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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

		t of the Treasury venue Service	N	lote. The foundation i			as a Privat e a copy of this			orting requirements.	2009
For calendar year 2009, or tax year beginning								, and e	nding		
G C	heck	all that apply:		Initial return Amended return		Initi	al return of a fo Address chan	•	charity	Final return)
	the label.		oundation							A Employer identification	number
	erwi		CCART	TY FAMILY	FOU	NDATI	ON INC			20-4766769	
	print	Number and	street (or P	O box number if mail is i	not deliv	ered to stree	t address)		Room/suite	B Telephone number	
	type	12777	AVALO	ON RIDGE P	ARK	WAY #	250			770-447-43	32
See	Spec	ne City or tov		nd ZIP code						C If exemption application is p	
		NORCR								D 1. Foreign organizations	s, check here
H C	_	type of organiz		X Section 501(c)(2 Foreign organizations me check here and attach co	omputation
<u>_</u>				pt charitable trust			private founda			E If private foundation sta	
		arket value of all		end of year J Acco		method:	X Cash	Accr	rual	under section 507(b)(1	• •
-		Part II, col. (c),	line 16)	L , 662 . (Part I,	Othe	er (specify)	t bo on each	hace)		F If the foundation is in a	
Po		Analysis of R								under section 507(b)(1	(d) Disbursements
Pa	rt i	(The total of amonecessarily equi	ounts in colu al the amoun	d Expenses mns (b), (c), and (d) may r its in column (a))	not	(a) Hev expense	enue and es per books		vestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1			ts, etc., received	_		2,500.			N/A	
	2			n is not required to attach Sch	8 -		2 225		2 205		Gm 2 mm 2 mm 1
	3	Interest on saving cash investments			-		3,307.		3,307.	,	STATEMENT 1
	4	Dividends and	interest fro	om securities	-		11.		11,)	STATEMENT 2
		Gross rents			-						
	_ `	Net rental income	–				L3,096.				
£	•	Gross sales price	for all	assets not on line 10 226,058			13,030.				
8	7	assets on line 6a Capital gain net ii	-		'				0.		
gegm.	8	Net short-term							-		
0	9	Income modifi									
JUN	10a	Gross sales less and allowances	returns								
5	b	Less Cost of goo	ods sold								
Ω	C	Gross profit or	(loss)		<u> </u> _						
NE I		Other income			-		7 070		2 210	<u> </u>	
ANNED	12	Total. Add line					-7, <u>278.</u> 0.		3,318. 0.		0.
3	13	•		ectors, trustees, etc			<u> </u>				0.
ס	14 15	Other employe Pension plans,									
es		Legal fees	, citipioyee	Delicino							
ens		Accounting fee	es		_						
Ε̈́		Other professi									
Ve	17	Interest								RECEIVED)
rati	18	Taxes									<u> </u>
nist	19	Depreciation a	nd depletio	n	_				000	MAY 1 8 2010	080-8
<u>a</u> j	20	Occupancy			<u> </u>		•••		-	A WAT TO LOT	
ďρ	21	Travel, confere			-					OCDEN II	
au	22	Printing and p			-				<u>_</u>	OGDEN, U	
ting	23	Other expense		iniatrativa	F						
Operating and Administrative Expenses	24	Total operation expenses. Add	_				0.		0.		0.
o	25	Contributions,			\vdash		44,800.				44,800.
	26	Total expense	-				,				
		Add lines 24 a				4	44,800.		0.	,	44,800.
	27	Subtract line 2		12:							
				ses and disbursements	L	5	52,078.				
	b	Net investmer	nt income (if negative, enter -0-)					3,318.		
	C	Adjusted net i	ncome (if n	egative, enter -0-)						N/A	

