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

Do not enter Social Security numbers on this form as it may be made public.

Int	ernal	Reven	ue Service	▶ Information ab	out Form 990-PF	and its separate	instr	ructions is	at www.ir	s.gov/form990pf.	Open to Public Inspection
F					and ending						
	Name	of fou	ndation						A Emplo	yer identification number	
									0~		
_				AMILY FOUNDA		<u>c.                                    </u>				-4003704	
				mber if mail is not delivered to DTTOM DRIVE	street address)		Roc	om/suite	•	none number (see instructions 3 – 3 6 4 – 9 7 1 6	·)
_				Intry, and ZIP or foreign postal	code				6/6	3-304-9/10	
	-	LU'			A 30096				C If exen	nption application is pending,	check here
G			all that apply	Initial return	<del></del>	rn of a former publ	ıc ch	arıtv	<b>D</b> 1 Fo	reign organizations, check he	re 🕨 🗍
_				Final return	Amended	•		··- <b>·</b>		reign organizations meeting th	_
				Address change	Name cha	inge				% test, check here and attach	
_ H	Ch	eck t	vne of organization	on X Section 501(c)					E If priva	ite foundation status was term	
Ë	٦			exempt charitable trust		le private foundation	n			n 507(b)(1)(A), check here	inated under
 I			ket value of all as		counting method		Accr	ual	F If the f	oundation is in a 60-month tei	·mination
<u>ග</u>			ear (from Part II,		Other (specify)		1001	uu.		section 507(b)(1)(B), check h	.
Ö				025,714 (Part I		be on cash hasis )					_
CANNED	Pai			evenue and Expenses		(a) Revenue and					(d) Disbursements
Ź		•	amounts in columns	s (b), (c), and (d) may not nece		expenses per books	Ì	(b) Net inv		(c) Adjusted net income	for chantable purposes
Щ_			<del></del>	mn (a) (see instructions) )			_				(cash basis only)
<b>O</b>		1		s, grants, etc , received (att		2,7	00				
Œ	-	2	_	the foundation is not requi		37.7	~		37 700	27 700	
$\overline{C}$	İ	3		ngs and temporary cas	n investments	37,7 47,8	_		37,709 47,815	37,709 47,815	
		4		nterest from securities		47,0	13	,	47,613	47,613	
ಆ	_	5a b	Gross rents Net rental incom	no or (loss)			$\dashv$				
2014	<u>≅</u>	6a		sale of assets not on line 10		69,3	87				
4	je	b	Gross sales price for a		752,085	<del></del>	-				
	Kevenue	7		income (from Part IV,					69,387		
•	_	8	Net short-term-	and all and	···· <b>,</b>					0	***************************************
	-	9	1 1	ations of							
	ĺ	10a	Income modifica うしいり Gross sales less retu	urns and allowances							
		b	Less Cost of go	oods_sold							
		C	Gross profit တြှ(	ပြန်နီ) (attach schedule)							
		11	•	attach schedule)							
_	-	12	Total. Add lines			157,6	_	1	54,911	85,524	
	S	13	·	of officers, directors, tru	istees, etc.		_0				
	nses	14		e salaries and wages			$\dashv$				· · · · · · · · · · · · · · · · · · ·
		15 16a	Legal fees (atta	employee benefits			_				
L	ן נַבֿ	b	-	s (attach schedule)	STMT 1	7,7	70				
_	<u>ĕ</u>	c	-	I fees (attach schedule)	STMT 2	19,4	_		19,479		
•	<u> </u>	17	Interest	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			12		12	· · · · · · · · · · · · · · · · · · ·	
	12	18		edule) (see instructions)	STMT 3	3,3	14				
•		19	•	ch schedule) and depletion							
•	틸	20	Occupancy								
•	<u>ح</u>	21	Travel, conferer	nces, and meetings							
	ا <u>م</u>	22	Printing and put	blications							
	ם	23	Other expenses (att. se	sch)	STMT 4	1,8	70				
;		24		g and administrative e	xpenses.						
	Operating and Administrative Expe		Add lines 13 thr	=		32,4			19,491	0	0
(	5	25	Contributions, gifts, gra	•		103,3	_				103,347
_	-	26		and disbursements. Add	lines 24 and 25	135,7	92		19,491	0	103,347
		27	Subtract line 26		iahumama-4-	31.0	,				
		a h		ue over expenses and d		21,8	19	1	35,420		***************************************
		b		t income (if negative, ent	•				33,420	85,524	<del></del>
_		<u> </u>	Aujustea net in	ncome (if negative, ent	EI -U-)	L		<u> </u>		65,324	

