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Department of the Treasury

# **Return of Private Foundation**

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

2009

OMB No 1545-0052

		nue Service	Note. The fo	undation ma	ay be abl	e to use a copy of this	return to sati	sfy state repo	rting requireme	ents			
For	calend	ar year 2009,	or tax year beginning	9			, and e	nding					
G (	heck a	III that apply.	Initial retur	rn	Ľ	Initial return of a f	r	harity		Final return			
			Amended	return		Address chan	ige		Name change				
Use	the IR	Name of f			~				A Employer i	dentification	number		
	Tabel.				SNO	NOW FAMILY PRIVATE			58-2365263				
Otl	erwise		ATION, INC		t dolaroro	t to atract address)		Room/suite					
o	print r type.	Į.	UTH BATTER			to street address)		Hoonvalle	B Telephone	number 255–88	77		
See	Specif	fic City or toy	vn, state, and ZIP code		CE								
Inst	ruction			342					D 1. Foreign		_		
H (	heck ty	ype of organiz	•		exempt	private foundation			2. Foreign or	ganizations me e and attach co	eting the 85%	test,	
	¬ `	-	) nonexempt charitable			taxable private found	ation						
l Fa			assets at end of year	J Accou			Acci	ual	E If private fo under secti	on 507(b)(1)			
(fi	om Pa	art II, col (c),	line 16)		Other (s				F If the found	,			
	\$		2,451,139.	(Part I, co	olumn (d	d) must be on cash	basis)			on 507(b)(1)			
Pa	ırt I	Analysis of R	levenue and Expenses ounts in columns (b), (c), a	S nd (d) may not		(a) Revenue and		vestment	(c) Adjus		(d) Dis	bursements able purposes	
		necessarily equi	al the amounts in column (	(a) )	•	xpenses per books		ome	inco	me		basis only)	
	1 C	Contributions,	gifts, grants, etc., rece	eived		60,000.	W.	<u> </u>	\$13°	4 % 2 2 2	<b>3683</b>	\$, 1° (	
		heck	if the foundation is not required	to attach Sch B	ļ		ANTE SE	<u> </u>	35.4.	<u> </u>	-3-3	· · · · · · · · · · · · · · · · · · ·	
			gs and temporary		<u> </u>	06 500		E 760	ļ		^	MISSIO 1	
			interest from securitie	S		86,508.	0	5,768.			STATE		
		Gross rents	- av ((a.a.)		-	*			· ¾	.4.3	<i>5</i> 2	<u> </u>	
Revenue		let rental income	from sale of assets not on	line 10	+	-162,042.	*	y.ÿ.	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	7 13			
	l ⊾G	Gross sales price essets on line 6a	for all 1 11	5,026.		100,010	in in the second		1/3/	<u> </u>		<u> </u>	
			ncome (from Part IV, line 2		-			Ő.	\$33°	Š	13.2		
ď	8 N	let short-term	capital gain			` ;	344 34	¥ .5.			38.7		
		ncome modifi		_		> ^X	41 (A 📆	<b>*</b>			. 1		
	108 a	Bross sales less and allowances					' 🌋	į	s ii				
	<b>b</b> Lo	essicost of go	PECHIVED	اب	* ,		3					*	
	CG	ross pro <u>ilt</u> or	<del>-(109</del> S)	ାଧ	<u> </u>		** <sub>e</sub>	Far			Cm > m =	·	
	11 0	Other income F <b>otal A</b> edline	NOV 0 8 2010	7 68	-	535. -14,999.		535. 6,303.		0.	STATE		
	12 T	otar Agovine	i officers, dire <u>ctors, truste</u> e		+	0.	<del>  °</del>	0,303.	<u> </u>	0.		0.	
			e salaries and Wages		$\vdash$		ļ		<del> </del>		<del></del>		
	15 P	ension plans	employee benefits	and a second				·-			<u> </u>		
ses		egal fees											
		Accounting fee	es Si	тмт 3		1,750.		1,750.		0.		0.	
Ä	<b>c</b> 0	Other profession	onal fees										
<u>š</u>	<b>17</b> Ir	nterest											
and Administrative Exper	18 T			MT 4		2,794.	<u> </u>	0.		0.		0.	
inis	1	Depreciation ai	nd depletion										
퉏		Occupancy			$\vdash$								
ΑÞ			nces, and meetings		-		<u> </u>	-			<del></del>	<del></del> _	
a		rinting and pi Other expenses		rmt 5	-	16,945.	1	6,945.		0.	1	0.	
럂		•	g and administrative	III J	-	10,743.		0,545		<u> </u>			
Operating		-	lines 13 through 23		1	21,489.	1 1	8,695.		0.		0.	
Ö			gifts, grants paid			102,000.		_ ,			1	02,000.	
			s and disbursements.										
_		dd lines 24 ai				123,489.	1	8,695.		0.	1	02,000.	
_			6 from line 12:		_						<u> </u>		
	<b>a</b> E:	xcess of revenue	e over expenses and disbi	ursements		-138,488.							
	b N	let investmen	<b>it income</b> (if negative, en	ter -0-)			4	7,608.					
9235		Adjusted net i	ncome (if negative, enter	-0-)			L			0.	L	O DE (2000)	

FOUNDATION, INC.

