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Form 990-PF	30-PF
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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052 2009

		nt of the Tr evenu <del>ge</del> Sei		Note	: The foundation	n may b				ite Foundatio		portir	ng requireme	nts	2(	<b>909</b>
For calendar year 2009, or tax year beginning  G Check all that apply  Initial return  Initial return							, 20									
_					Initial return			Initial	return o	of a former pu	blic charif	ty			Final ref	urn
		•			Amended r	etum			Addres	ss change		1	lame chang	je		
			Name of fo	undat	ion ,								A Employer	ıdentifi	cation numb	per
	Use th	ie IRS														
	lak	el.	THE VAL	ERI	E ADAMS M	1EMOR 1	IAL CH	ARITA	BLE '	TRUST				58-	6445315	<u> </u>
		wise,	Number an	d stre	et (or PO box n	umber if i	mail is not	delivered	to street	address)	Room/su	ıte	B Telephone nu	mber (see p	page 10 of the inst	ructions)
	•	int ype.	<b>l</b> '													
;		pecific	11200 E							<u></u>					<del></del>	-4020
		ctions.	City or towi	n, stat	e, and ZIP cod	е							C If exemption pending, ch	n applicat eck here	ion is	▶□
			į										D 1 Foreign	organizati	ons, check hen	▶ 🔝
_					A 30075										ons meeting there and attach	• _
H	Che	ck type	of organiza	atıon	X Section	on 501(										▶∐
1					npt chantable t					vate foundation			E If provate for	undation :	status was term	inated
ı			t value of al				unting m		X C	ash Acc	rual		under section	on 507(b)	(1)(A), check h	ere . ►
			m Part II, c				ther (sp								a 60-month ter	- 1 1
	<u> </u>	▶ \$			834.			(a) mus	st be or	n cash basis )			under section	on 507(b)	(1)(B), check h	
	∕aπ i	total o may n	f amounts in ot necessari	colun ly equ	and Expense nns (b), (c), and all the amounts of the instructi	d (d) in	(a) r	Revenue Denses p books		(b) Net inve		(	c) Adjusted n income	et	for ch	ursements antable poses asis only)
-	1				eceived (attach sche			100	000.	<u> </u>					(Casir E	asis only
	2	Check	if the	found	ation is not requ	ired to		1								
	3	-	- 011110		B									-		
	4		•	•	m securities				545.		545.				ATCH	1
	5 a	Gross r	ents													
	ь	Net rent	al income or (le	oss) _												
<u>a</u>					f assets not on lir	ne 10										
Revenue	b		ales pnce for a In line 6a	<u></u>												
Š	7	Capital	gain net inco	ome (f	from Part IV, Im	e 2) .										
-	8	Net sho	ort-term_capit	al gai	3\/E.D	· ]										
	9 10 a	Income	modification		JYEU.	ا ٠٠٠										
		and aflow	vances · · ·			<u> </u>										
	b	Less Co	petror goods/ac	olaji • (	3 2010 C	7									-	
	ı		3		1 1	<b>K</b>			700.	<u> </u>					ATCH	2
	11		Add lines 17-th		edule)>────── N.J. UT			101.	245.		545.				AICH	
_	12				ectors, trustees,	<del></del>			0.		0.10.					
	14	•			ectors, trustees, t and wages .	• •				<del>-</del>						
S	1		• •		benefits								·			
nse	16 a			-	ıle)											
×pe	b				chedule)	1		8	,250.		0.			0.		0
e E	С		-		attach schedule											
Ę	17	•				,										
stra	18	Taxes (a	ittach schedule	e) (see i	page 14 of the instri	ıctıons)* *		6	,000.							
Ë	19	Deprec	iation (attach	sche	dule) and deple	etion .										•
퉏	20	Occupa	ncy													
Υþ	15 16 a b c 17 18 19 20 21 22 23 24	Travel,	conferences	, and	meetings											
a	22															
ing	23		•		chedule) ATC	í			86.				<del></del>			
graf	24				inistrative exp	enses.		1.	33.		_					_
å			es 13 through						336.		0.	<u>-</u>		0.		136 500
-	25			-	s paid			143,	427.		0.		<del></del>	0.		136,500. 136,500.
_	26				ents Add lines 24	and 25		13/,	421.					υ.	<del></del>	130,300.
	27		t line 26 fron					-56	182.							
				-	es and disburseme (if negative, ent	!		J 0 ,	104.		545.		<del></del>			
					negative, enter	· ' I					- 375.		_	-0-		
_				<u>ا الرحد</u>	ganvo, cinci	<u> /• 1</u>										

