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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2010

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

For calendar year 2010, or tax year beginning

, and ending

GC	heck	all that apply: Initial return Amended return	Initial return of a fo	•	· —	Final returi	n
Nar	ne of	foundation	Address chang	yc ————		A Employer identification	n number
		THE CONTRACT FORTONTO	N TNO			FO 604276	•
<u> </u>		THE COUSINS FOUNDATIO			Room/suite	58-6043765	
Nun	npera	3445 PEACHTREE ROAD,	•		Hoom/suite	B Telephone number (404) 233-	-4339
City	or to	own, state, and ZIP code			<u> </u>	C If exemption application is	
"	•	ATLANTA, GA 30326	-	_		D 1. Foreign organization	s, check here
H C	heck	type of organization X Section 501(c)(3) ex	cempt private foundation			Foreign organizations me check here and attach co	eeting the 85% test, omputation
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ıtion		E If private foundation sta	itus was terminated
I Fa	ır ma	arket value of all assets at end of year J Accounti	ng method: X Cash	Accr	rual	under section 507(b)(1	
			ther (specify)			F If the foundation is in a	60-month termination
▶		41,118,599. (Part I, colu	mn (d) must be on cash b	pasis)		under section 507(b)(1	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	401,734.			N/A	
	2	Check it the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	267,128.		7,128.		STATEMENT 1
	4	Dividends and interest from securities	407,828.	40	7,828.		STATEMENT 2
	5a	Gross rents					
	b	Net rental income or (loss)					<u></u>
ā	6a	Net gain or (loss) from sale of assets not on line 10	191,372.		-	**	
Revenue	b	Gross sales price for all assets on line 6a 6,574,064.		10	1 277		
Re	′	Capital gain net income (from Part IV, line 2)		19	1,372.		
	9	Net short-term capital gain					
	100	Income modifications Gross sales less returns and allowances					
		Less dost of goods sold				ļ 	
	c	Gross Sout or (1059)					
	11	Other indome A/O	<4,322.	> ~	4,322.	>	STATEMENT 3
	12	Other indome AVO in Total Add lines 1 through 11	1,263,740.		2,006.		
	13	Opmpensation of officers, directors trustees, etc.	0.		0.		0.
	14	Other employer salaries and wages Pension plans, employee benefits					
(n	15	Pension plans, employee benefits					
NIVA© ve Expenses	1	Legal fees					
		Accounting fees STMT 4	7,850.		0.		7,850.
<u>)</u>		Other professional fees					ļ
4		Interest CONTROL F	10 250	1	0,250.		0.
loberating and Administration	18	Taxes STMT 5	10,250.		0,230.	<u> </u>	ļ·
CĒ.	19	Depreciation and depletion Occupancy					-
-5	20	Travel, conferences, and meetings			 -		
₩.	22	Printing and publications				<u> </u>	
g	23	Other expenses STMT 6	254,658.	25	4,547.		111.
뺭	24	Total operating and administrative	25.1,0001				
		expenses. Add lines 13 through 23	272,758.	26	4,797.		7,961.
-0	25	Contributions, gifts, grants paid	1,329,343.				1,329,343.
	26	Total expenses and disbursements.					
		Add lines 24 and 25	1,602,101.	26	4,797.		1,337,304.
	27	Subtract line 26 from line 12:					
		Excess of revenue over expenses and disbursements	<338,361.				
		Net investment income (if negative, enter -0-)		59	7,209.	NT / 3	
0235 12-07) C	Adjusted net income (if negative, enter -0-)	the instructions	<u> </u>		N/A	Form 990-PF (2010)
12-07	-10	LHA For Paperwork Reduction Act Notice, see	uic iiisuuduulis.				FULLE 230-FF (2010)

同	Part II Balance Sheets Attached schedules and amounts in the description	Beginning of year	En	d of year
	Part II Balance Sheets Aracheo 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
	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	5,692,024.	352,062	352,062.
	3 Accounts receivable ► 3,966.			1 332,3323
	Less: allowance for doubtful accounts	18,102.	3,966	3,966.
		10,1021	3,700	3,300:
	4 Pledges receivable ►			
	Less; allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other			
	disqualified persons			
	7 Other notes and loans receivable 418,325.			- -
	Less allowance for doubtful accounts ► 100,000.	307,219.	318,325	318,325.
S.	8 Inventories for sale or use			
Assets	9 Prepaid expenses and deferred charges			
Ą	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 8	31,033,463.	40,444,245	40,444,246.
	c Investments - corporate bonds	31,033,1031	10/111/213	1 10,111,2100
				
