FAMILY	FOUNDATIO	ON. I	FOR	RM 990E	PF - 1			22-36641	22
	t测度 Election To Expen								<u> </u>	
	Note: If you have any lis					irt I				
1	Maximum amount (see instruction	ons)						1		
2	Total cost of section 179 property	y placed in service	(see instruction	ons)				2	·	
3	Threshold cost of section 179 pro	operty before redu	ction in limitat	ion (see ii	nstructions)			3		
4	Reduction in limitation Subtract	line 3 from line 2	If zero or less,	enter -0-				4		
5	Dollar limitation for tax year Sub	tract line 4 from lin	ne 1. If zero or	less, ente	er -0- If marr	ied filing				
	separately, see instructions							5		
6	(a) Description of				usiness use only)		cted cost	·		
										146
				1				_		1300
7	Listed property Enter the amoun	nt from line 29 .			7					3.4
8	Total elected cost of section 179	property Add amo	ounts in colum	n (c), line	s 6 and 7 .			8		
9	Tentative deduction Enter the si	maller of line 5 or	line 8					9		
10	Carryover of disallowed deduction	on from line 13 of y	our 2010 Form	n 4562 .				10		
11	Business income limitation Ente							11		
12	Section 179 expense deduction							12		
13	Carryover of disallowed deduction					1		<u> </u>	40.72×	100
Note	: Do not use Part II or Part III bel								The state of the s	
	Special Depreciati					o not include l	isted pro	perty) (See instructions)
14	Special depreciation allowance f						•	Ė		<u>, </u>
	during the tax year (see instruction							14		
15	Property subject to section 168(f	•						15		
16	Other depreciation (including AC							16	11	348
Pai	MACRS Depreciat								1 11/	<u> </u>
- Se Service	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	(======================================		ection A						
17	MACRS deductions for assets pl	laced in service in	tax vears beg	inning bef	ore 2011			17		
18	If you are electing to group any a							海溪道	The state of the s	
			_	•		_	• 🗍		A PLAN	
		ets Placed in Serv					preciati	on Sv	stem	
		(b) Month and	(c) Basis for dep	reciation	(d) Recovery	1				
	(a) Classification of property	year placed in service	(business/investronly-see instru		period	(e) Convention	(f) Met	hod	(g) Depreciation dedu	ction
19a	3-year property	A FARENCE CO.			 					
b	5-year property				 					
	7-year property			-						
	10-year property				1					
	15-year property				1		<u> </u>			
f	20-year property				1	i	<u> </u>			
g	25-year property				25 yrs	_	S/I			
	Residential rental	This seems to the			27 5 yrs	ММ	S/I			
	property				27 5 yrs	MM	S/I			
i	Nonresidential real				39 yrs	MM	S/I			
•	property				05 yis	MM	S/I		1	
	Section C - Asset	te Placed in Servi	ce During 20:	11 Tay Vo	ar Heina the				Evetom	
20a	Class life	S Placed III Selvi	Ce During 20	II lax re	ar Using the	Alternative			J	
b b	12-year	一种的一种			12 200		S/I		-	
	40-year	ALC: STATE OF THE			12 yrs	MM	S/I			
		ructions)			40 yrs	IVIIVI		-		
	Tt IV Summary (See inst	•					_	24	<u> </u>	
21	• • •			 .d 20 :			· · ·	21	 	
22	Total. Add amounts from line 12	_								240
23	and on the appropriate lines of y For assets shown above and pla					uctions	· · ·	22	1 11,	ე48 266
	portion of the basis attributable to		_	-		3		-		

Federal Supporting Statements 2011 PG01 Name(s) as shown on return THE WARDLAW FAMILY FOUNDATION, INC. 22-3664122 STATEMENT #8 990-T, PART II, LINE 18 INTEREST **DESCRIPTION** THUOMA TOTAL \$0 PG 01 STATEMENT #120 FORM 990PF, PART II, LINE 15 OTHER ASSETS SCHEDULE **DESCRIPTION** BOY BOOK EOY BOOK **FMV** SECURITY DEPOSITS TOTAL 260 290

FORM 990PF, PART II, LINE 21 MORTGAGES AND NOTES PAYABLE SCHEDULE

LAGRANGE BANKING COMPANY

PG 01 STATEMENT #123

BANK LENDER'S TITLE RELATIONSHIP TO INSIDER N/A ORIGINAL AMOUNT OF LOAN \$ 712,000 BALANCE DUE \$ 712,000 DATE OF NOTE 2010-07 MATURITY DATE 2013-03 REPAYMENT TERMS INTEREST RATE SECURITY BY BORROWER STORAGE FACIL. PURPOSE OF LOAN PURCHASE STORAGE FACILITY LENDER CONSIDERATION CONSIDERATION FMV