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2013)

20-4003704 Form 990-PF (2013) STINCHCOMB FAMILY FOUNDATION. INC. Page 2 Beginning of year End of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Part II (a) Book Value (b) Book Value (c) Fair Market Value 175,102 127,232 1 Cash - non-interest-bearing 127,232 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ 4 Pledges receivable ▶ Less allowance for doubtful accounts ▶ 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (att. schedule) 0 Less allowance for doubtful accounts ▶ Inventories for sale or use Prepaid expenses and deferred charges 10a Investments – U S and state government obligations (attach schedule) STMT 588,503 471,240 466,334 SEE 6 1,519,566 1,733,634 2,092,913 b Investments - corporate stock (attach schedule) 7 Investments - corporate bonds (attach schedule) SEE STMT 377,692 332,257 339,235 c 11 Investments - land, buildings, and equipment basis Less accumulated depreciation (attach sch.) 12 Investments - mortgage loans 13 Investments - other (attach schedule) 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 2,660,863 2,664,363 3,025,714 instructions Also, see page 1, item I) 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 ) 0 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Net Assets or Fund Balances Unrestricted 24 25 Temporanly restricted 26 Permanently restricted X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 2,664,363 2,660,863 29 Retained earnings, accumulated income, endowment, or other funds 2,660,863 2,664,363 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see 2,660,863 2,664,363 instructions) Analysis of Changes in Net Assets or Fund Balances Part III

:	Artin Analysis of Offanges in Net Assets of Faria 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	2,660,863
2	Enter amount from Part I, line 27a	2	21,819
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	2,682,682
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 8	5	18,319
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	2,664,363

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

Form 990-PF (2013)

143,518

103,347

7

7 Add lines 5 and 6

Part VI instructions

Enter qualifying distributions from Part XII, line 4

Form	1 990-PF (2013) STINCHCOMB FAMILY FOUNDATION, INC. 20-4003/04			<u> </u>	age <b>4</b>
Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	,			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)				
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check				<u>708</u>
	here ▶ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	ļ			0
3	Add lines 1 and 2	ļ		2,	<u>708</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	ļ			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	ļ		2,	708
6	Credits/Payments:	]			
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 1,150				
b	Exempt foreign organizations – tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d 6d	1			
7	Total credits and payments. Add lines 6a through 6d			1,	<u> 150</u>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <b>X</b> if Form 2220 is attached 8				<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			1,	<u> 563</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11				
<u>P</u>	art VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		<u> </u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		1b		X
	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				
С	Did the foundation file Form 1120-POL for this year?		1c		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 ▶ \$				
е	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?		2		X
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	/-	4a		_X_
b	·	N/A	4b		<del></del>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	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		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	GA				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ا ا	٠,	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"		ايا		37
4.0	complete Part XIV		9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		40		v
	names and addresses 11/15 INT 24 FTP 46 TOT 1,6		10	n PF	(2013)
	TT/ TMT	· · · · ·	omn <b>J</b> S	U-1 F	(2013)

	990-PF (2013) STINCHCOMB FAMILY FOUNDATION, INC. 20-4003704			P	age <b>5</b>
Pa	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified				
	person had advisory privileges? If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	L
	Website address ► N/A				_
14	The books are in care of ▶ ALAN K. CLARK  Telephone no ▶ 4	04-2	52-	220	8
	90 WEST WIEUCA ROAD SUITE 100	00041			
45		30342	_		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	1			<b>▶</b>
46	and enter the amount of tax-exempt interest received or accrued during the year  At any time during selection was 2012, did the foundation base or interest as a constant of the selection of the	L		<b>.</b> .	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority		۱ ۵۰	Yes	No X
	over a bank, securities, or other financial account in a foreign country?		16		<u> </u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign country ▶				
P:	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>		L
	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):			163	110
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes	No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?	No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?				
	(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)?	No	]		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	_	1		
	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 )	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)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗒			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that				
	were not corrected before the first day of the tax year beginning in 2013?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).				
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and	_			
	6e, Part XIII) for tax year(s) beginning before 2013?	No	-		
	If "Yes," list the years ▶ 20 , 20 , 20				
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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	· / ·	.		
		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here				
20	Did the foundation hold more than a 20/ direct or indirect interest in any hydrogen antermore				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	ก 👡			
<b>L</b>		No			
b	If "Yes," did it have excess business holdings in 2013 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 2013.)	N/A	2.	1	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	-1/ -	3b 4a		X
+a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		a		
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?		4b		X
	The state of the s	F	om 99	0-PF	
		•			(===,0)

