

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



Form 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning , 2009, and ending G Check all that apply Initial return Initial Return of a former public charity Final return Amended return Address change Name change Name of foundation **Employer identification number** Use the IRS label. GREATER ROME CHAMBER OF COMMERCE FOUNDATION, 03-0383919 Otherwise, Number and street (or P O box number if mail is not delivered to street address) Telephone number (see the instructions) print RIVERSIDE PARKWAY or type. (706) 291-7663 See Specific City or town State ZIP code If exemption application is pending, check here Instructions. ROME GA 30161 1 Foreign organizations, check here eck type of organization X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust 7 Other taxable private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Check type of organization Accounting method: X Cash If private foundation status was terminated Fair market value of all assets at end of year under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other_(specify) If the foundation is in a 60-month termination 96,055. (Part I, column (d) must be pricash basis.) under section 507(b)(1)(B), check here Part Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income income for charitable columns (b), (c), and (d) may not necespurposes sarily equal the amounts in column (a) (cash basis only) (see the instructions).) Contributions, gifts, grants, etc, received (att sch) 5,092. Ck X if the foundn is not reg to att Sch B Interest on savings and temporary cash investments Dividends and interest from securities 118 5a Gross rents b Net rental income or (loss) REVENU 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit/(loss) (att sch) Other income (attach schedule) UNREALIZED GAIN ON INVESTMENTS 20 Total. Add lines 1 through 11 5,230 13 Componsation of officers, directors, trustees, etc. Other employee the law and wages 14 15 Pension plans, employee benefits 16 Depai fees (attach schedule) ADMINISTRAT braccountificues Lattech 2010 250 Š Other prof fees (attach sch) Interestanting 17 30 19 Depreciation (attach sch) and depletion ¥ 20 Occupancy 21 Travel, conferences, and meetings 13,839 22 Printing and publications Other expenses (attach schedule) See Line 23 Stmt 430. Total operating and administrative 14,549. expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 14,549 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -9,319 **b** Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0)

BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

TEEA0301 02/02/10

Form **990-PF** (2009)

Par	FIL	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	50,732.	92,527.	92,527.
	2	Savings and temporary cash investments	132.	220.	220.
	3	Accounts receivable			
		Less allowance for doubtful accounts	1,200.	0.	0.
	4	Pledges receivable			
	_	Less allowance for doubtful accounts	40,000.	0.	0.
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7				
ŝ		Less allowance for doubtful accounts			
A S E T	8	Inventories for sale or use			
Ŧ	9	Prepaid expenses and deferred charges			
S		a Investments — U.S. and state government obligations (attach schedule)			
	I .	b Investments — corporate stock (attach schedule) .	4,157.	4,157.	3,308.
	ŀ	c Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment basis		-	, ,
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans .			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less: accumulated depreciation (attach schedule)			
		Other assets (describe Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)	96,221.	96,904.	96,055.
Ļ	17	Accounts payable and accrued expenses	9,988.	20,010.	
Å	18	Grants payable			
В	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			A STATE OF THE STA
ļ	21	Mortgages and other notes payable (attach schedule)			÷
į E	22	Other liabilities (describe)			
<u> </u>	23	Total liabilities (add lines 17 through 22)	9,988.	20,010.	
		Foundations that follow SFAS 117, check here X and complete lines 24 through 26 and lines 30 and 31.			
N F U T N	24	Unrestricted	86,233.	76,894.	
ŤŇ	25	Temporarily restricted			-4,
D	26	Permanently restricted			
ASSETS		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			\ .
TA	27	Capital stock, trust principal, or current funds			", "
SNC	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E R S	29	Retained earnings, accumulated income, endowment, or other funds			,
RS	30	Total net assets or fund balances (see the instructions)	86,233.	76,894.	• ,
	31	Total liabilities and net assets/fund balances (see the instructions)	96,221.	96,904.	}
Part	HI L	Analysis of Changes in Net Assets or Fund Balance			
1		net assets or fund balances at beginning of year - Part II, colum		e with	
	end-d	of-year figure reported on prior year's return)	in (a), ime 30 (must dyre	e with	86,233.
_		r amount from Part I, line 27a		2	-9,319.
3		increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3		4	76,914.
		ases not included in line 2 (itemize) CUMULATIVE UNRE			20.
<u>6</u>	iotal	net assets or fund balances at end of year (line 4 minus line 5) -	- Part II, column (b), line	9 30 6	76,894.