58-2365263

Page 2

P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	-		(a) DOOK Value	(b) Dook value	(o) an market value
		Cash - non-interest-bearing Savings and temporary cash investments	178,468.	130,207	130,207.
		Accounts receivable			
	•	Less: allowance for doubtful accounts	\$. \(\delta_i\)	w &&	# 1
	A	Pledges receivable	- · · · · · · · · · · · · · · · · · · ·		
	7	Less: allowance for doubtful accounts	λο <sup>0</sup>	, ,,,,,,, &	in the same in the
	5	Grants receivable			<del>                                     </del>
		Receivables due from officers, directors, trustees, and other	-		<del> </del>
	ľ	disqualified persons			
	7	Other notes and loans receivable	Salah	·	*
		Less; allowance for doubtful accounts	s rudina sa - ma	, and add the a	
ø	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges		19.	. 19.
As		Investments - U.S. and state government obligations			
		Investments - corporate stock			
		Investments - corporate bonds			
	l	Investments - land, buildings, and equipment basis	\$	. X	là · · ·
	ł	Less accumulated depreciation	*** - ^ 4		
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	2,117,856.	2,320,913	
	14	Land, buildings, and equipment: basis ▶	. AaS	. id i	1 3 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A
		Less accumulated depreciation			
	15	Other assets (describe			
_	16	Total assets (to be completed by all filers)	2,296,324.	2,451,139	2,451,139.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab.	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			43 (1.2) 1
	l		о.	0	
_	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here	U•		
		•			
ģ	۱.,	and complete lines 24 through 26 and lines 30 and 31.	2,296,324.	2,451,139	
nces		Unrestricted Temperature to the second secon	2,230,324.	2,431,133	<b>4</b> %.
ala		Temporarily restricted Permanently restricted		·	
Net Assets or Fund Bala	20	Foundations that do not follow SFAS 117, check here		<del></del>	
Ē		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	ı		**** ,
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			•
Ass	29	Retained earnings, accumulated income, endowment, or other funds			<b>1.</b>
et	30	Total net assets or fund balances	2,296,324.	2,451,139	<b>.</b>
2				<u> </u>	
	31	Total liabilities and net assets/fund balances	2,296,324.	2,451,139	•
_					
ഥ	art	Allalysis of Changes in Net Assets of Fund B			
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	•	st agree with end-of-year figure reported on prior year's return)		<u> </u>	2,296,324.
		r amount from Part I, line 27a			
		r increases not included in line 2 (itemize)	ATEMENT 6 3		
		lines 1, 2, and 3		4	<del></del>
		eases not included in line 2 (itemize)			
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		
					Form <b>990-PF</b> (2009)

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Part IV   Capital Gains	and Loss	es for Tax on	Investmen	t Income						
		s) of property sold (e ommon stock, 200 s			` P	How ac - Purc - Dona	cquired hase ation	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a SMITH BARNEY 5	<del>4729 -</del>	SEE ATTA	CHED ST	ATEMENT			P	VARIO	OUS	VARIOUS
	4729 -	SEE ATTA		ATEMENT				VARIO		VARIOUS
c SMITH BARNEY 4	7471 -	SEE ATTA	CHED ST	ATEMENT				VARIO		VARIOUS
d SMITH BARNEY 4		SEE ATTA	CHED ST	ATEMENT			P	VĀRI	OUS	VARIOUS
e CAPITAL GAINS	DIVIDE	NDS			<u> </u>					
(e) Gross sales price		reciation allowed rallowable)		st or other basis expense of sale					in or (loss (f) minus (	(g)
a 29,057.				23,72						5,337.
ь 216,401.				146,62						69,779.
c 258,497.				214,89						43,599.
d 710,888.				991,82	8.					-280,940.
e 183.					]					183.
Complete only for assets showin	ig gain in colu	mn (h) and owned b	y the foundation	n on 12/31/69			(1)	Gains (Co	ol. (h) gain	minus
(i) F.M.V. as of 12/31/69		djusted basis of 12/31/69		cess of col. (i) col. (j), if any			COI.	Losses (	ot less that from col (	h))
а										5,337.
b										69,779.
С		_						•		43,599.
d										-280,940.
е										183.
2 Capital gain net income or (net ca	pital loss)	If gain, also en	ter in Part I, line -0- in Part I, line	7 7	}	2				-162,042.
3 Net short-term capital gain or (los	s) as defined	in sections 1222(5)	and (6):							
If gain, also enter in Part I, line 8, column (c).										
If (loss), enter -0- in Part I, line 8					Л	3			N/A	
Part V Qualification U	nder Sec	tion 4940(e) f	or Reduced	Tax on Net	Inv	estn	nent Inc	ome		
(For optional use by domestic private	foundations	subject to the sectio	n 4940(a) tax or	net investment in	come	e.)				
If postupe 4040/d\/2\ applies leave th	no nart blank									
If section 4940(d)(2) applies, leave th	iis part bialik.									
Was the foundation liable for the sect	tion 4942 tax	on the distributable	amount of any y	ear in the base per	rıod?					Yes X No
If "Yes," the foundation does not qual										
1 Enter the appropriate amount in e	each column f	or each year; see ins	structions before	making any entri	es.					
(a) Base period years Calendar year (or tax year beginnir	ng in)	<b>(b)</b> Adjusted qualifying o		Net value of no		rıtable-			Distrib col. (b) div	(d) oution ratio rided by col. (c))
2008		3	66,495.		2	<u>,36</u>	4,328	•		.155010
2007			_							
2006										
2005										
2004										
								1		
2 Total of line 1, column (d)								2		.155010
3 Average distribution ratio for the 5				or by the number				1 1		
the foundation has been in exister	5-year base po	eriod - divide the tota	al on line 2 by 5,	or by the number	of ye	ars		1 1		
the realitation has been in exister	-		al on line 2 by 5,	or by the number	of ye	ars		3		.155010
	nce if less thai	n 5 years	-	or by the number	of ye	ars		3		
4 Enter the net value of noncharitab	nce if less thai	n 5 years	-	or by the number	of ye	ars		3		.155010
	nce if less thai	n 5 years	-	or by the number	of ye	ars				2,293,706.
	nce if less thai	n 5 years	-	or by the number	of ye	ars				
4 Enter the net value of noncharitab	nce if less thai	n 5 years	-	or by the number	of ye	ars		4		2,293,706. 355,5 <b>4</b> 7.
4 Enter the net value of noncharitab	nce if less thai	n 5 years for 2009 from Part	-	or by the number	of ye	ars		4		2,293,706.
<ul><li>4 Enter the net value of noncharitab</li><li>5 Multiply line 4 by line 3</li></ul>	nce if less thai	n 5 years for 2009 from Part	-	or by the number	of ye	ars		5		2,293,706. 355,547. 476.
<ul><li>4 Enter the net value of noncharitab</li><li>5 Multiply line 4 by line 3</li></ul>	nce if less thai	n 5 years for 2009 from Part	-	or by the number	of ye	ars		5		2,293,706. 355,5 <b>4</b> 7.
<ul> <li>4 Enter the net value of noncharitab</li> <li>5 Multiply line 4 by line 3</li> <li>6 Enter 1% of net investment income</li> </ul>	nce if less thai de-use assets ne (1% of Pari	n 5 years for 2009 from Part i	-	or by the number	of ye	ars		5		2,293,706. 355,547. 476.
<ul> <li>4 Enter the net value of noncharitab</li> <li>5 Multiply line 4 by line 3</li> <li>6 Enter 1% of net investment incom</li> <li>7 Add lines 5 and 6</li> </ul>	nce if less thai ile-use assets ne (1% of Pari	n 5 years for 2009 from Part ( t I, line 27b)	X, line 5				rate.	4 5 6 7		2,293,706. 355,547. 476. 356,023.

