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Form **990-PF**

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

OMB No. 1545-0052

2012Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

For calendar year 2012 or tax year beginning , and ending

Name of foundation HILLARD FAMILY CHARITABLE TRUST		A Employer identification number 58-6288320
Number and street (or P.O. box number if mail is not delivered to street address) 2400 WARWICK AVENUE	Room/suite	B Telephone number (see instructions) 229-883-1318
City or town, state, and ZIP code ALBANY GA 31721-9212		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change </div> <div> <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change </div> </div>		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input type="checkbox"/> Section 501(c)(3) exempt private foundation <input checked="" type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 132,907	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	13,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	2,656	2,656	2,656	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10 STMT 1	3,812			
	b Gross sales price for all assets on line 6a 82,827				
	7 Capital gain net income (from Part IV, line 2)		3,812		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	19,468	6,468	2,656	
	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) STMT 2	475			475
	c Other professional fees (attach schedule) STMT 3	1,914	1,914		
	17 Interest				
	18 Taxes (attach schedule) (see instructions) STMT 4	64			64
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (all sch.)				
	24 Total operating and administrative expenses. Add lines 13 through 23	2,453	1,914	0	539
	25 Contributions, gifts, grants paid	11,991			11,991
	26 Total expenses and disbursements. Add lines 24 and 25	14,444	1,914	0	12,530
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	5,024			
	b Net investment income (if negative, enter -0-)		4,554		
	c Adjusted net income (if negative, enter -0-)			2,656	

For Paperwork Reduction Act Notice, see instructions.

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments	8,891	5,099	5,099
	3	Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶ Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (att. schedule) ▶ Less allowance for doubtful accounts ▶	0		
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments – U S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule)			
	c	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch.) ▶			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) SEE STATEMENT 5	112,523	118,575	127,808
	14	Land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch.) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	121,414	123,674	132,907
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ <input type="checkbox"/>			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>			
	27	Capital stock, trust principal, or current funds	121,414		
	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds		123,674	
	30	Total net assets or fund balances (see instructions)	121,414	123,674	
	31	Total liabilities and net assets/fund balances (see instructions)	121,414	123,674	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	121,414
2	Enter amount from Part I, line 27a	2	5,024
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	126,438
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 6	5	2,764
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	123,674

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a MERRILL LYNCH				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 444			444	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0- or Losses (from col. (h)))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a			444	
b				
c				
d				
e				
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7			2	444
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 If (loss), enter -0- in			3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

N/A

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☐ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2011			
2010			
2009			
2008			
2007			
2 Total of line 1, column (d)			2
3 Average distribution ratio for the 5-year base period – divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5			4
5 Multiply line 4 by line 3			5
6 Enter 1% of net investment income (1% of Part I, line 27b)			6
7 Add lines 5 and 6			7
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions			8

Part 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 <input type="checkbox"/> 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 here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	91
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	91
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	91
6	Credits/Payments		
a	2012 estimated tax payments and 2011 overpayment credited to 2012	6a	
b	Exempt foreign organizations – tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	91
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2013 estimated tax Refunded	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ _____ (2) On foundation managers \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • 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?	X	
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	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) NONE		
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	X	
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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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Part 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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14	The books are in care of ► CLAIRE FOX HILLARD 2400 WARWICK AVENUE Located at ► ALBANY GA ZIP+4 ► 31721-9212 Telephone no ► 229-883-1318			
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	15		
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country ►	16	Yes	No X

Part 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A <input type="checkbox"/> 1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? N/A 1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? If "Yes," list the years ► 20 , 20 , 20 , 20 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions) N/A 2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20 , 20 , 20 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2012 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, Form 4720, to determine if the foundation had excess business holdings in 2012) N/A 3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? **N/A** ☐ **5b**

Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? **N/A** ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** ☐ Yes ☒ No **X**