	990:PF (2013) STINCHCOMB I			003704			Page 0
Pa	irt VII-B Statements Regardi	ng Activities for Which Forn	<u>n 4720 May Be R</u>	equired (cont	inued)		
5a	During the year did the foundation pay o					1	
	(1) Carry on propaganda, or otherwise a			<b></b> \	∕es 🏋 No		
	(2) Influence the outcome of any specific		or to carry on,	П.	. 🗫		
	directly or indirectly, any voter regist			<u> </u>	res X No		
	(3) Provide a grant to an individual for tr			\	res 🗓 No		
	(4) Provide a grant to an organization of		on described in		. 🖘		
	section 509(a)(1), (2), or (3), or section			<b>'</b>	res 🔀 No		
	(5) Provide for any purpose other than r		, or educational		, <del>.</del> .		
	purposes, or for the prevention of cr	•		_	res 🛚 X No		
b	If any answer is "Yes" to 5a(1)–(5), did a	•	-		N/A		
	Regulations section 53.4945 or in a curr			•	N/A	5b	
	Organizations relying on a current notice						
С	If the answer is "Yes" to question 5a(4),	•	from the tax	N/A 🗌	/aa □ Na │		
	because it maintained expenditure response.			N/A	res 🔝 No		
c -	If "Yes," attach the statement required b						
6a	Did the foundation, during the year, rece	eive any funds, directly or indirectly, to	pay premiums		res 🕱 No		
L	on a personal benefit contract?	promiumo directly or indirectly on a	norcenal benefit centr		res 🔀 No	6b	х
þ	Did the foundation, during the year, pay If "Yes" to 6b, file Form 8870.	premiums, directly or indirectly, on a	personal benefit contr	acti		OD	
7-	At any time during the tax year, was the	foundation a party to a prohibited tay	shelter transaction?		res X No	ļ	
	If "Yes," did the foundation receive any p				N/A	7b	İ
		ficers, Directors, Trustees, I					
•	and Contractors	, 2,,,,, .		g,g <b>,</b>		,	
1 1	List all officers, directors, trustees, fou	ndation managers and their compe	nsation (see instruc	tions).			
			(b) Title, and average	(c) Compensation	(d) Contributions to		
	(a) Name and a	address	hours per week	(If not paid,	employee benefit plans and deferred		ense account, allowances
			devoted to position	enter -0-)	compensation	0.00	
MA	ATTHEW D. STINCHCOMB	DULUTH	PT PRESIDENT			·	
37	798 SWEET BOTTOM DRIVE	GA 30096	5.00	0	0		0
JE	ENNY STINCHCOMB	DULUTH	PT DIRECTOR				
37	798 SWEET BOTTOM DRIVE	GA 30096	1.00	0	0		0
JC	ONATHAN STINCHCOMB	FORT WALTON BEACH	PT DIRECTOR		i		
11	14 SANTA ROSA BLVD	FL 32548	5.00	0	0		0
AI	LLISON STINCHCOMB	FORT WALTON BEACH	PT DIRECTOR				
	114 SANTA ROSA BLVD	FL 32548	1.00	<u> </u>	0		0
2	Compensation of five highest-paid er	nployees (other than those include	d on line 1 – see ins	tructions). If non	e, enter		
	"NONE."		<sub>T</sub>	<del>-</del>	T .::0	Τ	
	AND Advantage of the second and the		(b) Title, and average	(-) Componention	(d) Contributions to employee benefit	(e) Expe	ense account,
	(a) Name and address of each employee	paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other	allowances
		<u> </u>			Compensation		
NC	ONE				ļ		
				<del>                                     </del>	1		
				}			
				<u> </u>	1		
					İ		
Tota	I number of other employees paid over \$	50,000	1		<del></del>	<u> </u>	T 0
			.=		F	om 990	0-PF (2013

Form 990•PF (20	013) STINCHCOMB FAMILY FOUNDATION, INC	20-4003704	Р
Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)		
3 Five high	est-paid independent contractors for professional services (see instr	uctions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensat
NONE			
Total number of	others receiving over \$50,000 for professional services		<b>&gt;</b>
Part IX-A	Summary of Direct Charitable Activities		
	is four largest direct chantable activities during the tax year. Include relevant statistical information other beneficianes served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instr	uctions)	
Describe the two la	argest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-r	related investments. See instructions		

