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Department of the Treasury Internal Revenue Service

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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements.

Inspection

AI	or the	2011 calendar year, or tax year beginning	anc	a enaing	_				
B	Check if applicable	C Name of organization			D Employer identif	ication number			
X	Addre	Lettie Pate Evans Foun	dation, Inc.						
L_	Name chang	Doing Business As			58-6	004644			
	Initial return	Number and street (or P.O. box if mail is not de	ivered to street address)	Room/suite	E Telephone numbe	er			
	Termi	191 Peachtree Street N	E	3540	404-	522-6755			
	Amen return	City or town, state or country, and ZIP + 4			G Gross receipts \$	11916947.			
	Application	ACIANCA, GA 30303-1/9	9		H(a) Is this a group r	eturn			
	pendi	F Name and address of principal officer.P •	Russell Hardin		for affiliates?	Yes X No			
		191 Peachtree St NE, #3		303 A	O H(b) Are all affiliates in	cluded? Yes No			
1 7	Гах-ех	empt status. X 501(c)(3) 501(c)()		or 52	7 If "No," attach a	a list. (see instructions)			
		te:▶www.lpevans.org			H(c) Group exemption	on number			
KF	orm of	organization: X Corporation Trust As	sociation Other	∟ Yea	r of formation: 1945 [M State of legal domicile: GA			
Pa	art I	Summary							
	1	Briefly describe the organization's mission or most	significant activities To S	uppor	t certain na	med public			
Activities & Governance		charities located and ope	rating in Georg	jia an	d Virginia,	with a			
ű	2	Check this box I if the organization disco	ntinued its operations or dispo	osed of mo	re than 25% of its net a	ssets			
Š	3	Number of voting members of the governing body	(Part VI, line 1a)		3	5			
<u>ග</u> ජ	4	Number of independent voting members of the go	verning body (Part VI, line 1b)		4	5			
es (5	Total number of individuals employed in calendar	year 2011 (Part V, line 2a)		5	13			
Viti	6	Total number of volunteers (estimate if necessary)			6	0			
Ç	7 a	Total unrelated business revenue from Part VIII, co	olumn (C), line 12		7а	0.			
_	b	Net unrelated business taxable income from Form	990-T, line 34		7b	0.			
				L	Prior Year	Current Year			
ē	8	Contributions and grants (Part VIII, line 1h)			0.	0.			
en	9	Program service revenue (Part VIII, line 2g)			0.	0.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4	, and 7d)		10962160.	10399540.			
u.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8d	, 9c, 10c, and 11e)		39900.	39900.			
	12	Total revenue - add lines 8 through 11 (must equa	Part VIII, column (A), line 12)		11002060.	10439440.			
	13	Grants and similar amounts paid (Part IX, column	A), lines 1-3)	<u> </u>	9275000.	9803000.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	\ <u> </u>	100240.	106732.			
Expenses	16a	Professional fundraising fees (Part IX, column (A),	line 11e)		0.	0.			
ğ	b	Total fundraising expenses (Part IX, column (D), lin	e 25) 🕨	<u> </u>					
щ	17	Other expenses (Part IX, column (A), lines 11a-11d	, 11f-24e)		54114.	46031.			
	18	Total expenses Add lines 13-17 (must equal Part			9429354.	9955763.			
	19	Revenue less expenses. Subtract line 18 from line			1572706.	483677.			
Net Assets or Fund Balances					eginning of Current Year	End of Year			
aset	20	Total assets (Part X, line 16)	0 1000	gg .	33376395.	33860132.			
\$50 0	21	Total liabilities (Part X, line 26)	Q MAY 2 1 2	012	1983.	2043.			
犟	22	Net assets or fund balances Subtract line 21 from	line 20	رو	33374412.	33858089.			
_	art II	Signature Block	OCOEN						
		ilties of perjury, I declare that I have examined this return.				ny knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparer (other than office	er) is based on all information of w	vhich prepare	er has any knowledge	1			
		1 Lesel H	<u> </u>		<u> </u>	112			
Sig	n	Signature of Officer Communication of the Signature of Officer Communication of the Signature of the Signature of the Signature of Officer Communication of Of			Date /	/			
Her	e	P. Russell Hardin, Pre	sident						
		Type or print name and title			No.	570			
_		Print/Type preparer's name	Preparer's signature		Date Check	PTIN			
Paid					self-emplo	yed			
-	parer	Firm's name							
Use	Only	Firm's address							
		<u> </u>			Phone no.				
May	the II	RS discuss this return with the preparer shown abo	ove? (see instructions)			Yes No			

	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A		х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI		х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	_	
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			77
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	-	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
U	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	9 90 (2011)

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Part IV Checklist of Required Schedules (continued)

	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			х
23	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	-	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			77
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	21		
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II			X
22	· · · · · · · · · · · · · · · · · · ·	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity?	33		
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of		_	
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		,,	
	Note. All Form 990 filers are required to complete Schedule O	38	X 990 (<u> </u>
		1	4411 //	20441

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country. ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			İ
	were not tax deductible?	6b	<u> </u>	
7	Organizations that may receive deductible contributions under section 170(c).			٠,
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	├	Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	-
С		_		х
	to file Form 8282? If "Yes." indicate the number of Forms 8282 filed during the year 7d	7c		
d	3 7, 7	70		Х
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	 	
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	 		
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	1	х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	1	
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12		ļ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	l	1	•
11	Section 501(c)(12) organizations. Enter.			
а	Gross income from members or shareholders]		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against		ļ	
	amounts due or received from them)]	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	ļ	<u> </u>	├
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.	<u> </u>		
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ŀ	1	1
	organization is licensed to issue qualified health plans	1		
	Enter the amount of reserves on hand		├	v
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	Х
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	900	(2011)
		LOUI	330	(1104)

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			<u>X</u>				
Sec	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5							
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1						
b	Enter the number of voting members included in line 1a, above, who are independent 1b							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
	officer, director, trustee, or key employee?	2	Х					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х				
6	Did the organization have members or stockholders?	6		Х				
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a		х				
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
_	persons other than the governing body?	7b		х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
	The governing body?	8a	х	ł				
b	Each committee with authority to act on behalf of the governing body?	8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	-55						
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	<u> </u>						
	tion Division (mis seed on B requests information about politics not required by the internal revenue code)		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a	163	X				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,							
_	and branches to ensure their operations are consistent with the organization's exempt purposes?							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a	Х					
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990							
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	in Schedule O how this was done	12c	X					
13	Did the organization have a written whistleblower policy?	13	X					
14	Did the organization have a written document retention and destruction policy?	14	Х					
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ļ						
а	The organization's CEO, Executive Director, or top management official	15a	X]				
b	Other officers or key employees of the organization	15b	X					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	ın joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
	exempt status with respect to such arrangements?	16b						
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ►GA							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 for a policinal for the forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) are section 6104 for a policinal for a p	vailab	le					
	for public inspection. Indicate how you made these available. Check all that apply.							
	Own website X Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finar	icial					
	statements available to the public during the tax year							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ion. 🕨	·					
	Erik S. Johnson, Secretary - 404-522-6755							
3200	191 Peachtree Street NE, Suite 3540, Atlanta, GA 30303-2951							