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **N/A** **7b**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CLAIRE FOX HILLARD 2400 WARWICK AVE. ALBANY GA 31721-9212	CO-TRUSTEE 1.00	0	0	0
MERI BETH HILLARD 2400 WARWICK AVE. ALBANY GA 31721-9212	CO-TRUSTEE 1.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see instructions). 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**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 FIRST UNITED METHODIST CHURCH ALBANY, GA FUNDS PROVIDE ERAL CHURCH SPONSORED FUNCTIONS.	7,331
2 ALBANY SYMPHONY ASSOCIATION. FUNDS PROVIDED TO SUPPORT SYM	700
3 DARTON COLLEGE FOUNDATION. PROVIDES PROVIDED TO SUPPORT OP ON COLLEGE.	725
4 OTHER CHARITABLE ORGANIZATIONS	3,235

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3 ▶

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		
a	Average monthly fair market value of securities	1a	126,249
b	Average of monthly cash balances	1b	801
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	127,050
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	127,050
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	4	1,906
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	125,144
6	Minimum investment return. Enter 5% of line 5	6	6,257

Part 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	6,257
2a	Tax on investment income for 2012 from Part VI, line 5	2a	91
b	Income tax for 2012 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	91
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,166
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	6,166
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	6,166

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	12,530
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	12,530
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,530

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				6,166
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2012				
a From 2007	15,531			
b From 2008	16,261			
c From 2009	15,277			
d From 2010	17,829			
e From 2011	17,130			
f Total of lines 3a through e	82,028			
4 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ 12,530				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2012 distributable amount				6,166
e Remaining amount distributed out of corpus	6,364			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:	88,392			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b Taxable amount – see instructions				
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount – see instructions				
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	15,531			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	72,861			
10 Analysis of line 9				
a Excess from 2008	16,261			
b Excess from 2009	15,277			
c Excess from 2010	17,829			
d Excess from 2011	17,130			
e Excess from 2012	6,364			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test – enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test – enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year – see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
SEE STATEMENT 7

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed
N/A

b The form in which applications should be submitted and information and materials they should include
N/A

c Any submission deadlines
N/A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
N/A

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year SEE STATEMENT 8				11,991
Total			▶ 3a	11,991
b Approved for future payment N/A				
Total			▶ 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					2,656
5	Net rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					3,812
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
b						
c						
d						
e						
12	Subtotal Add columns (b), (d), and (e)		0		0	6,468
13	Total. Add line 12, columns (b), (d), and (e)					6,468

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

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

2012

Name of the organization

Employer identification number

HILLARD FAMILY CHARITABLE TRUST

58-6288320

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☒ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33¹/₃ % 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 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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) (2012)

Name of organization

HILLARD FAMILY CHARITABLE TRUST

Employer identification number

58-6288320**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CLAIRE AND MERI BETH HILLARD 2400 WARWICK AVE. ALBANY GA 31707-9212	\$ 13,000	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (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 <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (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 <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (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 <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (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 <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (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 <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

Whom Sold	Description	Date Acquired	Date Sold	How Received		Cost	Expense	Depreciation	Net Gain / Loss
				Sale Price	PURCHASE				
MERRILL LYNCH -	SEE SCHEDULE	VARIOUS	VARIOUS	\$ 10,484	\$ PURCHASE	10,007	\$	\$	477
MERRILL LYNCH -	SEE SCHEDULE	VARIOUS	VARIOUS	69,729	PURCHASE	67,004			2,725
MERRILL LYNCH -	SEE SCHEDULE	7/23/11	11/09/12	27	PURCHASE	29			-2
MERRILL LYNCH -	SEE SCHEDULE	VARIOUS	VARIOUS	2,143	PURCHASE	1,975			168
TOTAL				\$ 82,383	\$	79,015	\$	0	\$ 3,368

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
TAYLORCHANDLER, LLC	\$ 475	\$	\$	475
TOTAL	\$ 475	\$ 0	\$ 0	475

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
MERRILL LYNCH FEES	\$ 1,914	\$ 1,914	\$	\$
TOTAL	\$ 1,914	\$ 1,914	\$ 0	\$ 0



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CLAIRE FOX HILLARD TTEE

2012 TAX REPORTING STATEMENT

The following sections are provided to facilitate your review and the preparation of your tax return.