	11 Investments - land, buildings, and equipment, basis			}
	Less accumulated depreciation			
	12 Investments - mortgage loans			
	13 Investments - other			
	14 Land, buildings, and equipment: basis ►			Į.
	Less accumulated depreciation			
	15 Other assets (describe ►)			
	16 Total assets (to be completed by all filers)	37,050,808.	41,118,598	41,118,599.
	17 Accounts payable and accrued expenses		 	
	18 Grants payable	3,461,346.	2,632,547	ा
s	19 Deferred revenue			\dashv
Liabilities	20 Loans from officers, directors, trustees, and other disqualified persons			
<u>=</u>	21 Mortgages and other notes payable			\dashv
Ë	I F			
	22 Other liabilities (describe)			-
	IOO Total liabilities (and lines 47 through 00)	3,461,346.	2,632,547	,
_	23 Total liabilities (add lines 17 through 22)	3,401,340.	2,032,341	긕
	Foundations that follow SFAS 117, check here			
ģ	and complete lines 24 through 26 and lines 30 and 31.			
5	24 Unrestricted			
aga	25 Temporarily restricted			_
Ö	26 Permanently restricted	 		_]
Net Assets or Fund Balances	Foundations that do not follow SFAS 117, check here			
Ę	and complete lines 27 through 31.			
Ö	27 Capital stock, trust principal, or current funds	103,917.	103,917	
set	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	C	
As	29 Retained earnings, accumulated income, endowment, or other funds	33,485,545.	38,382,134	
₹	30 Total net assets or fund balances	33,589,462.	38,486,051	
~	-			
	31 Total liabilities and net assets/fund balances	37,050,808.	41,118,598	
\equiv	· L. · · · · · · · · · · · · · · · · · · ·			
P	Part III Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
•		JU		1 33,589,462.
9	(must agree with end-of-year figure reported on prior year's return)		F	
	Enter amount from Part I, line 27a	מוס מומנט		
	Other increases not included in line 2 (itemize)	SEE ST		5,234,950.
	Add lines 1, 2, and 3			4 38,486,051.
	Decreases not included in line 2 (itemize)			5 0.
<u>5</u>	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		6 38,486,051.
				Form 990-PF (2010)

Part I	/ Capital Gains	and Los	sses for Tax on In	vestment	Income							
	(a) List and desc 2-story brick wa	cribe the king arehouse; o	d(s) of property sold (e.g. r common stock, 200 shs	, real estate, . MLC Co.)		ľΡ	How ac - Purcl - Dona	hase	(c) Date ((mo., d		(d) Date sold (mo., day, yr.)	
1a CP.	STOCK SALE	S	•					P ,	VARI	OUS	VARIOUS	
b NT	70483 REALI	ZED G	AINS					P	VARI	OUS	VARIOUS	
c NT	32758 REALI	ZED G	AINS					P ,	VARI	OUS	VARIOUS	
d FRO	OM K-1S							Р ,	VARI	OUS	VARIOUS	
e CAI	PITAL GAINS	DIVID	ENDS									
(е) Gross sales price		epreciation allowed (or allowable)		t or other basis xpense of sale					ain or (loss s (f) mınus		
a	151,744.	 			145,06	7.					6,677.	
<u>-</u>	87,194.				53,91						33,281.	
c	6,099,264.	 			$\frac{30,31}{6,310,18}$						<210,924.	
d	0,033,2020	 			0,010,10	- 					126,476.	
	235,862.										235,862.	
e Comp	lete only for assets showin		olumn (h) and owned by t	ho foundation	on 12/21/60	-		-,	0 (0	-1 (1-)1-		
COMP	THE UTILY TOT ASSETS SHOWIT							col (I)	(k) but r	ol. (h) gain ot less tha	minus n -N-1 or	
(i) F	M.V. as of 12/31/69) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				Losses	(from col. ((h))	
a											6,677.	
b		L									6,677.	
C											<210,924.	
d			,		· · · · · · · · · · · · · · · · · · ·						126,476.	
			· · · · · · · · · · · · · · · · · · ·								235,862.	
	gain net income or (net ca	anital loce)	If gain, also enter	in Part I, line	7	1	2				191,372.	
•	,	,			′	기	-				171,374.	
	ort-term capital gain or (lo: . also enter in Part I, line 8,	•	• •	d (6):		٦						
), enter -0- in Part I, line 8					<u> </u>	3			N/A		
Part V	Qualification U	Jnder Se	ection 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome			
(For optio	nal use by domestic privati	e foundation	ns subject to the section 4	1940(a) tax on	net investment in	come) .)		•			
if section	4940(d)(2) applies, leave t	this part blai	nk.									
Was the fo	oundation liable for the sec	ction 4942 ta	ax on the distributable am-	ount of any ve	ear in the base per	od?					Yes X No	
	e foundation does not qua				•							
	the appropriate amount in					es						
- 2	(a)	00011 0010111			making any onese				1		(d)	
0-1	Base period years		(b) Adjusted qualifying dist	ributions	Net value of no	(c) nchar		use assets	Distribution ratio (col. (b) divided by col. (c))			
Calenda	ar year (or tax yéar beginni	ing in)	· · · · · · · · · · · · · · · · · · ·		Not value of file					(cor. (a) aiv		
	2009		3,05	7,327.				7,771	•		.090459	
	2008		3,71	7,820.		50	<u>, 68</u>	4,129	•		.073353	
	2007			4,407.				9,543			.021653	
	2006			6,211.				0,476			.039018	
	2005		1,38	1,614.		48	, 54	4,304	•		.028461	
2 Total	of line 1, column (d)			•					2		.252944	
	e distribution ratio for the	5-year hase	e period - divide the total o	n line 2 hv 5	or by the number	of ve	ars					
	indation has been in existe	-			or by the namber	0. 90	4.0		3		.050589	
the loc	indation has been in existe	11100 11 1000 1	ilali J years								.030303	
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5				4	3	6,620,621.						
											· ————————————————————————————————————	
5 Multip	y line 4 by line 3								5		1,852,601.	
6 Enter	% of net investment incon	me (1% of P	Part I. line 27b)						6		5,972.	
			• • • • • • • • • • • • • • • • • • • •						1			
7 Add br	es 5 and 6								7		1,858,573.	
. Aud III	oo o ana o										2,000,010.	
8 Enter o	qualifying distributions from	m Part XII, lı	ine 4					•	8	_	1,337,304.	
	B is equal to or greater than Part VI instructions.	n line 7, che	ck the box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax r	ate.				