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Form 990-PF (2009)



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_		Attached schedules and amounts in the	Beginning of year	End o	of year
Ŀ	art I	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	969,016.	912,834.	912,834.
	3.	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 16 of the instructions)			
	7	Other notes and loans receivable (attach schedule)		· <u>-</u>	
	l '	Less allowance for doubtful accounts			
	8				
ţ		Inventories for sale or use		<del></del>	
Assets	9	Prepaid expenses and deferred charges			
⋖	ı	Investments - U S and state government obligations (attach schedule)			<del></del>
	l .	Investments - corporate stock (attach schedule)			
į	11 6	Investments - corporate bonds (attach schedule)			· · · · · · · · · · · · · · · · · · ·
	``	and equipment basis			
		(attach schedule)		<del></del>	
	12	Investments - mortgage loans			
	13 14	Investments - other (attach schedule) Land, buildings, and			
	14				
	ŀ	Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
_		instructions Also, see page 1, item I)	969,016.	912,834.	912,834.
i	17	Accounts payable and accrued expenses			,
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable (attach schedule)			
בֿ	22	Other liabilities (describe			1
		,		-	1
	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here			]
		and complete lines 24 through 26 and lines 30 and 31.			
S	24	Unrestricted			
ances	25	Temporanly restricted		<u></u>	1
		Permanently restricted		TV	1
8	26	Foundations that do not follow SFAS 117,			1
Net Assets or Fund Ba		check here and complete lines 27 through 31.			
ΓF	27	Capital stock, trust principal, or current funds	969,016.	912,834.	,
s o	28	Paid-in or capital surplus, or land, bldg , and equipment fund	202,0201	522,0011	
set	29		0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances (see page 17 of the			
et	30		969,016.	912,834.	
Z		Instructions)  Total liabilities and net assets/fund balances (see page 17	909,010.	912,034.	{
	31		060 016	012 024	
_		of the instructions)	969,016.	912,834.	<u> </u>
		Analysis of Changes in Net Assets or Fund			T
1		I net assets or fund balances at beginning of year - Part II, co			0.00 0.15
		of-year figure reported on prior year's return)		· · · · · · · · · · · · · · · · · · ·	969,016.
		r amount from Part I, line 27a		2	-56,182.
		r increases not included in line 2 (itemize)		3	
4	Add	lines 1, 2, and 3		l a	912,834.
5	Decr	eases not included in line 2 (itemize)  I net assets or fund balances at end of year (line 4 minus line		5	
6_	Tota	net assets or fund balances at end of year (line 4 minus line	5) - Part II, column (b), I	ıne 30 6	912,834.