01-23-12

Form 990 (2011)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization (A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Desition				l than	one	Reportable	Reportable	Estimated
	hours per	box	box, unless person is both officer and a director/trust			ıs bot	h an	compensation	compensation	amount of
	week (describe		1	I	1 1			from the	from related organizations	other compensation
	hours for	direct	l			Ē			(W-2/1099-MISC)	from the
	related	tee or	ıstee			ensate		(W-2/1099-MISC)	,,	organization
	organizations	al fris	nal tr		loyee	g comp				and related
	ın Schedule O)	Individual trustee or director	Institutional trustee	Hicer	Key employee	Highest compensated employee	ormer			organizations
(1) JAMES B. WILLIAMS	<u> </u>			٦	-	_ 8				
TRUSTEE CHAIRMAN	2.00	X	L					6250.	88750.	0.
(2) JAMES M. SIBLEY										_
TRUSTEE VICE CHAIRMAN	1.00	X	L		L.	<u> </u>	L	6250.	88750.	0.
(3) WILTON LOONEY	1	١						0.550		
TRUSTEE	1.50	X	<u> </u>		_	ļ		8750.	53750.	0.
(4) HERBERT CLAIBORNE, JR. TRUSTEE	1.00	x						6250.	47500.	0.
(5) CHARLES H. MCTIER		 	 		\vdash			02301	1,000	
TRUSTEE	1.00	x	İ					6250.	71250.	0.
(6) P.RUSSELL HARDIN										
PRESIDENT	2.00			X	<u>.</u>			19269.	491850.	78060.
(7) J. LEE TRIBBLE										
TREASURER	2.00			X				10592.	270358.	51927.
(8) ERIK S. JOHNSON				!	l				4	
SECRETARY	2.00	<u> </u>		X		<u> </u>		6163.	157323.	17967.
(9) ELIZABETH A. SMITH	2 00							4603	110000	10607
GRANTS PROGRAM DIRECTOR (10) MARTHA W. MORTON	2.00	┢	<u> </u>	-		X	┡	4693.	119800.	18687.
CONTROLLER	2.00				ŀ	x	İ	3970.	101327.	42942.
CONTROLLER	2.00		\vdash		-	^		3370.	101327.	44344
		_								
		-	_			_				
	<u> </u>	_					L			

Form 990 (2011)

\$100,000 of compensation from the organization

			-		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
윤립		Membership dues	1b					
Ęţ.		J	1c					
2	d	Related organizations	1d					
Siris	e	3	· -					
ig E	f	All other contributions, gifts, gran		j				
음하		similar amounts not included abo						ļ
ξĒ	_	Noncash contributions included in lines	s 1a-1f \$					
"	n	Total. Add lines 1a-1f		Business Code				·
اه	2 a			Business Code				
Ş	2 a b			-				
<u>8</u> 2	c							
e a	d							
Program Service Revenue	е				-			
ል	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f						
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶	9983141.			9983141.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨	-			
	5	Royalties		>				
	_		(i) Real 42000.	(ıı) Personal				
	6 a		2100.					İ
	b	·	39900.					
- 1	ч С	Net rental income or (loss)	35500.	<u> </u>	39900.			39900.
		Gross amount from sales of	(i) Securities	(II) Other	333000			+ 333000
		assets other than inventory	1891806.	(ii) Otilici				
	b	Less cost or other basis				+		
		and sales expenses	1475407.					
	С	Gain or (loss)	416399.					
	d	Net gain or (loss)			416399.			416399.
e l	8 a	Gross income from fundraisin	g events (not					
l en		including \$	of					
Other Revenue		contributions reported on line	1c). See					
ĕ		Part IV, line 18	а					
₹		Less direct expenses	. b	L				-
		Net income or (loss) from fund	_	<u> </u>				+
	IJ d	Gross income from gaming ac Part IV, line 19	ctivities See a					
	h	Less direct expenses	a b					
		Net income or (loss) from gan	_					
		Gross sales of inventory, less	-					
		and allowances	а					
	b	Less cost of goods sold	b					
L		Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenu	ie	Business Code	· · · · · · · · · · · · · · · · · · ·			
Γ	11 a							
	b							
	C							
	d			L				
		Total. Add lines 11a-11d		>	10420440			10420440
	12	Total revenue. See instructions.		<u> </u>	10439440.	0.	0	. 10439440 . Form 990 (2011)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	check if Schedule O contains a respon	se to any question in the			
	include amounts reported on lines 6b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	ants and other assistance to governments and				
org	ganizations in the United States. See Part IV, line 21	9803000.	9803000.		
	ants and other assistance to individuals in				
	e United States. See Part IV, line 22				
	ants and other assistance to governments,				
_	ganizations, and individuals outside the				
	nited States See Part IV, lines 15 and 16				
	nefits paid to or for members				· · · · · · · · · · · · · · · · · · ·
	empensation of current officers, directors,	70440	42205	20057	
	stees, and key employees	72442.	43385.	29057.	·
	mpensation not included above, to disqualified				
	rsons (as defined under section 4958(f)(1)) and				
	rsons described in section 4958(c)(3)(B)	00110	12402	0.71.6	
	her salaries and wages	22119.	13403.	8716.	
	nsion plan accruals and contributions (include	2242	4040	1000	
	tion 401(k) and section 403(b) employer contributions)	2943.	1913.	1030.	·
	her employee benefits	6313.	4103.	2210.	
	yroll taxes	2915.	1895.	1020.	
	es for services (non-employees)·	60	20	0.1	
	anagement	60.	39.	21.	·
b Leg	~ -	582.		582.	
	counting	3437.		3437.	
	bbying				
	ofessional fundraising services. See Part IV, line 17	25220		25220	
	restment management fees	25330.		25330.	
g Oth	-				
	vertising and promotion	2071	1000	1072	
	fice expenses	3071.	1998.	1073.	
	ormation technology	2744.	1784.	960.	
	yalties P	5000	2000	- 2000	
	cupancy	5998.	3899.	2099.	
-	avel -	1285.	862.	423.	
-	yments of travel or entertainment expenses				
_	any federal, state, or local public officials	207	200	<u></u>	
1 9 Co	onferences, conventions, and meetings	387.	326.	61.	
-	erest	, ,			
	yments to affiliates	- 0 - 1	610		
	preciation, depletion, and amortization	951.	618.	333.	
	surance	912.	593.	319.	
24 Oth aho	ner expenses. Itemize expenses not covered bye. (List miscellaneous expenses in line 24e. If line				
24e	e amount exceeds 10% of line 25, column (A)				
	ount, list line 24e expenses on Schedule 0.)	1150	1100		
	RGANIZATION DUES	1179.	1122.	57.	
ь —					
°. —					
d				33	
	other expenses	95.	62.	33.	
	tal functional expenses. Add lines 1 through 24e	9955763.	9879002.	76761.	0
	int costs. Complete this line only if the organization				
	orted in column (B) joint costs from a combined				
	ucational campaign and fundraising solicitation.				
Che	eck here if following SOP 98-2 (ASC 958-720)				Form 990 (2011