		5-6043			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940	B - see ir	nstru	ctio	ns)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		_		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	1	1,9	<u>44.</u>
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>			0.
3	Add lines 1 and 2	3	1	1,9	44.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	l .			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	;	1	1,9	44.
6	Credits/Payments:				
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 44,757.				
b	Exempt foreign organizations - tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) 6c 6c				
d	Backup withholding erroneously withheld 6d 6				
7	Total credits and payments. Add lines 6a through 6d	,	4	4,7	57.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	3			
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	0	3	2,8	13.
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ 32,813. Refunded ▶ 1	1			0.
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	Ì	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	r Ì			
	distributed by the foundation in connection with the activities				
C	Did the foundation file Form 1120-POL for this year?		1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. \blacktriangleright \$ 0 • (2) On foundation managers. \blacktriangleright \$ 0 •				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ►\$ 0.				
	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		х
	If "Yes," attach a detailed description of the activities.	Ì		-	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	İ	4a	Х	
b	b If "Yes," has it filed a tax return on Form 990-T for this year?				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	ļ	5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	,			
	remain in the governing instrument?		6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	Ì	7	X	
	If "Yes," complete Part II, col (c), and Part XV.	ļ			
	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	GA .				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		į		
	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					<u> </u>
year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV					х
10 Did any persons become substantial contributors during the tax year? if the a schedule listing their parties and addresses. STMT 9					 -

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

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

Form 4720, to determine if the foundation had excess business holdings in 2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

b If "Yes," did it have excess business holdings in 2010 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.

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4b X Form **990-PF** (2010)

X

3b

4a

Yes X No

N/A

during the year?

	INC.		58-6043	/65	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:				Ī	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No		}
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,			
any voter registration drive?		Y	es X No	l	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es 🗶 No	- [
(4) Provide a grant to an organization other than a charitable, etc., organizatio				l	
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational ourposes, or t				
the prevention of cruelty to children or animals?			es X No	- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the excentions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru		in negalations	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 fi		unad			
		. —	🗀 🗤		
expenditure responsibility for the grant?		I/A	es 🔛 No 📗	į	
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		ਦਿ ਹ		
a personal benefit contract?		Y	es 🗶 No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			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	shelter transaction?	Y	es 🗶 No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	anagers, Highl	у		
Faid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their					
• • • • • • • • • • • • • • • • • • •	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation) ا	e) Expense count, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	ا ا	allowances
				<u> </u>	
,					
SEE STATEMENT 10		0.	l o		0.
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	1 1 1 1: 4) 16	1 11015	<u> </u>		
2 Compensation of five highest-paid employees (other than those inc		, enter "NONE."	(d) Contributions to	,	-) Evpense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plan and deferred	s a è	e) Expense count, other
	devoted to position	(-, , , , ,	compensation	1	allowances
NONE					
			l		
	}				
				1	
	1				
	 	 	1	+	
	 				
