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DLN: 93491215001022

OMB No 1545-0052

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

2011

For	cale	ndar year 2011, or tax y	ear beginning 01-	01-2011 , and	d end	ding 12-31-	2011	
G C1	neck a	Il that apply Initial retur	_	n of a former public ch		Final re	turn	
ME	DICAL	Indation RESEARCH & HEALTH IN FOUNDATION		J			lentification numbe	er
		l street (or P O box number if mail is i LING BEND COURT	not delivered to street addres:	s) Room/suite		B Telephone nu (706) 327-400	umber (see page 10 c	of the instructions)
		n, state, and ZIP code GA 31904				· '	application is pendin rganizations, check he	~ <u>'</u>
		ype of organization			n	2. Foreign o	organizations meeting re and attach comput	the 85% test, 🕨 🦵 ation
of line	year (1 e 16) ►	ket value of all assets at end from Part II, col. (c), \$ 58,590	JAccounting method Other (specify) (Part I, column (d) mus	_	rual	under section F If the found	undation status was t n 507(b)(1)(A), chec ation is in a 60-mont n 507(b)(1)(B), chec	k here • • • • • • • • • • • • • • • • • •
Ра	rt I	Analysis of Revenue a total of amounts in columns (b), (o necessarily equal the amounts in c the instructions))	c), and (d) may not	(a) Revenue and expenses per books	(b) I	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , rece	ived (attach schedule)					
	2	Check F 🔽 if the foundation is not	required to attach Sch B					
	3	Interest on savings and tempo	rary cash investments					
	4	Dividends and interest from se	ecurities					
	5a	Gross rents						
	ь	Net rental income or (loss)						
<u>Φ</u>	6a	Net gain or (loss) from sale of	assets not on line 10					
Revenue	ь	Gross sales price for all assets on line	6a					
	7	Capital gain net income (from						
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allowance						
	b	Less Cost of goods sold						
	C	Gross profit or (loss) (attach s	•	_				
	11	Other income (attach schedule	e)	362,176				
	12	Total. Add lines 1 through 11		362,176		0		
	13	Compensation of officers, direc						
مې	14	Other employee salaries and v	vages	241,955				241,955
Expenses	15	Pension plans, employee bene						
Ē	16a	Legal fees (attach schedule).						
	b	Accounting fees (attach sched						4,845
₹	C	Other professional fees (attac	•					
Admını strative	17	Interest						760
∃ St	18	Taxes (attach schedule) (see page 1	•	7,024				7,024
Ī	19	Depreciation (attach schedule		4,620				
Ą	20	Occupancy						
and	21	Travel, conferences, and meet						9,646
	22	Printing and publications						140
Ĕ	23	Other expenses (attach sched		81,596				81,596
Operating	24	Total operating and administra	_					
ă		Add lines 13 through 23				0		345,966
_	25	Contributions, gifts, grants pai	ıd					2,028
	26	Total expenses and disbursement	ts. Add lines 24 and 25	352,614		0		347,994
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expens		9,562				
	b	Net investment income (if neg				0		
	С	Adjusted net income (If negati	<u> </u>					000 PF (2011)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	(I-) D1		of year	. 141 1 - 1 - 1 - 1
		should be for end-or-year amounts only (see instructions)	(a) Book Value	(b) Bool	< Value 27,87		Market Value 27,877
	1	Cash—non-interest-bearing	6,615		21,0	+	21,011
	2	Savings and temporary cash investments	0,015			+	
	3	Accounts receivable					
	_ ا	Less allowance for doubtful accounts				+	
	4	Pledges receivable					
	_	Less allowance for doubtful accounts -					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see page 15 of the					
	_	instructions)	6,081				
	7	Other notes and loans receivable (attach schedule) 15,000					
		Less allowance for doubtful accounts 🟲		19 5	15,00	00	15,000
Assets	8	Inventories for sale or use					
455	9	Prepaid expenses and deferred charges					
_	10a	Investments—U S and state government obligations (attach schedule)					
	ь	Investments—corporate stock (attach schedule)					
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis 🟲					
		Less accumulated depreciation (attach schedule)					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment basis - 42,913					
		Less accumulated depreciation (attach schedule) > 29,283	11,228	% 3	13,63	30	13,630
	15	Other assets (describe 🟲)		-	2,08	33 95	2,083
	16	Total assets (to be completed by all filers—see the		_			
		instructions Also, see page 1, item I)	23,924		58,59	90	58,590
	17	Accounts payable and accrued expenses	19,956		4:	.4	
	18	Grants payable				7	
ý)	19	Deferred revenue				1	
itles	20	Loans from officers, directors, trustees, and other disqualified persons			44,64	15	
Liabili	21	Mortgages and other notes payable (attach schedule)				7	
Li	22	Other liabilities (describe				_	
						1	
	23	Total liabilities (add lines 17 through 22)	19,956		45,05	59	
		Foundations that follow SFAS 117, check here 🕨 🔽					
		and complete lines 24 through 26 and lines 30 and 31.					
Balances	24	Unrestricted	3,968		13,53	31	
an	25	Temporarily restricted					
Bal	26	Permanently restricted					
		Foundations that do not follow SFAS 117, check here ▶ ┌					
Fund		and complete lines 27 through 31.					
J.	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
Assets	29	Retained earnings, accumulated income, endowment, or other funds					
	30	Total net assets or fund balances (see page 17 of the					
Net		ınstructions)				31	
_	31	Total liabilities and net assets/fund balances (see page 17 of					
		the instructions)	23,924		58,59	90	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances				•	
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ac	gree			
		with end-of-year figure reported on prior year's return)		_	1		3,968
2		Enter amount from Part I, line 27a			2		9,562
3		Other increases not included in line 2 (itemize)			3		1
4		Add lines 1, 2, and 3			4		13,531
5		Decreases not included in line 2 (itemize)			5		
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P			6		13,531