Form 990-PF (2013)

Total. Add lines 1 through 3

	990-PF (2013) STINCHCOMB FAMILY FOUNDATION, INC. 20-4003704		Page 8
Pa	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreig	n found	dations,
	see instructions.)	······	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		0 550 450
а	Average monthly fair market value of securities	1a	2,773,152
þ	Average of monthly cash balances	1b	148,776
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2,921,928
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		_
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,921,928
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see		
	instructions)	4	43,829
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,878,099
6	Minimum investment return. Enter 5% of line 5	6	143,905
Pa	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	143,905
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013 (This does not include the tax from Part VI )		
С	Add lines 2a and 2b	2c	2,708 141,197
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	141,197
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	141,197
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	141,197
	A VB O - U.S. do - Distable Alice - (and instructions)		- <del></del>
	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	103,347
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.,	1 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	103,347
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	103,347

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

86B					
	n 990-PF (2013) STINCHCOMB FAMILY FOUND art XIII Undistributed Income (see instructions)	ATION, INC.	20-400370	4	Page \$
	Ordistributed moonie (see moudetions)	(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part XI,	Corpus	Years pnor to 2012	2012	2013
	line 7				141,197
2	Undistributed income, if any, as of the end of 2013:				
а	Enter amount for 2012 only				
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2013:		-		
а	From 2008				
b	From 2009		1		
C	From 2010 208		1		
d	From 2011		1		
е	From 2012		1		
f	Total of lines 3a through e	208			***************************************
4	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$ 103,347		1		
а	Applied to 2012, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2013 distributable amount				103,347
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013	208			208
	(If an amount appears in column (d), the same		1		
	amount must be shown in column (a) )				
6	Enter the net total of each column as		1		
	indicated below:				
а	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 2012 Subtract line

4a from line 2a Taxable amount - see instructions

f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)

Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)

Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a

10	Ana	lvsis	of	line	9:

a Excess from	n 2009
---------------	--------

Excess from 2010

Excess from 2011

Excess from 2012

Excess from 2013

	-	37,642
<u> </u>		

Form 990-PF (2013)

Grants and Contributions Paid During the		Future Payment	<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	reuplent		
a Paid during the year				
SEE STATEMENT 10				
				103,34
				105,54
			1	
			}	
			]	
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	103,3
b Approved for future payment				
N/A				
1				
		}		
		1		
Total		<u> </u>	▶ 3b	• -

Enter gross amo	ounts unless otherwise indicated.	Unrelated	business income	Excluded by	section 512, 513, or 514	(6)
1 Program se	Drice tenegrie.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
_				† †		
		_	<del></del>			<del></del>
						<u> </u>
f	<del>-</del>					
g Fees an	nd contracts from government agencies					
	dues and assessments				-	
3 Interest on s	savings and temporary cash investments			14	37,709	
4 Dividends a	nd interest from securities			14	47,815	
5 Net rental in	ncome or (loss) from real estate					
a Debt-fin	anced property		<del></del>			
<b>b</b> Not deb	t-financed property		<del></del>			···
6 Net rental in	ncome or (loss) from personal property					<u></u>
7 Other invest	tment income			<u> </u>		
•	s) from sales of assets other than inventory			18	69,387	
	or (loss) from special events		<u> </u>	<del> </del>		
	or (loss) from sales of inventory					
	nue. a	_				- h.
		_				· -
		- <del> </del>	<del></del>	-		<del></del>
				<del> </del>		
e	dd aalumaa (h) (d) aad (a)	_		0	154,911	0
	dd columns (b), (d), and (e) line 12, columns (b), (d), and (e)	L		<u> </u>	134,911	154,911
	in line 13 instructions to verify calculations.)				13	134,911
Part XVI-B		Accomplishme	nt of Exempt	Purposes		
Line No.	Explain below how each activity for which incor				ed importantly to the	
▼	accomplishment of the foundation's exempt pu					ons )
N/A						
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		<del></del>				

ADCOCK AND COMPANY LLI

30342

90 W WIEUCA RD. SUITE 100

ATLANTA, GA

P00038578

58-0979080

404-252-2208

PTIN

Firm's EIN ▶

Phone no

Check

Paid

Preparer

Use Only

ALAN K. CLARK

Firm's name ▶

Firm's address ▶

(11)(12)

(13)

(14)

(15)