	1	 	 		
	-				
	<u> </u>	<u> </u>	L		
Total number of other employees paid over \$50,000			•		0

orm 990-PF (2010) THE COUSINS FOUNDATION, INC.		043765	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)			
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	ensation
NONE			
		ļ	
		ĺ	
Total number of others receiving over \$50,000 for professional services		>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical	information such as the		
number of organizations and other beneficiaries served, conferences convened, research papers produce	d, etc.	Expenses	
1 N/A			
2			
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2.	Amount	
1 N/A			
2			
All other program-related investments. See instructions.			
3			
			

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 34,480,178. a Average monthly fair market value of securities 2,698,117. 1b b Average of monthly cash balances c Fair market value of all other assets 1c 37,1<u>78,295</u>. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 178,295. 3 Subtract line 2 from line 1d 557,674. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 36,620,621. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 1,831,031. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 1,831,031. Minimum investment return from Part X, line 6 11,944. Tax on investment income for 2010 from Part VI, line 5 2a 2b Income tax for 2010 (This does not include the tax from Part VI.) b 2c 11,944. Add lines 2a and 2b C 3 1,819,087. Distributable amount before adjustments. Subtract line 2c from line 1 3 0. 4 Recoveries of amounts treated as qualifying distributions 819.087. 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 6 819,087. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1,337,304 Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 15 b Program-related investments - total from Part IX-B 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: 3a a Suitability test (prior IRS approval required) 3b Cash distribution test (attach the required schedule) 1,337,304. 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 0. 5 income. Enter 1% of Part I, line 27b 1,337,304. 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 qualifies for the section 4940(e) reduction of tax in those years.

Form **990-PF** (2010)

58-6043765

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				1,819,087.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:		_		
' '		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007	1			
dFrom 2008 eFrom 2009 586,873.				
• • • • • • • • • • • • • • • • • • •	586,873.			
f Total of lines 3a through e 4 Qualifying distributions for 2010 from	300,073.	= ··		
Part XII, line 4: ►\$ 1,337,304.				
a Applied to 2009, but not more than line 2a		İ	0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			•	
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount		***		1,337,304.
e Remaining amount distributed out of corpus	0.1			
5 Excess distributions carryover applied to 2010	481,783.			481,783.
(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 indicated below:				
2 Corpus Add lines 31, 4c, and 4e Subtract line 5	105,090.			
b Prior years' undistributed income. Subtract	103,030.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009 Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of		<u>-</u>	-	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.		·	
9 Excess distributions carryover to 2011.	405 000			
Subtract lines 7 and 8 from line 6a	105,090.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				•
c Excess from 2008				
d Excess from 2009 105,090.				
e Excess from 2010	 			

art XIV Private Operating For a If the foundation has received a ruling or d				N/A	
foundation, and the ruling is effective for 2			' <u> </u>		
b Check box to indicate whether the foundat		•	t in section	4942(j)(3) or 4	942())(5)
a Enter the lesser of the adjusted net	Tax year		Prior 3 years	3 40 12())(0) 01	1542())(5)
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for		 		·	†
each year listed					
b 85% of line 2a		 	·	 	
c Qualifying distributions from Part XII,	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 	 			
line 4 for each year listed					
d Amounts included in line 2c not				 	
used directly for active conduct of			į		İ
exempt activities			}		
e Qualifying distributions made directly					
for active conduct of exempt activities					1
Subtract line 2d from line 2c					
Complete 3a, b, or c for the					
alternative test relied upon:		}			
a "Assets" alternative test - enter: (1) Value of all assets					
· · · · · · · · · · · · · · · ·		 	-		<u> </u>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					1
shown in Part X, line 6 for each year listed					1
c "Support" alternative test - enter:			· · · · · · · · · · · · · · · · · · ·	- 	-
(1) Total support other than gross			-		[
investment income (interest,					1
dividends, rerits, payments on					1
securities loans (section					
512(a)(5)), or royalties)	_ .				<u> </u>
(2) Support from general public and 5 or more exempt					1
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					İ
an exempt organization					
(4) Gross investment income					
art XV Supplementary Inform			if the foundation	n had \$5,000 or m	ore in assets
at any time during the	e year-see the	instructions.)			
Information Regarding Foundation	~				
a List any managers of the foundation who h			ntributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed mor	e man 45,000). (See s	section 507 (a)(2).)			
IN D. COUSINS					H
b List any managers of the foundation who o			ı (or an equally large por	tion of the ownership of a p	partnership or
other entity) of which the foundation has a	10% of greater intere	SL			
ONE					
Information Regarding Contribution					
Check here ► X if the foundation only	makes contributions	to preselected charitable	e organizations and does	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc. (se				complete items 2a, b, c, an	a a.
a The name, address, and telephone number	of the person to who	m applications should b	e addressed:		
'A					
			 		
b The form in which applications should be s	submitted and informa	tion and materials they	should include.		
'A		·			
c Any submission deadlines:					
'A					