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			5420.	1	7904.
	2	Savings and temporary cash investments			6241376.	2	6395043.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, di	ectors	, trustees, key			
		employees, and highest compensated employee	es. Cor	nplete Part II			
		of Schedule L			'	5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)), persons described in section 4958(c)					
			iployers and sponsoring organizations of section 501(c)(9) voluntary				
		employees' beneficiary organizations (see instru				6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
•	9	Prepaid expenses and deferred charges				9	
	l	Land, buildings, and equipment cost or other	I				· · · · · · · · · · · · · · · · · · ·
		basis. Complete Part VI of Schedule D	10a	156456.			
	h	Less accumulated depreciation	10b	951.	139848.	10c	155505.
	11	Investments - publicly traded securities			26981947.	11	27291578.
	12	Investments - other securities. See Part IV, line 1	1	1		12	
	13	Investments - program-related See Part IV, line		ŀ		13	
	14	Intangible assets	• •	ł	.	14	
	15	Other assets See Part IV, line 11		ŀ	7804.	15	10102.
	16	Total assets. Add lines 1 through 15 (must equal	al line '	34)	33376395.	16	33860132.
	17	Accounts payable and accrued expenses	000,0000	17	000000000000000000000000000000000000000		
	18	Grants payable			18		
	19	Deferred revenue		19	·		
	20	Tax-exempt bond liabilities			20		
(0	21	Escrow or custodial account liability Complete I	Part I\/	of Schodule D		21	
Liabilities	22	Payables to current and former officers, director		ľ		 -	
Ē	—	highest compensated employees, and disqualifi					
Ë		of Schedule L	ca pci	sons complete rate ii		22	
	23	Secured mortgages and notes payable to unrela	tad th	ird narties		23	
	24	Unsecured notes and loans payable to unrelate		· ·		24	
	25	Other liabilities (including federal income tax, pa		·			
		parties, and other liabilities not included on lines	•				
		Schedule D	2	, complete tale x or	1983.	25	2043.
	26	Total liabilities. Add lines 17 through 25			1983.	26	2043.
	20	Organizations that follow SFAS 117, check he	oro N	X and complete			
S		lines 27 through 29, and lines 33 and 34.		and complete			
Š	27	Unrestricted net assets			33374412.	27	33858089.
<u>a</u>	28	Temporarily restricted net assets				28	
Ä	29	Permanently restricted net assets				29	
Š	23	Organizations that do not follow SFAS 117, cl	heck h	ere 🕨 🔲 and			-
Ē		complete lines 30 through 34.			1		
Net Assets or Fund Balances	20			30			
se	30	Capital stock or trust principal, or current funds		nt fund		31	
Ϋ́	31	Paid-in or capital surplus, or land, building, or ed				32	
Ne	32	Retained earnings, endowment, accumulated in	come,	or other lunus	33374412.	33	33858089.
-	33	Total hebities and not special fund belonged			33376395.	34	33860132.
	34	Total liabilities and net assets/fund balances			23370373.	<u> </u>	Form 990 (2011)

Form **990** (2011)

	990 (2011) Lettie Pate Evans Foundation, Inc.	58-	6004644	Pa	ge 12			
Par	t XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1 1	104	394	40.			
2								
3	Revenue less expenses. Subtract line 2 from line 1	3	4	836	77.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	333	744	12.			
5	Other changes in net assets or fund balances (explain in Schedule O)	5	_		0.			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	338	580	89.			
Par	rt XII Financial Statements and Reporting							
Check if Schedule O contains a response to any question in this Part XII								
				Yes	No			
1	Accounting method used to prepare the Form 990 X Cash Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х			
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			<u> </u>			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	ļ			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O						
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a						
	separate basis, consolidated basis, or both							
	Separate basis Consolidated basis Both consolidated and separate basis		l					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	dıt					
	Act and OMB Circular A-133?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired auc	dit					

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

Lettie Pate Evans Foundation, Inc.

Employer identification number 58-6004644

Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	t) See inst	tructions				
The organ	nization is not a	a private foundation	because it is: (For lines	through	11, check	only one b	ox)	_				
1 🔲	A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).				
2 🗀	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🗀	A hospital or	a cooperative hospi	tal service organization (described	ın section	170(b)(1)	(A)(iii).					
4 🔲	A medical res	search organization o	operated in conjunction	with a hos	pital desci	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nam	ne,
	city, and stat	te										
5 🗀	An organizat	on operated for the	benefit of a college or ur	niversity ov	wned or or	perated by	a governi	mental uni	t describ	ed in		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)									
6 🗀	A federal, sta	ate, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1	I)(A)(v).					
7 🗀	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed	ın
	section 170((b)(1)(A)(vi). (Comple	te Part II)									
в 🗌	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9 🗌	An organizati	on that normally rec	eives: (1) more than 33	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, a	nd gross re	ceipts	from
	activities rela	ited to its exempt fur	nctions - subject to certa	ın exceptı	ons, and (2	2) no more	than 33 1	1/3% of its	support	t from gross	invest	tment
	income and i	unrelated business ta	axable income (less sect	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	nızatıon	after June 3	30, 197	75
	See section	509(a)(2). (Complete	Part III.)									
10 🖳	An organizati	ion organized and or	perated exclusively to te	st for publ	ic safety S	See sectio	n 509(a)(4	1).				
11 X	An organizati	ion organized and of	perated exclusively for the	ne benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the	purposes o	of one	or
	more publicly	y supported organiza	itions described in secti	on 509(a)(⁻	1) or section	on 509(a)(2	2). See se c	ction 509 (a	a)(3). Ch	eck the box	that	
	describes the	e type of supporting	organization and compl	ete lines 1	1e through	11h				_		
	a Type	l b □] Type∥ o	: 🔲 тур	e III - Func	tionally int	tegrated		d X	Type III - 0	Other	
e X	By checking	this box, I certify tha	t the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified	persons oth	ner tha	เก
	foundation m	nanagers and other ti	han one or more publicly	y supporte	ed organiza	ations des	cribed in s	ection 509	a)(1) or	section 509	(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting of	rganization, check th	nis box									
g	Since August	t 17, 2006, has the c	rganization accepted ar	ny gift or c	ontribution	n from any	of the follo	owing pers	sons?			
	(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons c	described	ın (ıı) and (ıı) below	', <u> </u>	Yes	No
	the gove	erning body of the si	upported organization?							11g(i)		X
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		X
	(iii) A 35% d	controlled entity of a	person described in (i) of	or (ii) above	e?					11g(iii)		X
h	Provide the f	ollowing information	about the supported or	ganızatıonı	(s)							
(i) Name	of supported	(ii) EIN	(iii) Type of		organization			(vi) ls		(vii) Amount of		
org	anization		organization (described on lines 1-9		sted in your		organization in col.		organization in col. (i) organized in the U.S.?		support	
		above or IRC section			document?	(i) of you	support	U.S.	.7			
			(see instructions))	Yes	No	Yes	No	Yes	No			

