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

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements OMB No 1545-0052

2012

Ī	For	cale	ndar	year 2012, or tax year beginning	, 2012	, and ending	,
				AHAN FAMILY CHARITABLE FO		· · · · · · · · · · · · · · · · · · ·	A Employer identification number 75-3022425
				OTH 28TH AVENUE BURG, MS 39402			B Telephone number (see the instructions)
-		<u> </u>	ام داد	l About and the Colonian Colon	I had a land on the factor		C If exemption application is pending, check here
'	G	Che	ck an	I that apply Initial return Final return	Initial return of a form Amended return	ner public charity	D 1 Foreign organizations, check here
-	Н	Ch	neck	Address change type of organization.	Name change 1(c)(3) exempt private	foundation	2 Foreign organizations meeting the 85% test, check here and attach computation
-			Sec	ction 4947(a)(1) nonexempt charitable	trust Other taxable	private foundation ash X Accrual	E If private foundation status was terminated under section 507(b)(1)(A), check here
	•		om Pa	rt II, column (c), line 16) 932, 397. (Part	Other (specify) J, column (d) must be of		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here
	Pa	rt l		nalysis of Revenue and	(a) Revenue and	(b) Net investmen	nt (c) Adjusted net (d) Disbursements
			co sa	(penses (The total of amounts in lumns (b), (c), and (d) may not neces rily equal the amounts in column (a) se instructions))	aynangan nar haaks	income	income for charitable purposes (cash basis only)
•			1	Contributions, gifts, grants, etc, received (att sch)	114,828.	M · (3)	* ** ** ** ** ** ** ** ** ** ** ** ** *
			2	Ck fithe foundn is not req to att Sch B Interest on savings and temporary			
				cash investments	3,987.	3,98	3,987.
				Dividends and interest from securities	32,917.	32,91	
				Gross rents Net rental income	¥ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	R	.		or (loss) Net gain/(loss) from sale of assets not on line 10	25,732.		
	R E V		_	Gross sales price for all assets on line 6a 281,743.		25.72	
	E N U		8	Capital gain net income (from Part IV, line 2) Net short-term capital gain		25,73	
	Ü		9	Income modifications			
		٠	10 a	Gross sales less returns and allowances			
			b	Less Cost of goods sold			
				Gross profit/(loss) (att sch)	* ***		
				Other income (attach schedule)			
		_		Total. Add lines 1 through 11	177,464.	62,63	36,904.
			13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	0.		
				Pension plans, employee benefits			
S)	A		Legal fees (attach schedule)			
		M		Accounting fees (attach sch) See St 1	1,650.		
Z	0	N	17	Other prof fees (attach sch) Interest			
CANNED	E	S T R	18	Taxes (attach schedule)(see instrs). See Stm 2	750.	75	50.
Ö	R A T	R A T	19	Depreciation (attach sch) and depletion			
A	i N	L V E	20	Occupancy			RECE
AUG	Ğ	Ě	21	Travel, conferences, and meetings			191 AUC 1 & 2013 131
69	Ņ	E X P E	22 23	Printing and publications Other expenses (attach schedule)			18 AUU I
7	D	Ë	23	See Statement 3	5,807.	5,80	OGDEN. UT
2 0 1?⊋		N S E S	24	Total operating and administrative			
فد		5	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid Part XV	8,207. 107,050.	6,55	107,050
				Total expenses and disbursements. Add lines 24 and 25			
-		\dashv		Subtract line 26 from line 12:	115,257.	6,55	57. 0. 107,050
-		ļ		Excess of revenue over expenses	60.00=		the state of the s
			Ь	and disbursements Net investment income (if negative, enter -0-)	62,207.	56,07	79.
				Adjusted net income (if negative, enter -0-)		36,07	36,904.
Ī	BA/	\ Fo	r Pa	perwork Reduction Act Notice, see in	structions.		TEEA0504L 12/23/12 Form 990-PF (2012

Part III Analysis of Changes in Net Assets or Fund Balances 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) 833,217. Enter amount from Part I, line 27a 2 62,207. Other increases not included in line 2 (itemize) 3 Add lines 1, 2, and 3 4 895,424 Decreases 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 6 895, 424