Page 11

3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year SEE STATEMENT A				1329343
SEE STATEMENT A				1323343
		}		
	•			
	ļ			
		!		
		[
		1		
Total		1	▶ 3a	132934
b Approved for future payment	1	T		132331
EE STATEMENT B				263254
		ì		
	Į.	1		
	<u> </u>			
	-			

023621 12-07-10

Form **990-PF** (2010)

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		ded by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code				
a	ļ				
b	 				
	 				
<u> </u>	—		-	····	
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments				,	
3 Interest on savings and temporary cash					
investments			14		
4 Dividends and interest from securities			14	407,828.	
5 Net rental income or (loss) from real estate:					-
a Debt-financed property					
b Not debt-financed property		-			
6 Net rental income or (loss) from personal					
property	1				
7 Other investment income	900099	<12,805.	>14	8,483.	
8 Gain or (loss) from sales of assets other			·	· · · · · · · · · · · · · · · · · · ·	
than inventory			18	191,372.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		<12,805.	$\overline{}$	874,811.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	862,006.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accom	polishment of Fx	œmn	t Purposes	
				-	
Line No. Explain below how each activity for which incolude the foundation's exempt purposes (other than			contrib	uted importantly to the accom	plishment of
· · · · · · · · · · · · · · · · · · ·	by provioling fullus	s for such purposes).			
N/A N/A					
		-			
			-		
				······································	
				.	
					
		· · · · · · · · · · · · · · · · · · ·			
	·				

Form 990-PF (2		OUSINS FOUNDATI			58-6043		Page 13
Pairt XVII	Information Re Exempt Organ	egarding Transfers To a izations	and Transactions a	nd Relationsh	nips With Nonchar	itable	
		rectly engage in any of the followin			on 501(c) of	Ye	s No
		(3) organizations) or in section 52		izations?			1 "
	• •	ation to a noncharitable exempt or					· •
						1a(1)	$\frac{X}{X}$
b Other tran						1a(2)	+^
		ble exempt organization				16(1)	χ̈́
		ncharitable exempt organization				1b(2)	$\frac{x}{x}$
		or other assets				1b(3)	X
						1b(4)	X
						1b(5)	X
		mbership or fundraising solicitation				1b(6)	X
		iling lists, other assets, or paid em				10	X
d If the ansv	wer to any of the above is	"Yes," complete the following sche	dule. Column (b) should alv	ways show the fair m	arket value of the goods, o	ther assets,	
		oundation. If the foundation receiv	ed less than fair market valu	e in any transaction	or sharing arrangement, st	ni wor	
		other assets, or services received.		_			
(a) ⊔ne no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description	of transfers, transactions, and s	haring arrange	ments
		N/A					
							
							
			· · · · · · · · · · · · · · · · · · ·	-			
							
			······································	 			
					· · · · · · · · · · · · · · · · · · ·		
2a is the four	ndation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organi	zations described	 		
	•	r than section 501(c)(3)) or in sec	• •	24.0.00		Yes [□ No
	omplete the following sch						
	(a) Name of org		(b) Type of organization		(c) Description of relations	nip	
EAST LA	KE HOLDINGS	, INC.	501 (C)(2)				
EAST LA	KE SHOPPING	CENTER, INC.	501 (C)(2)				
						_	
						·	
		e that have examined this return, include				lef, it is true, c	orrect,
Sign and '	complete. Declaration of prepa	arer (other than texpayer or fiduciary) is b	ased on all information of which	preparer has any knowle	sage.		
Here	Stellian		1/14/	111	/ <u> </u>		
	Signature of officer or tn		Date		itle		
	Print/Type preparer's na	ame Preparer's s	ignature	Date	Check ff PTIN		
			49 DA	- nhahil	self- employed PO	0448607	,
Paid		ATES		11/1/11/1			
Preparer	Firm's name ► DEL	OITTE TAX LLP			Firm's EIN ► 86-10	65772	
Use Only	= 1.44	1 202 0400000 00	ND 0217777 0	000			
	1	1 PEACHTREE ST.	•	000	1404	. 220	1 5 0 0
	AT	LANTA, GA 30303	-1924		Phone no (404)		-1500
					Fo	m 990-P	r (2010)

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Name of the organization

Schedule of Contributors

Employer identification number

11.	IE COUSINS FOUNDATION, INC.	30-0U43/03
Organization type (check o	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule X For an organization contributor Comp	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molected Parts I and II	
Special Rules		
509(a)(1) and 170(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
aggregate contrib	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, cruelty to children or animals Complete Parts I, II, and III.	
contributions for u If this box is check purpose Do not c	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contribute exclusively for religious, charitable, etc., purposes, but these contributions did not agreed, enter here the total contributions that were received during the year for an exclusive omplete any of the parts unless the General Rule applies to this organization because rile, etc., contributions of \$5,000 or more during the year.	ggregate to more than \$1,000. ely religious, chantable, etc.,
but it must answer "No" or	hat is not covered by the General Rule and/or the Special Rules does not file Schedule I n Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line ing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