		the kınd(s) of property sold (e g , r ouse, or common stock, 200 shs	P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1a						
				1		
(е) Gross sales price	(f) Depreciation allows (or allowable)		t or other basıs opense of sale		or (loss)) minus (g)
		(or anowabie)	pius c/	CPCH3C OF Sale	(c) plus (i) IIIIIus (g)
b						
d						
	mnlete only for assets s	showing gain in column (h) and own	ed by the foundation	n on 12/31/69	(I) Gains (Col	(h) gain minus
		(j) Adjusted basis		cess of col (ı)		less than -0-) or
(i)	FM V as of 12/31/69	as of 12/31/69		col (j), if any		om col (h))
а						
b						
С						
d						
е						
2	Capital gain net incor	me or (net capital loss)	If gaın, also enter If (loss), enter -0		2	
3	Net short-term capita	ه al gain or (loss) as defined in sectio	ons 1222(5) and (6	,		
	·	Part I, line 8, column (c) (see page			າ	
	If (loss), enter -0- in				} ₃	
Part '	V Qualification I	Jnder Section 4940(e) for	Reduced Tay or	Net Investme	<u> </u>	
If section Was the	on 4940(d)(2) applies, l foundation liable for the	erivate foundations subject to the s eave this part blank e section 4942 tax on the distribute of qualify under section 4940(e) D	table amount of any	year in the base p	·	┌ Yes ┌ No
		unt in each column for each year, s			makıng anv entries	
	(a)		1		(d)	
Base	period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncha		Distributio	n ratio
year (c	or tax year beginning in) 2010				(col (b) divided	by cor (c))
	2009					
	2008					
	2007					
	2006					
2	Total of line 1, colum	n (d)			2	
3		ratio for the 5-year base period—d he foundation has been in existend			3	
	the number of years t	ne roundation has been in existent	e ii less tilali 5 yea			
4	Enter the net value of	f noncharitable-use assets for 201	1 from Part X, line!	5	4	
5	Multiply line 4 by line	3			5	
6	Enter 1% of net inves	stment income (1% of Part I, line 2	27b)	[6	
7	Add lines 5 and 6				7	
8		butions from Part XII, line 4.			8	
0	If line 8 is equal to or	greater than line 7, check the box			_	x rate See
	the Part VI instructio					