Form 990-PF (2009) THE MCCARTY FAMILY FOUNDATION INC					4766769 Page 2
	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
<u></u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	53,270.	4,034.	4,034.
	2	Savings and temporary cash investments	55,037.	47,628.	47,628.
	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			
	İ	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
Ø	8	Inventories for sale or use			
ssets	i i	Prepaid expenses and deferred charges			
Ą	1	Investments - U.S. and state government obligations			
	l l	Investments - corporate stock			
	Į.	Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
	١	Less accumulated depreciation			
	12	Investments - mortgage loans			-
	13	Investments - other STMT 3	146,505.	151,072.	0.
		Land, buildings, and equipment: basis			
	'	Less accumulated depreciation			
	15	Other assets (describe ►			
	'	Other assets (describe >			
	16	Total assets (to be completed by all filers)	254,812.	202,734.	51,662.
_		Accounts payable and accrued expenses	231/0221	20277021	<u> </u>
	18	Grants payable			
,	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ij	21	Mortgages and other notes payable			
:=	1	Other liabilities (describe)			
	22)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
S	24	Unrestricted	254,812.	202,734.	
or Fund Balances	25	Temporarily restricted	234,0121	202,134.	
3ala	1	Permanently restricted			
Ā	26	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
Net Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	1	Retained earnings, accumulated income, endowment, or other funds			
et /	29	· · · · · · · · · · · · · · · · · · ·	254,812.	202,734.	
ž	30	Total net assets or fund balances	234,012.	202,134.	
		Total lightifates and not accept found belongs	254,812.	202,734.	
=	31	Total liabilities and net assets/tund balances		202,134.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
_	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3		ГТ	
ı		t net assets or fund balances at beginning of year - Part II, column (a), line s st agree with end-of-year figure reported on prior year's return)	,	1	254,812.
0	•	ramount from Part I, line 27a		2	52,078 <u>-</u>
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		3	202,734.
		eases not included in line 2 (itemize)		5	0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (h) line 30	6	202,734.
<u>U</u>	TULA	i not assets of june buildings at one of your fine 4 minus line of -1 art if, con			Form 990-PF (2009)

(a) List and desc 2-story brick w	cribe the kind(s) of property sold (arehouse; or common stock, 200	e.g., real estate, shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquir (mo., day, yr.	
1a MORGAN STANLEY	75896			P	VARIOUS	VARIOUS
b						
<u>c</u>			·		-	
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		it or other basis xpense of sale		(h) Gain or (e) plus (f) m	
a 226,058.			239,15	4.		-13,096.
<u>b</u>						
<u>C</u>	<u> </u>					
<u>d</u>						
Complete only for assets show	ng gain in column (h) and owned	by the foundation	on 12/31/69		(I) Gains (Col. (h)	dan minis
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (I)		col. (k), but not les Losses (from	s than -0-) or
	40 01 12/01/00					-13,096.
<u>a</u> b						13,030.
C						
d						
<u>e</u>						
2 Capital gain net income or (net c	•	nter in Part I, line i r -0- in Part I, line	7 7	} 2		-13,096.
3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8. if (loss), enter -0- in Part I, line 8	, column (c).			} 3	N	I/A
Part V Qualification L	Inder Section 4940(e) f	or Reduced	Tax on Net	Investment li	ncome	•
If section 4940(d)(2) applies, leave to Was the foundation liable for the sectif "Yes," the foundation does not quate the appropriate amount in (a)	ction 4942 tax on the distributable hify under section 4940(e). Do not each column for each year; see in	t complete this pa	r <u>t. </u>	S		Yes X No
Base period years Calendar year (or tax year beginn	ing in) Adjusted qualifying	distributions	Net value of no	(c) ncharitable-use asse	ets (col. (l	(d) Distribution ratio D) divided by col. (c))
2008		90,471.		264,05	6.	.342621
2007		58,877.		174,70		.337004
2006		37,000.		<u> 189,56</u>	55.	.195184
2005						
2004		i			- 	
2 Total of line 1, column (d)					2	.874809
3 Average distribution ratio for the	5-year base period - divide the tot	tal on line 2 by 5	or by the number	of years		.074002
the foundation has been in existe	-	tar on mic E by o,	or 53 and mamber	01 yours	3	.291603
	·					
4 Enter the net value of noncharital	ble-use assets for 2009 from Part	X, line 5			4	224,277.
5 Multiply line 4 by line 3					5	65,400.
6 Enter 1% of net investment incor	me (1% of Part I, line 27b)				6	33.
7 Add lines 5 and 6	-			_	7	65,433.
8 Enter qualifying distributions froi	m Part XII, line 4				8	44,800.
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check the box in Part VI, l	line 1b, and comp	lete that part using	a 1% tax rate.	· · · · · · · · · · · · · · · · · · ·	

