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## Form **990-PF**

Department of the Treasury Internal Revenue Service

### **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 OMB No 1545-0052

2011

	Calen	dar year 2011 or tax year beginning	, 201	1, and e	enaing		, 20
Nan	ne of foi	undation			A Employer	identification numbe	7
GEC	DCTA	HEALTH FOUNDATION, INC.			58-1352	076	
		d street (or P O box number if mail is not delivered to street address)	Room	/suite		number (see instructio	ns)
		ACHTREE ROAD, SUITE 270			404-658	9066	
		n, state, and ZIP code				on application is pend	ng check here ▶ [
ATI	ANTA	A, GA 30305					
		<u> </u>	of a former public	charity	D 1. Foreign	organizations, check	here ▶ [
		☐ Final return ☐ Amended re	eturn	_	2 Foreign	n organizations meeting	_
		☐ Address change ☐ Name chan	ge			here and attach compu	
Н	Check	type of organization: Section 501(c)(3) exempt p	rivate foundation		F If private t	foundation status was	terminated under
	Sectio	n 4947(a)(1) nonexempt charitable trust   Other tax				07(b)(1)(A), check here	
1	Fair m	narket value of all assets at   J   Accounting method:	☐ Cash 😧 A	ccrual	F if the four	ndation is in a 60-mont	n termination
		f year <i>(from Part II, col. (c)</i> ,				ction 507(b)(1)(B), chec	
		6)▶ \$ 7,925,524 (Part I, column (d) must be	on cash basis )				
Pa	ırt l	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	expenses per books		ncome	income	purposes
							(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,055				
	2	Check ► 🔯 if the foundation is not required to attach Sch B	) ~ <u>\$3</u>				, , , , , , , , , , , , , , , , , , , ,
	3	Interest on savings and temporary cash investments	24,414	+	24,414		
	4	Dividends and interest from securities	126,982	<u> </u>	126,982		*
	5a	Gross rents		-			
4	b	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	500 0E3	×		* * * * * * * * * * * * * * * * * * *	
Revenue	6a b	Gross sales price for all assets on line 6a	580,053	2 4 Min	<u>^</u>	in in its contract to the cont	*
Vel	7	Capital gain net income (from Part IV, line 2)		<u> </u>	580,053	* 3	
Re	8	Net short-term capital gain	*	<del>                                     </del>		·	
	9	Income modifications	* '	6. 5	~1 <u>%;</u>		* *
	10a	Gross sales less returns and allowances	, .	<del> </del>	•	· · · · · · · · · · · · · · · · · · ·	
	b	Less: Cost of goods sold		1.	· 🔏	*	
	C	Gross profit or (loss) (attach schedule)	0	1	, ,	COLUMN C I	S N/A
	11	Other income (attach schedule)		<u> </u>			
	12	Total. Add lines 1 through 11	732,504		731,449	0	
S	13	Compensation of officers, directors, trustees, etc	27,000				18,90
enses	14	Other employee salaries and wages	13,400				9,38
	15	Other employee salaries and wages Pension plans, employee benefits Legal fees (attach schedula)					
×	16a		<u> </u>	<u> </u>			
e	b	Accounting fees (attach schedule) AUDIT FEED	4,700				3,29
Ę	С	Other professional fees (attach schedule) 012	54,327	<u> </u>	37,204		17,12
Coperating and Administrative Exp	17		<b> </b>				
nis	18	Taxes (attach schedule) (see instructions) EXCLISE TAX	13,885	-	<del></del>		9,72
Ē	19	Depreciation (attach schedule) and depletion		<u> </u>			
Ad	20	Occupancy	16 500	ļ			<del>                                     </del>
ם: ב	21 22	Printing and publications	16,528	<del> </del>			11,57
<u>_</u>	23	Other expenses (attach schedule) OFFICE. & PHON	2,627	<del> </del>			<del>                                     </del>
וני	24	Total operating and administrative expenses.	2,021	<del>                                     </del>			1,84
iat		Add lines 13 through 23	132,467		37,204	o	71 90
be	25	Contributions, gifts, grants paid	300,000	+	31,204		71,82 300,00
Ç	26	Total expenses and disbursements. Add lines 24 and 25	432,467		37,204	0	
7	27	Subtract line 26 from line 12.	//	† <u>"</u>	0.,204		3,1,62
	a	Excess of revenue over expenses and disbursements	300,037	1			1
	b	Net investment income (if negative, enter -0-)	200,031	1	694,245		<del> </del>
	C					0	
							i .

		Attached schedules and amounts in the description column	Beginning of year	Ena	or year
Ρć	rt II	Balance Sheets Attached schedules and amounts in the 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	52,661	64,931	64,931
	2	Savings and temporary cash investments	292,529	235,977	235,977
	3	Accounts receivable ▶	The same	•	1
		Less. allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	2.2. 2.2. 2.2. 2.2. 2.2. 2.2. 2.2. 2.2	* 24*	*****
		Less. allowance for doubtful accounts ▶			**************************************
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		_	<del></del>
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶	** -:	4>	
	'	Less allowance for doubtful accounts			n patrico servicione de la constantina del con
Ś	8	Inventories for sale or use			<del>-</del>
Assets	9	Prepaid expenses and deferred charges	2,080	(	0
ķ	10a	Investments—U.S. and state government obligations (attach schedule)	354,748	258,528	<u> </u>
	b	Investments—corporate stock (attach schedule)	6,301,036	5,944,423	<del>                                       </del>
	C	Investments—corporate bonds (attach schedule)	249,566		<del></del>
	11	·	249,566	258,915	
	' '	Investments—land, buildings, and equipment. basis ►  Less accumulated depreciation (attach schedule) ►			
	12				<del>  -</del>
	13		1 105 544	1 150 500	1 150 500
	14	Investments—other (attach schedule) LTD.P!SHIP SHARES		1,158,589	
	14	Land, buildings, and equipment. basis ▶		× × × × × × × × × × × × × × × × × × ×	<u> </u>
	4.5	Less accumulated depreciation (attach schedule)	4 600		
	15   16	Other assets (describe ACCRUED INCOME )	4,683	4,161	4,161
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	0 440 045	E 005 50	
$\dashv$	47		8,442,847	7,925,524	<del></del>
	17	Accounts payable and accrued expenses	480	12,285	
es	18	Grants payable		·-	
Ë	19	Deferred revenue			<b>_</b> \$^*.
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)		<del></del>	
	22	Other liabilities (describe >		<del></del>	
	23	Total liabilities (add lines 17 through 22)	480	12,28	
S	1	Foundations that follow SFAS 117, check here > X			
ည		and complete lines 24 through 26 and lines 30 and 31.			
<u>a</u>	24	Unrestricted	8,442,367	7,913,23	
Ba	25	Temporarily restricted			
ק	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here ▶ □			
Ä		and complete lines 27 through 31.			, ,
S	27	Capital stock, trust principal, or current funds			
ë	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
188	29	Retained earnings, accumulated income, endowment, or other funds			
it A	30	Total net assets or fund balances (see instructions)	8,442,367	7,913,239	2
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	8,442,847	7,925,524	1 . 620.
_	rt III	Analysis of Changes in Net Assets or Fund Balances	<b>.</b>		
1	Tota	net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (must	agree with	
		of-year figure reported on prior year's return)		. 1	8,442,367
2		er amount from Part I, line 27a		. 2	300,037
3	Othe	er increases not included in line 2 (itemize)		3	
4	- Ada	lines 1, 2, and 3		4	8,742,404
5	Deci	reases not included in line 2 (itemize) VNREALIZED LOSS	IN INVESTMENT M	KT VALUE 5	829,165
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), line	e 30 . <b>6</b>	7,913,239