833,217

(see instructions)

895,424

,	(a) List and describe	the kind(s) of property sold (e g , ree, or common stock, 200 shares ML	eal estate,	b) How acqui P — Purchas D — Donatio	e (month, day, year)	(d) Date sold (month, day, year)
1 2	See Statement 4				"	
<u>' a</u> b						
<u>c</u>		· · · · · · · · · · · · · · · · · · ·				
d						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	5	(h) Gain or (e) plus (f) m	
a		-				
b						
С		··· - ·				
d						
е						
	Complete only for assets show	ng gain in column (h) and owned by			(I) Gains (Col	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (over column (j), if any	1)	gain minus column (l than -0-) or Losses (fi	
a						
b					,	
d						
е						
2	Capital gain net income or (net	capital loss). — If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7		2	25,732.
3	Net short-term capital gain or (loss) as defined in sections 1222(5)	and (6):		·	
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions) If	(loss), enter -0-		3	0.
Par	t V Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investme	nt Incom	ie	
	es,' the foundation does not qual	tion 4942 tax on the distributable an ify under section 4940(e) Do not con n each column for each year; see the	mplete this part		Yes	X No
	_ (a)	(b)	(c)	any entre	(d)	
	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use asse	ets (Distribution column (b) divided	
	2011	76,775.	863	,948.		0.088865
	2010	70,616.		,566.		0.080836
	2009	209,517.	874	,301.		0.239639
	2008	68,625.	303	,575.		0.226056
	2007	288,030.	252	,615.		1.140194
2	Total of line 1, column (d)				2	1.775590
_	, , ,	o E year base period duide the tr	atal an line 2 by E. or by 45 a	 		
3		e 5-year base period — divide the to has been in existence if less than		_	3	0.355118
4	Enter the net value of nonchari	table-use assets for 2012 from Part	X, line 5	_	4	889,796.
5	Multiply line 4 by line 3				5	315,983.
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6	561.
7	Add lines 5 and 6				7	316,544.
8	Enter qualifying distributions fro	om Part XII, line 4			8	107,050.
	If line 8 is equal to or greater to Part VI instructions	han line 7, check the box in Part VI,	line 1b, and complete that p	art using a	1% tax rate. See	

7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV

8 a Enter the states to which the foundation reports or with which it is registered (see instructions)

N/A

b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G? If 'No,' attach explanation*

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

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

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X

8 b

9

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.)

4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

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Form 990-PF (2012) THE MCMAHAN FAMILY				22425	Page 6
Part VII-B Statements Regarding Activiti		4720 May Be Req	uired (continued)	- 1	
5 a During the year did the foundation pay or incu(1) Carry on propaganda, or otherwise attempt	•	n (section 4945(e))?	Yes	∢No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra		1 4955), or to carry	∏ Yes ∑	o o o o o o o o o o o o o o o o o o o	
(3) Provide a grant to an individual for travel,	_	•		No No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	ganization described actions)	Yes	☑ No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio			Yes	∏ No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to o a current notice regard	qualify under the excep ding disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistanc	ce check here	▶ [100
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A Yes	No No	
If 'Yes,' attach the statement required by Reg	ulations section 53 4945	5-5(d)			
6 a Did the foundation, during the year, receive an on a personal benefit contract?			∐Yes ∑	X No	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b	X
7 a At any time during the tax year, was the found	dation a narty to a prob	ibited tay shelter transs	ection? Dvec 5	X No	
b If 'Yes,' did the foundation receive any procee				N/A 7b	
Part VIII Information About Officers, D				117 11 ' ~	
and Contractors	,,	· ouriadion mana	90.5,gy . a.a	_ p.oycos,	,
1 List all officers, directors, trustees, foundation	on managers and their o	compensation (see inst	ructions).		
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense	account.
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	owances ´
LYNN B. MCMAHAN	President	0.	0.		0.
16 CHANDELEUR POINT	0				
HATTIESBURG, MS 39402					
BRYAN MCMAHAN		0.	0.		0.
1420S 28TH AVENUE	0				
HATTIESBURG, MS 39402					
KATHERINE MCMAHAN WALKER		0.	0.		0.
16 CHANDELEUR POINT HATTIESBURG, MS 39402	0				
SHAWN B. MCMAHAN	-	0.	0.		0.
16 CHANDELEUR POINT	0				
HATTIESBURG, MS 39402					
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none, enter 'NON	E.'	
(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		
None			compensation	-	
			· · · · · · · · · · · · · · · · · · ·		
				1	
				1	
				 	