LENDER'S NAME

		Federal Sup	Federal Supporting Statements	nents	2011 PG 01
Name(s) as shown on return THE WARDLAW FAMILY FOUNDATION, INC.	I, INC.				Your Social Security Number 22–364122
	FORM 990PF, PART	I, LINE 23	- OTHER EXPENSES SCHEDULE	снвриле	STATEMENT #103
	REVENUE	NET	ADJUSTED	CHARITABLE	
ACCOUNTING FEES	1,500	1,500	O O	1,500	
CASUAL LABOR	4,322	4,322	0	4,322	
CREDIT CARD FEES	1,516	1,516	0	1,516	
EMOVE	160	160	0	160	
LAWN CARE	08	80	0	80	
OFFICE SUPPLIES	7,271	7,271	0	7,271	
PERSONEL EXPENSE	15,552	15,552	0	15,552	
POSTAGE	06	06	0	06	
PROPERTY INSURANCE	2,160	2,160	0	2,160	
PUBLIC SALE EXPENSE	147	147	0	147	
CUSTOMER REFUND	542	542	0	542	
REPAIRS & MAINTENANCE	2,437	2,437	0	2,437	
RETURNED CHECK	569	569	0	569	
SECURITY	210	210	0	210	
UTILITIES	7,748	7,748	0	7,748	
MISCELLANEOUS	68	68	0	68	
OPERATING SUPPLIES	352	352	0	352	
MANAGEMENT EXPENSE	14,000	14,000	0	14,000	
UHAUL EXPENSE	2,753	2,753	0	2,753	
TOTALS	61,498	61,498	0	61,498	

2011 PG 01		STATEMENT #106				PG 01 STATEMENT #110			
ments		SCHEDULE				a-Inc	CHARITABLE PURPOSE 0	0	
Federal Supporting Statements		1 - OTHER INCOME SCHEDULE	ADJUSTED NET INCOME	000	0	E 18 - TAXES SCHEDULE	ADJUSTED NET INCOME	0	
Federal Su		PF, PART I, LINE 11	NET INVESTMENT	688 7,407 2,821	11,531	FORM 990PF, PART I, LINE 18	NET INVESTMENT 9,682	9,682	
	INC.	FORM 990PF, PART	REVENUE AND EXPENSES	688 7,407 2,821	11,531	FORM 9	REVENUE AND EXPENSES 9,682	9,682	
	Name(s) as snown on return THE WARDLAW FAMILY FOUNDATION, INC.			ION					
	Name(s) as shown on return THE WARDLAW FAMIL		DESCRIPTION	MISCELLANEOUS UHAUL COMMISSION UHAUL INCOME	MISCELLANEOUS		DESCRIPTION	TOTALS	

	Federal Supporting Statements	INC,	FORM 990PF, PART II, LINE 14 - LAND ETC. SCHEDULE	COST OR ACCUMULATED END OF OTHER BASIS DEPRECIATION BOOK VA	ACILITY 440,603 28,112 412,491 500 125 375 534,971 534,971	976,074 28,237 947,837	PG 01	FORM 990PF, PART I, LINE 19 - DEPRECIATION SCHEDULE	DATE COST OR PRIOR YEAR COMPUTATION ACQUIRED OTHER BASIS DEPRECIATION METHOD RATE LIFE DEPRECIATION INCOME INCOME O7-14-2010 440,603 16,814 SL 2.564 39 11,298 5,674 O7-14-2010 500 75 SL 10 10 50 5,674 441,103 16,889
-		Name(s) as snown of feture THE WARDLAW FAMILY FOUNDATION,		DESCRIPTION	STORAGE FACILITY FURNITURE LAND	TOTAL			DESCRIPTION STORAGE FACILITY FURNITURE TOTALS

!

2011 PG 01 Your Social Security Number Federal Supporting Statements Name(s) as shown on return THE WARDLAW FAMILY FOUNDATION, INC. 22-3664122

FORM 990PF, PART XV, LINE 2 APPLICATION SUBMISSION INFORMATION 990APP

GRANT PROGRAM N/A

APPLICANT NAME CHARLES T. WARDLAW

ADDRESS 1004 COUNTRY CLUB DRIVE

LAGRANGE GA 30240

TELEPHONE 706-333-5555

FORM & CONTENT NO PARTICULAR FORM. THE FOUNDATION WANTS TO FUND LOCAL ORGANIZATIONS THAT SERVE OTHERS.