(i) Name of supported organization	(ii) EIN	organization (described on lines 1-9 above or IRC section	in col. (i) li	organization sted in your document?	organiza	u notify the tion in col. r support?	organizatio (i) organiz U.S	on in col. ed in the	(vii) Amount of support	
		(see instructions))	Yes	No	Yes	No	Yes	No		
Agnes Scott										
College	58-0566116	2	Х			X	X		0.	
American										
Cancer Socie	58-0659875	7	Х			X	X		0.	
Andrew										
College	58-0568687	2	Х		Х		X		250000.	
Archdiocese									·	
of Atlanta	58-0867213	1	X			X	Х		0.	
Associated										
Colleges of	58-1948807	11A	Х			Х	х		0.	
Total									9803000.	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12 See Part IV for Line 11 Continuation

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support	_					
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and	, ,	<u> </u>	<u> </u>			
	membership fees received. (Do not						
	include any "unusual grants ")	i					
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities				·		
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3			<u> </u>			
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		1				
	column (f)		1				
6	Public support. Subtract line 5 from line 4						
Sec	ction B. Total Support				-		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4			, ,			
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources			1			
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruct	ions)			12	
13	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop						<u>▶□</u>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2011 (I	ine 6, column (f) c	livided by line 11,	column (f))		14	%
15	Public support percentage from 2010	Schedule A, Part	: II, line 14			15	%
16a	33 1/3% support test - 2011. If the o	rganization did n	ot check the box o	n line 13, and line	14 is 33 1/3% or r	nore, check this bo	ox and
	stop here. The organization qualifies		•				▶∟
b	33 1/3% support test - 2010. If the o				l line 15 is 33 1/39	6 or more, check th	nis box
	and stop here. The organization quali						▶□
17a	10% -facts-and-circumstances test	t - 2011. If the org	anization did not	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac			_	•	rt IV how the organ	nization
	meets the "facts-and-circumstances" $\\$	test. The organiza	ation qualifies as a	publicly supported	d organization		
b	10% -facts-and-circumstances test	t - 2010. If the org	ganization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	ie "facts-and-circi	ımstances" test, c	heck this box and	stop here. Explaii	n in Part IV how the	
	organization meets the "facts-and-circ	umstances" test.	The organization	qualifies as a publi	cly supported org	anızatıon	ightharpoons
18	Private foundation. If the organization	n did not check a	box on line 13, 16	ia, 16b, 17a, or 17l	b, check this box a	and see instruction	s ▶ □
					Scho	edule A (Form 990	or 990-EZ) 2011

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	siow, piease com	pioto i ait ii j		-			
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	1	e) 2011	(f) Total
	Gifts, grants, contributions, and	(4) 2001	(3) 2000	(5) 2005	(4) 2010	 '	-, - 5 , ,	1.7 1.0.01
•	membership fees received. (Do not		1					1
	include any *unusual grants *)							
2	' ' ' h					 		<u> </u>
2	Gross receipts from admissions, merchandise sold or services per-							
	formed, or facilities furnished in					l		
	any activity that is related to the							
	organization's tax-exempt purpose					_		
3	Gross receipts from activities that							
	are not an unrelated trade or bus-		,					
	iness under section 513							
4	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
•	furnished by a governmental unit to					1		
	the organization without charge							
e	<u> </u>	_	 			1		L
	Total. Add lines 1 through 5		 			1		
/a	Amounts included on lines 1, 2, and							
L	3 received from disqualified persons					-		
D	Amounts included on lines 2 and 3 received from other than disqualified persons that							
	exceed the greater of \$5,000 or 1% of the							
	amount on line 13 for the year					<u> </u>		
C	Add lines 7a and 7b					<u> </u>		
8	Public support (Subtract line 7c from line 6)		<u> </u>		<u> </u>	<u> </u>		
Sec	tion B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2007	(b) 2008	(c) 2009	(d) 2010		e) 2011	(f) Total
9	Amounts from line 6					<u> </u>		
10a	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties and income from similar sources							
h	Unrelated business taxable income				<u> </u>	†		
-	(less section 511 taxes) from businesses]
	acquired after June 30, 1975							1
	· ·		-			+-		
	Add lines 10a and 10b Net income from unrelated business					+-		
'''	activities not included in line 10b,							
	whether or not the business is							
	regularly carried on		ļ			<u> </u>		
12	Other income Do not include gain		1					1
	or loss from the sale of capital assets (Explain in Part IV)		<u> </u>					ļ
13	Total support (Add lines 9, 10c, 11, and 12)							<u> </u>
14	First five years. If the Form 990 is for	the organization'	s first, second, thii	d, fourth, or fifth t	ax year as a section	on 501	(c)(3) organiz	zation,
	check this box and stop here		· - :-					
Sec	tion C. Computation of Publi	c Support Pe	rcentage					
15	Public support percentage for 2011 (li	ne 8, column (f) d	livided by line 13,	column (f))		15		%
16	Public support percentage from 2010	Schedule A, Part	III, line 15			16		%
	tion D. Computation of Inves							
17	Investment income percentage for 20	11 (line 10c, colui	mn (f) divided by lii	ne 13, column (f))		17	-	%
	Investment income percentage from 2			("		18		9/
	33 1/3% support tests - 2011. If the			on line 14, and lin	e 15 is more than :	$\overline{}$	%, and line	
•	more than 33 1/3%, check this box ar	-					,	▶□
h	33 1/3% support tests - 2010. If the	-	•	•			an 33 1/3%	and
	line 18 is not more than 33 1/3%, che	•						. \square
20	Private foundation. If the organization							
	ate loundation. If the organization	n did not check a	DOX OF III 0 14, 18	a, or 190, check t			A /Form 00	200 57\004