	orm 990-PF (2009)	and the second section in	58-64453	15		Page 3
L		s and Losses for Tax on Inv		(b) How	(c) Date	(d) Date sold
		d describe the kind(s) of property sold (e	- ·	P-Purchase D-Donation	acquired (mo , day, yr )	(mo, day, yr)
1:				D-Donation		
	b					
_	 C					
_	d		J			
_	<u> </u>		<del>-</del>			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
_ 6	3					
_1	b					
_	C				<del></del>	<del>~~</del>
_9	1				<del></del>	
_6	<u> </u>			ļ		
_(	Complete only for assets sho	wing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col (h) ga	ain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less to Losses (from co	
ě	1					
_1	)				-	
_						
_(	d					
_6	e		<u></u>	ļ		
2	Capital gain net income or (	net capital loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7			
	-	•	· · · · · · · · · · · · · · · · · · ·	2		
3	, -	or (loss) as defined in sections 1222				
		ine 8, column (c) (see pages 13 and				
_		ine 8		3		
F	art V Qualification Un	der Section 4940(e) for Reduc	ed Tax on Net Investment Inco	ome		
(F	or optional use by domestic	private foundations subject to the se	ection 4940(a) tax on net investment	income)	•	
lf	section 4940(d)(2) applies, le	eave this part blank				
						. —
			ible amount of any year in the base	репод?	L	JYes X No
_	<del></del>	ot qualify under section 4940(e). Do				
1		unt in each column for each year, se	ee page 18 of the instructions before	making a		
	(a) Base penod years	(b)	(c)		(d) Distribution rat	tio
_	Catendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	col (c))
_	2008	136,705.	966,346.	,		0.141466
_	2007	92,575.	829,190.			0.111645
	2006	111,322.	685,539.			0.162386
	2005	97,629.	621,857.			0.156996
	2004	85,993.	568,041.			0.151385
2	Total of line 1, column (d)			2		0.723878
3	Average distribution ratio for	or the 5-year base period - divide the	e total on line 2 by 5, or by the			
	•	ation has been in existence if less th		3	1	0.144776
	,					
4	Enter the net value of nonc	haritable-use assets for 2009 from	Part X line 5	4	;	892,574.
•	Enter the net value of none	mantable abe abbets for 2000 from	Part A, line 5	-	<u> </u>	032,3711
5	Multiply line 4 by line 3			5		129,223.
J	Multiply line 4 by line 3 .			3	<u> </u>	129,223.
_	F-1 40/ -f1	40/ - ( D 1 L - 071 )				-
6	Enter 1% of net investment	income (1% of Part I, line 27b)		6		5.
_	A11P - 1-					100 000
7	Add lines 5 and 6		. <i></i>	7		129,228.
8	Enter qualifying distribution	s from Part XII, line 4	n Part VI, line 1b, and complete ti	8		136,500.
	If line 8 is equal to or gree Part VI instructions on page	eater than line 7, check the box ii e 18	n Part VI, line 1b, and complete th	nat part	using a 1% tax	rate. See the

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	tructi	ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here land enter "N/A" on line 1				
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u>5.</u>	
	here ► X and enter 1% of Part I, line 27b		•		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% J of Part I, line 12, col (b)		•	•	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2				
3	Add lines 1 and 2			5.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5.		
6	Credits/Payments Credits/Payments			•	
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 76.				
b	Exempt foreign organizations-tax withheld at source 6b 0.				
С	Tax paid with application for extension of time to file (Form 8868) 6c 0.				
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d			76.	
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			71.	
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ► 71. Refunded ► 11				
Par	t VII-A Statements Regarding Activities			<del></del>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No	
	participate or intervene in any political campaign?	<u>1a</u>		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	Ì		۱.,	
	of the instructions for definition)?	1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities			١,,	
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 year				
	(1) On the foundation >\$ (2) On foundation managers >\$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers   \$			х	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<del>  ^-</del>	
	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			х	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b 5		X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-3-		<u> </u>	
	If "Yes," attach the statement required by General Instruction T			İ	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>				
		6	х		
7	conflict with the state law remain in the governing instrument?	7	Х		
, 8а	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		,		
	CD		,		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
J	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
•	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page				
	27)? If "Yes," complete Part XIV	9		х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses	10		х	
			n-PF	(2000)	

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Х

3b

4a

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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?

Form 990-PF (2009) 58-6445315 Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(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 individual for travel, study, or other similar purposes? . . . . . . . (4) Provide a grant to an organization other than a chantable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Х Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums Х b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870 Yes X No 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? Х Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions). (b) Title, and average hours per week devoted to position (c) Compensation (If not paid, enter -0-) (d) Contributions to employee benefit plans (e) Expense account, other allowances (a) Name and address ind deferred compensation DONNA CURLING RUSTEE 11200 BOWEN ROAD, 0 ROSWELL, GA 30075 0 0. Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE." (d) Contributions to (b) Title, and average employee benefit plans and deferred (e) Expense account, other allowances (a) Name and address of each employee paid more than \$50,000 (c) Compensation hours per week devoted to position compensation NONE Total number of other employees paid over \$50,000 <u>. . . . . . . . . . . . . .</u> .**>** 