					•
Total number of other employees paid over \$50,000				>	0
BAA	TEEA0306L 1	2/25/12	 -	Form 990-	PF (201 <u>2)</u>

Form !	990-PF (2012) THE MCMAHAN FAMILY CHARITABLE FOUNDATION 75-302 VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	2425 Page 7 mployees,
3 F	ive 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	0
Part	X-A Summary of Direct Charitable Activities	
List the organiza	foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of itions and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
	N/A	
2 -		
3		
٠.		
-		
4 .		
-		
Part	Summary of Program-Related Investments (see instructions)	
Descri	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	17/2	
-	<u>N/A</u>	
2		
-		
All ot	her program-related investments. See instructions	
3		
-		
Total.	Add lines 1 through 3	0.
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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.

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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	* * * * * * * * * * * * * * * * * * *	**************************************	,	43,368.
2 Undistributed income, if any, as of the end of 2012	in the state of th			
a Enter amount for 2011 only			0.	
b Total for prior years 20, 20, 20		0.	****	The state of the s
3 Excess distributions carryover, if any, to 2012:				
a From 2007 276, 194. b From 2008 53, 482.	af "	34,1, 344		
b From 2008 53, 482. c From 2009 166, 556.		. in 40		
d From 2010 27, 678.				
e From 2011. 34, 296.			* * * * * * * * * * * * * * * * * * *	
f Total of lines 3a through e	558,206.			
4 Qualifying distributions for 2012 from Part				
XII, line 4 ► \$ 107,050.				
a Applied to 2011, but not more than line 2a	, , , , ,		0.	
 Applied to undistributed income of prior years (Election required — see instructions) 		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0		وَالْمُونِ الْمُؤْلِدُ اللَّهِ	
d Applied to 2012 distributable amount			18.35	43,368.
e Remaining amount distributed out of corpus	63,682.	14 14	. (4.3)	
5 Excess distributions carryover applied to 2012	0.	28 8 30 4 11 20 2		0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:	601 000			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	621,888.	ξ	,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b Prior years' undistributed income Subtract line 4b from line 2b		0.	R Ma Maria.	
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency	3"			
has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount — see instructions		0.	Mora	
	· · · · · · · · · · · · · · · · · · ·		* 13.35	
 Undistributed income for 2011. Subtract line 4a from line 2a Taxable amount — see instructions 			0.	
f Undistributed income for 2012 Subtract lines	**		*,	
4d and 5 from line 1. This amount must be				
distributed in 2013 7 Amounts treated as distributions out of			` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	0.
corpus to satisfy requirements imposed				,
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.		* * * * * * * * * * * * * * * * * * * *	**, , , , , , , , , , , , , , , , , , ,
			<u> </u>	ă
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	276,194.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	345,694.			
10 Analysis of line 9:	·	he.	· 李燮	7里 2
a Excess from 2008 53, 482.	STATES OF THE STATES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the s	
b Excess from 2009 166, 556.		1		
c Excess from 2010 27, 678.]	,	- 10 mm	
d Excess from 2011 34, 296.			the court	
e Excess from 2012 63, 682.		,	1 3	
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Part XIV. Private Operating Foundat				9)	N/A
1 a If the foundation has received a ruling or dete is effective for 2012, enter the date of the	rmination letter that				***
b Check box to indicate whether the foundat	-	rating foundation o	described in section	4942(j)(3) or	4942(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 each year listed	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
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					
 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					
 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 th	e year – see in	structions.)			
Information Regarding Foundation Managers of the foundation who have close of any tax year (but only if they have	e contributed more t	nan 2% of the total o than \$5,000). (See	contributions received e section 507(d)(2))	by the foundation bef	ore the
None					
b List any managers of the foundation who own	10% or more of the	stock of a corporati	on (or an equally large	portion of the owner	ship of
a partnership or other entity) of which the None	foundation has a 1	0% or greater inte	rest	•	·
2 Information Regarding Contribution, Gran	nt. Gift, Loan, Scho	olarship, etc. Progr	rams:		
Check here X if the foundation only marequests for funds If the foundation make complete items 2a, b, c, and d.	ikes contributions to	preselected charitat	ole organizations and o		
a The name, address, and telephone number o	r e-mail of the perso	n to whom application	ons should be address	ed:	
b The form in which applications should be	submitted and info	rmation and materi	als they should inclu	de	
c Any submission deadlines			-		.,
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charit	able fields, kinds of i	nstitutions, or other	factors:

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3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	it	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	CONTINUUTO	
a Paid during the year				
See Statement 5				
•				
Total		<u></u>	► 3a	107,050.
b Approved for future payment			1	
			1	
				1
Total			▶ 31	

Part XVI-A Analysis of Income-Producing Activities

Ente	r gross amounts unless otherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(e)
1	Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
ā						
ŀ	D					
•	·					
(<u> </u>					
•	<u> </u>					
1	<u> </u>					
ç	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	3,987.	
4	Dividends and interest from securities			14	32,917.	
5	Net rental income or (loss) from real estate	7.38				
ā	a Debt-financed property					
ı	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					25,732.
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory			-		
11	Other revenue	,			,, ,,, ,,	
;	a	[
- 1	b					
	c					
(d					
,	e					
12	Subtotal Add columns (b), (d), and (e)			17.3	36,904.	25,732.
13	Total. Add line 12, columns (b), (d), and (e)			<u> </u>	13	62,636.
(See	e worksheet in line 13 instructions to verify calculate	ions)				

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

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

Yes No

Form 990-PF (2012) THE MCMAHAN FAMILY CHARITABLE FOUNDATION 75-3022425 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

describerelating a Transfe (1) Cas (2) Other tr (1) Sal (2) Pur (3) Rer (4) Rei (5) Loa (6) Per c Sharing d If the all	ed in section 501(c) to political organizations from the reporting the research from the reporting the research from the reporting the research from the reporting the research from the resea	of the Code (otherwise) g foundation to a ncharitable exerum a noncharital pment, or other ements es s or membershi nent, mailing list above is 'Yes,' of	p or fundraising solicitation is, other assets, or paid emonitoring scheme reporting foundation.	organizations) ganization of us nployees. edule Columr e foundation re	o (r in section 5	ays show the fair	1a (1) 1a (2) 1b (1) 1b (2) 1b (3) 1b (4) 1b (5) 1b (6) 1c market value of	X X X X X X
			low in column (d) the value			· · · · · · · · · · · · · · · · · · ·		
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable exempt organization	n (d)	Description of trans	sfers, transactions, an	1 sharing arrangeme	nts
N/A			<u></u>					
		 						
		 						
		 						
				_		· · · · · ·		
								
		<u> </u>					<u>_</u>	
							<u>.</u>	
			-	_				
describ	oundation directly or in red in section 501(c) ' complete the follow	of the Code (ot	with, or related to, one or m her than section 501(c)(3))	ore tax-exemp or in section	t organizations 527?		Yes [ΧΝο
(a	a) Name of organiza	tion	(b) Type of organiz	ation	(c)	Description of re	lationship	
N/A								
								