FOUNDATION, INC.	10/ \ 40/0/1\ \	58-23			Page 4
Part VI Excise Tax Based on Investment Income (Section 494		948 - se	e instru	ıctioı	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here  and e					
Date of ruling or determination letter: (attach copy of letter if new		[83] L	** .	• • -	
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ L and enter 1%	1		9	<u>52.</u>
of Part I, line 27b		S	34 K	4	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	· · · · · · · · · · · · · · · · · · ·		,		.: 22
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O	Others enter -0-)	2			<u> </u>
3 Add lines 1 and 2		3		<u>9</u>	52.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		9	52.
6 Credits/Payments:	1 1		i		4
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a 1,000.		· \$	· Q	ì
<b>b</b> Exempt foreign organizations - tax withheld at source	6b		*	<u> </u>	ž. `
c Tax paid with application for extension of time to file (Form 8868)	6c			i i	00.
d Backup withholding erroneously withheld	6d	,		î j	
7 Total credits and payments. Add lines 6a through 6d		7		î,0	<u>00.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached	8			29.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>&gt;</b>	9			
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>•</b>	10			<u> 19.</u>
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax	19 · Refunded ►	11			0.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate or intervene	ın	-18/3	Yes	
any political campaign?			1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purpor	·		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copies of any materials publishe	d or			: \$
distributed by the foundation in connection with the activities.				1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the			<b>4</b> 33		
(1) On the foundation. > \$ (2) On foundation managers		i		Ž.	
e Enter the reimbursement (if any) paid by the foundation during the year for political expendi	liture tax imposed on foundation				Ŕĸ.
managers. ▶ \$ 0.			1	.3.3.4	
2 Has the foundation engaged in any activities that have not previously been reported to the II	RS?		2		X
If "Yes," attach a detailed description of the activities					W j
3 Has the foundation made any changes, not previously reported to the IRS, in its governing i		r		.	. <u> </u>
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the yea	ar?	/ -	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	_	N/A	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				, [	ء
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied el	ither:		ì	,	
By language in the governing instrument, or			٠	_ ´ .	) ;
By state legislation that effectively amends the governing instrument so that no mandator	ry directions that conflict with the state	law			
remain in the governing instrument?			6	Х	
7 Did the foundation have at least \$5,000 in assets at any time during the year?			7	Х	
If "Yes," complete Part II, col. (c), and Part XV.	_		1		7 9
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ons) ►		- 🚶		
GA			_   🐔		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or designate)		- 4		اسمم
of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of se		ndar			,
year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," c			9		<u> </u>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	ule listing their names and addresses	-	10		X
			Form <b>990</b>	-PF (	20091

Form 990-PF (2009) 58-2365263 FOUNDATION, INC. Page 5 Part VII-A | Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of 11 X section 512(b)(13)? If "Yes," attach schedule (see instructions) 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before 12 August 17, 2008? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A Telephone no. ► 404 255-8877 14 The books are in care of ▶ JEFFREY SNOW Located at ▶ 15 SOUTH BATTERY PLACE, ATLANTA, ZIP+4 ►30342 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year N/A Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes No 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available 🗌 Yes 🗶 No for the benefit or use of a disqualified person)? (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 Yes X No termination of government service, if terminating within 90 days ) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A 1b section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009? 1¢ 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning Yes X No before 2009? If "Yes," list the years 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 N/A statement - see instructions.) 2b 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 Yes X No 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 3b X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that X