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). 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	▶ NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1_N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3	▶

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee page 24 of the instructions.)	gn foundatio	ns,
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	0.
b	Average of monthly cash balances	1b	906,167.
C		1c	0.
d	Total (add lines 1a, b, and c)	1d	906,167.
е	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	906,167.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	13,593.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	892,574.
6	Minimum investment return. Enter 5% of line 5	6	44,629.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here		<u></u> -
1	Minimum investment return from Part X, line 6	1	44,629.
2a	Tax on investment income for 2009 from Part VI, line 5		
b		1	
С		2c	5.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	44,624.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	44,624.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	44,624.
		<del></del>	<del></del> -
	art XII Qualifying Distributions(see page 25 of the instructions)	<del></del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		126 500
a		1a	136,500.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b		3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	136,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	5.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	136,495.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet qualifies for the section 4940(e) reduction of tax in those years.	her the found	ation

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Pa	ri XIII Undistributed Income (see page	26 of the instruction	is)	,	
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years pnor to 2008	2008	2009
	line 7			,	44,624.
2	Undistributed income, if any, as of the end of 2009	,			
а	Enter amount for 2008 only		•		
b	Total for pnor years 20 07 ,20 06 ,20 05				,
3	Excess distributions carryover, if any, to 2009				
-	From 2004 56, 831.				
ь	CO 470				
	70.401				
4	F2 026				
·	102 070				
		360,614.			
_f	Total of lines 3a through e	300,014.			
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 136,500.				
_	A 1 11 0000 1 1 1 1 0				
а	Applied to 2008, but not more than line 2a		<u> </u>		
þ	Applied to undistributed income of prior years (Election			!	
	required - see page 26 of the instructions)			·	
C	Treated as distributions out of corpus (Election				*
	required - see page 26 of the instructions)		· · · · · · · · · · · · · · · · · · ·		44 624
	Applied to 2009 distributable amount	01 076			44,624.
	Remaining amount distributed out of corpus	91,876.			
5	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				1
	indicated below:	450 400	-		l
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	452,490.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed		· · · · · · · · · · · · · · · · · · ·		
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions				
e	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
•	4d and 5 from line 1 This amount must be				
	distributed in 2010				
7	Amounts treated as distributions out of corpus		,		
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)			1	
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the				
	instructions)	56,831.			
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	395,659.		··	
10	Analysis of line 9				
а	Excess from 2005 68, 478.				
b	Excess from 2006				
С	Excess from 2007 52, 926.				
d	Excess from 2008 103, 978.				
	Excess from 2009 91,876.				

Pa	art XIV Private Oper	rating Foundations	(see page 27 of the	instructions and Pai	t VII-A, question 9)	NOT APPLICABLE		
1 a	If the foundation has	received a ruling or o	determination letter that	t it is a private oper	ating			
	foundation, and the ruling	is effective for 2009, ente	r the date of the ruling		. ▶			
b	Check box to indicate whe	ther the foundation is a p	nvate operating foundatio		4942()	)(3) or 4942(j)(5)		
2 a	Enter the lesser of the ad-	Tax year Pnor 3 years (e) Total						
	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(6) 10(2)		
	I or the minimum investment return from Part X for each							
	year listed							
b	85% of line 2a							
c	Qualifying distributions from Part							
٠	XII, fine 4 for each year listed							
d	Amounts included in line 2c not					<del> </del>		
	used directly for active conduct							
_	of exempt activities		<u> </u>					
·	directly for active conduct of							
	exempt activities. Subtract line							
3	2d from line 2c Complete 3a, b, or c for the			<u> </u>		<del> </del>		
•	alternative test relied upon							
а	"Assets" afternative 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 invest- ment return shown in Part X,							
	line 6 for each year listed							
С	"Support" alternative test - enter		İ					
	(1) Total support other than		İ					
	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)	<del></del>						
	port from an exempt							
	organization (4) Gross investment income							
Dа		any Information (C	omplete this part	only if the found	ation had \$5,000	or more in assets		
Γē	at any time of	during the vear - se	e page 28 of the in	structions.)	ation had \$5,000	or more in assets		
1	Information Regarding		<u> </u>		·			
	List any managers of	_		than 2% of the total	Contributions receive	ed by the foundation		
_	before the close of any					ca by the roundation		
	·		•	, ,	, , , , ,			
<del>-</del>		DONNA CURLING	400/					
p	List any managers of					large portion of the		
	ownership of a partners	ship of other entity) of	which the loundation	nas a 10% or greater	merest			
	\7 / D							
_	N/A Information Regarding	Cantaibution Count	Cift Loon Coholombi	4- D	<del> </del>			
2								
	Check here ► if the	ne foundation only r	nakes contributions	to preselected charit	able organizations a	nd does not accept		
	unsolicited requests for				28 of the instruction	ns) to individuals or		
	organizations under oth	ter conditions, comple	ete items 2a, b, c, and	0				
а	The name, address, and	d telephone number of	the person to whom a	pplications should be a	ddressed			
	N/A							
b	The form in which applie	cations should be subn	nitted and information a	and materials they sho	uld include			
				•				
	"WRITTEN RE	QUEST"						
С	Any submission deadlin	es						
_	,							
	N/A							
	Any restrictions or lin	nitations on awards	such as by geogra-	phical areas chantal	ole fields kinds of a	institutions or other		
u	factors	awaius,	such as by yeogla	pinodi dicas, challdi	aic neido, killus Ul I	montations, or other		
	N/A							
JSA	11,11	1						