Part IV Suppleme	ntal Information	on (Schedule A, Part I,	Line 11h -	Information	on regardir	ng suppor	ted organi	zations (c	ontinuation)
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	(iv) Is the tion in col in your g docur	. (i) listed overning	organizat	u notify the ion in col. support?	(vi) is organizatio (i) organizatio U.S.	on in col. ed in the	(vii) Amount of support
		(see instructions))	Yes	No	Yes	No	Yes	No	
Atlanta		 							
Ballet, Inc. 5	8-1047778	9	х			l x	х		0.
City of						İ			
	8-6000511	6	Х			Х	X		0.
Atlanta									
Contemporary 5	8-1174492	7	Х			Х	Х		<u> </u>
Atlanta-Fult		4.4-				1			•
on Public Li5	8-1837951	11B	Х			Х	Х		0.
Atlanta	0 0566160	7	٠,,			.			0.
History Cent 5	8-0300102		Х			Х	X		
Internationa5	8-1829492	9	х			x	х		0.
Atlanta	0 1025452	<u> </u>	_ A			_ A	-		
Internationa5	8-1581116	2	x			x	х		0.
Atlanta	0 1301110							 	
Landmarks, I1	3-1240132	7	x			х	X	1	0.
Atlanta									
Legal Aid So 5	8-0568691	7	X			Х	Х		0.
Atlanta									
Speech Schoo5	8-0566198	2	Х			Х	X		0.
Atlanta						l <u></u>			•
University C			X		!	Х	Х		0.
Bath County	4 0505013	3					_ v	, [0.
Community Ho 5	4-0505913	3	Х		-	X	X		<u> </u>
	8-0566133	2	X			x	x		0.
Boy Scouts	0 0300133				 	 ^• -	 		
of America, 5	8-1681556	7	x			х	x		0.
Boys and							1		
Girls Clubs 1	3-5562976	9	х			х	x		0.
Boys and	·								
Girls Clubs 5	8-0566123	7	Х			Х	X		0.
Boys' Home,		_							
	4-0505870	1	Х		Х		Х		350000.
Brenau	0.0566143	2				,,	,,		0
University 5 Brewton-Park	8-0566143	2	Х		 	X	Х		0.
	8-0619030	2	x			x	x		0.
Bruton	0-0013030	Z			1	<u> </u>			
Parish Churc5	4-6036077	1	x			x	x		0.
Center for	4 0030077				1				
Advanced Tec5	8-1600482	9	x			x	x		0.
Center for					1		-		
the Visually5	8-1168874	7	x			Х	X		0.
Children's									
Healthcare of	8-236781 <u>9</u>	3	Х		Х		Х		3500000.
Clark								T	
Atlanta Univ5	8-1825259	2	Х			Х	X	igspace	0.
Coca-Cola	0 1606000								0.400000
Scholars Fou5	8-1686023	7	Х		X	ļ	Х	 	2400000.
On a time of the second]		
Continuation Total			L	L	L	<u> </u>	Cobodii		990 or 990-F7) 2011

(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the tion in co	organiza- l. (i) listed	(v) Did you	u notify the	(vi) is organizatio	the on in col.	(vii) Amount of
organization		(described on lines 1-9 above or IRC section	in your g	ovérning ment?		r support?	(i) organız U.S	ed in the	support
		(see instructions))	Yes	No	Yes	No	Yes	No	
Columbia		_							_
Theological 5	8-0566165	2	Х			Х	Х		0.
The Community Fo5	.0 1244646	7	x		x		x		350000.
Council on	00-1344040				 ^	<u> </u>			350000.
Foundations 1	3-6068327	9	х			X	x		0.
The	3 0000327				 			 	
Darlington S5	8-0566169	2	X	İ		x	l x		0.
Daughters of				İ					
The America		9	X			х	x		0.
Daughters of									
The America 5	4-6052460	9	X		Х		Х		3000.
Emory	.0 0566056	•		ļ					0
University 5 Episcopal	8-0566256	2	Х	<u> </u>		Х	Х		0.
Diocese of A5	8-0572411	1	x			x	x		0.
Episcopal Episcopal	00-03/2411	<u>_</u>		<u></u>	-			\vdash	
Diocese of G5	8-0566215	1	x			x	x		0.
Episcopal		<u> </u>				 		 	
Diocese of S5	4-0506420	1	х			x	x		0.
Episcopal		···							
High School 5	4-0506326	2	Х		Х		Х		500000.
Episcopal									
Parish House			Х	ļ		Х	Х		0.
Fernbank,		7	.,			.,,	,,		0
Inc. 5	8-6028607		Х			Х	Х	-	0.
Foundation C1	3-1837418	9	х			X	x		0.
The Friends	3 1037410			1	 			 	<u> </u>
School of At5	8-1918318	2	х			x	х		0.
Fulton				-					
County Arts 5	8-6001729	6	X			Х	Х		0.
The Galloway									
	8-1052217	2	Х			Х	X		0.
Georgia	0 0073100	7	,,			.,	.,	i	•
Council for 5 Georgia	08-09/3190	/	Х		<u> </u>	Х	Х	-	0.
Foundation f5	8-0684740	9	х			X	x		0.
Georgia	0 0004740						Α	 	<u> </u>
Military Col5	8-0616992	2	x			x	x		0.
Georgia									
Partnership 5	8-1974586	7	Х		İ	Х	x		0.
Georgia									
Public Educa			X			X	Х		0.
Georgia									
Radio Readin5	8-1336856	7	Х			X	Х	\sqcup	0.
Georgia	0 1405460	7	v			.,	.,		^
Shakespeare 5 State of	8-1495460	7	X			X	Х		0.
Georgia		6	х			х	x		0.
Georgia		<u> </u>			 			 	<u> </u>
Continuation Total									
			L			L	<u> </u>		990 or 990-E7\ 2011

Part IV Supplen	nental Informati	on (Schedule A, Part I,	Line 11h -	Information				zations (co	ontinuation)
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	tion in col	organiza- l. (i) listed overning nent?	organizat	u notify the ion in col. r support?	(vi) Is organizatio (i) organiz U.S	on in col. ed in the	(vii) Amount of support
		above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No	
Georgia								 '''•	
State Univer	58-6033185	7	X		x		х		100000.
Georgia Tech						-			
Foundation,	58-6043294	5	Х			x	Х		0.
Georgia					<u> </u>				
Trust for Hi	23-7357226	7	Х			x	х		0.
University									
of Georgia F	20-2779492	5	Х			X	X		0.
Georgia,									
University S	58-6333106	11B	Х			Х	Х		0.
Georgia		_			1		ŀ		_
Women of Ach	58-1949306	7	Х			Х	Х		0.
Girls	1056004	_			ļ				
Incorporated	58-1276804	7	Х		ļ	Х	Х		0.
Goodwill	FO 0566173	-			1			1	•
Industries o	D8-05661/3	7	Х		<u> </u>	Х	Х		0.
Grace Yorktown Ham	E4 060104E	1							0
The Heritage		<u> </u>	X			Х	Х	-	0.
	58-1077670	2	X			х	x		0.
Holy	56-1077670		_ ^_					├ ──	0.
Innocents' E	58-1120296	2	x			x	X		0.
The Howard	150 1120250		^				_ ^		<u>.</u>
	58-0611768	2	х			х	x		0.
Independent	30 0011700								
	52-1081024	9	х			x	x		0.
Interdenomin									
ational Theo	58-0814544	2	х			l x	x	į į	0.
Kenmore									
Association,	54-0525507	9	Х			x	Х		0.
LaGrange									
	58-0566199	2	Х			X	Х		0.
Literacy									
Action, Inc.	58-1053728	9	X			Х	Х		0.
The Lovett		_							_
	58-0619038	2	Х		ļ	Х	Х		0.
Marietta/Cob	1	-			1				•
b Museum of	58-1528144	7	Х			Х	Х		0.
Marist	E0 056600A	0							•
	58-0566204	2	Х			Х	Х	<u> </u>	0.
Mercer	E0 0E66167	2	v			🗓			0
University Metropolitan	58-0566167		X		-	Х	Х		0.
Atlanta Art		7	x			х	X		0
Morehouse	20-1344040		^		-	_^		 	0.
	58-0566205	2	х			x	x		0.
Morehouse	000203	<u></u>				<u> </u>		+	· ·
School of Me	58-1438873	2	х			x	х		0.
Morgan		<u> </u>							
County Found	58-6067915	9	х			х	x		0.
		-			<u> </u>		- 	 	
Continuation Total									
	<u></u>						Cabadal	- A /F	990 or 990 E7\ 2011