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

Form 990-PF (2009) FOUNDA'TION, INC.			58-23652	63	Page €
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to:		,			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire				l
any voter registration drive?			es 🗶 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	for			
the prevention of cruelty to children or animals?			es X No		ł
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i				ŀ
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•			-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ınad			-
· ·			es 🔲 No	]	
expenditure responsibility for the grant?		·/ A T	ES [] NU		
If "Yes," attach the statement required by Regulations section 53 494	• •			-	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<b></b>			
a personal benefit contract?		Y	es X No		J
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> </u>	6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es 🗶 No 📙		
<b>b</b> If yes, did the foundation receive any proceeds or have any net income attribut	able to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highl	У		
Faid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their					
(-) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense punt, other
(a) Name and address	to position	(If not paid, enter -0-)	and deterred compensation	all	owances
	1		ł		
SEE STATEMENT 8	1	0.	0.		0.
	1				
	1				
	1				
	1				
			<del> </del>	<del>                                     </del>	
	1				
	1				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1) If none	enter "NONE "	L	<u> </u>	
2 Compensation of the highest-paid employees (other than those inc	(b) Title, and average	CITE HORE.	(d) Contributions to	(6)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acci	bunt, other
MONTE	devoted to position	-	compensation	all	owances
NONE					
	1				
				L	
			1		
. 197	1				
<del></del>				1	
	1				
Total number of other employees paid over \$50,000		·	<u> </u>	٠	(

Form **990-PF** (2009)

	365263 Page 7
on Managers, Highly	
NONE "	
	(c) Compensation
(B) Type of dervice	(o) companiation
	<del></del>
	<u>▶</u>   0
<del></del>	
I information such as the	Expenses
ed, etc.	
es 1 and 2.	Amount
<del></del>	<del></del>
	NONE."  (b) Type of service  al information such as the led, etc.  es 1 and 2.

923561

Total. Add lines 1 through 3

Form **990-PF** (2009)

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	2,149,904.
b	Average of monthly cash balances	1b	178,732.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	2,328,636.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)   1e   0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	<u>0.</u>
3	Subtract line 2 from line 1d	3	2,328,636.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	34,930.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,293,706.
6	Minimum investment return. Enter 5% of line 5	6	114,685.
P	<b>Distributable Amount</b> (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	114,685.
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	952.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	113,733.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	113,733.
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	113,733.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		102 000
a	, , , , , , , , , , , , , , , , , , , ,	1a	102,000.
_	Program-related investments - total from Part IX-B	1b	<u> </u>
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:		
	Suitability test (prior IRS approval required)	3a	<u> </u>
	Cash distribution test (attach the required schedule)	3b	102,000.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	102,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	0
_	income. Enter 1% of Part I, line 27b	5 6	102,000.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		
	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 f	or the section
_	to ratal research of the memory sense.		5 000 DE (0000)

Form **990-PF** (2009)

# Part XIII Undistributed Income (see instructions)

<del></del>				
	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	30,600	Todato prior to 2000		
line 7				113,733.
2 Undistributed income, if any, as of the end of 2009				·
a Enter amount for 2008 only			0.	
<b>b</b> Total for prior years:		~-		
· · · · · · · · · · · · · · · · · ·		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
<b>b</b> From 2005 <b>c</b> From 2006				
d From 2007				
eFrom 2008 250,024.				
f Total of lines 3a through e	250,024.			· '
4 Qualifying distributions for 2009 from	200,021	- · · · · · · · · · · · · · · · · · · ·		
Part XII, line 4: ►\$ 102,000.				
a Applied to 2008, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior			<b>43.</b> 7	
years (Election required - see instructions)	^>	0.		<b>```</b> ``
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				102,000.
e Remaining amount distributed out of corpus	0.	·· <del>·</del>		į
Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a) )	11,733.			11,733.
6 Enter the net total of each column as				
indicated below:	220 201			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	238,291.	3*		
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years'			<u> </u>	
undistributed income for which a notice of	, , , , ,			^
deficiency has been issued, or on which				*
the section 4942(a) tax has been previously assessed	` * .	0.	*	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract		- "		
lines 4d and 5 from line 1. This amount must		İ		
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.	220 201			
Subtract lines 7 and 8 from line 6a	238,291.			
10 Analysis of line 9.				
a Excess from 2005 b Excess from 2006				
c Excess from 2007				
dExcess from 2008 238, 291.		1		
e Excess from 2009		1		
5 =				Form <b>QQN_DF</b> (2000)

Form 990-PF (2009) <b>FOUNDAT</b>				58-23	65263 Page
Part XIV Private Operating Fo	undations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter that	t it is a private operating			
foundation, and the ruling is effective for	2009, enter the date of t	the ruling	<b>▶</b>		
<b>b</b> Check box to indicate whether the founda	ition is a private operatir	ng foundation described		4942(j)(3) or 49	)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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>b</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.				ł	
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		<del></del>	<del></del>	<del> </del>	
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	<del></del>			<del> </del>	
c "Support" alternative test - enter:			1		
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)	<del></del>				
(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 Infor			if the foundation	had \$5,000 or mo	ore in assets
at any time during th	e year-see the i	instructions.)		•	
1 Information Regarding Foundation					
a List any managers of the foundation who	have contributed more		tributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed mo JEFFREY SNOW	ne than \$5,000). (See S	ection 507 (u)(2).)			
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large portion	on of the ownership of a pa	artnership or
NONE	a 1070 of greater interes	ot.			
2 Information Regarding Contribution	n. Grant. Gift. Loan	Scholarship etc. F	Programs:	<del></del>	
Check here ► X if the foundation on				not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc. (s					
a The name, address, and telephone number	·				
- · · · · · · · · · · · · · · · · · · ·	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,				
<b>b</b> The form in which applications should be	submitted and informal	tion and materials they s	should include:		
c Any submission deadlines:					
	<del></del>		<u> </u>	<del></del>	
d Any restrictions or limitations on awards,	such as by geographica	ai areas, charitable fields	, kinds of institutions, or o	otner lactors;	

Form 990-PF (2009)

FOUNDATION, INC.