'Form 990-PF (2009) GREATER ROME CHAMBER OF COMMERCE FOUNDATION, INC

03-0383919 Page 2

Par		Losses for Tax on Investmen					
	(a) List and describ 2-story brick warehou	e the kind(s) of property sold (e.g., r se, or common stock, 200 shares ML	eal estate, .C Company)	(b) How ac P — Purc D — Dona	hase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a							
)	····					
	<u> </u>						
e		T				L	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa			(h) Gain or (e) plus (f) m	
a							
d							
е							
	Complete only for assets show	ing gain in column (h) and owned by	the foundation on 12/31/69			(I) Gains (Coli	ımn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		th	gain minus column (F an -0-) or Losses (fr	(), but not less
a							
							
d	***						
е							
2	Capital gain net income or (net	capital loss).	enter in Part I, line 7 ter -0- in Part I, line 7				
3	Net short-term capital gain or (loss) as defined in sections 1222(5)	 -		2		
•		, , , , , , , , , , , , , , , , , , , ,	··· ¬				
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see the instructions)	If (loss), enter -0-		3		
Par		r Section 4940(e) for Reduce	d Tax on Net Investme	ent Inco			
		foundations subject to the section 4					
					,		
If sec	ction 4940(d)(2) applies, leave th	nis part blank					
Was	the foundation liable for the sec	tion 4942 tax on the distributable am	ount of any year in the base	e period?		Yes	i ; No
If 'Ye	s,' the foundation does not qual	ify under section 4940(e) Do not coi	mplete this part	·		• •	•
1	Enter the appropriate amount is	n each column for each year; see the	e instructions before making	any entri	es.		• • •
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:			(d) Distributior umn (b) divided	
	2008			0.			0.00000
	2007	0.			-		
	2006			-			
	2005						
	2004						
2	Total of line 1, column (d)				2		0.00000
3	Average distribution ratio for th	e 5-year base period – divide the tot has been in existence if less than 5	al on line 2 by 5, or by the		3		0.000000
	•		•				
4	Enter the net value of nonchar	table-use assets for 2009 from Part 2	X, line 5		4		0.
5	Multiply line 4 by line 3				5	_	0.
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7		0.
8	Enter qualifying distributions fro	om Part XII, line 4			8		
	If line 8 is equal to or greater th	nan line 7, check the box in Part VI,	line 1b, and complete that r	art usino	a 1%	tax rate. See th	e
RAA	Part VI instructions.	The state of the s				<u> </u>	~ 000 BE (2000)

	1990-PF (2009) GREATER ROME CHAMBER OF COMMERCE FOUNDATION, INC 03-038391		F	age 4
Par	LVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instruc	ctions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			
	check here ► and enter 1% of Part I, line 27b		,	}
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-)			
3	Add lines 1 and 2		_	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0.
6	Credits/Payments Credits/Payments			
а	2009 estimated tax pmts and 2008 overpayment credited to 2009		,	
b	Exempt foreign organizations – tax withheld at source 6b	' -		- 1
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.	•	΄.	
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here			
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			0.
11	Enter the amount of line 10 to be. Credited to 2010 estimated tax			
Per	VII-A Statements Regarding Activities			
1 a	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?	1 a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			
	(see the instructions for definition)?	1ь		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			لنـــا
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1 c		X
	(1) On the foundation \$\\$\$ (2) On foundation managers \$\\$\$. : 1	
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		J	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	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		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	If 'Yes,' attach the statement required by General Instruction T.	1 1		-]
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.		- 1	
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	1-1		
_	with the state law remain in the governing instrument?	6	<u> </u>	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
Вa	Enter the states to which the foundation reports or with which it is registered (see the instructions)			
_	GA - Georgia		1	
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		Ţ	<u> </u>
_		8Ь	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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV			
		9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10	į	х
BAA		orm 990	-PF (
	•		\	