Part		Losses for Tax on Investr		(b) How acquired	· · · · ·		
		e kınd(s) of property sold (e g , real estate se, or common stock, 200 shs MLC Co )	9,	P—Purchase D—Donation		te acquired , day, yr )	(d) Date sold (mo , day, yr )
1a	**SEE SCHEDULE	ATTACHED**		P		VAR	VAR
<u>b</u>							-
<u> </u>					_		
<u>d</u>						-	<del></del>
<u>e</u>		(f) Depreciation allowed	(a) Cost o	or other basis	<u> </u>	(h) Gai	n or (loss)
	(e) Gross sales price	(or allowable)		ense of sale			(f) minus (g)
	3,608,706		-	3,028,653			580,053
b						_	
С							
<u>d</u>							
ее	Complete only for exacts she	nung gain in column (h) and awned	hy the foundation	op 12/21/60	-		
	Complete only for assets sho	(i) Adjusted basis	1	ess of col (i)			l (h) gain minus t less than -0-) <b>or</b>
	(i) F M V as of 12/31/69	as of 12/31/69		of (j), if any			rom col (h))
	<u>.                                      </u>					<u> </u>	
b							
С							
d							
ее		( Kasis	-l	-41 P 7	<b>-</b>		
2	Capital gain net income of		also enter in P ), enter -0- in Pa		2		580,053
3		n or (loss) as defined in sections I, line 8, column (c) (see instru					
	Part I, line 8		, ,	,	3		
Part		ler Section 4940(e) for Red				ne	·
		vate foundations subject to the s					
Was t		ve this part blank. section 4942 tax on the distribut qualify under section 4940(e) D			ase per	riod?	☐ Yes 🕱 No
1	Enter the appropriate amo	ount in each column for each yea	ar; see the instr	uctions before ma	aking ar	ny entries	
Cal	(a) Base penod years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	s Net value	(c) of nonchantable-use a	ssets	Dis (col. (b)	(d) tribution ratio divided by col (c))
	2010	<del></del>	193	7,866,	.035	(001 (0)	0.0580
	2009		, 957	7,069,			0.0669
	2008	548,	704	9,363,			0.0586
	2007		,280	11,030,			0.0452
	2006	487,	,204	10,349,	,448		0.0471
•	Takal aftina 4 anti-man (a)						
2 3	Total of line 1, column (d)  Average distribution ratio	)     .    .   .  .  .  .  .  . for the 5-year base period—divi				2	0.2758
J		dation has been in existence if le				3	. 0551
4	Enter the net value of nor	ncharitable-use assets for 2011 f	rom Part X, line	e 5		4	8,346,240
5	Multiply line 4 by line 3					5	460,379
6	Enter 1% of net investme	nt income (1% of Part I, line 27b	)			6	6,942
7	Add lines 5 and 6					7	467,321
8		ons from Part XII, line 4				8	
J	If line 8 is equal to or gre Part VI instructions.	ater than line 7, check the box i	n Part VI, line	1b, and complete	that pa		371 , 823 1% tax rate. See the

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	nstructi	ons)				
1a	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	13	8,885				
С	here ▶ ☐ and enter 1% of Part I, line 27b	^.	e e e				
C	Part I, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)						
3	Add lines 1 and 2	13	8,885				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  4  Tax based on investment income Subtract line 4 from line 3. If rare as less onter 0.						
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	13	3,885				
a	2011 estimated tax payments and 2010 overpayment credited to 2011   6a   2,080		, .				
b	Exempt foreign organizations—tax withheld at source 6b		, 1				
C	Tax paid with application for extension of time to file (Form 8868) . 6c	Ü	- 1				
d	Backup withholding erroneously withheld 6d	rico. Se					
7	Total credits and payments. Add lines 6a through 6d	2	2,080				
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 ▶ 9	11	L,805				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		0				
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11		0				
Palru 1a	VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it						
ıa	participate or intervene in any political campaign?	Yes	<del></del>				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	1a	<u> </u>				
~	of the instructions for definition)?	1 <sub>b</sub>	x				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	<u> </u>	<del>  ^</del>				
	published or distributed by the foundation in connection with the activities.	38					
С	Did the foundation file Form 1120-POL for this year?	1c	x				
d	the state of the s						
	(1) On the foundation ▶ \$ 0 (2) On foundation managers ▶ \$ 0						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X				
3	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		1				
	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				
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		- i				
	By language in the governing instrument, or	~~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		,				
	conflict with the state law remain in the governing instrument?	6 X					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 X	+				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		1				
	GEORGIA						
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	7 (	i				
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b X					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	L	-				
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV						
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9 -	<u> </u>				
	names and addresses	40	x				
		<b>_10</b>	^-				