The 2012 Proceeds from Broker and Barter Exchange Transactions section includes both sales of positions for "covered securities" and "noncovered securities." A covered security includes those with a purchase date within the following timeline: Equities acquired on or after January 1, 2011 and Mutual Funds acquired on or after January 1, 2012. Legislation requires reporting the gross proceeds of the sales of "covered" and "noncovered" securities and the adjusted cost basis for "covered securities." Any sale of a security that is considered a "noncovered security" will still be included in this section with the adjusted cost basis (where available) but the adjusted basis will not be transmitted to the IRS.

In calculating gain (loss), unless otherwise noted, it was assumed that the oldest position was liquidated first, and that you have made an election to amortize the premium paid on the purchase of taxable bonds. Under the Cost Basis Reporting Regulations, brokers need not track wash sale activity for substantially identical securities, transactions across accounts, or between covered and non-covered securities. However, you as a taxpayer still have to track and report wash sales as you have in the past which would include all of the aforementioned transaction types. Securities distributed from a retirement account reflect the tax basis on the date of distribution. Other methods for calculating gain (loss) are available. The cost basis for most Original Issue Discount ("OID") obligations includes the accretion of OID. For purposes of allocating original purchase price to the components of an equity unit consisting of a purchase contract and a debt security subject to a remarketing event, we assumed that the fair market value of the debt security on purchase date was equal to its adjusted issue price. The difference between your original cost and the amount allocable to the debt component was allocated to the purchase contract. In making adjustments to the cost basis of the purchase contract, it was assumed that the unit holder included contract adjustment payments in income when received.

1099-B 2012 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS (OMB NO. 1545-0715)

1e. Quantity	Transaction Description	1b. Date of Acquisition	1a. Date of Sale or Exchange	2a. Amount	3. Cost Basis	5. Wash Sale Loss Disallowed	Gain or (Loss)	Remarks
SHORT TERM CAPITAL GAINS AND LOSSES - 1099-B Line 1c.								
COVERED TRANSACTIONS - 1099-B Line 6b. (cost basis reported to the IRS)								
MFS VALUE FD CL I		CUSIP Number	552983694					
6 0000 Sale		01/25/12	04/16/12	147.30	141.84	0.00	5.46	
8 0000 Sale		01/25/12	10/18/12	208.56	189.12	0.00	19.44	
Security Subtotal				355.86	330.96	0.00	24.90	
THOMAS WHITE INTL FD INV		CUSIP Number	543917108					
11 0000 Sale		02/13/12	10/18/12	187.88	178.86	0.00	9.02	
18 0000 Sale		02/13/12	12/17/12	311.22	292.68	0.00	18.54	
Security Subtotal				499.10	471.54	0.00	27.56	
EV LG CAP VAL I		CUSIP Number	277905642					
3 0000 Sale		01/25/12	07/17/12	55.72	54.03	0.00	1.69	
11 0000 Sale		01/25/12	10/18/12	220.44	198.11	0.00	22.33	
3 0000 Sale		01/25/12	12/17/12	59.19	54.03	0.00	5.16	
Security Subtotal				335.35	306.17	0.00	29.18	
ARTIO INTL EQUITY II I		CUSIP Number	04315J837					
752 0000 Sale		01/25/12	02/13/12	7,941.13	7,662.88	0.00	278.25	



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2012 TAX REPORTING STATEMENT

1099-B 2012 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS (OMB NO. 1545-0715)

1e. Quantity	Transaction Description	1b. Date of Acquisition	1a. Date of Sale or Exchange	2a. Amount	3. Cost Basis	5. Wash Sale Loss Disallowed	Gain or (Loss)	Remarks
HARTFORD GROWTH OPPTY'S I								
		CUSIP Number	416641207					
12 0000	Sale	01/25/12	04/16/12	346.81	324.36	0.00	22.45	
5 0000	Sale	01/25/12	07/17/12	144.45	135.15	0.00	9.30	
4 0000	Sale	01/25/12	10/18/12	123.80	108.12	0.00	15.68	
10 0000	Sale	01/25/12	12/17/12	312.30	270.30	0.00	42.00	
Security Subtotal				927.36	837.93	0.00	89.43	
AMERICAN EURO PACIFIC								
		CUSIP Number	29875E100					
5 0000	Sale	01/25/12	12/17/12	207.90	187.70	0.00	20.20	
DREYFUS APPRECIATION FD								
		CUSIP Number	261970107					
3 0000	Sale	01/25/12	04/16/12	130.05	125.97	0.00	4.08	
1 0000	Sale	01/25/12	07/17/12	43.17	41.99	0.00	1.18	
1 0000	Sale	01/25/12	12/17/12	44.44	41.99	0.00	2.45	
Security Subtotal				217.66	209.95	0.00	7.71	
Covered Short Term Capital Gains and Losses Subtotal				10,484.36	10,007.13	0.00	477.23	