## 6786B Capital Gains and Losses for Tax on Investment Income 990-PF 2013 Form For calendar year 2013, or tax year beginning and ending Name **Employer Identification Number** STINCHCOMB FAMILY FOUNDATION, INC. 20-4003704 (a) List and describe the kind(s) of property sold, e.g., real estate, 2-story bnck 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 ) AMERICAN CAPITAL WORLD BD F2 P **VARIOUS** 04/04/13 (1) P AMERICAN INTM BD FD OF AMER F2 **VARIOUS** 02/28/13 (2)(3) BB&T CORP P 08/30/12 03/14/13 CATERPILLER FINL P 06/26/12 04/04/13 (4) FHLMC P **VARIOUS** VARIOUS (5)**FNMA** P 03/20/13 **VARIOUS** (6)HSBC HOLDINGS PLC P 03/14/13 04/04/13 (7)P 09/14/12 PEPSICO INC 02/27/13 (8)P 02/27/13 TIME WARNER CABLE **VARIOUS** (9)US TREASURY NOTE P (10)**VARIOUS VARIOUS** VERIZON WIRELESS P **VARIOUS** 11/06/13 (11)P 01/14/13 (12)WELLS FARGO COMPANY 04/04/13 **VARIOUS** AMERICAN EXPRESS P **VARIOUS** AT&T INC P **VARIOUS VARIOUS** BB&T CORP P 04/29/10 03/14/13 (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) 43,070 42,290 780 (1)58,307 59,454 1,147 (2)1,091 1,082 9 (3)5,099 5,034 (4)65 18,734 18,831 97 (5)36,066 36,046 20 (6)4,348 4,283 65 <u>(7)</u> 25,085 25,101 -16 (8)22,670 24,125 -1,455(9) 40,331 40,928 -597 (10)4,041 4,042 -1 (11)5,294 5,322 28 (12)23,183 22,671 512 (13)2,001 23,956 21,955 (14)(15)24,011 22,030 1,981 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus I (k), but not less than -0-) Or Losses (from col. (h)) (i) FMV as of 12/31/69 (k) Excess of col (i) over col (j), if any (j) Adjusted basis as of 12/31/69 780 (1)147 (2) 9 (3) 65 (4)97 (5) 20 (6)65 (7)-16 (8)-1,455 (9) -597 (10)

-1

28 512

2,001

1,981

Form 990-PF Capital Gains and Losses for Tax on Investment Income
For calendar year 2013, or tax year beginning and ending

Name Employer Identification Number

STINCHCOMB FAMILY FOUNDATION, INC. 20-4003704

	TINGHOOD TILLET TOOKDATION, INC.		20 4003	7704
	(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story bnck 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 )
(1)	COMCAST CORP	P	04/07/10	04/04/13
(2)	ENTERPRISE PRODUC	P	02/01/12	VARIOUS
(3)	FHLMC	P	VARIOUS	VARIOUS
(4)	FNMA	P	VARIOUS	VARIOUS
(5)	GECC	P	02/09/11	VARIOUS
(6)	GOLDMAN SACHS	P	VARIOUS	VARIOUS
(7)	JP MORGAN CHASE	P	01/19/11	04/04/13
(8)	MERRILL LYNCH	P	05/31/11	VARIOUS
(9)	PETROBRAS INTL CO	P	02/14/12	04/04/13
(10)	TIME WARNER INC	P	10/13/11	04/04/13
(11)	US TREASURY NOTE	P	VARIOUS	VARIOUS
(12)	VERIZON WIRELESS	P	04/07/10	VARIOUS
(13)	WACHOVIA CORP	P	VARIOUS	01/14/13
(14)	MORGAN STANLEY ACCT 105608			
(15)	MORGAN STANLEY ACCT 121762			

(e) Gross sales pno	e	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sale	sis le	(h) Gain or (loss) (e) plus (f) minus (g)
5,5	974		5	,008	966
5,4	469		5	,175	294
) 61,	157		59	,778	1,379
60,	145		57	,148	2,997
5,	750		5	,037	713
26,	707		23	,880	2,827
6,	711		5	,885	826
9,3	383		8	,718	665
	155		4	,025	130
o) <b>5</b> , (	696		5	,272	424
1) 129,8	852		127	,122	2,730
2) 20,	317		20	,169	148
3) 24,	533		23	,559	974
16,2	297				16,297
5) 33,	381				33,381

Complete only for assets shown	ng gain in column (h) and owned by the	e foundation on 12/31/69	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) <b>Or</b> Losses (from col. (h))
(1)			966
(2)			294
(3)			1,379
(4)			2,997
(5)			713
(6)			2,827
(7)			826
(8)			665
(9)			130
(10)			424
(11)			2,730
(12)			148
(13)			974
(14)			16,297
(15)			33,381

6786B Stinchcomb Family Foundation, Inc.