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13 3	ζ	
	Website address ▶ www.gahealthfdn.org			
14	The books are in care of ▶ JOHN M. BOREK, TREASURER Telephone no ▶ 404-6	58-90	66	
	Located at ▶ 3050 PEACHTREE RD., STE 270, ATLANTA, GA ZIP+4 ▶ 30305			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the year	•	. •	▶ □
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority	Υ Υ	'es	No
	over a bank, securities, or other financial account in a foreign country?	16		<u>x</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶	,	_ `	1
Dart	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	, & "		
ı aıı	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	- « Y	es	No
1a	During the year did the foundation (either directly or indirectly):	7.		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .   Yes   No	*		۰,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	4 yr *		i,
	disqualified person?			* ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .   Yes  No		1	ì
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		* .	. !
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		•	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	/.*	• ]	i '
	foundation agreed to make a grant to or to employ the official for a period after	1 25/48	~	,
L	termination of government service, if terminating within 90 days.)	egitha (		,
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		ا ا	- <u> </u>
	Organizations relying on a current notice regarding disaster assistance check here	1b	<i>*</i>	N/A
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		***	*
	were not corrected before the first day of the tax year beginning in 2011?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	( )	, *#	*
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and		. *	* '
	6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	Ĭ .		,
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	ж.	<b>\3</b>	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	×		
	all years listed, answer "No" and attach statement—see instructions)	2b		x
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.  20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20	10.23	, -	1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	-		·
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		}	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	, , , , , , , , , , , , , , , , , , ,		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.)			<u>-</u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b		N/A
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		<u> </u>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		X

Page	E
raye	•

	0-PF (2011)				<u> </u>					Page 6
	VII-B Statements Regarding Activities			<u>4720  </u>	May Be R	equire	d (contin	nued)	Incompanie (sc. cr.sa	
5a	During the year did the foundation pay or incur ar (1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public directly or indirectly, any voter registration driv	influe election	nce legislatıor				☐ Yes	⊠ No ⊠ No		
	<ul><li>(3) Provide a grant to an individual for travel, stud</li><li>(4) Provide a grant to an organization other than section 509(a)(1), (2), or (3), or section 4940(</li></ul>	dy, or o	ritable, etc., o	rganiza		 bed in	☐ Yes	⊠ No ⊠ No		
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to cl	hildren	or animals?				□Yes	⊠ No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the Regulations section 53 4945 or in a current notice in	regardı	ng disaster as	sistance	e (see instru			bed in	5b	N/2
С	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility	he four	ndation claim	exemp		he tax	· ·	► □ □ No		
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any on a personal benefit contract?					miums	☐ Yes	<b>⊠</b> No		
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.	ns, dire	ctly or indirec	lly, on a	personal l	benefit	contract?		6b	X
7a b	At any time during the tax year, was the foundation a If "Yes," did the foundation receive any proceeds						☐ Yes insaction?	⊠ No ?	7b	N/2
Part	VIII Information About Officers, Direc	tors,	Trustees, F	ounda	tion Mana	agers,	Highly F	Paid E	mployees,	
1	and Contractors  List all officers, directors, trustees, foundation	n man	agers and th	eir con	nensation	1 /800 i	netructio	ne)		<u>.                                    </u>
	(a) Name and address	(b) Tit	le, and average urs per week ted to position	(c) Co	mpensation paid, enter -0-)	(d) (emplo	Contributions byee benefit erred compe	s to plans	(e) Expense ac	
**	SEE LIST ATTACHED**	ALL	DIRECTORS <5HRS/WK		27,000			0		0
			<u>,                                      </u>					_		
2	Compensation of five highest-paid employe "NONE."	es (ot	her than tho	se incl	uded on I	ine 1—	see insti	ructior	s). If none,	enter
	(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to po	/eek ¯	(c) Compe	nsation	(d) Contribution (d) Co	benefit deferred	(e) Expense ac other allowa	
*	*NONE * *		1							
			<u> </u>							
			<u> </u>	<del></del>						
						· <u> -</u>		_		
<del></del>				·						
otal	number of other employees paid over \$50,000			<u> </u>				<b>&gt;</b>	000 Dr	