NONCOVERED TRANSACTIONS - 1099-B Line 6a. (cost basis not reported to the IRS)

ISHARES RUSSELL 1000								
		CUSIP Number	464287614					
177 0000	Sale	07/22/11	01/23/12	10,752.04	11,077.87	0.00	(325.83)	
4 0000	Sale	07/22/11	01/23/12	242.98	245.94	0.00	(2.96)	
8 0000	Sale	07/22/11	01/23/12	485.96	489.66	0.00	(3.70)	
167 0000	Sale	12/14/11	01/23/12	10,144.60	9,400.43	0.00	744.17	
8 0000	Sale	12/14/11	04/16/12	517.37	450.32	0.00	67.05	
Security Subtotal				22,142.95	21,664.22	0.00	478.73	
ISHARES RUSSELL 1000								
		CUSIP Number	464287598					
165 0000	Sale	07/22/11	01/23/12	10,976.62	11,293.73	0.00	(317.11)	
3 0000	Sale	07/22/11	01/23/12	199.57	202.18	0.00	(2.61)	
8 0000	Sale	07/22/11	01/23/12	532.20	536.39	0.00	(4.19)	
167 0000	Sale	12/14/11	01/23/12	11,109.69	10,225.54	0.00	884.15	
1 0000	Sale	12/14/11	04/16/12	68.19	61.23	0.00	6.96	
1 0000	Sale	12/14/11	07/17/12	68.37	61.23	0.00	7.14	
4 0000	Sale	12/14/11	10/18/12	295.99	244.92	0.00	51.07	
Security Subtotal				23,250.63	22,625.22	0.00	625.41	

CLAIRE FOX HILLARD TTEE

2012 TAX REPORTING STATEMENT

(OMB NO. 1545-0715)

1099-B

2012 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS

1e Quantity	Transaction Description	1b. Date of Acquisition	1a. Date of Sale or Exchange	2a. Amount	3. Cost Basis	5 Wash Sale Loss Disallowed	Gain or (Loss)	Remarks
IShares MSCI EAFE INDEX 426 0000 Sale		CUSIP Number 12/14/11	464287465 01/23/12	22,168.06	20,647.71	0.00	1,520.35	
THORNBURG INTL VAL FD I 1 0000 Sale		CUSIP Number 07/22/11	885215566 04/16/12	26.82	29.11	2.29 (WY)	0.00	
MFS RESEARCH BOND I 15 0000 Sale		CUSIP Number 07/22/11	55272P778 07/17/12	165.00	159.30	0.00	5.70	
METRO W TTL RTRN BD CL I 15 0000 Sale		CUSIP Number 07/22/11	592905509 07/17/12	161.70	157.05	0.00	4.65	
AM CEN SM CP GRW CL INV 3 0000 Sale 6 0000 Sale		CUSIP Number 07/22/11 07/22/11	025083338 04/16/12 04/16/12	26.34 52.68	28.14 56.28	1.80 (W) 0.00	0.00 (3.60)	
Security Subtotal				79.02	84.42	1.80	(3.60)	
EV LG CAP VAL I 4 0000 Sale 1 0000 Sale 2 0000 Sale 2 0000 Sale		CUSIP Number 07/22/11 07/28/11 08/01/11 08/08/11	277905642 07/17/12 07/17/12 07/17/12	74.27 18.57 37.14 37.14	72.40 16.89 32.72 31.26	0.00 (Y) 0.00 (Y) 0.00 (Y) 0.00	1.87 1.68 4.42 5.88	
Security Subtotal				167.12	153.27	0.00	13.85	
ARTIO INTL EQUITY II I 2 0000 Sale 12 0000 Sale 9 0000 Sale 38 0000 Sale		CUSIP Number 07/28/11 08/01/11 08/08/11 09/27/11	04315J837 02/13/12 02/13/12 02/13/12	21.11 126.72 95.04 401.28	22.58 131.76 95.40 382.66	0.00 (Y) 0.00 (Y) 0.00 0.00	(1.47) (5.04) (0.36) 18.62	
Security Subtotal				644.15	632.40	0.00	11.75	
WESTCORE SC VAL CL R 1 0000 Sale 1 0000 Sale 4 0000 Sale		CUSIP Number 07/22/11 07/22/11 07/22/11	957904535 04/16/12 04/16/12 07/17/12	12.43 12.43 50.36	12.91 12.91 51.64	0.48 (W) 0.00 0.00	0.00 (0.48) (1.28)	
Security Subtotal				75.22	77.46	0.48	(1.76)	