	990-PF (2009) GREATER ROME CHAMBER OF COMMERCE FOUNDATION, INC	03-0383	3919	Page 5
Par	t VII-A Statements Regarding Activities Continued			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11	х_
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address * WWW . ROMEGA . COM	application?	13	х
14	The books are in care of ► SCOTTY CLARK Telephor	ne no. • _(70	6) 232	-5755
15	Located at ► 1 RIVERSIDE PARKWAY ROME GA ZIP + 4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	30161		
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15		
Par	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)		٤,	a
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X N	lo .	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X N	lo l	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X N	lo .	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X N	lo 🖟	rigi 😘 ,
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X N	lo (* .	
	(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		44	
	of government service, if terminating within 90 days)	Yes X N	lo *-	1 14.2
t	olf 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 the instruction	ons) ²	1 b	
	Organizations relying on a current notice regarding disaster assistance check here	▶□	,	
(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 2009?		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))		jk.	
а	i At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X N	lo	
	If 'Yes,' list the years ▶ 20, 20, 20			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942		15	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(all years listed, answer 'No' and attach statement — see the instructions)	a)(2) to	2b	33
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years b	nere		
	► 20 , 20 , 20 , 20		1 ,	. "
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X N	lo i	
ŧ	of Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation	a.		
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve 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	u	l	
	(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 2009)		3 b	
4=	Did the foundation invest during the year any amount in a manner that would jeopardize its			
70	charitable purposes?		4a	X
Ł	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 2009?		4 b	х
ВДД			Form 00	0-PF (2009)

FORM 990-PF (2009) GREATER ROME CHAMBER				53919 Page 6
Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)	
5a During the year did the foundation pay or incur	•			
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	(section 4945(e))?	∐ Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registra	c election (see section attended)	4955), or to carry	Yes X	No
(3) Provide a grant to an individual for travel,	study, or other similar p	urposes?	Yes X	No .
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	an a charitable, etc, org 4940(d)(2)? (see instru	janization described ctions)	Yes X	No state of the st
(5) Provide for any purpose other than religious educational purposes, or for the prevention	is, charitable, scientific, n of cruelty to children o	literary, or r animals?	Yes X	No S
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regardi	ualify under the exceptions of the control of the c	ons	5b
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ []	
c If the answer is 'Yes' to question 5a(4), does it tax because it maintained expenditure response	ne foundation claim exe libility for the grant?	mption from the	Yes	No
If 'Yes,' attach the statement required by Regu	lations section 53 4945	·5(d)		
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indir	ectly, to pay premiums	Yes X	No
b Did the foundation, during the year, pay premit	ums, directly or indirectl	y, on a personal benefit	contract?	6b X
If 'Yes' to 6b, file Form 8870. 7a At any time during the tax year, was the found.	ation a partir to a probib	utad tay shaltar transact	ion? Yes X	No
b If yes, did the foundation receive any proceeds				7b
Part VIII Information About Officers, D and Contractors				mployees,
1 List all officers, directors, trustees, foundation	n managers and their co	ompensation (see instri	uctions).	
(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
RANDY_QUICK		-		
20 JOHN DAVENPORT DRIVE	DIRECTOR			
ROME GA 30161	1.00	0.	0.	0.
DAVID NEWBY 100 ANDERSON ROAD	DIRECTOR			
ROME GA 30161	1.00	0.	0.	0.
LAMANTE ATTAUD				
2204 SHORTER AVENUE, SUITE 10-225				
ROME GA 30165	1.00	0.	0.	0.
See Information about Officers, Directors, Trustees, Etc.				
		0.	0.	0.
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1— see ins	tructions). If none, ente	er '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				
0			<u> </u>	
0				
0				
0				
Total number of other employees paid over \$50,000	<u> </u>	L	.	None
BAA	TEEA0306 0	07/06/09		Form 990-PF (2009)

.

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highland Contractors (continued)	03-0383919 Pa ly Paid Employees,	ige 7
3 Five highest-paid independent contractors for professional services — (see instructions). If none, enter 'NONE.'		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation	
NONE	(0) 00.11-poi.totalio	
Total number of others receiving over \$50,000 for professional services	► No	one
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses	
1 SUPPORT FOR GREATER ROME CHAMBER OF COMMERCE		
2	14,54	19.
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2. Amount	_
1		
2		
All other program-related investments See instructions 3		
<u> </u>		
Total. Add lines 1 through 3	•	_
BAA	Form 990-PF (2	009)

Forr	990-PF (2009) GREATER ROME CHAMBER OF COMMERCE FOUNDATION, INC	03-0383919	Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this par see instructions.)	t. Foreign founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: A Average monthly fair market value of securities	1 a	
	Average monthly cash balances	1 b	
	c Fair market value of all other assets (see instructions)	16	
	d Total (add lines 1a, b, and c)	1 d	
	Reduction claimed for blockage or other factors reported on lines 1a and 1c	10	
`	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
_			
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here ► ☐ and do not complete this		
1	Minimum investment return from Part X, line 6	1	0.
2	Tax on investment income for 2009 from Part VI, line 5	0.	
1	Income tax for 2009. (This does not include the tax from Part VI.)		
•	Add lines 2a and 2b	2 c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	
ı	Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3a	
ı	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
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	0.