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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the	e instr	uctio	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here T and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary–see					
ь	instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check 1				0	
_	here F and enter 1% of Part I, line 27b				<u> </u>	
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-)					
3	Add lines 1 and 2					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0					
6	C redits/P ayments					
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a					
ь	Exempt foreign organizations—tax withheld at source 6b					
c	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.					
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 10					
11	Enter the amount of line 10 to be Credited to 2012 estimated tax					
Par	t VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did			Yes	No	
	it participate or intervene in any political campaign?		1a		No	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of					
	the instructions for definition)?		1b		No	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities.					
c	Did the foundation file Form 1120-POL for this year?	. L	1c		No	
d						
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					
e	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? \dots . \dots		2		No	
	If "Yes," attach a detailed description of the activities.					
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		No	
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	· [4a		No	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	L	4b		No	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		No	
	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	Yes		
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	Ļ	7	Yes		
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the					
	Instructions) • GA	-				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney		O.L.	\ v = -		
^	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	 -	8b	Yes		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)					
	or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV on		6		No	
10	page 27)? If "Yes," complete Part XIV	. }	9 10		No No	
10			ΤŪ		140	

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	rt VII-A Statements Regarding Activities (continued)		Ι	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			l
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	<u> </u>
	Website address ► <u>N/A</u>			
14	The books are in care of ▶JONATHAN L LISS Telephone no ▶(706) 327·	-4000	
	Located at ▶7409 ROLLING BEND CT COLUMBUS GA COLUMBUS GA ZIP+4 ▶31904			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			- ,
			<u> </u>	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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 foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			
ь				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		No
	Organizations relying on a current notice regarding disaster assistance check here			
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		No
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			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b		No
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			
За	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
ь	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation	1		
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved	1		
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)	1		
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	1		
	If the foundation had excess business holdings in 2011.).	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	No
ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			T
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		No

Pa	T VII-B Stateme	ents Regard	na Activities for	· Wł	nich Form 4720	Mav	Be Required (cont	inue	d)	r age c
5a	During the year did th					,	Do Required (come		<u> </u>	
	(1) Carry on propaga	•	•		uslation (section 49	45(e)))?	√ No		
	(2) Influence the out							110		
			•	-			, <mark>「Yes</mark> 「	Z Na		
			=			•	Yes			
	(3) Provide a grant to							NO		
	(4) Provide a grant to	-			· -					
						struc	tions) T Yes F	✓ No		
	(5) Provide for any pi							_		
	educational purpo	ses, or for the p	prevention of cruelty	to ch	ıldren or anımals?.		Yes 🖟	✓ No		
b	If any answer is "Yes	" to 5a(1)-(5),	did any of the transac	tions	s fail to qualify unde	rthe	exceptions described in			
	Regulations section 5	53 4945 or ın a	current notice regard	ling (disaster assistance	(see	page 22 of the instruction	ons)?	5b	No
	Organizations relying	on a current no	tice regarding disast	eras	ssistance check her	e	▶∫	_		
С	If the answer is "Yes'	to question 5a	(4), does the foundat	ion c	laım exemption from	the				
	tax because it mainta	ained expenditu	e responsibility for tl	he gr	ant?		T Yes	√ No		
	tax because it maintained expenditure responsibility for the grant?									
6a	Did the foundation, di	-				,				
ou							□ voc 5	Z No		
	premiums on a personal benefit contract?								N	
D								6b	No	
	If "Yes" to 6b, file Fori							_		
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes V No									
ь	b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b								7b	No
Da			fficers, Director	s, T	rustees, Founda	atior	n Managers, Highly	Paid	Emp	loyees,
	and Cont									
1	List all officers, direct					T -	age 22 of the instruction	ns).		
	(a) Name and addr		h) Title, and average hours per week		c) Compensation If not paid, enter	1 ` '		(e) Expe		e account,
	(a) Name and addi		devoted to position		-0-)	and deferred compensation		ot	her all	owances
LISA	LISS		P & Secretary		0	_	· · · · · · · · · · · · · · · · · · ·			
740	9 ROLLING BEND CO	OLLING BEND COURT 0 00								
	UMBUS,GA 31904									
JONA	THAN L LISS	Pre	s & Treas		0					
740	9 ROLLING BEND CO	URT 0 (0							
COL	UMBUS,GA 31904									
2			ployees (other than	thos	e included on line 1–	-see	page 23 of the instruction	ons).		
	If none, enter "NONE	."								
			(b) Title, and aver	age			(d) Contributions to	l	_	
(a)	Name and address of paid more than \$!		hours per week	((c) Compensation	on	employee benefit plans and deferred			e account, owances
	paid more than \$.	30,000	devoted to positi	on			compensation	"	iici aii	owances
NON	IF									
	· <u> </u>									
								-		
			1							
			+							
			\dashv							
_			+50.000				F-	-		
Lota	I number of other empl	oyees paid ovei	\$50,000				🕨	1		