	4	4	
Page	⊥ of	I of Pa	rt I

Name of organization

Employer identification number

янт	COTISTNS	FOUNDATION.	INC
+ + + 4 - 4	COODING	LOCKDULLON	T110

58-6043765

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THOMAS G. COUSINS LIFE INSURANCE TRUST ATLANTA, GA	\$ 60,094.	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
2	COUSINS CHARITABLE LEAD ANNUITY TRUST ATLANTA, GA	\$ 341,640.	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 Oncash Complete Part II if there is a noncash contribution.)
023452 12-2	3-10	Schedule B (Form	990, 990-EZ, or 990-PF) (2010)

Page of of Employer identification number

THE COUSINS FOUNDATION, INC.

58-6043765

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
)23453 12-23-		 _ _ ss	90, 990-EZ, or 990-PF) (2010

rage of o

nization		Employer identification number
USINS FOUNDATION, INC.		58-6043765
more than \$1,000 for the year. Complet Part III, enter the total of exclusively reliquent	e columns (a) through (e) and the ous, chartable, etc., contributions	following line entry. For organizations completing of
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of grft	
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	JSINS FOUNDATION, INC. Exclusively religious, charitable, etc., is more than \$1,000 for the year. Complet Part III, enter the total of exclusively religions \$1,000 or less for the year. (Enter this info (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a	JSINS FOUNDATION, INC. Exclusively religious, charitable, etc., individual contributions to section more than \$1,000 for the year. Complete columns (a) through (e) and the Part III, enter the total of exclusively religious, charitable, etc., contributions \$1,000 or less for the year. (Enter this information once. See instructions.) (b) Purpose of gift (c) Use of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Form 886	8 (Rev. 1-2011)					Page 2
	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this bo	×		► X
-	y complete Part II if you have already been granted an a				8868.	
	re filing for an Automatic 3-Month Extension, comple					
Part II				opies n	eeded).	
Type or	Name of exempt organization					ication number
print	THE COUSINS FOUNDATION, INC.			5	8-6043	765
File by the	Number, street, and room or suite no. If a P.O. box, s		tions	·		
extended due date for	3445 PEACHTREE ROAD, SUITE					
filing your return, See	City, town or post office, state, and ZIP code. For a fo		ress see instructions			
instructions	ATLANTA, GA 30326	orcigir add	iless, see ilistractions.			
	112121111111111111111111111111111111111		-			
						0 4
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1 4
A1:A:		Return	Application	_		Return
Applicati	on	1	Is For			Code
Is For		Code	IS FOI	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·····	Code
Form 990		01	F 4044 A			. 00
Form 990		02	Form 1041-A			. 08
Form 990		03	Form 4720			09
Form 990		04	Form 5227			10
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870		. =	12
STOP! Do	not complete Part II if you were not already granted	an autor	natic 3-month extension on a previou	sly file	d Form 886	8
	AMY CLARKE	22	ome 175 amraxma 07		20226	
	ooks are in the care of ► 3445 PEACHTREE	RD,	STE 1/5, ATLANTA, GA	<u> </u>	30326	
	one No. ► 404-233-4339		FAX No. ► 404-233-8852			. —
	organization does not have an office or place of busines				-	. ▶ ∟
If this j	s for a Group Return, enter the organization's four digit					
box ▶	$__$. If it is for part of the group, check this box $ extbf{ riangle}$ $ extbf{ riangle}$		ach a list with the names and EINs of all	memb	ers the exte	nsion is for
4 I re	quest an additional 3-month extension of time until -1	NOVEM	BER 15, 2011.			
5 For	calendar year 2010 , or other tax year beginning		, and ending			<u> </u>
6 If th	ne tax year entered in line 5 is for less than 12 months, o	check reas	on: Initial return	Final r	eturn	
	Change in accounting period					
7 Sta	te in detail why you need the extension					
AL	DITIONAL TIME IS NEEDED TO	GATHE	R INFORMATION TO FII	EΑ	COMPL	ETE AND
AC	CURATE RETURN.					····
			•		 	
8a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
nor	refundable credits. See instructions.			8a	\$	44,757.
b If th	nis 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 al	llowed as	a credit and any amount paid			
	eviously with Form 8868.		•	8b	\$	44,757.
	ance due. Subtract line 8b from line 8a. Include your pa	ayment wr	th this form, if required, by using			
	rPS (Electronic Federal Tax Payment System). See instr	•	, , , , ,	8c	\$	0.
			nd Verification		• •	
	alties of perjury, I declare that I have examined this form, include orrect, and complete, and that I am authorized to prepare this f	ding accom		e best o	f my knowled	ge and belief,
-		····				
Signature	► Title ►		<u> </u>	Date	P	