Form 990-PF (2009)			58-6445315	Page 11
Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid Duri	ng the Year or App	roved for I	Future Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
ATTACHMENT 5				
ATTACHMENT 5				
•				
			]	
		ŀ		
			!	
			]	
			]	
			İ	
	-			
			1	
			İ	
Total			▶ 3a	143,091.
b Approved for future payment	]			
		İ		
		L		
Total			▶ 3b	1

Form 990-PF	(2009)			58-	-6445315	Page 12
Part XV	-A Analysis of Income-Produ	ucing Act	ivities			
Enter gross amounts unless otherwise indicated		Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt function income
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
a						
b						
c						
e	<del> </del>	 		<b></b>		
,					<u> </u>	
-	s and contracts from government agencies rship dues and assessments		-	<del> </del>	· · · · · · · · · · · · · · · · · · ·	
	on savings and temporary cash investments		· · · · · · · · · · · · · · · · · · ·	1		
	ds and interest from securities			14	545.	
	tal income or (loss) from real estate					
a Del	ot-financed property					
b Not	debt-financed property				<u> </u>	
	al income or (loss) from personal property			<del> </del>		
	nvestment income			<del></del>	· · · · · · · · · · · · · · · · · · ·	
•	loss) from sales of assets other than inventory			<del> </del>	-	
	ome or (loss) from special events orofit or (loss) from sales of inventory			<del>                                     </del>		
	evenue a	· · · · · · · · · · · · · · · · · · ·				
	IOR YEAR REFUND			1	700.	
c						
_						
е				ļ		
	I Add columns (b), (d), and (e)			<u> </u>	1,245.	
13 Total. A	odd line 12, columns (b), (d), and (e)		• • • • • • • • • • • • • • • • • • •	• • • • • •	<sup>13</sup>	1,245.
	-B Relationship of Activities			empt Purc	ooses	
Line No.	Explain below how each activity					tributed importantly to
▼	the accomplishment of the fo page 29 of the instructions)					
	N/A					
		· · · · · · · · · · · · · · · · · · ·				
	·					
	<del></del>		<del></del>			<del> </del>
		- · · - · · · · · · · · · · · · · ·	<u> </u>			
						<del></del>
						<del></del>