Page 3

	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	<u>4 / 0 0</u> See ir			ne)
		300 11	300	CHO	13/
ιa	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check here				66.
D	1 1				00.
_	of Part I, line 27b All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
_			_		66.
3	Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4		_		0.
-	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			_	66.
6	Credits/Payments:				00.
	2009 estimated tax payments and 2008 overpayment credited to 2009				
	Exempt foreign organizations - tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868) 6c				
	Backup withholding erroneously withheld 6d				
	Total credits and payments. Add lines 6a through 6d				0.
_	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				<u> </u>
8 9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				66.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				00.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax				
	irt VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
10	any political campaign?	ŀ	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	ŀ	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	ŀ	-10		
	distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?		1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	ŀ	10		
u	(1) On the foundation. \$\(\begin{align*} \text{0.} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
6	managers. > \$ 0.				
9	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.	ŀ			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		х
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	Ì	4a		Х
		/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	′	5		X
J	If "Yes," attach the statement required by General Instruction T.	ŀ			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
Ū	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	ŀ	7	X	
•	If "Yes," complete Part II, col. (c), and Part XV.	Ì	•		
Q.	Enter the states to which the foundation reports or with which it is registered (see instructions)	i			
Ua	GA				
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
O	of each state as required by General Instruction G? If "No," attach explanation		8ь	х	
٨	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	ŀ	70		
9	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	1	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	ŀ	10	_	X
-10	and any personal positing apparental contributors during the tax year. It is a stricture issuit their figures and sourceses	– Form		-PF	

