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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2009

OMB No 1545-0052

For o	For calendar year 2009, or tax year beginning , and ending						
G C	heck	all that apply. Initial return	Initial return of a fo	•	, <u> </u>	Final return	ı
		Amended return	Address chang	ge		Name change	
Use	the I	RS Name of foundation		A Employer identification	number		
	abel. erwis		· ·	N, INC)
	print	Number and street (or P O box number if mail is not de	livered to street address)		Room/suite	B Telephone number	0.7
	type Spec	1610				706-541-11	.07
	oper ructio	City of town, State, and ZIP code				C If exemption application is p	
		type of organization X Section 501(c)(3) ex	empt private foundation			D 1. Foreign organization C. Foreign organizations me check here and attach or	s, check here eeting the 85% test, employed
	_		Other taxable private founda	ition		E If private foundation sta	
I Fa	ır ma	rket value of all assets at end of year J Accounting	ng method X Cash	Accru	al	under section 507(b)(1	
(fr	om F		her (specify)			F If the foundation is in a	60-month termination
▶\$ 614 . (Part I, col.			mn (d) must be on cash l	basis.)		under section 507(b)(1)(B), check here
Pa	<u>ırt l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net inv		(c) Adjusted net income	(1) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received	6,200.			N/A	
	2	Check Image: If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments .	11.		11.		STATEMENT 1
	4	Dividends and interest from securities					
	5a	Gross rents .		,			
Revenue	b	Net rental income or (loss)			****		,
	6a	Net gain or (loss) from sale of assets not on line 10					
	b	Gross sales price for all assets on line 6a	·				
	7	Capital gain net income (from Partyly line 2)			0.		
	0	iver short-term capital-gam.					4 11 12 14 14 11 11 11 11 11 11 11 11 11 11 11
	9	Income modifications Gross sales less returns and allowingles. MAY 17 2010					
	10a	4.10 - 1.	.''' 1,''''' -''''H -#HH-#		·····		· · · · · · · · · · · · · · · · · · ·
		Less Cost of goods sold Gross profit of (1058)					
	11	Other Income OGDEN, UT-1					
	12	Total. Add lines 1 through 11	6,211.		11.		
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
ses	16a	Legal fees					
Je n	b	Accounting fees STMT 2	750.		375.		375.
찣	C	Other professional fees .					
Ĭ.	17	Interest					
trat	18	Taxes STMT 3	30.		0.		0.
ī. Si	19	Depreciation and depletion					
퉏	20	Occupancy					
ĕ	21_	Travel, conferences, and meetings					
, an	22	Printing and publications Other expenses STMT 4	34.	_	0.		0.
Operating and Administrative Expen	23	Total operating and administrative	34.				
era	24	expenses. Add lines 13 through 23	814.		375.		375.
Ö	25	Contributions, gifts, grants paid	10,396.				375. 10,396.
	1	Total expenses and disbursements.					
	آ ا	Add lines 24 and 25	11,210.		375.		10,771.
	27	Subtract line 26 from line 12.	•				
		Excess of revenue over expenses and disbursements	-4,999.				
		Net investment income (if negative, enter -0-)			0.		
	C	Adjusted net income (if negative, enter -0-)				N/A	

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SUMMERVILLE FOUNDATION, INC

(a) List and desc	cribe the ki	nd(s) of property sold (e g or common stock, 200 sh	, real estate,		P	How ac - Purc - Dona		(c) Date acqu (mo , day,)		(d) Date sold (mo , day, yr)
a					ļ					
b NC	NE									
<u>c</u>										
<u>d</u>			-							
<u> </u>	1 10	Depreciation allowed	(n) Co	st or other basis				(h) Gain (or (loss)	
(e) Gross sales price	(")	(or allowable)	1	expense of sale				(e) plus (f)		g)
<u> </u>	<u> </u>									
<u></u>		_				_				
<u> </u>										-
<u> </u>		·	Ī							
Complete only for assets show	ng gain in	column (h) and owned by	the foundation	on 12/31/69				(I) Gains (Col. (
(i) F.M V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col (I)			co	l (k), but not i Losses (fro	ess than m col (f	-0-) or 1))
		·								
<u> </u>										
<u> </u>	<u> </u>									
Capital gain net income or (net o	apital loss	If gain, also ente	er in Part I, line)- in Part I, line	7 17	}	2				
Net short-term capital gain or (ic	ss) as defi	•								
If gain, also enter in Part I, line 8			(-7		}					
If (loss), enter -0- in Part I, line 8	3	Section 4940(e) for			لل	3				
section 4940(d)(2) applies, leave as the foundation liable for the se Yes," the foundation does not qui	ction 4942 alify under	tax on the distributable ar section 4940(e) Do not c	omplete this pa	art						Yes
Enter the appropriate amount in	each colu		ructions before	making any entr						(4)
(a) Base period years Calendar year (or tax year beginn	ııng ın)_	(b) Adjusted qualifying dis	stributions	Net value of no	(c) oncha		use asset	s (col	Distribi (b) divi	(d) ution ratio ded by col (c))
2008										
2007										
2006										<u> </u>
2005 2004	<u>.</u>							<u> </u>		
2004	!			l			-		-	
Total of line 1, column (d)								2		
Average distribution ratio for the	5-year ba	se period - divide the total	on line 2 by 5	, or by the number	r of ye	ears				
the foundation has been in exist			-	-	-			. 3		
Enter the net value of nonchanta	ıhla-usa as	eate for 2000 from Part Y	line 5					4		
Culter the net value or nonchants	IDIE-036 43	sets for 2009 from Fait A,	, iiile 3	•				-		
Multiply line 4 by line 3		•		٠			-	5		
Enter 1% of net investment inco	me (1% of	Part I, line 27b)						6		
Add lines 5 and 6								7	_	
Enter qualifying distributions fro	ım Part XII	, line 4						8		
If line 8 is equal to or greater tha	an line 7, cl	neck the box in Part VI, lin	e 1b, and com	plete that part usir	ng a 1	% tax	rate .			
See the Part VI instructions										