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Part VIII Information About Officers, Directors, Tr and Contractors (continued)	ustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional servi	ces (see page 23 of the instructions). If none, e	nter "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 servi-	ces	
<u> </u>		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficiaries served, conferences convened, research papers		Expenses
1THE FOUNDATION FUNDS AS WELL AS CONDUCTS RESEARCH		0
OF NEUROLOGICAL DISEASES AND DISORDERS	THE CAUSES AND THEATTENED	
2		
		1
		•
2		
<u> </u>		-
		ļ
4		
		_
Part IX-B Summary of Program-Related Investmen		1
Describe the two largest program-related investments made by the foundation d	uring the tax year on lines 1 and 2	A mount
1		
2		
		1
All other program-related investments See page 24 of the instruc	tions	
3		
-		1
		1
	Т	

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Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	0
b	A verage of monthly cash balances	1b	9,822
C	Fair market value of all other assets (see page 24 of the instructions)	1c	13,630
d	Total (add lines 1a, b, and c)	1d	23,452
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1	
2	A cquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	23,452
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	352
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	23,100
6	Minimum investment return. Enter 5% of line 5	6	1,155
Par	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(
	foundations and certain foreign organizations check here 🕨 📗 and do not complete t	his pa	
1	Minimum investment return from Part X, line 6	1	1,155
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI) 2b	_	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,155
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,155
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	1,155
Par	Qualifying Distributions (see page 25 of the instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	347,994
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	За	
ь	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	347,994
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		317,554
_	income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	347,994
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet		·
	the section 4940(e) reduction of tax in those years		

	ondistributed income (see page	(a)	(b)	(c)	(d)
		Corpus	Years prior to 2010	2010	2011
	Distributable amount for 2011 from Part XI, line 7				1,155
	Undistributed income, if any, as of the end of 2011				
	Enter amount for 2010 only				
	Total for prior years 20				
	Excess distributions carryover, if any, to 2011				
	From 2006				
	From 2007	_			
	From 2008	4			
	From 2009				
	From 2010	4			
	Total of lines 3a through e	1,329,719			
4	Qualifying distributions for 2011 from Part				
	XII, line 4 🕨 \$ 347,994				
	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years				
_	(Election required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required—see page 26 of the instructions)	0			
d	Applied to 2011 distributable amount				1,155
	Remaining amount distributed out of corpus	346,839			<u>'</u>
	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	1,676,558			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions				
е	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount—see page 27				
_	of the instructions				
T	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2011				0
7	Amounts treated as distributions out of				
-	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27				
	of the instructions)				
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see page 27 of the instructions)	108,315			
9	Excess distributions carryover to 2012.	·			
	Subtract lines 7 and 8 from line 6a	1,568,243			
10	Analysis of line 9				
а	Excess from 2007				
b	Excess from 2008 238,825				
c	Excess from 2009 309,199				
d	Excess from 2010 478,929				
е	Excess from 2011 346,839				

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines

factors

3 Grants and Contributions Paid	During the Year or App	proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor	recipient		
b Approved for future payment				2,028