11. Alany time during the year, dut the foundation, desettly or indicately, own a controlled entity within the meaning of section 512(b) (13)? If 'Yes,' attach schodule (see instructions) 2. Duth the foundation acquire a develor of indicated the air any applicable insurance contract before Angust 17, 2008? 3. Duth the foundation comply with the public inspection requirements for its annual returns and examption application? 3. Website address ► N/A 1. The books are in care of ► CELIA MCCARTY 1. The books are included the person of the books are person of the books are included to the books are person of the books are an are the person of the books are an are the books are an are the b		990-PF (2009) THE MCCARTY FAMILY FOUNDATION INC Int Vil-A Statements Regarding Activities (continued)	20-4766	<u>769</u>	F	Page 5
Section 512(b) (13)? If Yes, a taken schedule (see instructions) 2. Did the foundation acquire a direct or indirect inferest in any applicable insurance contract before August 17, 2008? 3. Did the foundation acquire a direct or indirect inferest in any applicable insurance contract before August 17, 2008? 3. Did the foundation comply with the public inspection requirements for it's annual returns and exemption application? 4. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 1. The books are in care of ▶ CELIA MCCARTY 2. Section 4947(a)(1) nonexempt charable brists fling Form 990-PF in leu of Form 1472 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1. The page in the sale or exchange, or lessing of properly with a disqualified person? 2. Borrow money from, lend money for, or inderwese exend creded to (or accept it from) 2. A disqualified person? 3. Funds upones from, lend money for or cerebrate the companies of the control of the second of the second second of the second second of the second secon				— Т	T	
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 14 The books are in care of ▶ CELTA MCCARTY 17 Telephone no. ▶ 770 − 447 − 433 2 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶ 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 ▶30071 − 571,22 Located at ▶4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 →30071 − 571,22 Located at ▶4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 →30071 − 571,22 Located at ▶4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 →30071 − 571,22 Located at ▶4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 →30071 − 571,22 Located at ▶4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP-4 →30071 − 571,22 Located at ▶4995 BARWAY SUITE 250, NORCROSS, GA ZIP-4 →30071 − 571,22 Located at ▶4995 BARWAY SUITE 250, NORCROSS GA ZIP-4 →40071 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470 − 4470	1,1			,,		v
August 17, 2008? Website address > N/A 15 The books are in care of CELIA MCCARTY Telephone no. > 77.0 - 4.47 - 4.3.3 \	10		ļ	-'' -		
13	12			12	ŀ	v
Website address ▶ N/A I The books are in care of ▶ CELIA MCCARTY Telephone no. ▶ 770 – 447 – 4332 Located at ▶ 4995 AVALON RTDGE PARKWAY SUITE 250, NORCROSS, GA 2P-4 ▶ 30071 – 571.2 To Section 4947(a)(1) nonexempt charitable trusts thing form 990-PF in he or Form 1041 - Check here and the new meanum of tax-except the interest received or accrued dumpt he year 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. To Bourng the year did the foundation (either directly or indirectly): To Broad the time of the checked in the "Yes" column, unless an exception applies. To Bourng the year did the foundation (either directly or indirectly): To Broad the time of the checked in the "Yes" column, unless an exception applies. To Bourng the year did the foundation (either directly or indirectly): To Broad the time of the checked in the "Yes" column, unless an exception applies. To Bourng the year did the foundation (either directly or indirectly): To Broad the time of the checked in the "Yes" column, unless an exception applies. To Bourng the year did the foundation (either directly or indirectly): To Broad the time of the checked in the "Yes" column, unless an exception applies. To Broad the Checked in the "Yes" column, unless an exception applies. To Broad the Checked in the State of the	12		ļ	-	v	
14. The books are in care of ▶ CRLIA MCCARTY Coated at ▶ 4.995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA 2 P+4 ▶ 30071-5712	10		l	_ 13	Δ	
Located at \$\insert 4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA 2IP+4 \$\insert 30071-5712 15 Section 4947(a)(1) nonexempt charable trusts filing form 990-PF in lieu of form 1041 - Check here	14		770-44	7-41	132	
15 Section 4947(a)(1) nonexempt charitable trusts lining form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless an exception applies. File Form 4720 if any item is checked in the "Yea" column, unless and exception applies. File Form 4720 if any item is checked in the "Yea" column, unless and item is a disqualified person? File Form 4720 if any item is a disqualified person? File Form 4720 if any item is a disqualified person? File Form 4720 if any item is a disqualified person? File Form 4720 if any item is a disqualified person? File Form 4720 if any item is a disqualified person? File Form 4720 if any item is a disqualified person? File Form 4720 if any item is a disqualified person? File Form 4720 if any item is a disqualified person? File Form 4720 if any item is a disqualified person? File Form 4720 if any item is a disqualified person in a disqualified person and a disqualified person? File Form	14					1 2
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	15		217+4 -30	0/1	<u> </u>	
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b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		before 2009?	s X No			
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statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.						
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		statement - see instructions.)	N/A	2ь		
Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Ves X No	C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2009 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 2009.) N/A 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? 4b X						
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(1) Carry on propaganda, or otherwise attempt to mituence legislation (section 4954(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an organization other than a charitable, etc., organization described in section \$50(e)(1), (2), or (3), or section 4940(q)(2)? (3) Provide a grant to an organization other than a charitable, etc., organization described in section \$50(e)(1), (2), or (3), or section 4940(q)(2)? (4) Provide a grant to an organization other than a charitable, etc., organization described in section \$50(e)(1), (2), or (3), or section 4940(q)(2)? (5) Provide for any purpose other than religious, charitable, socientific, hierary, or educational purposes, or for the prevention of cutelly to children or animals? (5) Provide for any purpose other than religious, charitable, socientific, hierary, or educational purposes, or for the prevention of cutelly to children or animals? (6) Provide for any purpose other than religious, charitable, socientific, hierary, or educational purposes, or for the prevention of cutelly to children or animals? (7) Part (7) Provide (7) Provided (7) Provid		Form 4720 May Be F	Required (contin	ued)		_,