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Х

3b

4a

4h

Form 4720, to determine if the foundation had excess business holdings in 2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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

Part VIII Information About Officers, Directors, Trustees, For Raid Employees, and Contractors (continued)	undation Managers, 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) Compensation
NONE		
	 	
		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		•
List the foundation's four largest direct charitable activities during the tax year. Include relevan	it statistical information such as the ers produced, etc	Expenses
1 N/A		
2		
3		
4		
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	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	•	0.

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see	instructions.)
1 1	air 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	1a	0.
	Average of monthly cash balances	1b	2,903.
	Fair market value of all other assets	10	
d ·	Total (add lines 1a, b, and c)	1d	2,903.
	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	ic (attach detailed explanation)		
	Acquisition indebtedness applicable to line 1 assets	2	0.
	Subtract line 2 from line 1d	3	2,903.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	44. 2,859.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,859.
6	Minimum investment return. Enter 5% of line 5	6	143.
Pa	rt 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)	ıd certain	-
1	Minimum investment return from Part X, line 6	1	143.
	Tax on investment income for 2009 from Part VI, line 5		
	ncome tax for 2009 (This does not include the tax from Part VI)		
	Add lines 2a and 2b	20	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	143.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	143.
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	143.
	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	10,771.
þ	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	10,771.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ncome Enter 1% of Part I, line 27b	5	0.
	Adjusted qualifying distributions Subtract line 5 from line 4	6	10,771.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	qualifies for the	section

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4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions) (b) (c) (d) Corpus Years prior to 2008 2008 2009 1 Distributable amount for 2009 from Part XI. 143. line 7 2 Undistributed income, if any, as of the end of 2009 0 a Enter amount for 2008 only h Total for prior years 0 3 Excess distributions carryover, if any, to 2009 56,247 a From 2004 34,702. **b** From 2005 23,537 c From 2006 86,204 d From 2007 34,596 e From 2008 235,286 1 Total of lines 3a through e 4 Qualifying distributions for 2009 from 10,771 Part XII, line 4 > \$ 0 a Applied to 2008, but not more than line 2a **b** Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 143. d Applied to 2009 distributable amount 10,628. e Remaining amount distributed out of corpus 0. 0 . Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 245,914 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract 0 line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 d Subtract line 6c from line 6b Taxable 0 amount - see instructions e Undistributed income for 2008 Subtract line 0 4a from line 2a Taxable amount - see instr f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2010 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 0 -section_170(b)(1)(E)_or_4942(g)(3)_ 8 Excess distributions carryover from 2004 56,247 not applied on line 5 or line 7 9 Excess distributions carryover to 2010. 189,667 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 34,702. a Excess from 2005 23,537. 86,204. b Excess from 2006 c Excess from 2007 34,596. d Excess from 2008

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e Excess from 2009

10,628

Part XV Supplementary Information		-		
3 Grants and Contributions Paid During the	ear or Approved for Future	Payment		
. Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year AUGUSTA STATE UNIVERSITY	NONE	EXEMPT	EDUCATION	2,592.
KIOKEE CHURCH	NONE	ЕХЕМРТ	CHURCH	6,175.
SOVEREIGN GRACE PRESBYTERIAN CHURCH 3326 ARCHDALE DRIVE CHARLOTTE, NC 28210	NONE	EXEMPT	CHURCH	200.
SUSIE WELSH	NONE	ЕХЕМРТ	EDUCATION	1,000.
MISC CONTRIBUTION	NONE	EXEMPT	EDUCATION	179.
THE AWAKENING	NONE	EXEMPT	RELIGIOUS	250.
Total	<u> </u>	<u> </u>	▶ 3a	10,396.
b Approved for future payment				
NONE				
Tabel				0.
Total			▶ 3b	orm 990-PF (2009)