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

BAA

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1	Distributable amount for 2009 from Part XI,	,		***	0.
2	Undistributed income, if any, as of the end of 2009				<u> </u>
i	Enter amount for 2008 only	, , , , , , , , , , , , , , , , , , , ,	,	0.	r t
	• Total for prior years 20, 20, 20			,	
	Excess distributions carryover, if any, to 2009				
	From 2004 0.	ing the state of t			
	From 2005 0.				
	From 2006 0 .				
	From 2007 0				
	Total of lines 3a through e	0.			
	Qualifying distributions for 2009 from Part				
•	XII, line 4 > \$,			
ä	Applied to 2008, but not more than line 2a				
	Applied to undistributed income of prior years	31.			
•	(Election required — see instructions)	24			
•	Treated as distributions out of corpus (Election required see instructions)				
•	Applied to 2009 distributable amount				
•	Remaining amount distributed out of corpus	0.			, · · ·
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same amount must be shown in column (a))	500 L L L L	The way to be a first		
	(-)				
6	Enter the net total of each column as				MAGE STATE
	indicated below:	, , ,			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
t	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			a and a second	
	has been issued, or on which the section				
	4942(a) tax has been previously assessed				
C	Subtract line 6c from line 6b. Taxable				图 经分价格 第
	amount – see instructions		0.		
e	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see instructions	···.		0.	
	Undertwheted and a constant of a constant of the constant of t	-			
ı	Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be		,	`	
	distributed in 2010				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)			t	`
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.		·	
9	Excess distributions carryover to 2010.				,
•	Subtract lines 7 and 8 from line 6a	0.	í		,
	Analysis of line 9				•]
	Excess from 2005 0.				
	Excess from 2006 0.				}
	Excess from 2007 0.				ļ
	Excess from 2008 0.		İ		ļ
<u>e</u>	Excess from 2009 0.				

Form 990-PF (2009) GREATER ROME CHAMBE				03-0383919	Page 10
Part XIV Private Operating Foundation	ons (see instru	ctions and Part	VII-A, question	9)	N/A
1 a If the foundation has received a ruling or do is effective for 2009, enter the date of the r	uling				7
b Check box to indicate whether the foundation		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		:			
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		1			
Supplementary Information assets at any time during th	(Complete this e year – see ir	part only if the structions.)	organization h	ad \$5,000 or more	e in
Information Regarding Foundation Manag a List any managers of the foundation who had close of any tax year (but only if they have NONE	ave contributed mo	ore than 2% of the to than \$5,000) (See s	otal contributions re section 507(d)(2))	ceived by the foundation	on before the
b List any managers of the foundation who o a partnership or other entity) of which the f NONE	wn 10% or more of oundation has a 10	the stock of a corp)% or greater intere	oration (or an equal st.	ly large portion of the	ownership of
2 Information Regarding Contribution, Gran Check here X if the foundation only m requests for funds If the foundation makes complete items 2a, b, c, and d.	akes contributions	to preselected char	ritable organizations		
a The name, address, and telephone number	of the person to w	hom applications sl	hould be addressed		
b The form in which applications should be s	ubmitted and inform	mation and material	s they should includ	e.	
c Any submission deadlines.					, <u></u>
d Any restrictions or limitations on awards, s	uch as by geograp	hical areas, charitat	ole fields, kinds of in	nstitutions, or other fac	tors

TEEA0310 07/06/09

Form **990-PF** (2009)

BAA

'Form 990-PF (2009) GREATER ROME CHAMBER OF COMMERCE FOUNDATION, INC 03-0383919 Page 11 Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or contribution status of recipient Amount Name and address (home or business) a Paid during the year NONE Total 3a **b** Approved for future payment