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	Supplementary information	(continued)			r <del></del>
3 Grants an	d Contributions Paid During the Y	ear or Approved for Future	Payment		
Name a	Recipient  nd address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
		or substantial contributor	recipient		
a Paid durin		or substantial contributor	recipient		
C T	E STATEMENT 9				
Total	DIVIDUONI 2		<u> </u>	<b>▶</b> 3a	102,000
	for future payment	1	T	<b>&gt;</b> 3a	102,000
NC	ONE				
Total				▶ 3b	0
923611 02-02-10				F	orm <b>990-PF</b> (2009)

Form 990-PF (2009) FOUNDATION, IN	IC.			58-2	365263 Page 12
Part XVI-A Analysis of Income-Produ	ucing Activitie	es			
Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Code	Amount	sion code	Amount	function income
a			<del>                                     </del>		
b	-				<del></del>
C	-		+		
d	-		+		
e	-		+		
1	-		_	<u>-</u>	
g Fees and contracts from government agencies	-	<u> </u>	+		
2 Membership dues and assessments	<del> </del>	·	+		· · · · · · · · · · · · · · · · · · ·
3 Interest on savings and temporary cash		<u></u>	+		
investments					
4 Dividends and interest from securities		· · · · · · · · · · · · · · · · · · ·	14	86,508.	<del></del>
5 Net rental income or (loss) from real estate:	*		+	00,500.	
a Debt-financed property	<del></del>		+		
b Not debt-financed property			+		
6 Net rental income or (loss) from personal			+		
property 7 Other investment income			14	535.	
8 Gain or (loss) from sales of assets other		<u>-</u>	+	333.	
than inventory			18	-162,042.	
9 Net income or (loss) from special events			+ - 4	102,042.	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.	<u> </u>		+		
,	-		+	<del></del>	
	-		+		
4	-		+ +		
e	-		+ +-		
12 Subtotal. Add columns (b), (d), and (e)	-	0		-74,999.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<del> </del>	······································	<u> </u>	13	-74,999.
(See worksheet in line 13 instructions to verify calculations.)				<u>-</u>	
Part XVI-B Relationship of Activities	to the Accom	plishment of E	xempt P	Purposes	
					lichment of
Explain below how each activity for which inc the foundation's exempt purposes (other tha			A contribute	a importantly to the accomp	DISTIMENT OF
					······································
		<del></del>	-		
			_		
		<del></del>	·		
	· · · · · ·			<del>-</del>	<del></del>
					<del></del>
		<u> </u>		-	
					. <u></u>
				<del></del>	
					<del></del>
		<del></del>	_		

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

		Exempt Organ	izations						
1	Did th	ne organization directly or indir	ectly engage in any of the followin	g with any other organizatio	n described in section	n 501(c) of	`	Yes	No
	the C	ode (other than section 501(c)	(3) organizations) or in section 52	7, relating to political organi	ızatıons?		šo.		
á	a Trans	fers from the reporting founda	ition to a noncharitable exempt org	ganization of:			in in	<b>1</b>	
	(1) (	Cash					1a(1)	`	X
	(2) (	Other assets					1a(2)		X
ı	Other	transactions:					` 4	<b>4</b> 9	*
	(1) 5	Sales of assets to a noncharitat	ole exempt organization				16(1)		~X
			ncharitable exempt organization				1b(2)		X
	(3) F	Rental of facilities, equipment, (	or other assets				1b(3)		X
		Reimbursement arrangements					1b(4)		X
	(5) L	oans or loan guarantees					1b(5)		X
			mbership or fundraising solicitatio	ns			1b(6)	<del>                                     </del>	X
(			ling lists, other assets, or paid em				1c		X
(			"Yes," complete the following sche	• •	vavs show the fair m	arket value of the goods, ot	her ass	ets.	L
		•	oundation. If the foundation receive	· •	-	-		·	
			other assets, or services received.		•				
(a)	Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and sh	aring ar	rangeme	ents
			N/A			,			
			· · · · · · · · · · · · · · · · · · ·			**			
				<del></del>		- · · · ·			
_				<del></del>					
						· · · · · · · · · · · · · · · · · · ·			
							_		
_									
						<del></del>			
			<del>,</del>		-				
				****					
2:	ls the	foundation directly or indirect	ly affiliated with, or related to, one	or more tay-eyempt organiz	zations described				
			than section 501(c)(3)) or in sect	· -	ations decombed		Yes	ГХ	No
٠		s," complete the following sche				<u> </u>	1 163		_ INU
_		(a) Name of orga		(b) Type of organization	(1	) Description of relationshi	D		
_		N/A		(-).71	<b>`</b>				
	_								
	_		1						
			1/1						
I	Under p	enalties of perjury, I declare that I ha	ave examined this return, including acco	mpanying schedules and statem	ents, and to the best of	my knowledge and belief, it is tri	ig, corre	ect,	
	and con	nplete Declaration of preparer (othe	Man taxpayer or fiduciary) is based on	all information of which preparer			,		
ł			<b>' X</b> '	11/4/10		ister for			
<u> </u>	Si	gnature of officer or trustee		Date	Title	<u>, , , , , , , , , , , , , , , , , , , </u>			
Ĕþ	<u> </u>	Preparer's			ate / Che	Ck if Preparer's	sidentif	ying nun	nber
힑	.°. ≥	signature		N -	a/~~/   self	oloyed <b>&gt;</b>			
"	Paid Preparer's Use Only	HART	F, AROGETI, & W	YNNE, L.L.P.	<del>/ / · · · · · · · · · · · · · · · · · ·</del>	EIN >			
	тер Jse	בונוטין וען אוומו כי וווווי ן	CONCOURSE PARK			<u>-</u>			
	م م		NTA, GEORGIA 30			Phone no.			
_			<u> </u>						

Form **990-PF** (2009)

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

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

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

Name of the organization

THE KERRI & JEFFREY SNOW FAMILY PRIVATE FOUNDATION. INC.