Part XVI-A Analysis of Income-Produc	ina Activitie				r uge 🝱
Enter gross amounts unless otherwise indicated		usiness income	Excluded by section	512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemp function income (See page 28 of the instructions)
a RESEARCH INCOME					362,17
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					+
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					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					_
9 Net income or (loss) from special events10 Gross profit or (loss) from sales of inventory					+
11 Other revenue a					
b					+
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e).					362,17
13 Total. Add line 12, columns (b), (d), and (e)			1	13	362,176
Line No. Explain below how each activity for wh the accomplishment of the organizatio page 28 of the instructions)					

Part	XVII	Information Re Noncharitable			nd Transa	ctions	and Relations	hips With		,		
1 Did	the organ	zation directly or indirectly	-	_	ny other organ	ızatıon desc	cribed in section			Yes	No	
501	(c) of the	Code (other than section	501(c)(3) orga	nizations) or in section !	527, relating to	political or	ganızatıons?					
a Tra	nsfers fr	om the reporting foui	ndation to a i	noncharıtable exem	npt organizat	ion of						
					-				1a(1)		No	
		assets							1a(2)		No	
	ner trans								,,,			
(1)	Sales	of assets to a noncha	ırıtable exem	ipt organization					1b(1)		No	
		ses of assets from a		-							No	
		of facilities, equipme									No	
		ırsement arrangemer									No	
		or loan guarantees.									No	
		ance of services or r									No	
		acılıtıes, equipment,	•	_							No	
	_	er to any of the above	_								110	
of t ın a	he good ny trans	s, other assets, or se action or sharing arr	rvices given angement, s	by the reporting for how in column (d) t	undation Ift he value of t	the founda he goods	ation received les , other assets, or	s than fair marke services receive	t value d	1	nto	
(a) Line	NO	(b) Amount involved	(c) Name of	noncharitable exempt o	organization	(a) Des	cription of transfers, t	ransactions, and sna	ring arra	ngemer	its	
des	cribed i	dation directly or indinsection 501(c) of the mplete the following section Name of organization	he Code (oth schedule	er than section 501		section!	527?		. 厂 Y€ onship	es F	√ No	
	the be	penalties of perjury, est of my knowledge a on all information of ****	and belief, it	is true, correct, and	d complete [Declaratio						
	Sı	gnature of officer or t	rustee			Date	!	Title				
as .							Date		PTIN			
Sign Here	ى _د	Preparer's EVE	RETT G PRE	STLEY JR				Check if self- employed ▶	FIIN			
Ö	Paid parer? e Only	\$ 6										
	Per P			7290 NORTH LA	KE DRIVE S	SUITE 50) 3					
	"	Firm's address 🕨		COLUMBUS, GA	31909			Phone no (706)321-	9111		
May the	TDC du	ecuse this return with	the prepare	r chown phous? So	o instruction			<u> </u> ⊾⊽,	_{/es} Г	No		

Additional Data

Software ID: 11000144

Software Version: 2011v1.2

EIN: 58-2580582

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

Form 990PF - Special Condition Description:

Special Condition Description

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CSU FUND4225 UNIVERSITY AVENUE COLUMBUS,GA 31907	NONE	N/A	TO HELP WITH THE SPECIAL NEEDS OF PERSONS WITH NEUROLOGICAL DISEASES OR DISORDERS	1,000
HILLEL YOUTH FUND800 EIGHTH STREET NW WASHINGTON,DC 20001	NONE	N/A	TO HELP WITH THE SPECIAL NEEDS OF PERSONS WITH NEUROLOGICAL DISEASES OR DISORDERS	250
JLAS1617 WILDWOOD AVENUE COLUMBUS, GA 31906	NONE	N/A	TO HELP WITH THE SPECIAL NEEDS OF PERSONS WITH NEUROLOGICAL DISEASES OR DISORDERS	128
TEMPLE ISRAELPO BOX 5086 COLUMBUS, GA 31906	NONE	N/A	TO HELP WITH THE SPECIAL NEEDS OF PERSONS WITH NEUROLOGICAL DISEASES OR DISORDERS	100
JEWISH FEDERATIONPOST OFFICE BOX 6313 COLUMBUS, GA 31907	NONE	N/A	TO HELP WITH THE SPECIAL NEEDS OF PERSONS WITH NEUROLOGICAL DISEASES OR DISORDERS	500
BOY SCOUTS OF AMERICA1710 BUENA VISTA ROAD COLUMBUS, GA 31906	NONE	N/A	TO HELP WITH THE SPECIAL NEEDS OF PERSONS WITH NEUROLOGICAL DISEASES OR DISORDERS	50
Total				2,028