Total

3ь

Part XVI-A Analysis of Income-Producing Activi
--

er gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	
	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income
Program service revenue			code		(see the instruction
ab	 		+		
· · · · · · · · · · · · · · · · · · ·	 		 		
cd	 		 		
e					
1					
g Fees and contracts from government agencies					
Membership dues and assessments	 				
Interest on savings and temporary cash investments					<u> </u>
Dividends and interest from securities			14	118.	
Net rental income or (loss) from real estate	ļ			, <u>, , , , , , , , , , , , , , , , , , </u>	-
a Debt-financed property			+		-
b Not debt-financed property Net rental income or (loss) from personal property			 		
Other investment income	 		+		
			+		
Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events			 		
Gross profit or (loss) from sales of inventory					
Other revenue					
a		<u> </u>			
b					
	T		T		
	<u> </u>				
С					
cde					
c d e Subtotal Add columns (b), (d), and (e)				118.	
c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				118.	
c d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in the instructions for line 13 to verify cort XVI-B Relationship of Activities to the	e Accomplis			13	11:
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the	e Accomplis			13	11
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the	e Accomplis			13	13
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) . worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the	e Accomplis			13	13
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify catalogue. Relationship of Activities to the	e Accomplis			13	13
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) . worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the	e Accomplis			13	13
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the	e Accomplis			13	11
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify call XVI-B Relationship of Activities to the	e Accomplis			13	11
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify catalogue. Relationship of Activities to the	e Accomplis			13	11
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in the instructions for line 13 to verify columns. Relationship of Activities to the	e Accomplis			13	11

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	Exempt Organ	izations				
descr	ibed in section 501(c) of	f the Code (oth	igage in any of the following with any other organization ner than section 501(c)(3) organizations) or in section 527,		Yes	No
	ng to political organizati		a noncharitable exempt organization of.			
(1) C	, -	iounuation to a	a nonchantable exempt organization of.	1 a (1)		X
• • • •	Other assets			1a (2)		X
	transactions:					
	ales of assets to a none	charitable exer	npt organization	16(1)		Х
(2) P	urchases of assets from	n a noncharitat	ole exempt organization	1 b (2)		X
(3) R	ental of facilities, equip	ment, or other	assets	1 b (3)		X
(4) R	leimbursement arranger	nents		1 b (4)		X
(5) Lo	oans or loan guarantees	5		1 b (5)		<u> </u>
• •		·	p or fundraising solicitations	1b(6)	<u> </u>	<u>X</u>
c Sharii	ng of facilities, equipme	ent, mailing list	s, other assets, or paid employees	1c		Х
the ac	oods other assets or si	ervices aiven t	omplete the following schedule. Column (b) should always show the fair mar by the reporting foundation. If the foundation received less than fair market vi ow in column (d) the value of the goods, other assets, or services received.	ket value alue in	of	
(a) Line no	(b) Amount involved	T	f noncharitable exempt organization (d) Description of transfers, transactions, and s	haring arrar	ngement	s
			-			
	<u> </u>					
	foundation directly or in tibed in section 501(c) or s,' complete the following		ted with, or related to, one or more tax-exempt organizations ner than section 501(c)(3)) or in section 527?	XYes	; 🗌	No
<u> </u>	(a) Name of organization	•	(b) Type of organization (c) Description of rela	tionship		
GREATER	R ROME CHAMBER OF		···			
,						
Under pen complete	alties of perjury, I declare/that Declaration of preparer rother t	L bave examined the	is return, including accompanying schedules and statements, and to the best of my knowledge and buciary) is based on all information of which preparer has any knowledge 8/8/6/0 Prescription	/	Je, corre	ct, and
Sion	ature of officer or trustee	V V 1	Date Title			
i			Date Prepa	rer's Identify	/ing num	ber
Paid Pre-	Preparer's signature	nrefee	M. Bunton AUG 1 1 2010 Check if self. employed -	Signature in	the inst	rs)
parer's Use	Firm's name (or yours if self-		& SLICKMAN, CPA'S, LLP EIN			
Only	employed).	. BOX 161		61 201	. 7 2 1	20
BAA	ZIP code ROME		GA 30162-1614 Phone no ► (70	6) 291		
				Form 99	,U-FF	(といいろ)

Form 990-PF, Page 1, Part I, Line 23

Line 2	23 S	tm	į
--------	------	----	---

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
INSURANCE	351.			
OFFICE SUPPLIES	49.			
INVESTMENT EXPENSE	30.			

Total

430.