20-4003704 FYE: 12/31/2013

**Federal Statements** 

Fees
ccounting
16b - A
, Line
Part I,
990-PF,
- Form
Statement 1
<b>U</b> )

Description		Total	Net Investment	Adjusted Net	Charitable Purpose
ACCOUNTING / TAX FEES		7,770	S	vs.	\$
TOTAL	w	7,770	ο 0	\$	o   o

# Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees

			•	Net	Adjusted	Charitable
Description		Total	<u>ב</u>	/estment	Net	Purpose
MORGAN STANLEY ACCT 105608	<b>پ</b>	6,647	₩.	6,647	٧٠	‹
MORGAN STANLEY ACCT 121742		5,187		5,187		
MORGAN STANLEY ACCT 121762		7,645		7,645		
TOTAL	w.	19,479	φ.	19,479	\$	\$

## Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

			Net	<u>et</u>	Adjusted	Charitable
Description		Total	Inves	Investment	Net	Purpose
TAXES & LICENSES	\sqrt{v}	2,467	‹›		€S-	<b>‹</b> ›
FOREIGN TAXES		289				
FOREIGN TAXES		558				
TOTAL	φ.	3,314	\$	0	\$	\$

6786B Stinchcomb Family Foundation, Inc. 20-4003704 FYE: 12/31/2013

## Federal Statements

Fair Market Value	\$ 2,092,913
Basis of Valuation	COST
End of Year	\$ 1,733,634 \$ 1,733,634
Beginning of Year	\$ 1,519,566 \$ 1,519,566
Description	MUTUAL FUNDS TOTAL

Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Fair Market Value	\$ 339,235	\$ 339,235
Basis of Valuation	COST	
End of Year	332,257	332,257
,	δ	ςς.
Beginning of Year	377,692	377, 692
ш .		ς, I
Description	CORPORATE BONDS	TOTAL

Statement 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

6786B Stinchcomb Family Foundation, Inc. Federal Statements 20-4003704 FYE: 12/31/2013 Statement 8 - Form 990-PF, Part III, Line 5 - Other Decreases Description Amount 18,319 ADJUSTMENT 18,319 TOTAL Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000 Name of Manager Amount JONATHAN STINCHCOMB TOTAL Form 990-PF, Part XV, Line 1b - Managers Who Own 10% or More Stock Name of Manager **Amount** NONE TOTAL Statement 9 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents Description LETTER TO MR. STINCHCOMB EXPLAINING THE PURPOSE OF THE GRANT AND NATURE OF THE APPLICANT'S ORGANIZATION Form 990-PF, Part XV, Line 2c - Submission Deadlines Description NONE Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description NONE

6786B Stinchcomb Family Foundation, Inc.

20-4003704 FYE: 12/31/2013

## Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	<b>A</b>	Address			
Address	Relationship	Status	!	Purpose	Amount
ASHER FOUNDATION	2312 TWIN (	IN OAKS PLACE			;
MONROE GA 30656	;	PUBLIC	OPERATING GRANT	GRANT	0.9
BOYS & GIRLS CLUBS OF ALBANY	P.O. BOX 1130	.30			i I
ALBANY GA 31702		PUBLIC	OPERATING	GRANT	0/
CHILDREN'S TUMOR FOUNDATION	95 PINE ST	ST 16TH FLOOR			
NEW YORK NY 10005-1703		PUBLIC	OPERATING GRANT	GRANT	2,000
GEORGIA ENGLISH BULLDOG RESCUE	PO BOX 1097	7			
WINDER GA 30680		PUBLIC	OPERATING	GRANT	1,800
GEORGIA TRANSPLANT FOUNDATION	3125 PRESII	ESIDENTIAL PKWY			
ATLANTA GA 30340		PUBLIC	OPERATING	GRANT	27,750
NG3 ORGANIZATION INC	2880 CALLIE STILL	STILL RD			
LAWRENCEVILLE GA 30045		PUBLIC	OPERATING GRANT	GRANT	6,000
GRAYSON UNITED METHODIST CHURCH	555 GRAYSON PKWY	1 PKWY			
GRAYSON GA 30017		PUBLIC	OPERATING	GRANT	57,832
GWINNETT CHILDREN'S SHELTER	3850 TUGGL	GGLE RD NE			
BUFORD GA 30519		PUBLIC	OPERATING	GRANT	420
HUDSON FAMILY FOUNDATION	300 N. DEAN	<b>DEAN RD ST 5 #163</b>	53		
AUBURN AL 36830		PUBLIC	OPERATING GRANT	GRANT	1,000
PARKWAY BAPTIST CHURCH	5975 STATE BRIDGE	BRIDGE RD			
DULUTH GA 30097		PUBLIC	OPERATING GRANT	GRANT	3,090
PARKVIEW TOUCHDOWN CLUB	P.O. BOX 2515	515			
LILBURN GA 30048		PUBLIC	OPERATING	GRANT	100
PERIMETER CHURCH	9500 MEDLOCK BRIDGE	XK BRIDGE RD			
JOHNS CREEK GA 30097		PUBLIC	OPERATING GRANT	GRANT	225
TOTAL					103,347