3 Five highest-paid independent contractors for professional services (see 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 ▶  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct chantable 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  1 EMORY UNIVERSITY ROLLINS SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid scholarships to needy student candidates for the Master of Public Health degree 25,000  2 GEORGIA STATE UNIVERSITY SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid scholarships to needy student candidates for the Master of Public Health degree 25,000  3 GEORGIA SOUTHERN UNIVERSITY RESEARCH FOUNDATION - Contributions to the University to fund program development of research and service for health related issues in the state of Georgia 20,000  4 GWINNETT COMMUNITY CLINIC - Contributions to the clinic to buy furniture and equipment necessary to provide health services to the poor and needy	Part	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	iployees,
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct chaniable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research appers produced, etc.  I EMORY UNIVERSITY ROLLINS SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid scholarships to needy student candidates for the Master of Public Health degree  2 GEORGIA STATE UNIVERSITY SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid scholarships to needy student candidates for the Master of Public Health degree  3 GEORGIA SOUTHERN UNIVERSITY RESEARCH FOUNDATION - Contributions to the University to fund program development of research and service for health related issues in the state of Georgia  4 GWINNETT COMMUNITY CLINIC - Contributions to the clinic to buy furniture and equipment necessary to provide health services to the poor and needy in the Gwinnett County area  15,000  Part IX-B Summary of Program-Related investments (see instructions)  Cescode the volargest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See instructions  3   All other program-related investments See instructions	3		E."
Total number of others receiving over \$50,000 for professional services    PartIX-A   Summary of Direct Charitable Activities		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
List the foundation's four largest direct chantable activities  List the foundation's four largest direct chantable 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  1 EMORY UNIVERSITY ROLLINS SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid acholarships to needy student candidates for the Master of Public Health degree 25,000  2 GEORGIA STATE UNIVERSITY SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid scholarships to needy student candidates for the Master of Public Health degree 25,000  3 GEORGIA SOUTHERN UNIVERSITY RESEARCH FOUNDATION - Contributions to the University to fund program development of research and service for health related issues in the state of Georgia 20,000  4 GWINNETT COMMUNITY CLINIC - Contributions to the clinic to buy furniture and equipment necessary to provide health services to the poor and needy in the Gwinnett County area 15,000  PartINB Summary of Program-related investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 **NONE**	*	*NONE * *	
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1 EMORY UNIVERSITY ROLLINS SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid scholarships to needy student candidates for the Master of Public Health degree 25,000 2 GEORGIA STATE UNIVERSITY SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid scholarships to needy studuent candidates for the Master of Public Health degree 325,000 3 GEORGIA SOUTHERN UNIVERSTIY RESEARCH FOUNDATION - Contributions to the University to fund program development of research and service for health related issues in the state of Georgia 4 GMINNETT COMMUNITY CLINIC - Contributions to the clinic to buy furniture and equipment necessary to provide health services to the poor and needy in the Gwinnett County area 15,000  Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  All other program-related investments See instructions  Total. Add lines 1 through 3			Expenses
University to fund aid scholarships to needy student candidates for the Master of Public Health degree 25,000  2 GEORGIA STATE UNIVERSITY SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid scholarships to needy studuent candidates for the Master of Public Health degree 25,000  3 GEORGIA SOUTHERN UNIVERSTIY RESEARCH FOUNDATION - Contributions to the University to fund program development of research and service for health related issues in the state of Georgia 20,000  4 GMINNETT COMMUNITY CLINIC - Contributions to the clinic to buy furniture and equipment necessary to provide health services to the poor and needy in the Gwinnett County area 15,000  Part IX-B Summary of Program-Related Investments (see 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 instructions  3			
the Master of Public Health degree 25,000  GEORGIA STATE UNIVERSITY SCHOOL OF PUBLIC HEALTH - Contributions to the University to fund aid scholarships to needy studuent candidates for the Master of Public Health degree 25,000  GEORGIA SOUTHERN UNIVERSITY RESEARCH FOUNDATION - Contributions to the University to fund program development of research and service for health related issues in the state of Georgia 20,000  GWINNETT COMMUNITY CLINIC - Contributions to the clinic to buy furniture and equipment necessary to provide health services to the poor and needy in the Gwinnett County area 15,000  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount **NONE***  All other program-related investments See instructions  Total. Add lines 1 through 3	_		
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health related issues in the state of Georgia 20,000  4 GWINNETT COMMUNITY CLINIC - Contributions to the clinic to buy furniture and equipment necessary to provide health services to the poor and needy in the Gwinnett County area 15,000  Part IX-B Summary of Program-Related Investments (see 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 instructions  3	-		:
4 GWINNETT COMMUNITY CLINIC - Contributions to the clinic to buy furniture and equipment necessary to provide health services to the poor and needy in the Gwinnett County area  15,000  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  1 **NONE**  All other program-related investments See instructions  3  Total. Add lines 1 through 3		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	20,000
in the Gwinnett County area  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  Total. Add lines 1 through 3	4	GWINNETT COMMUNITY CLINIC - Contributions to the clinic to buy furniture	
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  Total. Add lines 1 through 3		and equipment necessary to provide health services to the poor and needy	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  2  All other program-related investments See instructions 3  Total. Add lines 1 through 3			15,000
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All other program-related investments. See instructions  3  Total. Add lines 1 through 3	Des		Amount
All other program-related investments. See instructions  3  Total. Add lines 1 through 3	1	**NONE * *	
All other program-related investments. See instructions  3  Total. Add lines 1 through 3			
All other program-related investments. See instructions  3  Total. Add lines 1 through 3			
3	2		
3			
3	ΔU	other program related investments. See instructions	
Total. Add lines 1 through 3		other program-related investments. Occ instituctions	
	J .		
	Total	. Add lines 1 through 3	_
			Form 990-PF (2011)

Part .	Minimum investment Return (All domestic foundations must complete this part. Foreign see instructions.)	in tonno	lations,
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	8,288,784
b	Average of monthly cash balances	1b	184,556
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	8,473,340
е	Reduction claimed for blockage or other factors reported on lines 1a and	130	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	8,473,340
4	Cash deemed held for charitable activities. Enter 11/2 % of line 3 (for greater amount, see		
	instructions)	4	127,100
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	_5	8,346,240
6	Minimum investment return. Enter 5% of line 5	6	417,312
Part 2	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.)	<del></del>	
1	Mınımum ınvestment return from Part X, line 6	1	417,312
2a	Tax on investment income for 2011 from Part VI, line 5	1377	<u>.</u>
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	13,885
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	403,427
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	403,427
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	Ine 1	7	403,427
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	371,823
b	Program-related investments—total from Part IX-B	1b	
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	371,823
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 instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	371,823
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		er the foundation

Part_	Undistributed Income (see instruction	ons)			_
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years pnor to 2010	(c) 2010	(d) 2011
	line 7				403,427
2	Undistributed income, if any, as of the end of 2011:				
а	Enter amount for 2010 only			256,570	
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2011:				
а	From 2006				
b	From 2007				
С	From 2008				
d	From 2009				
е	From 2010				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 371,823				
а	Applied to 2010, but not more than line 2a .		ŀ	256,570	
	Applied to undistributed income of prior years			230,370	
-	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
Ū	required—see instructions)				
d	Applied to 2011 distributable amount				115,253
е	Remaining amount distributed out of corpus			,	
5	Excess distributions carryover applied to 2011				
	(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:	**	* * *		
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0	<u> </u>	•	
b	Prior years' undistributed income. Subtract line 4b from line 2b	źz.	0	6 >	
С	Enter the amount of prior years' undistributed	•	<del>.</del>		
	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 instructions		o		
е	Undistributed income for 2010 Subtract line				
	4a from line 2a. Taxable amount—see				
	instructions			o	
f	Undistributed income for 2011. Subtract lines				·
	4d and 5 from line 1 This amount must be				
	distributed in 2012				288,174
7	Amounts treated as distributions out of corpus				200,174
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions).				
8	Excess distributions carryover from 2006 not				
O	applied on line 5 or line 7 (see instructions).				
•	·			<u></u>	
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a				
		0			
10	Analysis of line 9				-
а	Excess from 2007	1			
b	Excess from 2008	1			
С	Excess from 2009	1			
d	Excess from 2010	1			
е	Excess from 2011				

