



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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.  
▶ Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

2013

For calendar year 2013, or tax year beginning

, 2013, and ending

THE SHELBY AND WANDA AMOS FOUNDATION INC  
4245 MILGEN ROAD  
COLUMBUS, GA 31907

A Employer identification number  
20-5801944

B Telephone number (see the instructions)  
706-563-4524

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity  
☐ Final return ☐ Amended return  
☐ Address change ☐ Name change

H Check type of organization ☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, column (c), line 16) ☐ \$  
J Accounting method ☒ Cash ☐ Accrual  
☐ Other (specify) \_\_\_\_\_  
(Part I, column (d) must be on cash basis)

C If exemption application is pending, check here ☐

D 1 Foreign organizations, check here ☐

2 Foreign organizations meeting the 85% test, check here and attach computation ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

## Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

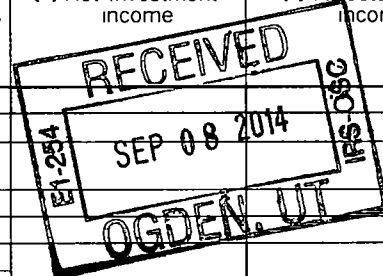
(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

REVENUE	1 Contributions, gifts, grants, etc., received (att sch)	87,459.		
	2 Ck <input type="checkbox"/> if the foundn is not req to att Sch B			
	3 Interest on savings and temporary cash investments			
	4 Dividends and interest from securities			
	5 a Gross rents			
	b Net rental income or (loss)			
	6 a Net gain/(loss) from sale of assets not on line 10	-1.		
	b Gross sales price for all assets on line 6a	84,458.		
	7 Capital gain net income (from Part IV, line 2)		0.	0.
	8 Net short-term capital gain			
	9 Income modifications			
	10 a Gross sales less returns and allowances			
b Less Cost of goods sold				
c Gross profit/(loss) (att sch)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	87,458.	0.	0.	
ADMINISTRATIVE EXPENSES	13 Compensation of officers, directors, trustees, etc	0.		
	14 Other employee salaries and wages			
	15 Pension plans employee benefits			
	16 a Legal fees (attach schedule)			
	b Accounting fees (attach sch) SEE ST 1	725.		
	c Other prof fees (attach sch)			
	17 Interest			
	18 Taxes (attach schedule)(see instrs) SEE STM 2	6.		
	19 Depreciation (attach sch) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
23 Other expenses (attach schedule)				
24 Total operating and administrative expenses. Add lines 13 through 23	731.			
25 Contributions, gifts, grants paid STMT 3	102,330.		102,330.	
26 Total expenses and disbursements. Add lines 24 and 25	103,061.	0.	0.	
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	-15,603.			
b Net investment income (if negative, enter -0-)		0.		
c Adjusted net income (if negative, enter -0-)			0.	



SCANNED SEP 17 2014

ADMINISTRATIVE EXPENSES

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		75,990.	60,387.	
	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				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach sch)				
		Less allowance for doubtful accounts				
	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)				
	LIABILITIES	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)				
12		Investments – mortgage loans				
13		Investments – other (attach schedule)				
14		Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
15		Other assets (describe )				
16		<b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)		75,990.	60,387.	0.
17		Accounts payable and accrued expenses				
18		Grants payable				
NET ASSETS OR FUND BALANCES	19	Deferred revenue				
	20	Loans from officers, directors, trustees, & other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe )				
	23	<b>Total liabilities</b> (add lines 17 through 22)		0.	0.	
		<b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> <input checked="" type="checkbox"/>				
	24	Unrestricted		75,990.	60,387.	
	25	Temporarily restricted				
	26	Permanently restricted				
		<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> <input type="checkbox"/>				
27	Capital stock, trust principal, or current funds					
28	Paid-in or capital surplus, or land, building, and equipment fund					
29	Retained earnings, accumulated income, endowment, or other funds					
30	<b>Total net assets or fund balances</b> (see instructions)		75,990.	60,387.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions)		75,990.	60,387.		

## 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	75,990.
2	Enter amount from Part I, line 27a	2	-15,603.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	60,387.
5	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	60,387.

**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 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	1493 AFLAC	P	6/06/13	6/07/13
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 84,458.		84,459.	-1.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			-1.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>		2	-1.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	<div style="border: 1px solid black; padding: 2px;">           If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-            in Part I, line 8         </div>		3	-1.