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(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 494(d)(2)? (5) Provide for any purpose other than reliquous, charitable, scientific, literary, or educational purposes, or for the pervention of cruelly to children or animals? If any answer is "set to \$41,150, did any of the transactions fail to qualify under the exceptions described in Regulations section \$5.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "set to question \$640, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section \$5.4945-5(d). If "Yes," attach the statement required by Regulations section \$5.4945-5(d). If "Yes "To 8b, file Form 8870. A lamp that the statement required by Regulations party to a prohibited tax shelter transaction? If "Yes "To 8b, file Form 8870. A lamp that the statement required by Regulation aparty to a prohibited tax shelter transaction? If "Yes "To 8b, file Form 8870. A lamp that the foundation receive any proceeds or have any net income attributable to the transaction? If "Yes a "No B lityes, did the foundation receive any proceeds or have any net income attributable to the transaction? If a lateral officers, directors, Trustees, Foundation Managers, Highly It is all officers, directors, trustees, foundation managers and their compensation. It is all officers, directors, trustees, foundation managers and their compensation. (a) Name and address of each employee paid more than \$50,000 O. CHAIRMAN, TREASURER (b) Title, and average house the state of the party	(2) Influence the outcome of any specific public election (see section 4955); (or to carry on, directly or indire				
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7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 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. (a) Name and address (a) Name and address (b) Tille, and average hours per week devoted for position (if not paid, enter -0-) pos		personal benefit contract?		<u> </u>	6b	<u> </u>
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation.	•				ļ	İ
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. (a) Name and address (b) Title, and average hours get week devaged hours get week devaged enter -0.) (c) Compensation (d) Combulens in employee beefingings account glow of the position of the highest-paid employees (other than those included on line 1). 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) Combulens to a contractors (e) Examples account glow and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Combulens to apply the paid of the property of the property beefing lains and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Combulens to apply the property beefing lains and property beefing and address (e) Examples account glow and property beefing and address (e) Examples account glow and address (e) Examples account glow and property beefing and address (e) Examples account glow and property beefing and address (e) Examples account glow and glow	7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	_		
1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (a) Name and address (b) Tille, and average hours per week devoted to position (l) footpaid, enter-ob- compensation allow CHAIRMAN, TREASURER 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0					<u>7b </u>	
List all officers, directors, trustees, foundation managers and their compensation. List all officers, directors, trustees, foundation managers and their compensation. (b) Title, and average hours per week devoted in position (f) Compensation (f) Compensation (f) (in ot paid, enter -0)	Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	magers, Highl	y		
(a) Name and address (b) Title, and average hours per week devoted to position (e) Compensation allow and address (b) Title, and average hours per week devoted to position (e) Compensation allow allow allow allow allow and address of each employee paid more than \$50,000 (c) Compensation (e) Compensation allow allow allow allow allow allow allow allow and address of each employee paid more than \$50,000 (c) Compensation (d) Compensation (d) Compensation allow	Paid Employees, and Contractors					
(a) Name and address hours per week devoted to position compensation accountable and address hours per week devoted to position accountable and address hours per week devoted to position accountable and address compensation compensation accountable and address compensation accountable and address compensation accountable and address compensation accountable and address compensation accountable and address compensation accountable and address compensation accountable and address compensation accountable and address compensation accountable and accountable and address compensation accountable and accountable and accountable and address compensation accountable and accounta	1 List all officers, directors, trustees, foundation managers and their	T	14.00	l (al) o		
DAVID M MCCARTY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0. CELIA MCCARTY VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0.0. (a) Name and address of each employee (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoted to position NONE (c) Compensation (d) Combustons to employee paid more than \$50,000 Account and address of each employee paid more than \$50,000 NONE	(=) Name and address	(b) Title, and average		employee benefit plans	(e) E	xpense
A995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 CELIA MCCARTY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0. 0. 0. 1.00 0. 0. 0. 1.00 0. 0.	(a) Name and address		enter -0-)	compensation	allov	wances
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VICE CHAIRMAN, SECRETARY 4995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 1.00 0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee tentil plants account allow.	4995 AVALON RIDGE PARKWAY SUITE 250	Ī				
A 3995 AVALON RIDGE PARKWAY SUITE 250 NORCROSS, GA 30071 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average house per week devoted to position (c) Compensation (d) Controbutions to employee beefin pairs and deterred compensation. (e) Examples and deterred compensation.	NORCROSS, GA 30071	1.00	0.	0.	1	0.
A 30071 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutation in the paid entered and deterred compensation and deterred compensation allow.	CELIA MCCARTY	VICE CHAIRMAN	, SECRETA	RY		-
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation compensation (e) Examples and deterred compensation allow.	4995 AVALON RIDGE PARKWAY SUITE 250	1	ľ		1	
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutions to imployee benefit plans account allow.		1.00	0.	0.		0.
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(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deterred compensation (e) Expression (c) Compensation (d) Contributions to employee benefit plans account allows.		-				
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and detered compensation (e) Example 1 (in the compensation of the compensat		-			ł	
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NONE Compensation allow.	2 Compensation of the highest paid employees (other than those me	,	T TONE.	(d) Contributions to	(e) F	xpense
NONE Compensation allow.	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deterred	accou	int, other
	NONTO	devoted to position		compensation	allov	wances
	NONE	-			ł	
						