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2012 TAX REPORTING STATEMENT

1099-B **2012 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS** (OMB NO. 1545-0715)

1e Quantity	Transaction Description	1b Date of Acquisition	1a Date of Sale or Exchange	2a Amount	3 Cost Basis	5 Wash Sale Loss Disallowed	Gain or (Loss)	Remarks
	HARTFORD GROWTH OPPTY I	CUSIP Number	416641207					
2.0000	Sale	07/28/11	04/16/12	57.79	51.90	0.00 (Y)	5.89	
3.0000	Sale	08/01/11	04/16/12	86.70	74.73	0.00 (Y)	11.97	
10.0000	Sale	08/08/11	04/16/12	289.00	240.00	0.00	49.00	
	Security Subtotal			433.49	366.63	0.00	66.86	
	WF ADV EMER GRO FD ADM	CUSIP Number	949917264					
2.0000	Sale	07/22/11	04/16/12	26.86	31.21	4.35 (W)	0.00	
	PIMCO TOTAL RETURN FUND	CUSIP Number	72201M552					
34.0000	Sale	07/22/11	07/17/12	388.28	375.70	0.00	12.58	
	Noncovered Short Term Capital Gains and Losses Subtotal			69,729.30	67,003.70	8.92	2,734.52	
	NET SHORT TERM CAPITAL GAINS AND LOSSES			80,213.66	77,010.83	8.92	3,211.75	
	LONG TERM CAPITAL GAINS AND LOSSES - 1099-B Line 1c.							
	COVERED TRANSACTIONS - 1099-B Line 6b. (cost basis reported to the IRS)							
	THORNBURG INTL VAL FD I	CUSIP Number	885215566					
1.0000	Sale	07/23/11	11/09/12	26.55	29.33	0.00 (Y)	(2.78)	
	Covered Long Term Capital Gains and Losses Subtotal			26.55	29.33	0.00	(2.78)	
	NONCOVERED TRANSACTIONS - 1099-B Line 6a. (cost basis not reported to the IRS)							
	ISHARES RUSSELL 1000	CUSIP Number	464287614					
3.0000	Sale	12/14/11	12/17/12	196.86	168.87	0.00	27.99	
	ISHARES RUSSELL 1000	CUSIP Number	464287598					
4.0000	Sale	12/14/11	12/17/12	292.05	244.92	0.00	47.13	
	THORNBURG INTL VAL FD I	CUSIP Number	885215566					
3.0000	Sale	07/22/11	10/18/12	82.02	87.33	0.00 (Y)	(5.31)	
2.0000	Sale	08/01/11	11/09/12	53.13	51.19	0.00 (Y)	1.94	
4.0000	Sale	08/01/11	12/17/12	111.39	102.41	0.00 (Y)	8.98	



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CLAIRE FOX HILLARD TTEE

2012 TAX REPORTING STATEMENT

(OMB NO. 1545-0715)