Part 2					)	
1a	If the foundation has received a ruling			private operating		
	foundation, and the ruling is effective for			▶		
b	Check box to indicate whether the foun		operating foundation		tion 4942()(3	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2011	(b) 2010	Prior 3 years (c) 2009	(d) 2008	(e) Total
	investment return from Part X for	(a) 2011	(5) 2010	(0) 2003	(u) 2006	0
b	each year listed 85% of line 2a	0	0	0	0	<u>o</u>
	Qualifying distributions from Part XII,				Ĭ	
_	line 4 for each year listed					0
d	Amounts included in line 2c not used directly	_				
	for active conduct of exempt activities					0
е	Qualifying distributions made directly	-				_
	for active conduct of exempt activities	_				_
•	Subtract line 2d from line 2c	0	0	0	0	0
3	Complete 3a, b, or c for the alternative test relied upon		THIS	PART IS	NI/A	
а	"Assets" alternative test—enter		11115	IAKI IS	[ ]	
a	(1) Value of all assets					0
	(2) Value of assets qualifying under			· -		
	section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					0
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on				]	
	securities loans (section 512(a)(5)), or royalties)		1			0
	(2) Support from general public					
	`and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					О
	(3) Largest amount of support from					
	an exempt organization					0
Dowl	(4) Gross investment income	- (Co	in mant amb if 4	 		0
Part	XV Supplementary Information any time during the year-			ne loundation i	iad \$5,000 or mo	ore in assets at
1	Information Regarding Foundation				<del></del>	<del>-</del>
a	List any managers of the foundation		uted more than 29	% of the total cont	ributions received	by the foundation
	before the close of any tax year (but o	nly if they have co	ontributed more that	an \$5,000). (See s	ection 507(d)(2).)	,
**	NONE * *					
b	List any managers of the foundation					rge portion of the
	ownership of a partnership or other er	itity) of which the f	oundation has a 1	0% or greater inte	rest.	
2	NONE **	Cront Cift Loc	n Cobolombia	-4- Duamana		
2	Information Regarding Contribution Check here ▶ ☐ if the foundation				organizations and	doos not ossent
	unsolicited requests for funds. If the f	oundation makes	gifts, grants, etc.	(see instructions)	to individuals or or	ganizations under
	other conditions, complete items 2a, b		g, g,	(****		gameadono unaci
а	The name, address, and telephone nu	ımber of the perso	on to whom applica	ations should be a	ddressed	
JOHN	BOREK,C/O GEORGIA HEALTH					404-658-9066
b	The form in which applications should	be submitted and	information and n	naterials they shou	ıld include	
655	ADDITION OUTDITHE AME	ACUED				
	APPLICATION GUIDLINES ATT  Any submission deadlines:	ACUED				
	UST 1 OF EACH YEAR					
	Any restrictions or limitations on av	vards, such as b	y geographical a	reas, charitable f	ields, kınds of ins	titutions, or other
	factors:				- ···-	,

SEE APPLICATION GUIDELINES - PRIMARILY RESTRICTED TO HEALTH CHARITIES IN GEORGIA

	t XV Supplementary Information (configuration and Contributions Paid During	inued)	ed for Eu	ture Payment	
3	Recipient	If recipient is an individual,	Foundation		
		If recipient is an individual, show any relationship to any foundation manager or substantial contributor		Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year  **SEE LIST ATTACHED**	NO INDIVIDUAL DONATIONS	ALL ARE 501 (c) 3	FOR MEDICAL CARE OR RESEARCH	300,000
		BONATIONS		OK RESERVOIT	
	Total			<b>▶</b> 3a	300,000
t	**NONE**				
	Total	<del></del>	<del></del>		<del> </del>

	Analysis of Income-Producing Ac	HAIRICS				
Ente	r gross amounts unless otherwise indicated.	Unrelated but	siness income	Excluded by section	n 512, 513, or 514	(e)
	•	(a)	(b)	(c)	(d)	Related or exempt function income
		Business code	Amount	Exclusion code	Amount	(See instructions)
1	Program service revenue:					- ,
	a					
	<u> </u>				····-	
	C					
	d					
	e					
	Form and control from a constant and a control		<u> </u>	-	<del></del>	
_	g Fees and contracts from government agencies					
2	Membership dues and assessments			14	04 414	
3	Interest on savings and temporary cash investments  Dividends and interest from securities			14	24,414	
4				14	126,982	
5	· · ·	8 4 6 T (4 2 3 PC - 77)	, ,		* */ */ */**	
e	b Not debt-financed property				<del></del>	
6						
7	Other investment income			10	E00 052	<del></del>
8 9	Net income or (loss) from special events			18	580,053	
	Gross profit or (loss) from sales of inventory					
10 11						
• •	<b>.</b>					-
	d					
	e		<del></del>			
12	Subtotal Add columns (b), (d), and (e)		0	77. 1 (1)	731,449	0
13	Total. Add line 12, columns (b), (d), and (e)				13	731,449
<b>13</b> (See	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations	 S.)				
13 (See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	731,449
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	731,449
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	731,449
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes	13	731,449
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to XVI-B Relationship of Activities to the A e No.  Explain below how each activity for which accomplishment of the foundation's exempt purp	s.) .ccomplishm	ent of Exemp	t Purposes	13	731,449
13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to XVI-B Relationship of Activities to the A e No.  Explain below how each activity for which accomplishment of the foundation's exempt purp	s.) .ccomplishm	ent of Exemp	t Purposes	13	731,449
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13 (See Par Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to XVI-B Relationship of Activities to the A e No.  Explain below how each activity for which accomplishment of the foundation's exempt purp	s.) .ccomplishm	ent of Exemp	t Purposes	13	731,449

Form 99	90-PF (2011									rage 10
Part	XVII		n Regarding Trar ganizations	nsfers To and	d Transactio	ons and	Relationship	s With Nonc	haritable	
1	ın section organiz	on 501(c) of thations?	directly or indirectly e Code (other than	section 501(c)	(3) organizatio	ons) or in :	section 527, re			s No
а	Transfe (1) Cas		porting foundation to	a noncharitab	le exempt org	anızatıon	of: 		1a(1)	X
	• •	er assets .							1a(2)	х
b	• •	ansactions								3 17 17
	(1) Sale	es of assets to	a noncharitable exe	empt organizati	ion				1b(1)	X
			ets from a noncharite						1b(2)	х
			, equipment, or othe	•	_				1b(3)	х
			rrangements						1b(4)	х
		ns or loan gua							1b(5)	х
	(6) Per	formance of se	ervices or membersh	nip or fundraisii	ng solicitation	s			1b(6)	х
С	Sharing	of facilities, e	quipment, mailing lis	sts, other asset	ts, or paid em	ployees			1c	x
d			of the above is "Yes							
			ther assets, or servi							
		<del>-</del>	on or sharing arrang			he value	of the goods, o	ther assets, or	services rec	eıved
(a) Lin	e no (b)	Amount involved	(c) Name of nonc	haritable exempt or	rganization	(d) Desc	cription of transfers	transactions, and	sharing arrangei	ments
								<del></del>		
			**N/A**		_					
									<u>.                                      </u>	
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	_					-	<del></del>			
					<del></del>	<del>                                       </del>			<del></del>	
2a b	describ	ed in section 5	ectly or indirectly aff 501(c) of the Code (c) following schedule.	other than sect	related to, on tion 501(c)(3))	ne or mor or in sect	e tax-exempt ion 527?	organizations	☐ Yes 🖸	No
		(a) Name of organ	nization	(b) Type of organization		(c) Description of relation		ationship		
				**N/A*	*			· · · · · · · · · · · · · · · · · · ·	<del></del>	
							<del>                                     </del>		<del></del>	
			<u> </u>							
		<del> </del>							· · · · · · · · · · · · · · · · · · ·	
	Under p	enalties of perjury,	I declare that I have exami	ned this return, inclu	idyng accompanying	schedules a	nd statements, and	to the best of my kno	wledge and belie	ef. it is true
Sigr Here	correct,	and complete Dec	laration of preparer (other t	han taxpayer) is bas	seld on all informati	on of which p	reparer has any kno	wledge May the with the	ne IRS discuss the preparer show istructions)?	nis return
	1 6	Print/Type prepare		Date Preparer's sign	· · · · · · · · · · · · · · · · · · ·	_	Date		PTIN	
Paid		.,		120 -	RD+	-10		Check 🔀 i	f	
	alei	<del> </del>	DONTREE, CPA			80, C17	1 3-23-17		d P005206	295
Use			ROBERT B. ROU			C3 20		Firm's EIN ►	106 0000	
	<u> </u> F	irm's address 🕨	2300 HENDERSO	M WILL KD	, ATLANTA,	GA 30	345	Phone no 770-4	196-99 <u>39</u>	