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Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93491215001022

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99)	•	See separate instruction	s. 🕨 Attach i	to your tax re	et urn.		Attachment Sequence No 179
Name(s) shown on return		Business	s or activity to w	hich this form	n relates	Id	entifying number
MEDICAL RESEARCH & F EDUCATION FOUNDATI		Form 99	0/990-PF			58	3-2580582
		Certain Property Ur	•	179			
Note: If y	ou have any li	sted property, comple	ete Part V befo	ore you com	nplete Part I.		
1 Maximum amount (see	ınstructions)					1	\$ 500,000
2 Total cost of section 1	79 property plac	ed in service (see instru	ıctıons) .			2	
3 Threshold cost of sect	ion 179 property	before reduction in limit	tatıon (see ınstr	uctions) .		3	\$ 2,000,000
4 Reduction in limitation	Subtract line 3	from line 2 If zero or les	ss, enter -0-			4	
5 Dollar limitation for tax	x year Subtract	line 4 from line 1 If zero	or less, enter -0	O- If married	filing		
separately, see instruc	ctions					5	
6 (a)	Description of pi	operty	(b) Cost (bu		(c) Elected c	ost	
- (-,			onl	ly)	(5, 2.0000		
7 1		I 30		1 -			
7 Listed property Enter							
8 Total elected cost of s		•	umn (c), lines 6	and / .		8	
9 Tentative deduction E	nter the smaller	of line 5 or line 8 .				9	
10 Carryover of disallowe		•				10	
11 Business income limitation	Enter the smaller of	business income (not less tha	in zero) or line 5 (se	ee instructions)		11	
12 Section 179 expense	deduction Addl	ines 9 and 10, but do not	enter more thai	n line 1 1 ·		12	
13 Carryover of disallowe	d deduction to 2	012 Add lines 9 and 10,	less line 12	. 13			
Note: Do not use Part	II or Part III b	elow for listed proper	rty. Instead, u	se Part V.		•	
Part III Special De	epreciation <i>E</i>	Allowance and Othe	r Depreciati	<u>on (Do not</u>	: ınclude lısted p	roperty) (See instructions)
14 Special depreciation a tax year (see instructi		lified property (other than	n listed property) placed in se	rvice during the	14	
15 Property subject to se	ction 168(f)(1) e	election				15	
16 Other depreciation (in						16	4,62
		Oo not include listed	property.) (Se	e instructio	ns.)		1,02
			ection A		,		
17 MACRS deductions for	assets placed i	n service in tax years be	gınnıng before 2	011		17	
18 If you are electing to	to group any a	ssets placed in servic	e during the t	ax year ınto	one or more		
general asset accou	ints, check hei	e			▶□		
Section B—Ass	ets Placed in	Service During 20			General Dep	recia	tion System
		(c) Basıs for					
(a) Classification of property	(b) Month and year placed in service	depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convent	cion (f) Metho	od	(g)Depreciation deduction
19a 3-year property		<u> </u>					
b 5-year property							
c 7-year property							
d 10-year property							
e 15-year property							
f 20-year property							
g 25-year property			25 yrs		S/L		
h Residential rental			27 5 yrs	ММ	S/L		
property			27 5 yrs	MM	S/L		
i Nonresidential real			39 yrs	MM	S/L		
property			1 T V II-i	MM	S/L		
20a Class life	n C—Assets Plac	ced in Service During 201	.ıax tear Using 	y tne Alterna		ı əyste	:111
b 12-year	1		1.2 yrs		S/L S/L		
c 40-year	+		12 yrs 40 yrs	MM	S/L		
·		tions)	1 -0 y15	1 1717] 3/1	<u> </u>	
21 Listed property Enter		•				21	
22 Total. Add amounts fro			and 20 in colum	nn (a) and line	e 21 Enter here	 -	
and on the appropriate	lines of your ret	urn Partnerships and S	corporations—se	ee instruction		22	4,620
23 For assets shown above portion of the basis att			nt year, enter the	e 23			