**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)

N/A

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

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 (column (b) divided by column (c))
2012			
2011			
2010			
2009			
2008			

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 2013 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	8	

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.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)**

1 a 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 instrs)			
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	0.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (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	0.
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	0.
6 Credits/Payments			
a 2013 estimated tax pmts and 2012 overpayment credited to 2013	6 a		
b Exempt foreign organizations – tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments Add lines 6a through 6d	7		0.
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		0.
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 2014 estimated tax	11		
	Refunded		

**Part VII-A Statements Regarding Activities**

	Yes	No
1 a 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 the instructions for definition)? <i>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</i>		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 \$ 0. (2) On foundation managers \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities</i>		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? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a 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?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		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? <i>If 'Yes,' complete Part II, column (c), and Part XIV</i>	X	
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? <i>If 'No,' attach explanation</i>	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)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

BAA

Form 990-PF (2013)

**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 <u>N/A</u>	13	X	
14	The books are in care of <u>WANDA AMOS</u> Telephone no <u>706-575-0707</u> Located at <u>4245 MILGEN ROAD COLUMBUS GA</u> ZIP + 4 <u>31907</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year <u>N/A</u>	15		N/A
16	At any time during calendar year 2013, 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 <u></u>	16		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
1 a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<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 <u></u>	1 b	N/A
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 2013?	1 c	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))		
a 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? If 'Yes,' list the years <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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 all years listed, answer 'No' and attach statement - see instructions)	2 b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u>20</u> , <u>20</u> , <u>20</u> , <u>20</u>		
3 a 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 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)	3 b	N/A
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	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 2013?	4 b	X

BAA

Form 990-PF (2013)

**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)?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? ☐ 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? ☐ Yes ☒ No

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? ☐ Yes ☒ No**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
JOHN SHELBY AMOS, II P.O. BOX 5365 COLUMBUS, GA 31906	EXECUTIVE DI 0	0.	0.	0.
WANDA J. AMOS P.O. BOX 5365 COLUMBUS, GA 31906	SECRETARY/TR 0	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 X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b> Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b> Average monthly fair market value of securities	<b>1 a</b>	
<b>b</b> Average of monthly cash balances	<b>1 b</b>	
<b>c</b> Fair market value of all other assets (see instructions)	<b>1 c</b>	
<b>d Total</b> (add lines 1a, b, and c)	<b>1 d</b>	0.
<b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1 e</b>	
<b>2</b> Acquisition indebtedness applicable to line 1 assets	<b>2</b>	
<b>3</b> Subtract line 2 from line 1d	<b>3</b>	
<b>4</b> Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	
<b>5 Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	0.
<b>6 Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	0.

**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.)

<b>1</b> Minimum investment return from Part X, line 6		<b>1</b>	
<b>2 a</b> Tax on investment income for 2013 from Part VI, line 5	<b>2 a</b>		
<b>b</b> Income tax for 2013 (This does not include the tax from Part VI)	<b>2 b</b>		
<b>c</b> Add lines 2a and 2b		<b>2 c</b>	
<b>3</b> Distributable amount before adjustments Subtract line 2c from line 1		<b>3</b>	
<b>4</b> Recoveries of amounts treated as qualifying distributions		<b>4</b>	
<b>5</b> Add lines 3 and 4		<b>5</b>	
<b>6</b> Deduction from distributable amount (see instructions)		<b>6</b>	
<b>7 Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1		<b>7</b>	0.

**Part XII Qualifying Distributions** (see instructions)

<b>1</b> Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b> Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	<b>1 a</b>	102,330.
<b>b</b> Program-related investments — total from Part IX-B	<b>1 b</b>	
<b>2</b> Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b> Amounts set aside for specific charitable projects that satisfy the		
<b>a</b> Suitability test (prior IRS approval required)	<b>3 a</b>	
<b>b</b> Cash distribution test (attach the required schedule)	<b>3 b</b>	
<b>4 Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	102,330.
<b>5</b> 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)	<b>5</b>	
<b>6 Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	102,330.

**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 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years 20 __, 20 __, 20 __		0.		
3 Excess distributions carryover, if any, to 2013				
a From 2008	413,127.			
b From 2009	241,565.			
c From 2010	191,721.			
d From 2011	93,461.			
e From 2012	119,331.			
f Total of lines 3a through e	1,059,205.			
4 Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ 102,330.				
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2013 distributable amount				0.
e Remaining amount distributed out of corpus	102,330.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,161,535.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount – see instructions		0.		
e Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount – see instructions			0.	
f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014				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)	0.			
8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)	413,127.			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	748,408.			
10 Analysis of line 9				
a Excess from 2009	241,565.			
b Excess from 2010	191,721.			
c Excess from 2011	93,461.			
d Excess from 2012	119,331.			
e Excess from 2013	102,330.			

N/A

- (4) Gross investment income**

[illegible]

SEE STATEMENT FOR LINE 2A

**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)				
<b>a</b> Paid during the year				
<b>Total</b>			<b>3 a</b>	
<b>b</b> Approved for future payment				
<b>Total</b>			<b>3 b</b>	

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

Enter gross amounts unless otherwise indicated

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) Exclu- sion 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			14		
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					-1.
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)					-1.
13 Total. Add line 12, columns (b), (d), and (e)				13	-1.