1099-B

2012 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS

1e. Quantity	Transaction Description	1b. Date of Acquisition	1a. Date of Sale or Exchange	2a. Amount	3. Cost Basis	5. Wash Sale Loss Disallowed	Gain or (Loss)	Remarks
	THORNBURG INTL VAL FD I							
1 0000	Sale	08/08/11	885215566 12/17/12	27.85	24.93	0.00	2.92	
4.0000	Sale	09/27/11	12/17/12	111.41	96.76	0.00	14.65	
	Security Subtotal			385.80	362.62	0.00	23.18	
	MFS RESEARCH BOND I							
17 0000	Sale	07/22/11	55272P778 11/09/12	189.55	180.54	0.00	9.01	
	METRO W TTL RTRN BD CL I							
18.0000	Sale	07/22/11	592905509 11/09/12	199.98	188.46	0.00	11.52	
	PIMCO TOTAL RETURN FUND							
35.0000	Sale	07/22/11	72201M552 11/09/12	406.35	386.75	0.00	19.60	
	AMERICAN EURO PACIFIC							
3 0000	Sale	07/22/11	29875E100 10/18/12	121.74	127.11	0.00 (Y)	(5.37)	
4 0000	Sale	08/01/11	10/18/12	162.32	149.12	0.00 (Y)	13.20	
1 0000	Sale	09/27/11	11/09/12	39.38	35.21	0.00	4.17	
3 0000	Sale	09/27/11	12/17/12	124.74	105.63	0.00	19.11	
	Security Subtotal			448.18	417.07	0.00	31.11	
	ROYCE PA MUTUAL FD INV							
2.0000	Sale	07/22/11	780905840 10/18/12	23.82	25.34	0.00	(1.52)	
	Noncovered Long Term Capital Gains and Losses Subtotal			2,142.59	1,974.57	0.00	168.02	
	NET LONG TERM CAPITAL GAINS AND LOSSES			2,169.14	2,003.90	0.00	165.24	
	TOTAL SALES PROCEEDS FOR CAPITAL GAINS AND LOSSES			82,382.80				
	TOTAL REPORTED SALES PROCEEDS			82,382.80				

(Y) The gain or loss of this transaction includes an adjustment to basis for the disallowed loss amount on one or more previous "Wash Sales."

(WY) This transaction has been identified as a "Wash Sale" based on IRS regulations. The Wash Sale Loss Disallowed column reflects the deferred loss amount. The cost basis of the related transaction(s) has been adjusted by the deferred loss amount for this transaction. Please refer to the instructions for Form 8949 for how to report the deferred loss amount and applicable adjustment code. In addition, the cost basis of this transaction has been adjusted for the deferred loss amount of one or more previous "Wash Sales."



Account No.
687-11100

Taxpayer No.
58-6288320

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CLAIRE FOX HILLARD TTEE

2012 TAX REPORTING STATEMENT

1099-B 2012 PROCEEDS FROM BROKER & BARTER EXCHANGE TRANSACTIONS (OMB NO. 1545-0715)

1e. Quantity	Transaction Description	1b. Date of Acquisition	1a. Date of Sale or Exchange	2a Amount	3. Cost Basis	5. Wash Sale Loss Disallowed	Gain or (Loss)	Remarks
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(W) This transaction has been identified as a "Wash Sale" based on IRS regulations. The Wash Sale Loss Disallowed column reflects the deferred loss amount. The cost basis of the related transaction(s) has been adjusted by the deferred loss amount from either the cost basis on purchases or proceeds from short sales. Please refer to the instructions for Form 8949 for how to report the deferred loss amount and applicable adjustment code.

2012 REALIZED CAPITAL GAIN AND LOSS SUMMARY

COVERED SHORT TERM GAINS/LOSSES	477.23	NONCOVERED SHORT TERM GAINS/LOSSES	2,734.52	COVERED LONG TERM GAINS/LOSSES	(2.78)	NONCOVERED LONG TERM GAINS/LOSSES	168.02
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21115 HILLARD FAMILY CHARITABLE TRUST

58-6288320

FYE: 12/31/2012

Federal Statements

Statement 4 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
FOREIGN TAXES PAID	\$ 64	\$	\$	\$ 64
TOTAL	\$ 64	\$ 0	\$ 0	\$ 64

21115 HILLARD FAMILY CHARITABLE TRUST

58-6288320

FYE: 12/31/2012

Federal Statements

Statement 5 - Form 990-PF, Part II, Line 13 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
MERRILL LYNCH - MUTUAL FUNDS	\$ 112,523	\$ 118,575	COST	\$ 127,808
TOTAL	\$ 112,523	\$ 118,575		\$ 127,808