Under	penalties of perjuny I decla	are that I have exami	ned this return, including accompany	ying schedules and	d statements, and to	the best of my knowled	lge and belief, it is tr	ue,
Sign Here	t, and complete Seclaratio	n of preparer (other t	han taxpayer) is based on all inform	iation of which pre	parer has any knowl	~ Male	May the IRS di this return with preparer show	n the n below
Sign	nature of officer or trustee		Date	Ti	tle U		X Yes	No
	Print/Type preparer	nount)	A Breparer's sugnature	,	1/3/12	Check X if	PTIN	
Paid	BARON W THA	MES, CPA			410110	self-employed	P0054547	1
Preparer	Firm's game	MCARTHUR T	HAMES SLAY AND DE	EWS PLLC		Firm's EIN F 64-	0720697	
Use Only	- '	PO BOX 153						
]	HATTIESBUR				Phone no (60	1) 264-242	:3
BAA -							Form 990-PF	

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

Section: Solic Solic Section: Solic	Name of the organization		Employer identification number
Section: Solic Solic Section: Solic	THE MCMAHAN FAMILY CHARITABLE	FOUNDATION	75-3022425
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 \$4947(a)(1) nonexempt charitable trust treated as a private foundation \$4947(a)(1) nonexempt charitable trust treated as a private foundation \$4947(a)(1) nonexempt charitable trust treated as a private foundation \$501(c)(3) taxable private foundation \$501(c)(3)	Organization type (check one)		
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527 political organization	Form 990 or 990-EZ	501(c)() (enter number) organization	
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	meet the filing requirements of Schedule B (Fo	rm 990, 990-EZ, or 990-PF)	
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Schedule	B *(Form 990, 990-EZ, or 990-PF) (2012)	Page	1 of 1 of Part 1
, ,	MAHAN. FAMILY CHARITABLE FOUNDATION	1	r identification number 022425
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	j	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	DR. LYNN MCMAHAN 16 CHANDELEUR POINT HATTIESBURG, MS 39402	\$ <u>114,828.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution Part II if there is
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution Part II if there is
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)

1 of Part II

Name of organization
THE MCMAHAN FAMILY CHARITABLE FOUNDATION

Employer identification number

75-3022425

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	2800 SHARES WELLS FARGO ADVTG GWTH FUND		-
		\$ 114,828.	12/31/12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	Į.
\A		Schedule B (Form 990, 990-FZ	

1 of Part III

Name of organization
THE MCMAHAN FAMILY CHARITABLE FOUNDATION

Employer identification number

75-3022425

Part III	Exclusively reli	igious, charitable, et	tc, individual contrib	butions to section 501(d	;)(7), (8) or (10)
	organizations t	that total more than	\$1,000 for the year.	Complete columns (a) through (e	and the following line entry

organizations that total more than \$1,000 for the year. Complete columns (a) throfor organizations completing Part III, enter total of exclusively religious, charitable, etc, contributions of \$1,000 or less for the year. (Enter this information once See instructions.) Use duplicate copies of Part III if additional space is needed.

►\$ N/A

	Use duplicate copies of Part III if additional	space is needed.		<u></u>
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	N/A			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ntionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee

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THE MCMAHAN FAMILY CHARITABLE FOUNDATION

75-3022425

Statement 1	
Form 990-PF, Part I, Line 16I	b
Accounting Fees	

						(a) enses <u>Books</u>	(b) Net Investment Income		(c) justed <u>Income</u>	(d) Charital Purpose	
MCARTHUR,	THAMES,	SLAY	& DEW	S Total	\$ \$	1,650. 1,650.	\$ 0	<u>\$</u>	0.	\$	0.

Statement 2 Form 990-PF, Part I, Line 18 Taxes

		(a) Expenses per Books	(b) Net Investment <u>Income</u>	(c) Adjusted <u>Net Income</u>	(d) Charitable <u>Purposes</u>
FEDERAL EXCISE TAX	Total	\$ 750. \$ 750.	\$ 750. \$ 750.	<u>\$ 0.</u>	<u>\$ 0.</u>

Statement 3 Form 990-PF, Part I, Line 23 Other Expenses

		_ (a)	_ (b) Net	(c)	(d)
		Expenses per_Books_	Investment Income	Adjusted Net Income	Charitable Purposes
		ber_books_	тисоше	Net Income	<u>ruiposes</u>
INVESTMENT FEES		\$ 5,807.	\$ 5,807.		
	Total	<u>\$ 5,807.</u>	\$ 5,807.	\$ 0.	\$ 0.