# GEORGIA HEALTH FOUNDATION, INC. 2011

-	Column A	Column B	Column D_					
Part I, line 1 - Contribution Memorial gifts in memory								
of deceased director	1,055	0_	0					
Part I, line 16c - Other P Investment Fees and	rofessional Fe	ees						
Consultant Fees	54,327	37,204	17,123					
Part I, line 18 - Taxes								
Excise Tax	13,885	0	9,720					
Part I, line 23 - Other Ex	Part I, line 23 - Other Expenses							
Office Expense	1,425	0	998					
Telephone Expense	1,202	0	842					
Total	2,627	0	1,840					

PART I ATTACHMENT - REVENUE & OPERATING EXPENSE

•	Acquired	Quantity	Cost Basis	Market Value
CASH EQUIVALENTS -CD's				
CD - AMERICAN EXPRESS BANK - 2.9% CD - BMW BANK OF NORTH AMERICA - 2.85%	11/18/2009 12/8/2009	80,000 45,000	80,000 45,000	82,013 45,891
TOTAL			125,000	127,904
U.S. GOVERNMENT SECURITIES				
FNMA GLOBAL NOTES - 4.375% U S TREASURY NOTE - 4.25% FEDERAL FARM CREDIT BK BOND - 4.625%	12/1/2005 8/1/2006 11/30/2005	150,000 50,000 50,000	148,131 48,381 49,908	154,372 53,699 50,457
TOTAL			246,420	258,528
CORPORATE AND OTHER BONDS				
MICROSOFT CORP - 1.625% WAL-MART STORES - 4.55% PROCTER & GAMBLE CO 1.8%	12/16/2010 8/1/2006 12/20/2010	100,000 50,000 100,000	47,814	102,880 52,772 103,263
TOTAL			244,335	258,915
				200,0.0
LIMITED PARTNERSHIP SHARES				
THE ENDOWMENT TEI FUND, L P. THE ENDOWMENT TEI FUND, L.P. THE ENDOWMENT TEI FUND, L.P SKYBRIDGE MULTI-ADVISOR HEDGE FD, LLC	12/1/2006 6/1/2008 3/1/2010 8/1/2011	6,682 5,713 1,779 344	356,272 349,943 94,962 400,000	372,769 318,711 99,245 367,864
TOTAL	<del> </del>		1,201,177	1,158,589
				1,100,000
STOCK MUTUAL FUNDS				
VANGUARD SMALL CAP FUND VANGUARD MID-CAP ETF VANGUARD VALUE ETF VANGUARD GROWTH ETF VANGUARD EMERGING MKTS ETF VANGUARD FTSE ALL WORLD EX US THORNBURG INTL VALUE FD CL I JOHN HANCOCK DISCIPLINED MID CAP CL I FEDERATED STRAT VAL DIVIDEND INSTL CL GOLDMAN SACHS GROWTH OPP FD INSTL MAINSTAY LARGE CAP GROWTH FD CL I SCHRODER EMERGING MKT FD INV CL AMERICAN EURO PACIFIC GRWTH FD CL F2 AMERICAN FUNDS AMCAP FD CL F2 BLACKROCK EQUITY DIVIDEND FD INSTL PENNSYLVANIA MUTUAL FUND	9/21/2010 9/21/2010 9/21/2010 9/21/2010 9/21/2010 9/21/2010 5/10/2011 9/6/2011 5/12/2011 5/12/2011 5/12/2011 11/18/2009 5/7/2010 2/9/2009	3,463 5,362 10,046 8,579 1,071 3,241 5,225 36,909 143,826 17,693 71,019 7,333 3,727 28,293 38,963	352,409 495,728 468,782 47,314 145,160 160,633 382,110 655,279 463,018 564,901 103,685 147,034 472,916 569,798	241,267 385,742 527,315 529,839 40,923 128,506 128,422 416,700 698,992 390,663 502,103 83,597 130,847 533,613 708,732
	5/10/2011	46,205	589,107	497,162
TOTAL			5,834,808	5,944,423