	330-1-1-1						70 0443313			_	age 13
Pa	rt XVII		n Regarding ganizations	Transfers To an	nd Transa	ctions	and Relationship	s With 1	lonc	harii	table
1	in se	he organization direction 501(c) of the	ectly or indirectly	engage in any of an section 501(c)(3)						Yes	No
а	organı Transi	zations? fers from the reporting	foundation to a noi	nchantable exempt orga	nization of				:	-	
	(1) C	ash				. <b></b>			1a(1)		Х
									1a(2)		X
b		transactions									
				organization					1b(1)		<u>X</u> _
				exempt organization .					1b(2)		X
				ets							X
									1b(4)		X
				fundraising solicitations					1b(5)		X
c				her assets, or paid empli							X
				"Yes," complete the						fair i	narket
		<del>-</del>		rvices given by the	-		* *	="			
		=		ngement, show in co	-						
(2) [	ine no	(b) Amount involved	(s) Name of	nonchantable exempt orga	nization	(d) Dose	nption of transfers, transact	one and char			ıte.
(0)	ine no	(b) Amount involved	N/A	mondiantable exempt orga	inzadon	N/A	ipilon of tansiers, tansact	ons, and snam	iy allali	genien	13
								•			
			·						*		
							·····				
			-					<u> </u>			
							-				
				· · · · · · · · · · · · · · · · · · ·		· · ·					
	section		other than section	ated with, or related 501(c)(3)) or in section					Ye	es 🗀	No.
		(a) Name of organiza	tion	(b) Type of o	organization		(c) Descripti	on of relations	пр		-
	_				· ·		<del> </del>	<del></del>	_		
											-
	Under belief, i	penaltes of perjury, 1 of the time, correct, and content and conte	eclare that I have e omplete Declaration	xamined this return, inclu- of preparer (other than to	ding accompar axpayer or fidu	ying schedi crary) is bas	ules and statements, and ed on all information of v	to the best of hich preparer	fmykr hasan	owledg y knov	ge and vledge
ارو	Sic	nature of officer or truste	e Contraction	<u> </u>		Date	Title				
护				V	Date			Preparer's			
Sign Here	Pald Preparer's Use Only	Preparer's signature	· A f	that	1	11/2010	Check if self-employed ▶	number (Se page 30 of th P003709	e instru		1
	Prep Use	Firm's name (or your	<b>D</b>	WATERHOUSECOOP	ERS LLP		EIN ▶	13-40083	24		
- 1		self-employed), addre	ess. 🔻 125 H	IGH STREET			1				

02110

Form 990-PF (2009)

Phone no 617-530-7461

125 HIGH STREET

BOSTON, MA

self-employed), address,

and ZIP code

# Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasur

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

2009

Name of the organization THE VALERTE ADAMS MEI	MORIAL CHARITABLE TRUST		Employer identification number		
			58-6445315		
Organization type (check one)					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number) organiza	ation			
	4947(a)(1) nonexempt chantable trust	not treated as a private four	dation		
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt chantable trust	treated as a private foundation	1		
	501(c)(3) taxable private foundation				
	vered by the General Rule or a Special Rule. (8), or (10) organization can check boxes for bo	oth the General Rule and a Spo	eciał Rule See		
General Rule					
_	iling Form 990, 990-EZ, or 990-PF that received ne contributor Complete Parts I and II	I, during the year, \$5,000 or m	ore (in money or		
Special Rules					
sections 509(a)(1) an	3) organization filing Form 990 or 990-EZ that med 170(b)(1)(A)(vi), and received from any one c 2% of the amount on (i) Form 990, Part VIII, line	contributor, during the year, a c	ontribution of the greater		
the year, aggregate of		lusively for religious, charitable	e, scientific, literary, or		
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 Sp	pecial Rules does not file Sche	dule B (Form 990,		
	t answer "No" on Part IV, line 2 of its Form 990, to certify that it does not meet the filing requiren				
For Privacy Act and Paperwork Reduc	tion Act Notice, see the Instructions	Schedule B	(Form 990, 990-EZ, or 990-PF) (2009)		

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

Schedule B	(Form 990.	990-FZ	or 990-	PF)	20091

Page of of Part

Name of o	rganization THE VALERIE ADAMS MEMORIAL CHAR	ITABLE TRUST	Employer identification number 58-6445315
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DOUGLAS C & DONNA A CURLING  11200 BOWEN ROAD  ROSWELL, GA 30075	\$ 100,000.	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
4		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

# ATTACHMENT 1

SECURITIES	
FROM	
INTEREST	
AND	
DIVIDENDS	
ı	
PART I	
990PF,	
FORM	

NET INVESTMENT <u>INCOME</u>	536.	545.
REVENUE AND EXPENSES PER BOOKS	536.	545.
		TOTAL
DESCRIPTION	SUNTRUST G1R-257036 SUNTRUST 8814974641	

CHE	VALERTE	$\Delta D\Delta MC$	MEMORIAI.	CHARTTABLE	TRITET

58-6445315

ATTACHMENT 2

FORM 990PF, PART I - OTHER INCOME

REVENUE AND

EXPENSES
PER BOOKS

700.