Part IV Supplen	nental Informati	on (Schedule A, Part I,	Line 11h -	Information	on regardır	ng suppor	ted organi	zations (co	ontinuation)
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	(iv) Is the tion in co in your g	organiza- l. (i) listed loverning ment?	(v) Did you organizat	u notify the ion in col. r support?		the on in col. ed in the	(vii) Amount of support
		(see instructions))	Yes	No	Yes	No	Yes	No	
Morris Brown									
	58-0607083	2	Х			Х	Х		0.
The Museum	50 0006000	_							0.50000
of Arts and The Museum	58-0806933	7	Х		X		Х		250000.
of Aviation	58_1/51656	7	x			X	x		0.
National	20-1431030	,						+	
Black Arts F	58-1736780	7	l x			x	l x		0.
The Nature									
Conservancy	53-0242652	9	x			x	Х		0.
Oglethorpe	_								
University	58-0568698	2	Х			Х	Х		0.
Daga Baadama	50 0706010	2	.,			,,	,,		•
Pace Academy The Paideia	58-0/06812	2	Х		-	Х	Х	\vdash	0.
	23-7089522	2	x			X	x		0.
Paine	23 7003322				<u> </u>			+	
	23-7434499	2	x			x	x		0.
Piedmont									
	58-0568698	2	Х			Х	Х		0.
Protestant									
Episcopal Th	54-0505937	2	Х		X	ļ	Х	\vdash	2000000.
Rabun Gap-Nacooche	E8-0E03430	2	x			x	х		0
Recording	56-0595450							\vdash	0.
for the Blin	58-0899523	7	x			x	x		0.
Reinhardt	0000000	-							
College	58-0603153	2	x			х	Х		0.
St. James									
Episcopal Ch		1	Х	<u></u>	ļ	Х	Х		0.
St. Joseph's		11B	x						0
Mercy Found St. Luke's	50-1440522	118			-	Х	Х		0.
Episcopal Ch	54-1789512	1	x			x	x		0.
Senior	2,03022				 				
Citizen Serv	58-0960309	9	х]	l	Х	х		0.
Servants for									
Relief of I	<u>58-0</u> 566234	3	Х			Х	Х		0.
Shepherd	E1 0141601	2							•
Center (form Shorter	51-0141601	3	Х			Х	Х	\vdash	0.
	58-2624570	2	X			x	x		0.
Southeastern		<u> </u>	Α	<u> </u>			_ <u> </u>	 	
	56-0995114	7	x			x	x		0.
Southern									
Association	58-0566240	9	Х		<u> </u>	х	х		0.
Southern									
Center for I	58-1285654	2	Х	ļ		Х	Х	 	0.
Southern Education Fo	13_5562200	7	x			x	x		^
Education Fo	T3-3307300	′	^		ļ	 ^ _	^	├── ┼	0.
Continuation Total									
- John Manual Total				<u> </u>	<u> </u>	<u> </u>	Schedul	e A (Form	990 or 990-EZ) 2011

Part IV Supplem	ental Informati	on (Schedule A, Part I,	line 11h.	Information	on regardin	na support	ed organi	zations (c	OUU4644 Page 4
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the organization in col. (i) listed (v) Did you notify the			(vi) Is the organization in col. (vii) A		(vii) Amount of support	
		above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No	
Southern			103	140	103		100	100	
Growth Polic	23-7344523	7	x			х	x		0.
Southern									
Regional Edu	58-0566141	5	Х			х	х		0.
Spelman									
	58-0566243	2	Х			X	X		0.
Tallulah	_	_				l		Ì	_
Falls School	58-0600867	2	Х			Х	Х		0.
Telfair	50 0610074	0	.,,				,,		0
Academy of A Trinity	58-06100/4	9	Х			Х	Х		0.
	58-1197585	2	х			х	x		0.
United Negro	30-113/303	<u> </u>					<u> </u>	 	
College Fun	13-1624241	7	х			l x	x		0.
United Way		· · · · · · · · · · · · · · · · · · ·							
of Metropoli	58-0566194	7	Х			x	х		0.
Virginia									
Historical S	54-0419452	7	Х	<u></u>		Х	Х		0.
Virginia	- 4 - 6 - 6 - 6 - 6 - 6	_							
Museum of Fi	54-6001804	7	Х			Х	Х		0.
The Walker School	58-0940220	2	Х			x			0
Washington	36-0940220	4					Х		0.
and Lee Univ	54-0505977	2	х			х	x		0.
Wesley Homes									
Inc.	58-0909393	9	Х			х	Х		0.
Wesleyan									
	58-0593438	2	Х			Х	X		0.
Wesleyan	50 04 4 5 4 4 4	•							•
School The	<u>58-2147411</u>	2	Х			Х	Х	├	
Westminster	50 0566206	2	Х			x	x		0.
Westminster-	36-0300200							┢──╂	<u></u>
Canterbury F	52-1189655	7	х			x	x		0.
College of		,							
William and	54-0734117	2	Х			x	х		0.
Robert W.							i		
Woodruff Art	58-0633971	7	X		l	Х	Х		0.
Robert W.									_
Woodruff Hea	58-2229271	11B	Х			Х	Х	\sqcup	0.
Woodward	50 0625504	2	v						0
Academy Young Harris	58-0625584	2	Х			Х	Х		0.
	58-0593414	2	X			x	X		0.
YMCA of	30 0333414	<u> </u>			 				
Metropolitan	58-0566253	9	Х		l	x	x		0.
The State									
YMCA of Geor	58-0566 <u>2</u> 44	9	X		х		х		100000.
				-					
Zoo Atlanta	58-1655184	9	Х	ļ	ļ	Х	Х	<u> </u>	0.
									0553000
Continuation Total					<u> </u>	l	Colored		9553000 .

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

Lettie Pate Evans Foundation, Inc.