(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**

► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**

Name of the organization

THE SHELBY AND WANDA AMOS FOUNDATION INC

Employer identification number

20-5801944

**Organization type** (check one)

**Filers of:**

Form 990 or 990-EZ

**Section:**

- ☐ 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 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA 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) (2013)

Name of organization

Employer identification number

THE SHELBY AND WANDA AMOS FOUNDATION INC

20-5801944

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NATIONAL UNDERWRITERS/SHELBY AMOS 4245 MILGEN ROAD COLUMBUS, GA 31907	\$ 87,459.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)



Employer identification number

20-5801944

## Part II

[illegible]

**BAA**

20-5801944

**organizations that total more than \$1,000 for the year.** Complete columns (a) through (e) and the following line entry

► \$ N/A

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	N/A		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee	
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee	
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee	
-----			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee	

2013

## FEDERAL STATEMENTS

PAGE 1

CLIENT 3064

THE SHELBY AND WANDA AMOS FOUNDATION INC

20-5801944

8/27/14

08 22AM

**STATEMENT 1**  
**FORM 990-PF, PART I, LINE 16B**  
**ACCOUNTING FEES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	\$ 725.			
TOTAL	\$ 725.	\$ 0.	\$ 0.	\$ 0.

**STATEMENT 2**  
**FORM 990-PF, PART I, LINE 18**  
**TAXES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	\$ 6.			
TOTAL	\$ 6.	\$ 0.	\$ 0.	\$ 0.

**STATEMENT 3**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: PUBLIC CHARITY  
 DONEE'S NAME: GIRLS, INC.  
 DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
 ORGANIZATIONAL STATUS OF DONEE:  
 AMOUNT GIVEN: \$ 3,500.

CLASS OF ACTIVITY: PUBLIC CHARITY  
 DONEE'S NAME: CHILDREN'S MIRACLE NETWORK  
 DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
 ORGANIZATIONAL STATUS OF DONEE:  
 AMOUNT GIVEN: 5,000.

CLASS OF ACTIVITY: PUBLIC CHARITY  
 DONEE'S NAME: BROOKSTONE SCHOOL FOUNDATION  
 DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
 ORGANIZATIONAL STATUS OF DONEE:  
 AMOUNT GIVEN: 1,500.

CLASS OF ACTIVITY: PUBLIC CHARITY  
 DONEE'S NAME: CELEBRITY CLASSIC  
 DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
 ORGANIZATIONAL STATUS OF DONEE:

CLIENT 3064

THE SHELBY AND WANDA AMOS FOUNDATION INC

20-5801944

8/27/14

08 22AM

**STATEMENT 3 (CONTINUED)**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 3,000.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: UNITED WAY  
DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 3,000.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: ST FRANCES SOCIETY FOUNDATION  
DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 6,000.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: BOY SCOUTS  
DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: NEIGHBORWORKS  
DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: SPORTS HALL OF FAME  
DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 880.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: ALZHEIMERS ASSOCIATION  
DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 3,900.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: MARCH OF DIMES  
DONEE'S ADDRESS: COLUMBUS, GA

RELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:

CLIENT 3064

THE SHELBY AND WANDA AMOS FOUNDATION INC

20-5801944

8/27/14

08 22AM

**STATEMENT 3 (CONTINUED)  
FORM 990-PF, PART I, LINE 25  
CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 500.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: COLUMBUS REGIONAL FOUNDATION  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 28,000.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: MS GA  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 2,500.CLASS OF ACTIVITY: CHURCH  
DONEE'S NAME: ST LUKE UNITED METHODIST CHURCH  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: HISTORIC COLUMBUS FOUNDATION  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: COMMUNITY FOUNDATION  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: HOPE HARBOUR  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: MEDICAL FUNDRAISER  
DONEE'S NAME: JEREMY WILLIAMS FOUNDATION  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:

CLIENT 3064

THE SHELBY AND WANDA AMOS FOUNDATION INC

20-5801944

8/27/14

08 22AM

**STATEMENT 3 (CONTINUED)  
FORM 990-PF, PART I, LINE 25  
CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 2,000.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: CALLAWAY GARDENS STEEPLECHASE  
DONEE'S ADDRESS: PINE MOUNTAIN, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 6,150.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: THUNDER IN THE VALLEY  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: ALS  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 250.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: FRAT ORDER OF POLICE  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: HOPE FOR A DAY  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: HOUSE OF HEROS  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: KIWANIS CANNONBALL RUN  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:

CLIENT 3064

THE SHELBY AND WANDA AMOS FOUNDATION INC

20-5801944

8/27/14

08 22AM

**STATEMENT 3 (CONTINUED)  
FORM 990-PF, PART I, LINE 25  
CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 750.

CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: PAWS  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: PRESIDENT'S MC  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: AMERICAN RED CROSS  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: BSSOLF  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 2,500.CLASS OF ACTIVITY: CHURCH  
DONEE'S NAME: CALVARY CHURCH  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: SCHOOL  
DONEE'S NAME: CENTRAL HIGH SCHOOL  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 200.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: CRISIS CENTER OF RUSSELL COUNTY  
DONEE'S ADDRESS: PHENIX CITY, ALRELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:

CLIENT 3064

THE SHELBY AND WANDA AMOS FOUNDATION INC

20-5801944

8/27/14

08 22AM

**STATEMENT 3 (CONTINUED)**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 2,000.

CLASS OF ACTIVITY: SCHOOL  
DONEE'S NAME: CSU SCHOLARSHIP FUND  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 3,000.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: DAV  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: CHURCH  
DONEE'S NAME: FIRST BAPTIST CHURCH  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PROGRAM SUPPORT  
DONEE'S NAME: JACK LONG FAMILY FUND  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: MEDICAL FUNDRAISER  
DONEE'S NAME: JOSHUA HARGS FUND  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 6,000.CLASS OF ACTIVITY: MEDICAL FUNDRAISER  
DONEE'S NAME: GOUDIE FAMILY  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: SCHOOL  
DONEE'S NAME: LOUISBURG COLLEGE  
DONEE'S ADDRESS: LOUISBURG, NCRELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:



CLIENT 3064

THE SHELBY AND WANDA AMOS FOUNDATION INC

20-5801944

8/27/14

08 22AM

**STATEMENT 3 (CONTINUED)  
FORM 990-PF, PART I, LINE 25  
CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 200.

CLASS OF ACTIVITY: PROGRAM SUPPORT  
DONEE'S NAME: JACOB FAMILY  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: CHURCH  
DONEE'S NAME: MY CHURCH  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: NOAHS GIFT FUND  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: OPEN DOOR  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PUBLIC CHARITY  
DONEE'S NAME: PINK LADIES FOR BREAST CANCER AWARENESS  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,500.CLASS OF ACTIVITY: PROGRAM SUPPORT  
DONEE'S NAME: REGIONS EMS BANQUET  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: PROGRAM SUPPORT  
DONEE'S NAME: SOLDIER MANHATTAN  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:

2013

## FEDERAL STATEMENTS

PAGE 8

CLIENT 3064

THE SHELBY AND WANDA AMOS FOUNDATION INC

20-5801944

8/27/14

08 22AM

**STATEMENT 3 (CONTINUED)**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

AMOUNT GIVEN: \$ 2,500.

CLASS OF ACTIVITY: MEDICAL FUNDRAISER  
DONEE'S NAME: TONY JONES MEDICAL FUND  
DONEE'S ADDRESS: COLUMBUS, GARELATIONSHIP OF DONEE:  
ORGANIZATIONAL STATUS OF DONEE:  
AMOUNT GIVEN: 1,000.TOTAL \$ 102,330.**STATEMENT 4**  
**FORM 990-PF, PART XV, LINE 2A-D**  
**APPLICATION SUBMISSION INFORMATION**NAME OF GRANT PROGRAM:  
NAME: THE SHELBY & WANDA AMOS FOUNDATION  
CARE OF: WANDA AMOS  
STREET ADDRESS: 4245 MILGEN ROAD  
CITY, STATE, ZIP CODE: COLUMBUS, GA 31907  
TELEPHONE: 706-563-4524  
E-MAIL ADDRESS:  
FORM AND CONTENT: REQUEST BY LETTER INCLUDING ANY INFORMATION REQUESTOR  
DEEMS NECESSARY  
SUBMISSION DEADLINES: N/A  
RESTRICTIONS ON AWARDS: NONE

- 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).

Enter filer's identifying number, see instructions

<b>Type or print</b>  File by the extended due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	THE SHELBY AND WANDA AMOS FOUNDATION INC	20-5801944
	Number, street, and room or suite number. If a P.O. box, see instructions	Social security number (SSN)
	BEHAR, REID, MELTON, BROWN & TAYLOR 2821 HARLEY CT	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	COLUMBUS, GA 31909	

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 (other than individual)	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

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

- The books are in care of ▶ WANDA AMOS  
Telephone No ▶ 706-575-0707 Fax No ▶ \_\_\_\_\_
- 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, 20 14
- 5 For calendar year 2013, or other tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_
- 6 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 TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN.

<b>8a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$	0.
<b>b</b> If this application is for Forms 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 \$	0.
<b>c Balance due.</b> 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 \$	0.

**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 ▶ Quen Melton Title ▶ EXECUTIVE DIRECTORDate ▶ 8-14-14

BAA

FIFZ0502L 12/31/13

Form 8868 (Rev 1-2014)