**Employer identification number** 

58-2365263

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

	1 OUNDATION, INC.						
Organization type (chec	sk one):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt chantable trust <b>not</b> treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
• •	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General Rule							
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II							
Special Rules							
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 70(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% on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II.						
aggregate cont	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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.							
but it must answer "No"	on 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), 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 a filing requirements of Schedule B Form 990, 990-EZ, or 990-PF)						

923451 02-01-10

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

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

Name of organization
THE KERRI & JEFFREY SNOW FAMILY PRIVATE
FOUNDATION, INC.

Employer identification number

MOITA	INC.			<u>58-2365263</u>
		•	_	

Part I	Contributors (see instructions)		
(a)	(b)	(c)	(d)
No1	Name, address, and ZIP + 4  SYLVIA & MARTIN SNOW CHARITABLE FOUNDATION  5 PPG PL STE 250  PITTSBURGH, PA 15222	Aggregate contributions  \$ 60,000.	Person X 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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
923452 02-0	1-10	\$Schedule B (Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) 990, 990-EZ, or 990-PF) (2009)

FORM 990-PF DIVIDEND	S AND INTER	EST FROM	SECURITIES	S	TATEMENT	1
SOURCE	GROSS	S AMOUNT	CAPITAL G		COLUMN (A AMOUNT	.)
ACCRUED INTEREST 54729 DIVIDENDS 47471 DIVIDENDS 54729 DIVIDENDS PRIVATE REIT INTEREST 54729 INTEREST 54729 - OID		-1,877. 25,656. 8,589. 23,102. 11,712. 19,509.		0. 183. 0. 0. 0.	-1,8 25,4 8,5 23,1 11,7 19,5	73. 89. 02. 12.
TOTAL TO FM 990-PF, PART I, L	N 4	86,691.		183.	86,5	08.
FORM 990-PF	OTHER I	NCOME		S	TATEMENT	2
DESCRIPTION		(A) REVENUE PER BOOKS	(E NET IN MENT I	WEST-	(C) ADJUSTE NET INCO	
OTHER INCOME		5	535.	535.	<del></del>	0.
TOTAL TO FORM 990-PF, PART I,	LINE 11	Ē	535.	535.		0.
FORM 990-PF	ACCOUNTI	NG FEES		S	TATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE	EST- ADJ	C) USTED INCOME	(D) CHARITA PURPOS	
	1,750.	1,	750.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	1,750.	1,	750.	0.		0.

	TAX	ES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
TAXES	2,794.	(	).	0.	0.
TO FORM 990-PF, PG 1, LN 18 =	2,794.	(	).	0.	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
MANAGEMENT FEES INVESTMENT FEES	16,807. 138.			0.	0.
TO FORM 990-PF, PG 1, LN 23	16,945.	16,945	· .	0.	0.
FORM 990-PF OTHER INCREASES	TN NET ASS		<del></del>		
	TH NEE REE	ETS OR FUND	BALANCES	STATEMENT	6
DESCRIPTION	, IN NET 1100	ETS OR FUND	BALANCES	STATEMENT	6
DESCRIPTION  FAIR MARKET VALUE ADJUSTMENT BOOK TAX ADJUSTMENT	TH NET MOD	ETS OR FUND	BALANCES	AMOUNT 285,2	
FAIR MARKET VALUE ADJUSTMENT		ETS OR FUND	BALANCES	AMOUNT 285,2	33. 70.
FAIR MARKET VALUE ADJUSTMENT BOOK TAX ADJUSTMENT			BALANCES	AMOUNT 285,2 8,0	33. 70.
FAIR MARKET VALUE ADJUSTMENT BOOK TAX ADJUSTMENT TOTAL TO FORM 990-PF, PART II	OTHER INV	ESTMENTS LUATION	BALANCES  BOOK VALUE	AMOUNT 285,2 8,0 293,3	33. 70. 03.
FAIR MARKET VALUE ADJUSTMENT BOOK TAX ADJUSTMENT TOTAL TO FORM 990-PF, PART II	OTHER INV	ESTMENTS LUATION		AMOUNT  285,2 8,0 293,3  STATEMENT  FAIR MARKE	33. 70. 03.

	I - LIST OF OFFICERS, DI EES AND FOUNDATION MANAG		STATI	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JEFFREY SNOW 15 SOUTH BATTERY PLACE ATLANTA, GA 30342	PRESIDENT 0.00	0.	0.	0.
KERRI SNOW 15 SOUTH BATTERY PLACE ATLANTA, GA 30342	VICE PRESIDENT 0.00	0.	0.	0.
ADAM SNOW 15 SOUTH BATTERY PLACE ATLANTA, GA 30342	VICE PRESIDENT 0.00	0.	0.	0.
DENISE SNOW 15 SOUTH BATTERY PLACE ATLANTA, GA 30342	DIRECTOR 0.00	0.	0.	0.
EILEEN PRICE 15 SOUTH BATTERY PLACE ATLANTA, GA 30342	DIRECTOR 0.00	0.	0.	0.
DAVID PRICE 15 SOUTH BATTERY PLACE ATLANTA, GA 30342	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	0.	0.	0.