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		1			ĺ	
Cotal number of other employees paid over \$50,000	Total number of other employees paid over \$50,000	<u> </u>	1		 -	0
Form 990-PF	Seat Harrist of Strict Striptory 2000 paid Stort Googles			Ear-	200-PI	

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Form 990-PF (2009) THE MCCARTY FAMILY FOUNDATION INC	20-4766769	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Management Paid Employees, and Contractors (continued)	gers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service (c) Co	mpensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	such as the Expens	ses
1 N/A		
2		
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amou	nt
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.
	Form 990 -	-PF (2009)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
-	Average monthly fair market value of securities	1a	148,058.
	Average of monthly cash balances	1b	79,634.
	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	227,692.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	227,692.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,415.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	224,277.
6	Minimum investment return. Enter 5% of line 5	6	11,214.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	11,214.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	66.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,148.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,148.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	11,148.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	44,800.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	44,800.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	44,800.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies fo	r the section

Form **990-PF** (2009)

Page 9

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,				
line 7		······································		11,148.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006 30,591.				
d From 2007 50,368.	}			
e From 2008 77, 326.	150 205			
f Total of lines 3a through e	158,285.			
4 Qualifying distributions for 2009 from		,		
Part XII, line 4: ►\$ 44,800.			۱	
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			11 140
d Applied to 2009 distributable amount	22 ([2			11,148.
e Remaining amount distributed out of corpus	33,652.			
5 Excess distributions carryover applied to 2009 (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	191,937.			
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		0		
assessed d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		0.		
		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract			0.	
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)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	191,937.			
10 Analysis of line 9:	<u> </u>			
a Excess from 2005				
b Excess from 2006 30,591.	†	-		-
c Excess from 2007 50,368.				
d Excess from 2008 77,326.				
e Excess from 2009 33, 652.				
E LAGESS HUHI 2003 33,032 •			L	F 000 PE (2000)