**GRAND TOTAL - ALL INVESTMENTS** 

\$ <u>7,748,359</u>

# PAGE 2, PART II ATTACHMENT

# GEORGIA HEALTH FOUNDATION 12-31-2011

#### REALIZED CAPITAL GAIN AND LOSS SUMMARY

Quantity	Security Description	Date of Acquisition	Date of Liquidation	Sale Amount	Cost Basis	Gain or (Loss)
		05/00/00			.=	
4,789 0000	JANUS ENTERPRISE FD CL I	05/28/09	05/12/11	309,991 97	178,174 54	131,817 43 L
0 7640	JANUS ENTERPRISE FD CL I JANUS ENTERPRISE FD CL I	05/28/09 08/03/09	05/12/11	49 45	28 42	21 03 L
1,300 0000			05/12/11	84,148 99	49,974 82	34,174 17 L
1 0000	JANUS ENTERPRISE FD CL I	06/08/09	05/12/11	64 73	26 48	38.25 L
2,474 0000	JANUS ENTERPRISE FD CL I	11/18/09	05/12/11	180,142 03	112,968 09	47,173 94 L
1 0000	JANUS ENTERPRISE FD CL I	11/23/09	05/12/11	84 73	45 15	19.58 L
14,209 0000	NEUB BERM GENESIS INSTL	09/21/10 09/21/10	05/10/11	724,232 73	559,408 33	164,824 40 S
0 3360 11,988 0000	NEUB BERM GENESIS INSTL ARTIO INTL EQUITY II I	09/21/10	05/10/11 05/10/11	17 13	13 22	3 91 S
1 0000	ARTIO INTL EQUITY II I	12/03/10	05/10/11	153,908 48 12 85	140,145.28	13,763.20 S
224 0000	ARTIO INTL EQUITY II I	12/03/10	05/10/11	2,880 64	12 55	0.30 S
0 8010	ARTIO INTL EQUITY II I	12/30/10	05/10/11	10 30	2,842 56	38 08 S
253 0000	ARTIO INTL EQUITY II I	12/30/10	05/10/11	3,253 59	9 96	0.34 S
15,583.0000	JANUS FORTY FUND CL I	11/18/09	05/10/11	559,273 86	3,134 67	118.92 S
0 8960	JANUS FORTY FUND CL I	11/18/09	05/10/11	32 16	492,367 44	68,908 42 L
1 0000	JANUS FORTY FUND CL I	11/23/09	05/10/11	35 90	28 31 31 42	3.85 L
6,424 0000	ARTISAN EMERGING MARKETS	09/21/10	05/12/11	100,985 28		4 48 L
1 0000	ARTISAN EMERGING MARKETS	12/16/10	05/12/11	15 71	95,524 88 15 04	5,460 40 S 0 67 S
0 1160	ARTISAN EMERGING MARKETS	12/16/10	05/12/11	182	1 82	0.00
40 0000	ARTISAN EMERGING MARKETS	12/16/10	05/12/11	628 81	628 40	
985 0000	VANGUARD SMALL CAP	09/21/10	09/01/11	67,603 98	61,703 85	0 41 S
1,345 0000	VANGUARD MID-CAP ETF	09/21/10	09/01/11	96,807 47	88,397 97	5,900 13 S
4.525 0000	PERKINS MD CP VL FD CL I	05/28/09	09/01/11	97.604 25	74,078 20	8,409 50 S
14,660 0000	PERKINS MD CF VL FD CL I	05/28/09	09/06/11	306,687 20	239,996 98	23,526 05 L
168 0000	PERKINS MD CP VL FD CL I	06/30/09	09/08/11	3,514 58	2,763 60	68,690 22 L
1 0000	PERKINS MD CP VL FD CL I	07/01/09	09/08/11	20.91	2,763 60	750 96 L
29 0000	PERKINS MD CP VL FD CL I	12/18/09	09/06/11	, , 606 68	566 66	672 L 4002 L
1 0000	PERKINS MD CP VL FD CL I	12/21/09	09/06/11	20 91	19 71	1 20 L
2,771 0000	PERKINS MD CP VL FD CL I	09/21/10	09/06/11	57,969 33	56,722 37	1,246 96 S
0 5200	PERKINS MD CP VL FD CL I	12/20/10	09/06/11	10 88	11 46	(0 58) S
	<del></del>					
200 0000	PERKINS MD CP VL FD CL I	12/20/10	09/06/11	4,184.01	4,453 99	(269.98) S
23,004 0000	MFS VALUE FD CL I	02/09/10	09/01/11	498,726 71	472,238 20	26,488 51 L
88 0000	MFS VALUE FD CL I	03/25/10	09/01/11	1,907 84	1,894 64	13 20 L
1 0000	MFS VALUE FD CL I	06/24/10	09/01/11	21.68	20 49	1 19 L
131 0000	MFS VALUE FD CL I	06/24/10	09/01/11	2,840.08	2,612 27	227 81 L
1.0000	MFS VALUE FD CL I	09/28/10	09/01/11	21.67	21.03	0 64 S
82 0000	MFS VALUE FD CL I	09/28/10	09/01/11	1,777 76	1,733.47	44 29 S
115 0000	MFS VALUE FD CL I	12/09/10	09/01/11	2,493 20	2,571 40	(78 20) S
78 0000	MFS VALUE FD CL I	03/24/11	09/01/11	1,691.04	1,861 86	(170 82) S
0.7430	MFS VALUE FD CL I	08/23/11	09/01/11	16.11	16 82	(0 71) S
113.0000	MFS VALUE FD CL I	06/23/11	09/01/11	2,449.86	2,645.32	(195 46) S
4,230 0000	GLDMN SCHS GRW OPP INSTL	05/12/11	09/01/11	94,794.30	111,672 00	(16,877 70) S
11,260 0000	PENNSYLVANIA MUTUAL FD	05/10/11	09/01/11	123,184 40	144,465 80	(21,281 40) S
15,417 0000	FEDRID STRG VL DV FD INS	09/01/11	11/16/11 11/16/11	71,997 39	70,764.03	1,233 36 S
0 5590	FEDRTD STRG VL DV FD INS	10/31/11	11/16/11	2 61	2.57	0 04 S
4,070 0000	BLACKROCK EQ DIVIDEND I	02/09/09 10/21/11	11/16/11	71,998 30	52,021 50	19,976 80 L
0 0960	BLACKROCK EQ DIVIDEND I	10/21/11	11/10/11	1 70	1 67	0 03 S

NET CAPITAL GAIN 580,052.56

REALIZED CAPITAL GAINS & LOSSES
PAGE 3, PART IV ATTACHMENT

#### GEORGIA HEALTH FOUNDATION, INC. DIRECTORS AND DIRECTOR FEES 2011

NAME AND ADDRESS	AMOUNT
John M. Borek 3023 Shinnecock Hills Drive Duluth, GA 30097	\$4,050.00
Jaquelin Gotlieb 1522 Howell Highlands Stone Mountain, GA 30087	\$3,600 00
J. Rhodes Haverty 3359 Woodhaven Rd., NW Atlanta, GA 30305	\$3,600.00
Martha Katz 417 Clairemont Ave , #122 Decatur, GA 30030	\$3,150 00
S. Jarvin Levison 171 17th Street, Suite 2100 Atlanta, GA 30363	\$4,500.00
Nancy M. Paris 50 Hurt Plaza, Suite 910 Atlanta, GA 30303	\$4,950 00
Robert L. Zwald 3735 Sınclaır Shores Rd. Cumming, GA 30041	\$3,150 00
TOTAL DIRECTOR FEES	\$27,000 00
CONSULTANT John W Stephenson 3400 Pinestream Rd , NW Atlanta, GA 30327	\$25,200.00

PART VIII, LINE 1 ATTACHMENT

## General Information

The Georgia Health Foundation is a private, non-operating foundation, established in 1985. It is dedicated to improving the health of Georgians. The Foundation makes grants within a broad scope of health-related areas to tax-exempt organizations operating exclusively for charitable, scientific, and/or educational purposes. Grants are made only within the State of Georgia. Consideration is given to proposals that are of local importance and to opportunities that may address regional and national issues. While the Foundation should not be considered a source of continuing support, it seeks to encourage programs that have a high potential of becoming permanent.