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(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
Person X Business AL HODGE 1 RIVERSIDE PARKWAY ROME GA 30161 Person X Business	DIRECTOR 1.00	0.	0.	0.
RON TOMLINSON 2010 REDMOND CIRCLE NW ROME GA 30165 Person X Business HARRY BROCK	DIRECTOR 1.00	0.	0.	0.
412 BROAD STREET SUITE 200 ROME GA 30161 Person X Business MARTIN RHINER	DIRECTOR 1.00	0.	0.	0.
ROME GA 30161 Person X Business EDDIE WILSON	DIRECTOR 1.00	0.	0.	0.
228 N. SECOND AVENUE ROME GA 30161 Person X Business GREG SUMNER	DIRECTOR 1.00	0.	0.	0.
316 BROAD STREET ROME GA 30161 Person X Business	DIRECTOR 1.00	0.	0.	0.

_	_		-
7	_	٠.	_

0. 0. 0

Form **8868**(Rev April 2009)

New April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

				1		
If you are	e filing for an Automatic 3-Month	Extension, complete only Part I and check this box				▶ X
		omatic) 3-Month Extension, complete only Part II (o	n page 2 of this	form)		
		dy been granted an automatic 3-month extension on			368.	
Part I	Automatic 3-Month Extens	ion of Time. Only submit original (no copi	es needed).			
A corporatio	n required to file Form 990-T and	requesting an automatic 6-month extension — check	this box and co	omplete Pa	rt I only	▶ □
All other cor	porations (including 1120-C filers)	, partnerships, REMICS, and trusts must use Form 7			=	to file
ıncome tax ı						
returns note: the additiona Form 990-T	d below (6 months for a corporational (a) the corporational (a) and automatic) 3-month extens	ectronically file Form 8868 if you want a 3-month au on required to file Form 990-T). However, you cannot ion or (2) you file Forms 990-BL, 6069, or 8870, grou y completed and signed page 2 (Part II) of Form 886 e-file for Charities & Nonprofits	t file Form 8868 in returns, or a	delectronica composite	ally if (1) yo or consolid	ou want lated
	Name of Exempt Organization		··· /	Employer ide	entification nur	mber
Type or						
print	GREATER ROME CHAMBER	OF COMMERCE FOUNDATION, INC		03-038	3919	
File by the due date for	Number, street, and room or suite number					
iling your eturn See	1 RIVERSIDE PARKWAY					
nstructions	City, town or post office, state, and ZIP co-	de For a foreign address, see instructions				
	ROME			GA	30161	
Check type	of return to be filed (file a separat	e application for each return)				
Form 99	· -	Form 990-T (corporation)	Form 472	20		
Form 99	0-BL	Form 990-T (section 401(a) or 408(a) trust)	Form 522			
Form 99	o-Ez	Form 990-T (trust other than above)	Form 606			
X Form 99		Form 1041-A	Form 887			
If the orgIf this is check this	panization does not have an office for a Group Return, enter the orga	FAX No ► (706) 232-575 or place of business in the United States, check this inization's four digit Group Exemption Number (GEN the group, check this box ► □ and attach a list wi	s box) If		he whole gi all member	
1 I reque	st an automatic 3-month (6 month	is for a corporation required to file Form 990-T) external	nsion of time			
until <u>7</u>	Aug 16, 20 10_, to file	the exempt organization return for the organization i	named above			
_	tension is for the organization's re	turn for				
M	calendar year 20 <u>09</u> or					
- U	tax year beginning	, 20, and ending, 20				
2 If this t	ax year is for less than 12 months	, check reason:	turn 🔲 C	change in a	ccounting p	eriod
3a If this a nonrefu	application is for Form 990-BL, 99i indable credits. See instructions	0-PF, 990-T, 4720, or 6069, enter the tentative tax, le	ess any	3a \$		0.
b If this a made.	application is for Form 990-PF or 9 Include any prior year overpayme	990-T, enter any refundable credits and estimated ta nt allowed as a credit	x payments	3b \$		0.
deposit See ins	structions	Ba Include your payment with this form, or, if require by using EFTPS (Electronic Federal Tax Payment Sy	vstem) ———————	3c \$		0.
Caution. If you bayment inst	ou are going to make an electroni ructions.	c fund withdrawal with this Form 8868, see Form 845	3-EO and Forn	n 8879-EO	for	
BAA For Pri	vacy Act and Paperwork Reduction	on Act Notice, see instructions		Form	2262 (Pay	4.2000

SAA For Privacy Act and Paperwork Reduction Act Notice, see instructions

Form **8868** (Rev 4-2009)