COUSINS FOUNDATION, INC. FEI #58-6043765 December 31, 2010

GRANTS AND CONTRIBUTIONS-CASH	Amount
Action Ministries Atlanta, GA	\$1,000
Albany Museum of Art Albany, GA	10,000
The ALS Association Charleston, SC	250
Arch Foundation Athens, GA	100,000
Athletes for a Better World Atlanta, GA	250
Atlanta Ballet Atlanta, GA	15,000
Atlanta Masjid Atlanta, GA	500
Atlanta Union Mission Atlanta, GA	10,000
Atlanta Workforce Development Atlanta, GA	66,667
Boys & Girls Club of Metro Atlanta Atlanta, GA	5,000
Captain Planet Foundation Atlanta, GA	5,000
Contemplative Outreach Butler, NJ	7,500
The Craddock Center Cherrylog, GA	25,000
Darlington School Rome, GA	10,000
Druid Hills Presbyterian Church Atlanta, GA	5,000
Eagle Ranch Chestnut Mountain, GA	(1,054)
First Presbyterian Church of Albany Albany, GA	· 22,510
First Presbyterian Church of Atlanta Atlanta, GA	50,000
Foundation on Christian Origins Durham, NC	10,000

GRANTS AND CONTRIBUTIONS-CASH	Amount
George West Mental Health Foundation Atlanta, GA	65,314
The Georgia Conservancy Atlanta, GA	750
Georgia Historical Society Atlanta, GA	5,000
Grady Health Foundation Atlanta, GA	10,000
Kennedy Krieger Foundation Atlanta, GA	1,000
Linville Foundation Linville, NC	25,000
Marcus Autism Center Atlanta, GA	10,000
Marion Medical Mission Marion, IL -	220,074
Metro Atlanta YMCA Atlanta, GA	1,000
North Avenue Presbyterian Church Atlanta, GA	500
Odyssey Atlanta, GA	9,948
Park Pride Atlanta Atlanta, GA	1,000
Path Foundation Atlanta, GA	1,000
Phoebe Foundation Albany, GA	1,000
Prevent Child Abuse Atlanta, GA	5,000
Rome Area History Museum Rome, GA	6,000
Salvation Army Lawrenceville, GA	50,000
The Schenck School Atlanta, GA	10,000
Shepard Spinal Center Atlanta, GA	1,000
University of GA Foundation Athens, GA	500

COUSINS FOUNDATION, INC. FEI #58-6043765 December 31, 2010

GRANTS AND CONTRIBUTIONS-CASH	Amount
Visiting Nurse Health System Atlanta, GA	1,000
Wee Kirk Presbyterian Church Linville, GA	5,000
The Westminster Schools Atlanta, GA	556,634
Total cash grants	\$1,329,343

COUSINS FOUNDATION, INC. FEI #58-6043765 December 31, 2010

Pledges Payable		Amount
Arch Foundation Athens, GA		200,000
Columbia Seminary Decatur, GA		2,000,000
Druid Hills Presbyterian Church Atlanta, GA		15,000
First Presbyterian Church of Albany Albany, GA		139,091
George West Mental Health Atlanta, GA		278,456
	Total	2,632,547

58-6043765

TO FORM 990-PF, PG 1, LN 16B

·						
FORM 990-PF INTEREST ON SAV	INGS AND	remporary (CASH I	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
INTEREST INCOME				•	267,1	28.
TOTAL TO FORM 990-PF, PART I	, LINE 3,	COLUMN A			267,1	28.
FORM 990-PF DIVIDENT	OS AND IN	PEREST FRO	M SECU	URITIES	STATEMENT	2
SOURCE	GR	OSS AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
DIVIDEND INCOME		643,690	•	235,862.	407,8	28.
TOTAL TO FM 990-PF, PART I,	LN 4	643,690	•	235,862.	407,8	28.
FORM 990-PF	ОТНЕ	R INCOME			STATEMENT	3
DESCRIPTION		(A) REVENU PER BOO		(B) NET INVEST- MENT INCOME		
MISCELLANEOUS OTHER K-1 INCOME OTHER K-1 INCOME SUBJECT TO	UBIT	6	,802. ,681. ,805.>		•	
TOTAL TO FORM 990-PF, PART I	, LINE 11	<4	,322.>	<4,322	.>	
FORM 990-PF	ACCOU	NTING FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSE PER BOO		VEST-	(C) ADJUSTED NET INCOM		
ACCOUNTING	7,8	50.	0.		7,8	50.

7,850.

0.

7,850.