## Grant Criteria

The Foundation supports health-related purposes which provide innovative approaches to personal and community health care including access, delivery, maintenance, public awareness, education, quality evaluation, clinical research and preventive care for all segments of the population. In considering grants, attention is given to the financial strength of the applicant, the likelihood of success of the proposal, and the applicant's commitment to evaluating the effectiveness of the grant's purpose. Collaboration, cooperation and joint venturing among organizations are encouraged.

## Grant Application Procedures

Between January 1st and May 1st of the year, submit a brief but thorough request outlining the project or proposal. The letter should include the following:

- Legal name, office and mailing address and phone number of applicant organization
- Date of establishment and brief history
- Purpose and specific amount of grant requested with itemized budget information
- Identification of individuals administering the project
- Unique aspects of program
- A copy of the organization's IRS tax exempt determination letter

# Grant Awards Procedures

The Foundation normally awards grants in November and distributes the funds in December. Occasionally the Board will consider awarding grants earlier in the year, but only when the timing and urgency of the project requires early review and funding.

It is strongly recommended that grant applicants submit the initial brief proposal by May 1 so the Proposal Evaluation Committee will have time to request additional information before the August 1st final deadline for all submissions.

GRANT INFORMATION PART XV ATTACHMENT

Grantee Organization	Grantee Primary Contact	Type of Support	Amount Paid	Payment Date
Hillside, Inc. PO Box 8247 690 Courtenay Drive, NE (30306) Atlanta, GA 31106-0247	Teresa Stoker Tel: 404-875-4551 Fax: 404-875-1394	Program Development	\$15,000	12/1/2011
South Health District PO Box 5147 Valdosta, GA 31603	William R. Grow Tel: 229-333-5290 Fax: 229-333-7822	Program Development	\$15,000	12/1/2011
MedBank Foundation 835 East 65th Street, #12 Savannah, GA 31405	Liz Longshore Tel: 912-356-2898 Fax: 912-356-2767 medbank@bellsouth.net	Equipment/Furnishings	\$10,000	12/1/2011
Mercy Health Center, Inc. PO Box 6064 Athens, GA 30604	Tracy Thompson Tel: 706-425-9445 Fax: 706-425-0820	General Operating Support	\$15,000	12/1/2011
Rapha Clinic of West Georgia PO Box 1367 253 Highway 78 Temple, GA 30179-1367	Sue Brockman Tel: 770-562-4501 Fax: 770-562-4402 s_brock@comcast.net	Program Development	\$15,000	12/1/2011
St. Joseph's/Candler Foundations 5353 Reynolds Street Savannah, GA 31405	Paul P. Hinchey Tel: 912-819-3340 Fax: 912-819-8228	General Operating Support	\$15,000	12/1/2011
YMCA of Metropolitan Atlanta 100 Edgewood Avenue., Suite 1100 Atlanta, GA 30303	Edward G. Munster Tel: (404)588-9622 Fax: (404)527-7693	Project Support	\$10,000	12/1/2011
Grand Totals (18 items)			\$268,500	

PLUS MISCELL'ANEOUS SMALL DIRECTOR MATCHING GRANTS 31,500 \$ 300,000

2011 GRANTS
PAGE 11, PART XI ATTACHMENT

## **GHF** - Grants Paid 2011

## Georgia Health Foundation

Grantee Organization	Grantee Primary Contact	Type of Support	Amount Paid	Payment Date
Camp Sunshine 1850 Clairmont Road Decatur, GA 30030	Sally Hale Tel: 404-325-7979 Fax: 404-325-7929	General Operating Support	\$6,500	12/1/2011
Care and Counseling Center of Georgia, Inc. 1814 Clairmont Road Decatur, GA 30033	Sandra Mullins Tel: 404-636-1457 Fax: 404-636-7449	Program Development	\$15,000	12/1/2011
Caring Hands Health Clinic, Inc. 34-C Courthouse Square Cleveland, GA 30528	James B Hiers Tel: 404-626-1294	General Operating Support	\$15,000	12/1/2011
Center for the Visually Impaired 739 W. Peachtree Street, NE Atlanta, GA 30308	Susan B. Green Tel: 404-875-9011 Fax: 404-875-4568	Program Development	\$15,000	12/1/2011
Emory University 1440 Clifton Road, NE WHSCAB Atlanta, GA 30322	James W. Wagner Tel: (404)727-5630 Fax: (404)727-0473	Student Aid/Awards to Institutions	\$25,000	9/1/2011
George West Mental Health Foundation 1961 N. Druid Hills Road Atlanta, GA 30329	Elizabeth E Finnerty Tel: (404)315-8333 Fax: 404-315-9838	General Operating Support	\$15,000	12/1/2011
Georgia Free Clinic Network, Inc. PO Box 133224 1015 Donald Lee Holloway Parkway 30318 Atlanta, GA 30333	Donna Looper Tel: 678-553-4939	General Operating Support	\$12,000	12/1/2011
Georgia Southern University Research and Service Foundation, Inc. PO Box 8005 Statesboro, GA 30460-8005	Deborah N. Shaver Tel: 912-478-5465	Program Development	\$20,000	12/1/2011
Georgia State University Foundation 33 Gilmer Street Atlanta, GA 30303-3085	Nancy E. Peterman Tel: (404)651-3971	Student Aid/Awards to Institutions	\$25,000	6/24/2011
Gwinnett Community Clinic PO Box 487 2160 Fountain Drive Snellville, GA 30078	Sheila Adcock Tel: 770-985-1199 Fax: 770-985-3649	Equipment/Furnishings	\$15,000	12/1/2011
Health Students Taking Action Together, Inc. 1561 McLendon Avenue Atlanta, GA 30307	Morgan Washington Tel: 678-637-6923	Program Development	\$10,000	12/1/2011