6786B Stinchcomb Family Foundation, Inc. **Federal Statements** 20-4003704 FYE: 12/31/2013 **Direct Public Support** Noncash Cash Contribution Contributor Contribution VARIOUS CONTRIBUTORS 2,700 2,700 0 TOTAL Taxable Interest on Investments US Unrelated **Exclusion Postal** Business Code Code Code Obs (\$ or %) Description Amount 29,829 MORGAN STANLEY ACCT 121742 14 14 MORGAN STANLEY ACCT 121742 7,880 37,709 TOTAL **Taxable Dividends from Securities Exclusion Postal** US Unrelated Obs (\$ or %) Business Code Code Code Description Amount MORGAN STANLEY 105608 26,489 14 MORGAN STANLEY 113261 14 21,318 14 MORGAN STANLEY 121762 MORGAN STANLEY 159556 3 14 47,815 TOTAL

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Form 8868 (I	Rev. 1-2014)						Page 2
• If you are	e filing for an Additional (Not Automatic) 3-Month Ex	tension, co	omplete only Part II and check	this box			▶ X
Note. Only c	omplete Part II if you have already been granted an au	stomatic 3-m	nonth extension on a previously	y filed Form 8	868.		
• If you are	e filing for an Automatic 3-Month Extension, comple	te only Par	t I (on page 1)				
Part II	Additional (Not Automatic) 3-Month Ex	ctension	of Time. Only file the original	ginal (no co	pies	needed).	
			En	ter filer's ide	ntifyir	ng number, s	ee instructions
Type or				Employer ide	yer identification number (EIN) or		
print							
Cita builde	STINCHCOMB FAMILY FOUNDAT	rion,	INC.	20-400	<u> 370</u>	4	<del></del>
File by the due date for	Number, street, and room or suite no. If a P.O. box	c, see instru	ctions.	Social securi	ty nun	nber (SSN)	
filing your	3798 SWEET BOTTOM DRIVE						
return See	City, town or post office, state, and ZIP code For a	-					
instructions	DULUTH GA	30096	<u>5</u>				
Enter the Re	turn code for the return that this application is for (file a	a separate a	pplication for each return)				04
Applicatio	n	Return	Application				Return
ls For		Code	ls For				Code
Form 990 c	or Form 990-EZ	01					
Form 990-l	BL	02	Form 1041-A				08
Form 4720	(individual)	03	Form 4720 (other than indiv	idual)			09
Form 990-I	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
4 I reque 5 For cal 6 If the ta Ch 7 State II ADD	group, check this box  If it is for part frames and EINs of all members the extension is for  est an additional 3-month extension of time until  endar year 2013, or other tax year beginning ax year entered in line 5 is for less than 12 months, che ange in accounting period and detail why you need the extension  ITIONAL TIME IS REQUESTED  ACCURATE RETURN.	/15/14 eck reason:	, and ending Initial return Fina			RE A CO	)MPLETE
8a If this a	application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, ente	er the tentative tax, less any				
	undable credits See instructions. application is for Form 990-PF, 990-T, 4720, or 6069, e	enter any rot	fundable credits and		8a	\$	0
	ted tax payments made. Include any prior year overpa	•		ļ			
	t paid previously with Form 8868.	,c.iii aliow	ou us a orden and any	ŀ	8b	\$	0
	ce due. Subtract line 8b from line 8a. Include your pay	ment with th	us form if required by using F	FTPS	<del></del> -		
	onic Federal Tax Payment System) See instructions.				8c	\$	0
		ation mu	st be completed for Pa	rt II only.			
	nes of perjury, I declare that I have examined this form and belief, it is true, correct, and complete, and that I are			statements, ar	nd to t	·	
Signature	Heather S. 74 annor	Ti	tle PA			Date -	7-28-14
							3868 (Rev 1-2014)

(Rev January 2014)

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

File a separate application for each return.