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	aution	: See i	the i	instruc	tions	for li	mits 1	or pa	sseng	er au	tomoŁ	iles.)
24a Do you have evider	nce to support	the business/inv	estment u	ise claime	d? ┌ Yes	Γ _{No}		2	4b If "\	∕es," ıs	the ev	ıdence	written?	Гүе	sГN)
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(c Cost o ba		(busines	(e) deprecia ss/investr e only)		(f) Recover period	y M∈	(g) ethod/ ventior		(h Depreci deduc	ation/		(i) Electe section : cost	179
25 Special depreciation allo 50% in a qualified busi	· · · · · · · · · · · · · · · · · · ·		erty placed	in service (during the	tax year	and u	used moi	e than	25						
26 Property used more	e than 50%	ın a qualıfıed	business	use												
		%									+			-		
		%									+			+		
27 Property used 50%	orless in a		iness us	e										_		
		%							S/L - S/L -		_			4		
		%							S/L -							
28 Add amounts in co	olumn (h), lır	nes 25 throug	ıh 27 En	ter here a	and on lu	ne 21, _l	oage	1 .	28	8						
29 Add amounts in co	olumn (ı), lın	e 26 Enterh	ere and c	n line 7,	page 1					•		29				
			ction B													
Complete this section If you provided vehicles to														se vehic	les	
					a)	(1		1	(c)		(c			2)		f)
year (do not inclu-			_	Vehi	cle 1	Vehi	cle 2	. V	ehicle	3	Vehi	cle 4	Vehi	cle 5	Vehi	icle 6
31 Total commuting i	mıles drıven	during the ye	ar .													
32 Total other persor	nal(noncomm	nuting) miles	drıven													
33 Total miles driven through 32	during the y		s 30													
34 Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Ye	s 1	No.	Yes	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle us owner or related p		y by a more th	nan 5%													
36 Is another vehicle			e? .													
Section	on C—Que	stions for	Emplo	ers W	ho Pro	vide \	/ehi	icles	or U	se by	/ The	ir En	nploy	ees	l .	
Answer these questio 5% owners or related				eption to	comple	ting Se	ction	B for v	ehicle	s use	d by e	mploy	ees wh	o are	not mo	re tha
37 Do you maintain a employees? .		cy statement											our •	<u> </u>	es	No
38 Do you maintain a	written polic	cy statement	that prof	nibits per	sonal us	e of vel	nicle	s, exce	pt con	nmutır	ng, by					
employees? See t						ers, dire	ector	s, or 1	% or m	nore o	wners		• •	-	-+	
39 Do you treat all us						•	٠. ٠	•	• .	•	. •		•	-		
40 Do you provide movehicles, and reta				oyees, ol	btain info	ormatio •	n froi	m your • •	emplo •	yees .	about •	the us	e of the	e		
41 Do you meet the r	equirements	concerning	qualified a	automobi	le demor	nstratio	n us	e? (See	ınstrı	uction	s)					
Note: If your answ	ver to 37, 38	, 39, 40, or 4	1 is "Ye	s," do no	t comple	te Sect	ion E	3 for the	cove	red ve	hicles	5				
Part VI Amo	rtization															
(a) Description of c	costs	(b) Date amortization begins	n	(A mort a mo	ızable			(d) Code ection		(e) mortiz period ercen	ation d or			(f) rtızatı hıs ye		
42 A mortization of co	sts that her		ur 2011	tax vear	(see ins	truction	ns)		<u> </u>	3.3011	30					
		, ==,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	,	,	1	,									
						-+			\dashv							
43 Amortization of co	sts that beg	jan before you	ur 2011 t	ax year		-			•		43					
44 Total. Add amoun	_	•		•	ere to re	port				Ì	44					

TY 2011 Accounting Fees Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Witt, Callier, & Prestley, CPAs	4,845	0	0	4,845