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inter gross amounts unless otherwise indicated	Unrelated b	usiness income		by section 512, 513, or 514	(e)
1 Program service revenue	(a) (b) Business Amount		Exclu- sion code	(d) Amount	Related or exempt function income
a					
b			† - † -		
C			1 1		-
d	1				-
е	1 1				
f			1		
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash			1		
investments	ŀ		14	11.	
Dividends and interest from securities					
Net rental income or (loss) from real estate:			T		11M1 12M1111
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			1		
Other revenue					
a					
b					
C					
d					
8					
Subtotal Add columns (b), (d), and (e)		0.		11.	
Total. Add line 12, columns (b), (d), and (e)				13	
e worksheet in line 13 instructions to verify calculations)				
art XVI-B Relationship of Activities		onlishment of F	vemnt l	Purnoses	
neladoriship of Activities	to the Accon	ipiisiiiieiit oi L	xempt i		
ne No. Explain below how each activity for which in			A contribut	ed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other th	an by providing funds	for such purposes)			
	<u> </u>				
					
		<u> </u>			
	<u> </u>				
				 	<u> </u>
	- <u>-</u> -		_		
	<u> </u>				
1					

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923621 02-02-10

, orm 9	190-PF (20	009) SUMME	RVILLE FOUND	ATION,	INC		4.6	5-0486949	Pa	age 13
	XVII		garding Transfers	To and	Transactions :	and Relatio	nships With I	Noncharitable	9	
	od the ora		ectly engage in any of the f	following with	any other organizati	on described in s	ection 501(c) of		Yes	No
			(3) organizations) or in sec							
			ition to a noncharitable exe							
		Total the reporting rounds		mpt organiza				1a(1)	i	X
•	1) Cash			•	•		••	1a(2)	-	X
•	2) Other		•					1:0/5/		<u> </u>
	Other trans							45/43		х
•	•	of assets to a noncharital						1b(1)	 	$\frac{\lambda}{X}$
•	•		ncharitable exempt organiza	ation			•	1b(2)		
•	•	of facilities, equipment,	or other assets					1b(3)		X
(4) Reimb	oursement arrangements	•		•			1b(4)	<u> </u>	X
•	•	or loan guarantees						1b(5)		X
•			mbership or fundraising so					1b(6)	ļ	X
			iling lists, other assets, or p					<u>1c</u>	<u> </u>	X
			"Yes," complete the follows						sets,	
			oundation. If the foundation other assets, or services re		than fair market val	lue in any transac	tion or sharing arra	ngement, show in		
a) Lin		(b) Amount involved	(c) Name of nonch		pt organization	(d) Descri	ption of transfers, trans	actions, and sharing a	rangem	ents
		(-,		I/A	· · · · · · · · · · · · · · · · · · ·					
					·					
	-									
	- l							. —		
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		<u></u>								
					-				-	
22	le the four	adation directly or indirec	tly affiliated with, or related	to one or mo	re tax-exempt organ	nizations describe	ed			
		•	r than section 501(c)(3)) o				, u	Yes		No
		mplete the following sch		, 0000.0 01	•••	•	•			
U	11 165, CO	(a) Name of org		(p)	Type of organization	l "	(c) Description	of relationship		
		N/A			<u></u>	<u> </u>				
		21/11			 		·· -			
_										
		· · · · · · · · · · · · · · · · · · ·								
			nave examined this return, include					nd belief, it is true, corr	ect,	
a	nd complete	Declaration of preparer (other	er than taxpayer or fiduciary) is t	oased on all into						
_	Ta	P15			5-R- u	D N th	esidens			
	Signat	ure of officer or trustee		-	Date	Title				
alau uß	Pre	eparer's CA.	101/ 1/1	•		Date	Check if self-	Preparer's identi	fying nu	mber
[1	sig	nature VIII	4 C C C C C C C C C 	rish		05/04/10	employed			
Paid	E O Firm	's name (or yours CHER	RY, BEKAERT	& HOLI	LAND, LLP		EIN ►			
0	Preparer's Use Only	femployed), 1029	GREENE STRE	EET						
	addr		STA, GA 3090				Phone no	706-724-	<u>-355</u>	7
										/0000

Form **990-PF** (2009)

chedule B (Form 990, 990-EZ.

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

Name of the organization **Employer identification number** SUMMERVILLE FOUNDATION, INC 46-0486949 Organization type (check one): Section: Filers of: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

for Form 990, 990-EZ, or 990-PF.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

Employer identification number

SUMMERVILLE FOUNDATION, INC

46-0486949

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	PATTY POLLARD BLANTON 6017 WASHINGTON ROAD APPLING, GA 30802	\$\$.	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASH IN		STATEMENT 1
SOURCE				AMOUNT
INTEREST INCOME			_	11.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	11.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2
DESCRIPTION		(B) NET INVEST- MENT INCOME		
ACCOUNTING FEES	750.	375.		375.
TO FORM 990-PF, PG 1, LN 16B	750.	375.		375.
FORM 990-PF	TAX	ES		STATEMENT 3
DESCRIPTION		(B) NET INVEST- MENT INCOME		
LICENSE	30.	0.		0.
TO FORM 990-PF, PG 1, LN 18	30.	0.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES	34.	0.		0.
TO FORM 990-PF, PG 1, LN 23	34.	0.		0.