Employer identification number

П.	Lettle Pate Evalls		30-0004044			
Pa	<u></u>		S OF ACCOUNTS. Complete if the			
	organization answered "Yes" to Form 990, Part IV, line					
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	sed funds			
	are the organization's property, subject to the organization's	exclusive legal control?	└── Yes			
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only			
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	e conferring			
	impermissible private benefit?		Yes No			
Pa	t II Conservation Easements. Complete if the org	anization answered "Yes" to Form 990,	Part IV, line 7			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)				
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of an hi	storically important land area			
	Protection of natural habitat	Preservation of a cer	rtified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	n of a conservation easement on the last			
	day of the tax year					
			Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
þ	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c			
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struc	ture			
	listed in the National Register		2d			
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	ne organization during the tax			
	year ▶					
4	Number of states where property subject to conservation eas	sement is located				
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements it		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,					
7	Amount of expenses incurred in monitoring, inspecting, and e					
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17				
	and section 170(h)(4)(B)(ii)?		└ Yes └ No			
9	In Part XIV, describe how the organization reports conservation	·				
	include, if applicable, the text of the footnote to the organizat	cion's financial statements that describes	s the organization's accounting for			
Do	conservation easements. rt III Organizations Maintaining Collections of	FArt Historical Transuras or (Other Similar Assets			
Га		•	Other Sillinal Assets.			
	Complete if the organization answered "Yes" to Form					
ıa	If the organization elected, as permitted under SFAS 116 (AS	**				
	historical treasures, or other similar assets held for public exh		ance of public service, provide, in Part XIV,			
	the text of the footnote to its financial statements that described as a second statement of the control of the					
D	If the organization elected, as permitted under SFAS 116 (AS					
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pi	ublic service, provide the following amounts			
	relating to these items.		• •			
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$			
_	(ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, historical treations of all and a second of the following a second of the following second of the f	-	ai gairi, provide			
_	the following amounts required to be reported under SFAS 1	10 (ASC 936) relating to these items.	•			
a						
D	Assets included in Form 990, Part X		▶ \$			

	dule D (Form 990) 2011 Lettie rt III Organizations Maintaining C	Pate Evans							04644	
3	Using the organization's acquisition, accessi	on, and other record	is, checi	k any of the	tollowing the	at are a si	gnificant	use of its	collection	items
_	(check all that apply)		. —	•						
а	Public exhibition	C			change progr	ams				
b	Scholarly research	•	• —	Other						
C	Preservation for future generations							_		
4	Provide a description of the organization's co							ose in Pai	t XIV	
5	During the year, did the organization solicit o					ner sımılar	assets		٦	
D.	to be sold to raise funds rather than to be ma								_ Yes	<u> </u>
Pai	t IV Escrow and Custodial Arran		ete if the	organization	on answered	"Yes" to f	Form 990), Part IV,	line 9, or	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contributio	ns or other a	ssets not i	included	_	٦	
	on Form 990, Part X?								」Yes	∟ No
þ	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing t	table						
							ļ		Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f		–	
2 a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						」Yes	└─ No
	If "Yes," explain the arrangement in Part XIV	<u> </u>								
Pai	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	orm 990, Part	IV, line 10)			
		(a) Current year	(b) P	rıor year	(c) Two yea	rs back (d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships				l					
е	Other expenditures for facilities									
	and programs								L	
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curi	rent year end baland	ce (line 1	g, column (a)) held as.					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	<u>%</u>								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	it are held a	and administe	ered for th	e organiz	zation		
	by.									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	on Sched	lule R?					3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Land, Buildings, and Equipm	ient. See Form 990), Part X,	line 10						
	Description of property	(a) Cost or o	ther	(b) Cos	t or other	(c) Ac	cumulate	ed	(d) Book	value
		basis (investr	ment)	basis	(other)	dep	reciation	į		
1a	Land	139	848.						13	9848.
b	Buildings									
С	Leasehold improvements				4910.		8	06.		4104.
d	Equipment				11698.		1	45.	1	1553.
	Other									
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colun	nn (B), line	10(c))			ightharpoons	15	5505.

Schedule D (Form 990) 2011

(a) Description of security or category (including name of security)	(b) Book value		hod of valua I-of-year mar	
(1) Financial derivatives				
Closely-held equity interests				
3) Other				
(A)			<u> </u>	
(B)				
(C)				
(D)				
(E)				
(F)				<u> </u>
(G)				
(H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related	See Form 990, Part X, line			
(a) Description of investment type	(b) Book value		hod of valua I-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)		ļ·-		
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990. Part X.				
Part IX Other Assets. See Form 990, Part X,	(a) Description			(b) Book value
				= - + · · · · · · · · · ·
(1)				
(1)				
(2)				
(2)				
(2) (3) (4)				
(2) (3) (4) (5)				
(2) (3) (4) (5) (6)				
(2) (3) (4) (5) (6) (7)				
(2) (3) (4) (5) (6) (7) (8)				
(2) (3) (4) (5) (6) (7) (8) (9)				
(2) (3) (4) (5) (6) (7) (8) (9)	Uine 15)			
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B)	I line 15)		•	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Par	1 line 15) t X, line 25.	(b) Book value	>	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part 1. (a) Description of liability	Time 15) t X, line 25.	(b) Book value		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Fotal. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes	Tine 15) t X, line 25.		•	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes (2) 457 (b) Plan	Tine 15) t X, line 25.	1983.		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes (2) 457 (b) Plan (3) Benefit Plan	1 line 15) t X, line 25.		•	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes (2) 457 (b) Plan (3) Benefit Plan (4)	1 line 15) t X, line 25.	1983.	•	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes (2) 457 (b) Plan (3) Benefit Plan (4) (5)	1 line 15) t X, line 25.	1983.	•	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes (2) 457 (b) Plan (3) Benefit Plan (4) (5) (6)	1 line 15) t X, line 25.	1983.	•	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes (2) 457 (b) Plan (3) Benefit Plan (4) (5) (6) (7)	Time 15) t X, line 25.	1983.		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes (2) 457 (b) Plan (3) Benefit Plan (4) (5) (6) (7) (8)	Tine 15) t X, line 25.	1983.		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes (2) 457 (b) Plan (3) Benefit Plan (4) (5) (6) (7) (8) (9)	t X, line 25.	1983.		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part (a) Description of liability (1) Federal income taxes (2) 457 (b) Plan (3) Benefit Plan (4) (5) (6) (7) (8)	t X, line 25.	1983.	•	

132053 01-23-12

_	dule D (Form 990) 2011 Lettie Pate Evans Foundati					6004644	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	Audi	ted Finan	T T	tatemen		0.4.4.0
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	_		9440.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			5763.
3	Excess or (deficit) for the year Subtract line 2 from line 1			3		48.	3677 .
4	Net unrealized gains (losses) on investments			4			
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV)			8		_	
9	Total adjustments (net). Add lines 4 through 8			9		10:	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 art XII Reconciliation of Revenue per Audited Financial Statements.		lith Dovo	10	r Dotur		3677.
	· - · · · · · · · · · · · · · · · · · ·	elito A	VILII NEVE	ilue pe			1540.
1	Total revenue, gains, and other support per audited financial statements				1	1011	1340.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	2a	1				
a	Net unrealized gains on investments Donated services and use of facilities	2b	 		_		
b		2c	-		-		
C	Recoveries of prior year grants	2d	 	210	10		
d	Other (Describe in Part XIV) Add lines 2a through 2d	<u> 2u</u>	J		_		2100.
	Subtract line 2e from line 1				2e 3		9440.
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				-	1013	7 1 1 0 1
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a	I				
a	Other (Describe in Part XIV.)	4b	1		_	1	
b	Add lines 4a and 4b	10	<u> </u>			•	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5	1043	9440.
	t XIII Reconciliation of Expenses per Audited Financial Statem	ents	With Expe	enses			
1	Total expenses and losses per audited financial statements				1		7863.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25						
а	Donated services and use of facilities	2a					
b	Prior year adjustments	2b					
С	Other losses	2c					
d	Other (Describe in Part XIV)	2d		210	0.0		
е	Add lines 2a through 2d				2e		2100.
3	Subtract line 2e from line 1				3	995	5763.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b	<u> </u>				
С	Add lines 4a and 4b				4c		0.
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5	995	5763.
	t XIV Supplemental Information						
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part I						4, Part
	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also com						h
Kei	ital expense is included in expenses on au	атсе	ed IIIIe	IIICI	II Sta	cement .	but
is	netted against rental revenue on Form 990						
	necoda againse renear revenue on rorm 550	•					
		•					
			··· — ·	_	_		