Department of the I Internal Revenue S		► Information about Fo	orm 8868 and	its instructions is at www.i	rs.gov/form88	J68.			
		tomatic 3-Month Extension, comp	lete only Part	I and check this box				<u>.</u>	▶ X
		Iditional (Not Automatic) 3-Month			2 of this form)	).			
Do not compl	lete Part II uni	less you have already been granted	an automatic	3-month extension on a previ	ously filed Forr	n 8868	3		
Electronic fili	na (o filo). Vo	u can electronically file Form 8868 if	f you pood a 3	month automatic autonoica c	of time to file /F	mont	ha far		
	•	Form 990-T), or an additional (not a	•						
		n of time to file any of the forms liste							
		ated With Certain Personal Benefit C		· · · · · · · · · · · · · · · · · · ·			1		
		ls on the electronic filing of this form	· ·		•		fits		
Part I		c 3-Month Extension of Tim				<u>Unpro</u>	110	<del></del> ,	
		Form 990-T and requesting an auto							
Part I only				•					▶ 🗍
•	orations (includ	ling 1120-C filers), partnerships, REI	MICs, and trus	ts must use Form 7004 to red	uest an exten	sion of	f tıme		٠ ـــا
to file income	•	71.1	,						
				E	nter filer's ide	ntifyir	ng num	ıber, see ir	nstructions
Туре ог	Name of exe	empt organization or other filer, see i	nstructions		Employer ide		_		
print									
STINCHCOMB FAMILY FOUNDATION, INC. 20-4003704									
File by the	Number, str	eet, and room or suite no If a P O b	ox, see instruc	ctions	Social securi	ty nun	nber (S	SN)	
due date for	3798 S	WEET BOTTOM DRIVE							
filing your return See	City, town o	r post office, state, and ZIP code Fo							
instructions	DULUTH	[G	A 30096	5					
Enter the Retu	irn code for the	e return that this application is for (fil	e a separate a	polication for each return)					04
			<del></del>	···	-				
Application	i		Return	Application					Return
<u>Is For</u>						Code			
	Form 990 or Form 990-EZ 01 Form 990-T (corporation)						07		
	Form 990-BL 02 Form 1041-A					08			
Form 4720 (individual)  503 Form 4720 (other than individual)						09			
Form 990-PF 04 Form 5227					10				
Form 990-T (sec 401(a) or 408(a) trust)         05         Form 6069           Form 990-T (trust other than above)         06         Form 8870					11 12				
FOIII 990-1	(tiust other th	SMITH, ADCOCK & COM							12
		90 WEST WIEUCA ROAD	•						
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THE BOOKS !									
Telephone	No ▶ 40	4-252-2208	FAX No	<b>▶</b> 404-255-084	1				
•		not have an office or place of busine	ess in the Unite	ed States, check this box					▶ □
_		urn, enter the organization's four dig			If this	IS			
for the whole	group, check t	his box 🕨 📗 If it is for part	of the group,	check this box	and attach				
a list with the	names and El	Ns of all members the extension is fo	or						
		3-month (6 months for a corporatio		·				_	
until 0	8/15/14	, to file the exempt organization re	turn for the or	ganization named above. The	e extension is				
	organization's i								
► X	calendar year								
. $\square$									
	tax year begin	<del>-</del>	•						
	-	in line 1 is for less than 12 months,	check reason	Initial return I Fi	nal return				
	hange in acco					<del></del>			<del></del>
		r Forms 990-BL, 990-PF, 990-T, 472	20, or 6069, en	ter the tentative tax, less any		ایا			^
		. See instructions	20	- Constitution of the state of		3a	\$		0
	. •	r Forms 990-PF, 990-T, 4720, or 600	•				•		^
_		its made Include any prior year over it line 3b from line 3a Include your p	-			3b	<u> </u>		0
c baiance	e due. Subifac	a me oo nom me oa mciude your p	vayınıcını Willi) (f	ns romi, ii required, by using		, I			

EFTPS (Electronic Federal Tax Payment System). See instructions