DESCRIPTION U.S. TREASURY REFUND

TOTALS

700.

58-6445315

ATTACHMENT 3

FORM .990PF, PART I - TAXES

REVENUE

AND

EXPENSES

DESCRIPTION

PER BOOKS

US TREASURY

6,000.

TOTALS

6,000.

58-6445315

ATTACHMENT 4

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND **EXPENSES** 

DESCRIPTION OVERDRAFT FEE WIRE FEE

PER BOOKS

36. 50.

TOTALS

86.

EORM 990RE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	ina tasa international		ATTACHMENT 5
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ST FRANCIS SCHOOL BRUNSWICK, GA 31520	NO RELATIONSHIP SCHOOL	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	6,000
UNIVERSITY OF GEORGIA ARCH FOUNDATION ATHENS, GA 30602	NO RELATIONSHIP NON-PROFIT	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	5,000
AMIGOS FOR CHRIST BUFORD, GA 30518	NO RELATIONSHIP NON-PROFIT	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	30,000
GEORGIA REGIONAL GIRLS CHOIR ROSWELL, GA 30075	NO RELATIONSHIP NON-PROFIT	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	26,000
DULUTH HIGH SCHOOL DULUTH, GA 30096	NO RELATIONSHIP SCHOOL	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	4,000
HEBRON CHRISTIAN ACADEMY DACULA, GA 30019	NO RELATIONSHIP SCHOOL	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	000'6

ATTACHMENT 5 (CONT'D)

# FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
STAR HOUSE ROME, GA 30165	NO RELATIONSHIP NON-PROFIT	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	10,000
SMITH GILBERT GARDEN KENNESAW, GA 30152	NO RELATIONSHIP NON-PROFIT	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	35,000
LA MUSICA LIRICA MOODSTOCK, IL 60098	NO RELATIONSHIP NON-PROFIT	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	4,500
ROSWELL PRESBYTERIAN ROSWELL, GA 30075	NO RELATIONSHIP NON-PROFIT	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	7,000
NEXOS VOLUNTARIOS 131 DEPARTMENTO 204 27 SAN ISIDRO LIMA PERU	NONE	TO CARRY ON THE ORGANIZATION'S ACTIVITIES	6,591

TOTAL CONTRIBUTIONS PAID

143,091

ATTACHMENT 5

# Form 8868

(Rev April 2009)