FORM 990-PF	TAX	ES	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
TAXES AND LICENSES	10,250.	10,250.			0.
TO FORM 990-PF, PG 1, LN 18	10,250.	10,250.			0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
BANK CHARGES - INVESTMENT EXPENSE INVESTMENT EXPENSE OFFICE EXPENSE K-1 OTHER DEDUCTIONS ADVISORY/MANAGEMENT FEES	5,562. 32,991. 111. 187,331. 28,663.	32,991. 0.		1:	0. 0. 11. 0.
TO FORM 990-PF, PG 1, LN 23	254,658.	254,547.		1:	11.
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND BA	ALANCES S	TATEMENT	7
DESCRIPTION			•	AMOUNT	
UNREALIZED GAINS GRANTS PAYABLE INCLUDED IN RIBOOK TO TAX ADJUSTMENT	ETAINED EARN	INGS		4,313,88 828,88 92,2	00.
TOTAL TO FORM 990-PF, PART I	II, LINE 3		-	5,234,9	50.

FORM 990-PF

STATEMENT

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
COUSINS PROPERTIES STOCK	17,525,772.			
MARKET VALUE ADJUSTMENT	<8,133,679.>			
VANGUARD S&P 400 INDEX FUND	1,566,413.	1,937,690.		
WILLIAM BLAIR SMALL CAP GROWTH	1,886,863.	1,815,125.		
HARBOR SMALL CAP VALUE FUND	1,669,532.	1,683,588.		
SANDERSON INTERNATIONAL VALUE FUND	1,611,352.	1,983,365.		
ARCHSTONE EQUITY STRATEGIES FUND	5,000,000.	6,303,055.		
FARALLON INSTITUTIONAL PARTNERS	5,000,000.	5,143,792.		
COMMONFUND CAPITAL INTL PARTNERS VI	420,758.	420,758.		
COMMONFUND CAPITAL PRIVATE EQUITY VII	338,818.	338,818.		
COMMONFUND CAPITAL VENTURE VIII	217,675.	217,675.		
NATURAL GAS PARTNERS IX	884,912.	884,912.		
EVS EMERGING MARKET	2,019,305.	2,475,294.		
COMMON FUND NATURAL RESOURCES	412,305.	412,305.		
PIMCO	2,301,617.	2,250,343.		
MAVERICK STABLE FUND	1,024,910.	1,024,910.		
CHATHAM CASCADE III	442,738.	416,822.		
TAP FUND	750,000.	969,981.		
ESG TREASURY	500,000.	520,620.		
BAY RESOURCES OFFSHORE	2,000,000.	2,499,233.		
POINTER OFFSHORE	1,500,000.	1,663,940.		
GOLUB CAPITAL MEZZANINE	433,510.	433,510.		
ANGEL OAK	1,071,444.	1,077,587.		
TOTAL TO FORM 990-PF, PART II, LINE 10B	40,444,245.	40,444,246.		

CORPORATE STOCK

FORM 990-PF		STANTIAL CONTRIBUTORS VII-A, LINE 10	STATEMENT	9
NAME OF CONTRIBUT	OR	ADDRESS		
COUSINS CHARITABL	E LEAD ANNUITY	ATLANTA, GA		

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS STATEM TRUSTEES AND FOUNDATION MANAGERS					EMENT	10	
NAME AND ADDRESS			E AND HRS/W			EMPLOYEE BEN PLAN CONTRIB		
LILLIAN C. GIORNEI 3445 PEACHTREE RD, ATLANTA, GA 30326		PRESID 0.	ENT/TE	RUSTEE	0.	0.		0.
AMY CLARKE 3445 PEACHTREE RD, ATLANTA, GA 30326	, SUITE 175		ARY/TI	REASURER	0.	0.		0.
WILLIAM C. WREN 3445 PEACHTREE RD ATLANTA, GA 30326	, SUITE 175		RESIDI	ENT/TRUSTEE	0.	0.		0.
GRADY COUSINS 3445 PEACHTREE RD ATLANTA, GA 30326	, SUITE 175	TRUSTE 0.			0.	0.		0.
ANN D. COUSINS 3445 PEACHTREE RD ATLANTA, GA 30326	, SUITE 175	TRUSTE 0.	EE .00		0.	0.		0.
R. WALTER ASHMORE 3445 PEACHTREE RD ATLANTA, GA 30326			T ANT SI .00	ECRETARY	0.	0.		0.
TOTALS INCLUDED OF	N 990-PF, PAG	SE 6, PART V	/III		0.	0.		0.

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT 11

NAME OF AFFILIATED OR RELATED ORGANIZATION

EAST LAKE HOLDINGS, INC.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON OFFICERS

NAME OF AFFILIATED OR RELATED ORGANIZATION

EAST LAKE SHOPPING CENTER, INC.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON OFFICERS