Statement 4 Form 990-PF, Part IV, Line 1 Capital Gains and Losses for Tax on Investment Income

					(b)	How (c	c) Date	(d) Date
Item		(a) Des	cription		Acqu	iredAc	cquired	Sold
1	37.9510 PI	ONEER FUNDA	MENTAL		Purch	ased	Various	7/31/2012
2	500 CHUBB				Purch	ıased	Various	3/29/2012
3	300 EXXON				Purch	ased	Various	7/31/2012
4	3000 GENER	RAL ELECTRIC	;		Purch	ased	Various	3/29/2012
5	400 ISHARE	S TR BARCLA	AYS		Purch	ased	Various	7/31/2012
6	3962.562 I	VY HIGH INC	CM FUND		Purch	ased	Various	12/21/2012
7	2294.257 F	IONEER FUNI	DAMENTAL		Purch	ased	Various	7/31/2012
8	360 PROCTE	R & GAMBLE			Purch	ased	Various	7/31/2012
9	500 SCHW US BRD MKT				Purch	ıased	Various	7/31/2012
	(-)	(5)	()	(1-)	/23	(-)	(1-)	(1)
	(e)	(f)	(g)	(h)	(i)	(j)	_ (k)	(1)
_	Gross	Deprec.	Cost	Gain	FMV	Adj. Bas.	Excess	Gain
Tt⊖m	Sales	Allowed	Racic	(Loss)	12/31/69	12/31/69	(i)-(i)	(1,088)

	(e)	(I)	(g)	(h)	(i)	(j)	(K)	(T)
	Gross	Deprec.	Cost	Gain	FMV	Adj. Bas.	Excess	Gain
<u> Item</u>	Sales	<u> Allowed</u>	<u>Basis</u>	(Loss)	12/31/69	12/31/69	(i) - (j)	 (Loss)
1	693.		796.	-103.				\$ -103.
2	34,330.		24,875.	9,455.				9,455.
	•		•					

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THE MCMAHAN FAMILY CHARITABLE FOUNDATION

75-3022425

Statement 4 (continued)
Form 990-PF, Part IV, Line 1
Capital Gains and Losses for Tax on Investment Income

	(e) Gross	(f) Deprec.	(g) Cost	(h) Gain	(i) FMV	(j) Adj. Bas.	(k) Excess	(1) Gain
Item	Sales	Allowed	Basis	(Loss)	12/31/69	12/31/69	(i) - (i)	(Loss)
7 CCIII .	26,080.	VITOMER	23,517.	2,563.	14/31/05	14/31/03		\$ 2,563.
2								
4	59,622.		47,100.	12,522.				12,522.
5	45,447.		40,799.	4,648.				4,648.
6	33,840.		33,119.	721.				721.
7	41,916.		48,115.	-6,199.				-6,199.
8	23,265.		21,942.	1,323.				1,323.
9	16,550.		15,748.	802.				802.
							Total	\$ 25,732.

Statement 5 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	<u>Amount</u>
USM FOUNDATION 118 COLLEGE DRIVE #5210 HATTIESBURG, MS 39406	NONE	N/A	GENERAL CHARITABLE PURPOSE	\$ 1,000.
PINE BURR AREA COUNCIL BOY SCOUTS 1318 HARDY STREET HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	10,000.
SOUTH CENTRAL MISSISSIPPI RED CROSS 606 HUTCHINSON AVENUE HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	10,000.
ABBIE ROGERS CIVITAN CAMP HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	1,000.
PINK RIBBON FUND HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	5,000.
GREATOR ANTIOCH CHURCH 305 MAMIE STREET HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	500.
CHRISTIAN SERVICES 301 E 2ND STREET HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	10,400.