21115 HILLARD FAMILY CHARITABLE TRUST

58-6288320

FYE: 12/31/2012

Federal Statements

Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount
CORPUS ADJUSTMENT	\$ 2,764
TOTAL	\$ 2,764

21115 HILLARD FAMILY CHARITABLE TRUST

58-6288320

Federal Statements

FYE: 12/31/2012

Statement 7 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

<u>Name of Manager</u>	<u>Amount</u>
CLAIRE FOX HILLARD	\$ 6,500
MERI BETH HILLARD	6,500
TOTAL	<u>\$ 13,000</u>

21115 HILLARD FAMILY CHARITABLE TRUST

Federal Statements

58-6288320

FYE: 12/31/2012

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the
Year

Name		Address		Status	Purpose	Amount
Address	Relationship					
FIRST UNITED METHODIST CHURCH ALBANY GA 31701	307 FLINT AVE.			OPERATIONS		7,331
LEAGUE OF AMERICAN ORCHESTRAS NEW YORK NY 10023	33 WEST 60TH ST.			OPERATIONS		1,000
CONDUCTORS GUILD RICHMOND VA 23235	719 TWINRIDGE LN.			OPERATIONS		1,000
DARTON STATE COLLEGE ALBANY GA 31707	2400 GILLIONVILLE RD.			OPERATIONS		725
ALBANY SYMPHONY ORCHESTRA ALBANY GA 31707	2400 GILLIONVILLE RD.			OPERATIONS		700
SOWEGA COUNCIL ON AGING ALBANY GA 31707	1105 PALMYRA RD.			OPERATIONS		400
ALBANY MUSEUM OF ART ALBANY GA 31707	311 MEADOWLARK DR.			OPERATIONS		250
ALBANY CHORALE ALBANY GA 31701	215 N. JACKSON ST.			OPERATIONS		250
GIRLS, INC ALBANY GA 31701	701 PARK PLACE			OPERATIONS		160
MERIDIAN SYMPHONY ORCHESTRA MERIDIAN MS 39302	P.O. BOX 2171			OPERATIONS		100
WORLD VISION FOUNDATION FEDERAL WAY WA 98063	P.O. BOX 9716			OPERATIONS		50
CYSTIC FIBROSIS FOUNDATION BETHESDA MD 20814	6931 ARLINGTON RD.			OPERATIONS		25
TOTAL						11,991

Form **8868**

(Rev. January 2013)

Department of the Treasury
Internal Revenue Service**Application for Extension of Time To File an
Exempt Organization Return**

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** on page 2 of this form

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions HILLARD FAMILY CHARITABLE TRUST	Employer identification number (EIN) or 58-6288320
	Number, street, and room or suite no. If a P.O. box, see instructions 2400 WARWICK AVENUE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions ALBANY GA 31721-9212	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

CLAIRE FOX HILLARD, CO-TRUSTEE
2400 WARWICK AVENUE

- The books are in the care of ► **ALBANY**

GEORGIA**31721**Telephone No ► **229-883-1138**FAX No ► **229-439-2308**

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **08/15/13**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
 ► ☒ calendar year **2012** or

► ☐ tax year beginning _____, and ending _____

2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.For Privacy Act and Paperwork Reduction Act Notice, see instructions.
DAA

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**
- Note** Only complete **Part II** if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)

Type or print File by the due date for filing your return. See instructions	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions HILLARD FAMILY CHARITABLE TRUST	Employer identification number (EIN) or 58-6288320
	Number, street, and room or suite no. If a P.O. box, see instructions 2400 WARWICK AVENUE	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions ALBANY GA 31721-9212	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

CLAIRE FOX HILLARD
2400 WARWICK AVENUE

GA 31721-9212

- The books are in the care of ☒ **ALBANY**
Telephone No **229-439-0064** FAX No **229-439-2308**
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until **11/15/13**5 For calendar year **2012**, or other tax year beginning , and ending6 If the tax year entered in line 5 is for less than 12 months, check reason ☐ Initial return ☐ Final return☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS REQUESTED IN ORDER TO PREPARE AN ACCURATE AND COMPLETE TAX RETURN.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$
c	Balance due Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature **Richard L. Davis**Title **C.P.A.**Date **08/07/13**

Form 8868 (Rev. 1-2013)