	AND CONTRIBUTIONS DURING THE YEAR	STAT	EMENT 9
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
BRAUSER MAIMONIDES ACADEMY 5300 SOUTHWEST 40TH AVENUE FT. LAUDERDALE, FL 33314	NONE UNRESTRICTED	N/A	10,000.
LIMMUD 1579 MONROE DRIVE, STE 155 ATLANTA, GA 30324	NONE UNRESTRICTED	N/A	5,000.
YESHIVA OF GREAT NECK 569 MIDDLE NECK ROAD GREAT NECK, NY 11023	NONE UNRESTRICTED	N/A	7,500.
GREENFIELD HEBREW ACADEMY 5200 NORTHLAND DR NE ATLANTA, GA 30342	NONE UNRESTRICTED	N/A	37,000.
YESHIVA ATLANTA 3130 RAYMOND DR ATLANTA, GA 30340	NONE UNRESTRICTED	N/A	12,500.
AMERICAN FRIENDS OF HATZOLAH 400 S LAKE DR LAKEWOOD, NJ 08701	NONE UNRESTRICTED	N/A	5,000.
ATLANTA KOSHER FOOD PANTRY 1440 SPRING STREET NW ATLANTA, GA 30309	NONE UNRESTRICTED	N/A	5,000.
ATLANTA COMMUNITY FOOD BANK 732 JOSEPH E. LOWERY BLVD ATLANTA, GA 30318	NONE UNRESTRICTED	N/A	10,000.

THE KERRI & JEFFREY SNOW FAMILY	PRIVATE		58-2365263
ATLANTA JEWISH HUNGER RELIEF FUND 1440 SPRING STREET NW ATLANTA, GA 30309	NONE UNRESTRICTED	N/A	5,000.
CAMP TWIN LAKES 600 MEANS STREET, SUITE 110 ATLANTA, GA 30318	NONE UNRESTRICTED	N/A	5,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A	_	102,000.

Snow Foundation Schedule of Average Fair Market Values Y/E 12/31/2009

		CASH	<b></b>				SECURITITES	TITES			
		SB 47471	SB 54729	•	Average		SB 47471	SB 54729	:	REIT	Average
December 2008	<b>€</b>	172,035.88 \$	6,432.14			₩	635,589.50 \$	1,008,994.99	\$ 66	473,270.56	
January 2009		145,170.76	20,624.20 \$	€9	172,131.49		594,881.82	934,971.93	93	470,627.52	\$ 2,059,168.16
February 2009		146,565.17	9,826.49		161,093.31		514,943.65	897,843.70	92	467,984.48	1,940,626.55
March 2009		149,208.79	63,217.14		184,408.80		575,673.82	921,160.74	74	465,341.44	1,921,473.92
April 2009		93,297.71	53,074.42		179,399.03		741,946.16	913,043.22	22	462,698 40	2,039,931.89
May 2009		93,808.98	51,555.36		145,868.24		787,600.79	913,407.11	11	460,055.36	2,139,375.52
June 2009		115,859.40	53,701.15		157,462.45		739,908.70	929,214.45	<del>1</del> 5	457,412.32	2,143,799.37
July 2009		133,072.12	74,574.29		188,603.48		793,448.49	911,422.33	33	454,769.28	2,143,087.79
August 2009		133,439.24	52,755.32		196,920.49		824,539.39	938,576.76	92	452,126.24	2,187,441.25
September 2009		75,856.69	109,993.00		186,022.13		918,053.42	965,082.36	36	449,483.20	2,273,930.69
October 2009		89,812.79	117,466.58		196,564.53		890,139.63	951,172.31	31	446,840.16	2,310,385.54
November 2009		89,817.76	117,745.93		207,421.53		913,918.05	977,114.77	14	444,197.12	2,311,691.02
December 2009		89,823.59	40,383.64		168,885.46		935,377.73	943,710.00	00	441,554.07	2,327,935.87
				8	\$ 2,144,780.92						\$ 25,798,847.55