Form 990-PF (2009) THE MCC	ARTY FAMILY	FOUNDATION	INC	20-47	66769 Page 10
Part XIV Private Operating F	oundations (see ins	structions and Part VII	-A, question 9)	N/A	
1, a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo			▶		
b Check box to indicate whether the found		ng foundation described in		4942(j)(3) or 49	42(<u>J)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year	41.0000	Prior 3 years	1	
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
at any time during t	he year-see the i	nstructions.)			
Information Regarding Foundation a List any managers of the foundation wh year (but only if they have contributed in SEE STATEMENT 4	o have contributed more		ributions received by the	foundation before the clos	se of any tax
b List any managers of the foundation who ther entity) of which the foundation ha			or an equally large portion	on of the ownership of a pa	artnership or
NONE 2 Information Regarding Contribution	ion Grant Cift I as-	Sobolarobin etc. D-	ograms:		
2 Information Regarding Contribution Check here	only makes contributions t	o preselected charitable o	organizations and does n		
a The name, address, and telephone num	ber of the person to whor	n applications should be	addressed:		
, , , , ,	·	• •			
b The form in which applications should b	e submitted and informat	ion and materials they sh	ould include:		
c Any submission deadlines:	<u> </u>				
d Any restrictions or limitations on awards	s, such as by geographica	ıl areas, charitable fields,	kinds of institutions, or c	other factors;	

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	_			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount			
a Paid duning the year							
	:		!				
SEE STATEMENT 5	<u> </u>		▶ 3a	44,800.			
Total b Approved for future payment			- Julian	44,000.			
NONE							
Total	·		▶ 3b	0.			

Form 990-PF (2009) THE MCCARTY FA	MILY FOU	NDATION INC	<u> </u>	20-4	766769 Page 12
Part XVI-A Analysis of Income-Produ	cing Activitie	es			
Enter gross amounts unless otherwise indicated.	(a)	business income (b)	Excluded b	y section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a b		 	1		
С		-			
d	-		 		
e	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments			\bot		
3 Interest on savings and temporary cash			111	2 207	
investments 4 Dividends and interest from securities			14	3,307.	
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			14	-13,096.	
9 Net income or (loss) from special events		- 			
10 Gross profit or (loss) from sales of inventory 11 Other revenue:					·
a					
b					
c	-		1		
d	-		- - 		
12 Subtotal. Add columns (b), (d), and (e)	-	0		-9,778.	0
13 Total. Add line 12, columns (b), (d), and (e)	•			13	-9,778
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accor	nplishment of E	xempt Pı	ırposes	
Line No. Explain below how each activity for which inc	ome is reported in	column (e) of Part XVI-	A contributed	importantly to the accomp	lishment of
▼ the foundation's exempt purposes (other than					
				<u> </u>	
					
					
					
					

Form **990-PF** (2009)

			CCARTY FAMILY				20-47			ige 13
<u>P</u>	art X\	Information Re Exempt Organ	egarding Transfers ˈ nizations	To and 1	ransactions :	and Relations	hips With Nonch	aritabl	е	
1	Did th		rectly engage in any of the fol	llowing with	any other organizati	on described in sect	ıon 501(c) of		Yes	No
			c)(3) organizations) or in secti				• •			
a	Trans	fers from the reporting found	lation to a noncharitable exem	npt organizat	ion of:			1	1 1	
(1) Cash								1a(1)		X
	• •	ther assets						1a(2)	<u> </u>	X
t		transactions:						1		
		ales of assets to a noncharita	· =					1b(1)		X
	, ,	ental of facilities, equipment,	oncharitable exempt organizati	1011				1b(2)	$\overline{}$	X
	•	eimbursement arrangements						1b(3) 1b(4)		X
		oans or loan guarantees	'					1b(5)		X
		-	embership or fundraising solic	citations				1b(6)		X
C	Sharır	ng of facilities, equipment, ma	ailing lists, other assets, or pai	id employee	s .			1c		Х
d			"Yes," complete the following						sets,	
			foundation. If the foundation r		than fair market val	ue in any transaction	or sharing arrangement	, show in		
	$\overline{}$		other assets, or services rece							
(a)	Line no	(b) Amount involved	(c) Name of nonchar		pt organization	(d) Description	of transfers, transactions, ar	nd sharing a	талдетте	nts
			N/	<u> </u>	• • • • • • • • • • • • • • • • • • • •					
			 							
			 							
										