DLN: 93491215001022

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2011 Depreciation Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
DESK	2011-11-20	596		91	7 0000	7	'		
CABINET (2)	2011-10-18	936		91	7 0000	22			
COPIER	2011-08-31	2,285		91	5 0000	152			
COMPUTER (2)	2011-01-07	3,205		91	5 0000	641			
COMPUTER	2010-10-08	1,954	98	91	5 0000	391			
STORAGE CABINETS	2010-01-29	892	117	91	7 0000	127			
FREEZER	2009-12-31	1,118	224	91	5 0000	224			
SMALL REFRIGERATOR	2008-12-31	132	52	91	5 0000	26			
DRY ICE MAKER	2008-07-08	535	268	91	5 0000	107			
WASHER/DRYER	2008-06-03	1,067	550	91	5 0000	213			
TWO COMPUTERS	2008-03-05	1,060	601	91	5 0000	212			
BATTERY BACKUP	2008-02-17	423	241	91	5 0000	85			
OFFICE FURNITURE	2008-12-02	3,276	975	91	7 0000	468			
OFFICE FURNITURE	2008-02-17	1,052	425	91	7 0000	150			
BP CUFFS	2007-11-05	320	203	91	5 0000	64			
FURNITURE	2007-09-30	1,072	497	91	7 0000	153			
VIDEO CAMERA	2007-09-30	979	637	91	5 0000	196			
OFFICE CHAIRS	2007-07-31	781	533	91	5 0000	156			
2 VIDEO CONFERENCE MNTRS	2007-07-31	2,812	1,920	91	5 0000	562			
OFFICE FURNITURE	2007-06-18	1,211	606	91	7 0000	173	ſ <u></u>		
TELECOM ENTERPRISES	2006-06-12	5,886	5,395	91	5 0000	491			

TY 2011 Land, Etc. Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Machinery and Equipment	26,262	18,515	7,747	5,883
Furniture and Fixtures	16,651	10,768	5,883	7,747

TY 2011 Mortgages and Notes Payable Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Software Version: 2011v1.2

Total Mortgage Amount:

Item No.	1			
Lender's Name	SUNTRUST BANK			
Lender's Title				
Relationship to Insider	NONE			
Original Amount of Loan	5000			
Balance Due				
Date of Note	e 2009-03			
Maturity Date	2010-03			
Repayment Terms	LINE OF CREDIT			
Interest Rate	5.0000			
Security Provided by Borrower	NONE			
Purpose of Loan	OPERATIONAL FUNDS			
Description of Lender Consideration	CASH			
Consideration FMV				

TY 2011 Other Assets Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
OVERPAID PAYROLL TAXES		2,083	2,083

TY 2011 Other Expenses Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TELEPHONE AND ANSWERING SERVICE	453			453
SUPPLIES	575			575
RESEARCH FEES	24,481			24,481
REPAIRS & MAINTENANCE	250			250
POSTAGE	296			296
PENALTIES	145			145
OFFICE EXPENSE	7,293			7,293
MEDICAL SUPPLIES	3,483			3,483
MEDICAL	2,000			2,000
LAB	6,800			6,800
INSURANCE - GROUP	1,000			1,000
INSURANCE - CASUALTY	11,234			11,234
HOSPITAL FEES	100			100
FLO WERS & GIFTS	300			300
EQUIPMENT	133			133
ENTERTAINMENT	2,943			2,943
EDUCATION	150			150
COMPUTER EXPENSE	6,633			6,633
BANK CHARGES	406			406
ADVERTISING	12,921			12,921

TY 2011 Other Income Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
RESEARCH INCOME	362,176		

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TY 2011 Other Increases Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Description	Amount
ROUNDING	1

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TY 2011 Other Notes/Loans Receivable Short Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Name of 501(c)(3) Organization	Balance Due
JONATHAN LISS MD NEUROLOGY PC	15,000

TY 2011 Taxes Schedule

Name: MEDICAL RESEARCH & HEALTH

EDUCATION FOUNDATION

EIN: 58-2580582

Software ID: 11000144

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	6,704			6,704
GENERALTAXES	290			290
ANNUAL REGISTRATION	30			30