\$ 2,149,903.96

Total average cash: \$ 178,731.74

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box  Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868  If you are filing for an Automatic 3-Month Extension, complete only Part I(on page 1)  Part II	Form 8	868 (Rev. 4-2009)				Page 2	
Part II Additional (Not Automatic) 3-Month Extension, complete only Part I (on page 1)    Part II	•				<b>&gt;</b>	X	
Part II			filed For	n 8868			
Name of Exempt Organization THE KERTI & JEFFREY SNOW FAMILY PRIVATE FOUNDATION, INC.  S8-2365263  For IRS use only  SOUTH BATTERY PLACE  Check type of return to be filed (File a separate application for each return) Form 990 Form 990 Form 990 Form 990 Form 990-F Form 990-T (first other than above) Form 990 BL X Form 990-F Form 990-T (first other than above) Form 990 Form 990-F Form 990-T (first other than above)  The books are in the care of ▶ 15 SOUTH BATTERY PLACE Form 990-T (first other than above)  The books are in the care of ▶ 15 SOUTH BATTERY PLACE ATLANTA, GA 30342  Telephone No ▶ 404 255−8877  If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  For calendar year 2009, or other tax year beginning  If this tax year is for less than 12 months, check reason: Initial return  ADDITIONAL INFORMATION IS NEEDED TO FILE A COMPLETE AND ACCURATE TAX RETURN.  Ba If this application is for Form 990-F, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  Ba as 952.  If this application is for Form 990-F, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  Ba as 952.  If this application is for Form 990-F, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  Ba as 952.  If this application is for Form 990-F, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  Ba as 952.  Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.  Signature and Verification  Under penalties of perjury, Idectare that I ha		<u> </u>					
THE KERRI & JEFFREY SNOW FAMILY PRIVATE  FOUNDATION, INC.  Number, street, and room or surte no If a P O, box, see instructions  Lower steet of things the instructions  City, town or post office, state, and ZIP code. For a foreign address, see instructions.  TLANTA, GA 30342  Check type of return to be filed (File a separate application for each return)  Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 8870  Form 990 BL X Form 990-FF Form 990-T (trust other than above) Form 4720 Form 6069  STOPI Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  JEFFREY SNOW  The books are in the care of P 15 SOUTH BATTERY PLACE ATLANTA, GA 30342  Telephone No P 404 255-8877 FAX No. FAX N	Par	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (					
Print File by the FOUNDATION, INC.  58-2365263  FOUNDATION, INC.  58-2365263  For IRS use only  15 SOUTH BATTERY PLACE  Check type of return to be filed (File a separate application for each return)  Form 990	Type	OF   ' "	. En	ployer ide	ntification	number	
Number, street, and room or suite no. If a P O, box, see instructions   SOUTH BATTERY PLACE		THE KERKI & DEFFREI SHOW FAMILI PRIVATE			c=0c0		
Number, street, and room or suite no. If a P O. box, see instructions    South Batter P PLACE	•	FOUNDATION, INC.		58-23	65263		
City, town or post office, state, and ZIP code. For a foreign address, see instructions.  ATLANTA, GA 30342  Check type of return to be filed (File a separate application for each return) Form 990	extende due dat	d Number, street, and room or suite no. If a P.O. box, see instructions etor 15 SOUTH BATTERY PLACE	Fo	IRS use o	nly		
Form 990 BL X Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 8870 Form 990 BL X Form 990-F Form 990-T (trust other than above) Form 4720 Form 6069 Form 6069  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.  JEFFREY SNOW  The books are in the care of P15 SOUTH BATTERY PLACE - ATLANTA, GA 30342  Telephone No P404 255-8877 FAX No. FAX No. FAX No. FIT II is so for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box II if this for part of the group, check this box A1 is with the names and EINs of all members the extension is for II request an additional 3-month extension of time until NOVEMBER 15, 2010  For calendar year 2009, or other tax year beginning If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period State in detail why you need the extension ADDITIONAL INFORMATION IS NEEDED TO FILE A COMPLETE AND ACCURATE TAX RETURN.  Ba If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions.  Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. 8c \$ 0.  Signature and Verification  Under penalties of perjury, I declare that I have examined this form, or, or, or form, or, or form, or the penalties of perjury, I declare that I have examined this form, or, or form.	return S	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	*	1		4	
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For calendar year 2009, or other tax year beginning  If this tax year is for less than 12 months, check reason: Initial return  State in detail why you need the extension  ADDITIONAL INFORMATION IS NEEDED TO FILE A COMPLETE AND ACCURATE TAX  RETURN.  8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  8a If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.  8b \$ 1,000.  C Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.  Signature and Verification  Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.			or all mer	ibers the e	xtension is	ior	
If this tax year is for less than 12 months, check reason: Initial return		·					
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Signature ► Title ► CPA Date ►			1116 069	Of HIS KIIOY	nouge and De	nei,	
	Signati	ure ▶ CPA	D:	ite 🕨			

Form 8868 (Rev. 4-2009)			Page 2		
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	× ,		<b>&gt; X</b>		
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed					
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	_				
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	оріев г	reeded).			
Name of Exempt Organization	Emp	loyer ident	ification number		
THE KERRI & JEFFREY SNOW FAMILY PRIVATE					
FOUNDATION, INC.	5	8-236	5263		
File by the extended Number, street, and room or suite no. If a P.O. box, see instructions.	For #	S use only	<del>y</del>		
due date for 15 SOUTH BATTERY PLACE		V			
return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
Instructions ATLANTA, GA 30342		_			
Check type of return to be filed (File a separate application for each return):					
Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	☐ Fo	rm 5227	Form 8870		
Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	□ĸ	rm 6069			
STOP! Do not complete Part II If you were not already granted an automatic 3-month extension on a previou	elv file	d Form 88	MAR.		
		41 0111100	<del></del>		
JEFFREY SNOW					
• The books are in the care of ▶ 15 SOUTH BATTERY PLACE - ATLANTA, GA 30342					
Telephone No. ▶ 404 255-8877 FAX No. ▶					
• If the organization does not have an office or place of business in the United States, check this box					
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)					
box . If it is for part of the group, check this box and attach a list with the names and ElNs of all	memb	ers the ext	ension is for.		
4 I request an additional 3-month extension of time until <u>NOVEMBER 15, 2010</u> .					
5 For calendar year 2009, or other tax year beginning, and ending	7-3-7		<del>·</del>		
6 If this tax year is for less than 12 months, check reason: L Initial return L Final return		Change in	accounting period		
7 State in detail why you need the extension					
ADDITIONAL INFORMATION IS NEEDED TO FILE A COMPLETE AN	D A	CCURA'	re tax		
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Signature and Verification					
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Signature Title CPA	Date	> 8'	112/10		
		For	n 8868 (Rev. 4-2009)		