			ļ							
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				-		- 				
										
2 a	Is the	foundation directly or indirec	tly affiliated with, or related to	o, one or moi	re tax-exempt organ	izations described		 -		
	ın sec	tion 501(c) of the Code (other	r than section 501(c)(3)) or in	section 527	7?			Yes	X] No
Ь	If "Yes	," complete the following sch	edule.			· · · · · · · · · · · · · · · · · · ·				
		(a) Name of org	janization	(b) T	ype of organization		(c) Description of relation	nship		
		N/A				ļ <u>.</u>				
						-				
						 				
1	Under pe	enalties of perjury, I declare that I h	nave examined this return, including	g accompanyır	ng schedules and staten	nents, and to the best of	f my knowledge and belief, it	is true, corre	ect,	
			er than taxpayer or fiduciary) is base							
		Celia M	Carta		5-13-10	N Sec.	retary			
e	Sig	nature of officer or trustee			Date	Title				
agn Here		Preparer's	1: 0	•	1	Date Ch		arer's identif	ying num	ber
힑	무합	signature Fat	une LB	agen	<u>م ا</u>	5-12-10 sel	ployed >			
1	Pai e ar		GROSS COLLINS		•		EIN >			
	Paid Preparer's Use Only		CUMBERLAND E		ARD, # 90	0				_
_		address, and ZIP code ATLA	NTA, GA 3033	39				<u>- 4⁻33 -</u>		
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						ا القال)L14, 01			

FORM 990-PF INTEREST ON SAVINGS AN	ND TEMPORARY C	ASH INVESTMENTS	STATEMENT	1
SOURCE			AMOUNT	
BB&T MORGAN STANLEY	591. 2,716.			
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		3,30)7.
FORM 990-PF DIVIDENDS AND	INTEREST FROM	SECURITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A)
MORGAN STANLEY 075896	11.	0.		11.
TOTAL TO FM 990-PF, PART I, LN 4	11.	0.	:	11.
FORM 990-PF OTHE	ER INVESTMENTS		STATEMENT	3
DESCRIPTION		VALUATION METHOD	BOOK VALU	ΊE
INVESTMENTS - SECURITIES	COST	151,072.		
TOTAL TO FORM 990-PF, PART II, LINE	151,072.			
	KV - LINE 1A UNDATION MANAGI	RS	STATEMENT	4

NAME OF MANAGER

DAVID M MCCARTY CELIA MCCARTY

	TS AND CONTRIBUTIONS ID DURING THE YEAR	STATEMENT 5		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
FELLOWSHIP OF CHRISTIAN ATHLET	PROVIDES FOR A CHAPLAIN FOR GA TECH TEAMS	PRIVATE	5,000.	
HANDS OF CHRIST A DULUTH COOPERATIVE MINISTRY	N/A FOOD PANTRY SERVING POOR PEOPLE WITH FOOD. HELPING R	PRIVATE	5,000.	
IDEALS FOUNDATION	N/A HELPS HIGH SCHOOL ATHLETES DEVELOP LEADERSHIP AND PE	PRIVATE	3,000.	
MARIST WOMEN BUILD	N/A HABITAT HOUSING FOR LOW INCOME WORKING FAMILIES BUIL	PRIVATE	5,000.	
MEDSHARE	N/A REDISTRIBUTES SURPLUS MEDICAL SUPPLIES TO DEVELOPING	PRIVATE	10,000.	
YOUNG LIFE	N/A CHRISTIAN MINISTRY WORKS WITH HIGH SCHOOLERS, NURTUR	PRIVATE	5,000.	
FORSYTH - DAWSON FCA	N/A TO SUPPORT HIGH SCHOOL FCA IN FORSYTH & DAWSON COUNTIES	PRIVATE	1,800.	
WORLD WATER RELIEF	N/A BRING CLEAN DRINKING WATER TO PEOPLE IN NEED IN THE DEVELOPING WORLD	PRIVATE	10,000.	
TOTAL TO FORM 990-PF, PART XV,	LINE 3A		44,800.	