# Application for Extension of Time To File an Exempt Organization Return

Department of the Internal Revenue S		► File a separate application for each return.					
<ul> <li>If you are f</li> </ul>	iling for an	Automatic 3-Month Extension, complete only Part I and check this box	<u>.</u>	▶ <u>  X</u>			
<ul> <li>If you are find the second of t</li></ul>	iling for an <b>te Part II</b> un	Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 pless you have already been granted an automatic 3-month extension on a previous	of this form) isly filed Form	n 8868			
Part   Auto	matic 3-N	Month Extension of Time. Only submit original (no copies needed).					
A corporation	required to	file Form 990-T and requesting an automatic 6-month extension - check this box	and complete	•			
Part I only			<b></b>	▶ ∟			
time to file inco	ome tax ret						
one of the ref electronically i	turns note if (1) you v omposite o	Generally, you can electronically file Form 8868 if you want a 3-month automated below (6 months for a corporation required to file Form 990-T). However, want the additional (not automatic) 3-month extension or (2) you file Forms 990 or consolidated From 990-T Instead, you must submit the fully completed and sign the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Chair	you∙cannot D-BL, 6069, aned page 2	or 8870, grou (Part II) of For			
Type or	Name of 8	Exempt Organization Ex		ification number			
print	THE	VALERIE ADAMS MEMORIAL CHARITABLE TRUST	58-6445	315			
File by the	i '	street, and room or suite no. If a P.O. box, see instructions					
due date for filing your		00 BOWEN ROAD					
return. See instructions	1	or post office, state, and ZIP code. For a foreign address, see instructions WELL, GA 30075					
	ــــــــــــــــــــــــــــــــــــــ	be filed (file a separate application for each return)		<del></del>			
Form 990		Form 990-T (corporation) Form 4	720				
Form 990		Form 990-T (sec. 401(a) or 408(a) trust) Form 5	227				
<del></del>	Form 990-EZ Form 990-T (trust other than above) Form 6069						
X Form 990-	-PF	Form 1041-A Form 8	870				
<ul> <li>The books</li> <li>Telephone</li> </ul>		Pare of ► DONNA CURLING  FAX No ►	<del></del>	-			
<ul> <li>If the organ</li> <li>If this is for</li> <li>for the whole gnames and EIN</li> </ul>	nization doe a Group R group, chec so of all me	es not have an office or place of business in the United States, check this box eturn, enter the organization's four digit Group Exemption Number (GEN)	ttach a list				
47(7)		omatic 3-month (6 months for a corporation required to file Form $\frac{08/15}{2010}$ , to file the exempt organization return for the organization na s return for.	990-T) exte med above.	ension of time The extension i			
<b>►</b> [X]	calendar v	ear 2009 or					
	tax year b						
-			hange in ac	counting period			
	•	for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less		s 76.			
		is See instructions.  for Form 990-PF or 990-T, enter any refundable credits and estimated tax paym	3 a	70.			
		rior year overpayment allowed as a credit.	3 b	s 76.			
		act line 3b from line 3a Include your payment with this form, or, if required, de		•			
		or, if required, by using EFTPS (Electronic Federal Tax Payment System).	See				
instruction			3 c	<b>\$</b> 0.			
		o make an electronic fund withdrawal with this Form 8868, see Form 8453-EO ar					
for payment ins	0 0						
		erwork Reduction Act Notice, see Instructions.	Form 8	868 (Rev 4-2009			

Form 81	1868 (Rev. 4-2009)			Page 2
• If y	you are filling for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box			<b>▶</b> X
Note.	. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Forr	n 886	88.
	you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Pari	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no cor	ies	nee	ded).
	Name of Exempt Organization Employer Identifi			
Type print		5 ا		
File by	Number street and room or cuite no. If a B O box see instructions			
extend	ded 11200 BOWEN ROAD			
due de filing U	he City, town or post office, state, and ZIP code. For a foreign address, see instructions			
etum nstruc				
Chec	k type of return to be filed (File a separate application for each return)			
	Form 990 X Form 990-PF Form 1041-A	Γ	F	orm 6069
$\square$	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 4720			orm 8870
М	Form 990-EZ Form 990-T (trust other than above) Form 5227			
STOP	P! Do not complete Part II if you were not already granted an automatic 3-month extension on a previo	usly	filed	Form 8868.
	e books are in the care of DONNA CURLING			
	lephone No. ► FAX No. ►		_	
	the organization does not have an office or place of business in the United States, check this box		_	▶□
	his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If t			
	ne whole group, check this box If it is for part of the group, check this box and attack			
	ith the names and EINs of all members the extension is for.			
	I request an additional 3-month extension of time until 11/15/2010			
	For calendar year 2009, or other tax year beginning and ending	٠-،		
		e in a	accol	inting period
	State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO GATHER			
	INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.			
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	$\sqcap$		
	nonrefundable credits. See instructions.	8a	\$	76.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated		سسين	
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
	previously with Form 8868	8b	\$	76.
С	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	$\Box$		
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	8c	\$	0.
	Signature and Verification		<u> </u>	
Inder	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of	f my	knowłe	edge and belief,
t is true	ie, correct, and complete, and that I am authorized to prepare this form.			
			1	
Signatu	ure > Title > Putm Date 1	× 8	113	10
	PRICEMAPERHOUSECOOPERS LLP	Form	8868	(Rev 4-2009)
	125 HIGH STREET ,			

BOSTON, MA 02110