SUBMISSION DEADLINE NONE

RESTRICTIONS ON AWARD NONE

		•	AMT	50 50	11,348
2011	FAGE	Social security mumber/lein 22-3664122	6		
		8 8	Prior expense		
			Accumulated Depreciation		28,237
			Current	50	11,348
Depreciation Detail Listing			Rate	10 10	
	ý		p _Q	х н	
	SSO FF For your records only		Method	T/s S/T	
on Det	ır recc		§ .	500339	_
preciation	For you		Deprectation Basis	440, 603 500 10	441,103
۵			Section 179		
			Business percentage	100.00	
			Salvage		
		INC.	Cost	500	441,103
		UNDATION,	Date	20100714	
* Item was disposed	or during current year	Name(s) as shown on felurn THE WARDLAW FAMILY FOUNDATION,	Description	STORAGE FACILITY FURNITURE	Totals
* If	5	Nam	2	H 0	

ST ADJ:

441,103

Land Amount Net Depreciable Cost

Form 8868

(Rev January 2012)

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

OMB No 1545-1709

Internal Revenue		► File a s	separate ap	plication for each return.			<u></u>		
If you are to	filing for an	Automatic 3-Month Extension, co	mplete only	Part I and check this box				▶ [X	
If you are t	filing for an	Additional (Not Automatic) 3-Mont	th Extension	n, complete only Part II (on	page 2 of this form	n)			
Do not comp	lete Part I	l unless you have already been gran	ted an autor	natic 3-month extension on a	a previously filed Fo	orm 8	868		
a corporation 8868 to reque Return for Tra	required to est an exter ansfers Ass	. You can electronically file Form 886 file Form 990-T), or an additional (nonsion of time to file any of the forms lociated With Certain Personal Benef details on the electronic filing of this f	ot automatic listed in Part fit Contracts,) 3-month extension of time I or Part II with the exception which must be sent to the IF	You can electronic n of Form 8870, Inf RS in paper format	ally fi forma (see	le Form tion		
Part I	Automa	tic 3-Month Extension of Ti	me. Only	submit original (no cop	ies needed)				
		o file Form 990-T and requesting an a							
· ·	•	• • • • • • • • • • • • • • • • • • • •						▶□	
		cluding 1120-C filers), partnerships,			to request an exte	ensior	of time		
to file income		= ' ' '			,				
				Ente	r filer's identifying	ı nun	nber, see	instructions	
Type or	Name o	f exempt organization or other filer, s	ee instructio		Employer idei				
print	rint THE WARDLAW FAMILY FOUNDATION, INC. X 22-36								
File by the	Number	, street, and room or suite no. If a PC	D. box, see ii	ox, see instructions Social secu			nber (SSI	N)	
due date for	1004	COUNTRY CLUB DRIVE							
filing your return See	your								
instructions	LAGRA	NGE, GA 30240							
Enter the Ret	urn code fo	or the return that this application is fo	r (file a sepa	rate application for each retu	ırn)			d 4	
Application	n		Return	Application				Return	
is For			Code	Is For				Code	
Form 990			07						
Form 990-E	3L		02	Form 1041-A				08	
Form 990-E	ΞZ		01	Form 4720				09	
Form 990-F	PF .		04	Form 5227				10	
Form 990-1	Γ(sec 401	(a) or 408(a) trust)	05	Form 6069				11	
Form 990-1	(trust othe	er than above)	06	Form 8870				12	
Telephone If the orga If this is fo for the whole a list with the until for the	nization do r a Group I group, che names an st an autor 0 organizatio	TO6-333-5555 es not have an office or place of business of the extension	FA iness in the l digit Group E it is for part is for ation require	United States, check this box exemption Number (GEN) of the group, check this box	lf thr▶ and a	s is ttach		▶□	
2 If the ta	•	eginning 10-0 ered in line 1 is for less than 12 mont counting period	01 , 20 <u>11</u> hs, check re	, and ending ason	09-30 , Final return	20_3	12.		
		is for Form 990-BL, 990-PF, 990-T, 4	720, or 6069	, enter the tentative tax, less	any				
		edits See instructions		•	-	3a	\$	0	
b If this a	pplication	s for Form 990-PF, 990-T, 4720, or 6	069, enter a	ny refundable credits and	-		Ī	_	
		ments made Include any prior year				3b	\$	0	
c Balanc	e due. Sul	otract line 3b from line 3a. Include yo	ur payment v	with this form, if required, by	using				
EFTPS	(Electroni	c Federal Tax Payment System) See	instructions	· · · · · · · · · · · · · · · · · · ·		3c	\$	0	
Caution. If you a	are going to ma	ake an electronic fund withdrawal with this Form 8	3868, see Form 8	3453-EO and Form 8879-EO for paym	ent instructions				