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THE MCMAHAN FAMILY CHARITABLE FOUNDATION

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Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
SALVATION ARMY - BOYS AND GIRLS CLUB 5670 US HWY 49 HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	\$ 10,000.
GO RED HEART FUND/AMERICAN HEART ASSN HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	1,250.
SOUTHERN MISS ATHLETIC FOUNDATION HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	2,500.
GIRL SCOUTS OF THE GULF PINES COUNCIL 500 HUTCHINSON AVE HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	250.
HATTIESBURG CIVIC LIGHT OPERA PO BOX 16762 HATTIESBURG, MS 39404	NONE	N/A	GENERAL CHARITABLE PURPOSE	650.
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 THIRD AVENUE NEW YORK, NY 10017	NONE	N/A	GENERAL CHARITABLE PURPOSE	250.
LEUKEMIA & LYMPHOMA SOCIETY - PALM BEACH 4360 NORHTLAKE BLVD SUITE 109 PALM BEACH GARDENS, FL 33410	NONE	N/A	GENERAL CHARITABLE PURPOSE	2,600.
ST THOMAS CATHOLIC CHURCH 3117 W 4TH STREET HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	200.
FORREST GENERAL HEALTHCARE FOUNDATION PO BOX 19010 HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	200.
HILL COUNTRY RIDE FOR AIDS PO BOX 49097 AUSTIN, TX 78765	NONE	N/A	GENERAL CHARITABLE PURPOSE	500.
PRINCETON JEWISH CENTER 435 NASSAU STREET PRINCETON, NJ 08540	NONE	N/A	GENERAL CHARITABLE PURPOSE	250.

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THE MCMAHAN FAMILY CHARITABLE FOUNDATION

75-3022425

107,050.

Total 🕏

Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	. <u>-</u>	_Amount
PRESBYTERIAN CHRISTIAN SCHOOL 103 WSF TATUM DRIVE HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE	\$	500.
THE FAMILY YMCA 3719 VETERANS MEMORIAL DRIVE HATTIESBURG, MS 39401	NONE	N/A	GENERAL CHARITABLE PURPOSE		50,000.

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545 1709

If you 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 extention 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 II (on page 2 of this form)

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

Part I	Automatic 3-Month Extension of Time. Only submit original (no c	opies needed).
A corporation	n required to file Form 990-T and requesting an automatic 6-month extension $-{ m c}$	heck this box and complete Part I only.
All other cor income tax i	porations (including 1120-C filers), partnerships, REMICs, and trusts must use Foi eturns	rm 7004 to request an extension of time to file
		Enter filer's identifying number, see instructions
	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
Type or print	THE MCMAHAN FAMILY CHARITABLE FOUNDATION	75-3022425
File by the due date for filing your return See instructions	Number, street, and room or suite number. If a P O box, see instructions 1420 SOUTH 28TH AVENUE City, town or post office, state, and ZIP code. For a foreign address, see instructions HATTIESBURG, MS 39402	Social security number (SSN)

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 (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

orm 990-T (trust other than above)	06	Form 8870		12
The books are in the care of ► <u>DR. LYNN MCMAHAN</u>				
Telephone No ► 601-296-0633				_
If the organization does not have an office or place of bus	siness in th	e United States, check this box		▶
If this is for a Group Return, enter the organization's four	digit Group	Exemption Number (GEN) . If t	his is for the whole	group,
check this box If it is for part of the group, c	heck this b	ox Pand attach a list with the nam	nes and EINs of all	members
the extension is for				
1 I request an automatic 3-month (6 months for a corporation	required to	ile Form 990-T) extension of time		
until 8/15 , 20 13 , to file the exempt orgather. The extension is for the organization's return for ➤ X calendar year 20 12 or ➤ tax year beginning , 20 2 If the tax year entered in line 1 is for less than 12 mont Change in accounting period	, and endir	ng, 20	al return	
3 a If this application is for Form 990-BL, 990-PF, 990-T, 47 nonrefundable credits. See instructions	720, or 6069	, enter the tentative tax, less any	3a \$	1,122.
b If this application is for Form 990-PF, 990-T, 4720, or 60 payments made include any prior year overpayment all			3 b \$	0.
c Balance due. Subtract line 3b from line 3a Include your EFTPS (Electronic Federal Tax Payment System) See	r payment v	with this form, if required, by using	3c \$	1,122.

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