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

OMB No 1545-0047	2011

Open to Public Inspection '

Name of the organization Lettie Pate	te Evans	Foundation,	Inc.				Employer identification number 58-600464	mber 44
Part I General Information on Grants and Assistance	ind Assistance							
1 Does the organization maintain records to substantiate the amount of criteria used to award the grants or assistance?	to substantiate the		or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	tion X Yes	§ N
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for mon	toring the use of grant f	unds in the United	States.	:			
Part II Grants and Other Assistance to Governments and Organizati	Governments an	d Organizations in the	United States. C	omplete if the orga	nization answered "Y	ions in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	IV, line 21, for any	[
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000	\$5,000. Check the	s box if no one recipient	t received more th		can be duplicated if a	Part II can be duplicated if additional space is needed	▲ pap	
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Andrew College							Renovation of the	
501 College Street							physical education	
Cuthbert, GA 39840-1395	58-0568687	501(c)(3)	250000.	0.			complex.	
:								
							Renovation of the	4
414 Boys Home Road	6 6 1 6		6	•			Whitehead Cottage and the	. cne
Covington, VA 24426	54-0505870	501(c)(3)	350000.	0.0			Ben Parrott Dining Hall	11.
							Costs of pediatric	
Children's Healthcare of Atlanta							residency program	
1584 Tullie Circle, N.E.							conducted with the Em	Emory
Atlanta, GA 30329-2303	58-2367819	501(c)(3)	3500000.	0			University School of	
Coca-Cola Scholars Foundation		•						
P. O. Box 442							Two-Year College Scholars	lare
Atlanta, GA 30301-0442	58-1686023	501(c)(3)	2400000.	0.			Program,	
The Community Foundation for							Replacement of roof,	HVAC
Greater Atlanta, Inc 50 Hurt							and other capital	
Plaza, Suite 449 - Atlanta, GA							improvements to Seven	_
30303	58-1344646	501(c)(3)	350000.	0.			Stages Theater.	
Daughters of The American								
Revolution, Comte De Grasse								
Chapter - 304 Oak Point Drive -							Replacement of the Old	יסי
Yorktown, VA 23692	54-6052460	501(c)(3)	3000.	0.			Customhouse furnace.	
2 Enter total number of section 501(c)(3) and government organizations	ind government or		isted in the line 1 table				^	11.
social such as sold of sold sold sold sold sold sold sold sold	y con letter in the less 1 toble							

3 Enter total number of other organizations listed in accompantal states of Paperwork Reduction Act Notice, see the Instructions for Form 990.

See Part IV for Column (h) descriptions 25

Schedule I (Form 990) (2011)

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Inc.	
Foundation,	
Evans	
Pate	
Lettie	
m 990)	

Schedule (Form 990) Lettie Pate Evans Foundation, Inc. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	te Evans Assistance to Go	Foundation,	Inc. nizations in the Ur	nited States (Scho	edule I (Form 990), Par		58-6004644 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Episcopal High School 1200 North Quaker Lane Alexandria, VA 22302	54-0506326	501(c)(3)	. 500006	0.			Renovation of the David H. March Library.
Georgia State University Foundation, Inc University Plaza - Atlanta, GA 30303	58-6033185	501(c)(3)	100000	0			Strategic initiatives of the World Affairs Council of Atlanta.
The Museum of Arts and Sciences 4182 Forsyth Road Macon, GA 31210	58-0806933	501(c)(3)	250000.	0			Capital improvements to the planetarium of the Museum of Arts & Sciences in Macon.
Protestant Episcopal Theological Seminary in Virginia - 3737 Seminary Road - Alexandria, VA 22304	54-0505937	501(c)(3)	2000000.	0.			\$10 million campaign to rebuild chapel destroyed by fire.
The State YMCA of Georgia, Inc. P. O. Box 820 McDonough, GA 30253	58-0566244	501(c)(3)	100000.	0			Support of strategic initiatives.
							Schedule I (Form 990)

Schedule 1 (Form 990) (2011) (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Grant or Assistance: Costs of pediatric residency program thoroughly reviews the project details, including the project's budget. 0 Government: Children's Healthcare of Atlanta Grant recipients provide detailed written reports at least annually Line 2: Before a grant is awarded, the Foundation's staff Written reports are provided until (d) Amount of non-cash assistance conducted with the Emory University School of Medicine. (c) Amount of cash grant (b) Number of recipients Column (h): how grant funds are spent. (a) Type of grant or assistance or Name of Organization II, line 1, (h) Purpose of Part I, 132102 01-27-12 Part IV Part

Page 2

58-6004644

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed

Lettie Pate Evans Foundation, Inc.

Schedule I (Form 990) (2011)

Part III

Schedul Part I	e I (Form	990	2011		Le	<u>etti</u>	e P	<u>ate</u>	Eva	ans	_Fou	nda	ation,	Inc	: .			<u> </u>	<u>8 – 6</u>	<u>004</u>	644 F	Page 2
Part I	V Su	pple	ment	al Ir	nform	ation																
Foun	dati	on	staf	f	and	tru	ste	es	rev	iew	all	re	ports	s, ar	ıd	the	ey	are	e f	ile	đ	
with	Fou	nda	tion	ır	eco	rds.	F	oun	dat	ion	sta	ff	ofter	n mal	ce_	a	sit	е т	vis	it	upon	
the	proj	ect	's c	om	ple	tion										_						
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SCHEDULE J (Form 990).

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Lettie Pate Evans Foundation, Inc.

Attach to Form 990.

Employer identification number 58-6004644

Pa	t 1 Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g , maid, chauffeur, chef)			!
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		X
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	'	Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Х	
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
•	contingent on the revenues of		•	
а	The organization?	5a	,	Х
	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.			
а	The organization?	6a		Х
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	ınıtıal contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		_X_
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2011

58-6004644

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Lettie Pate Evans Foundation, Inc.

Schedule J (Form 990) 2011

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
	Ξ		0	683.	2024.	918.	22211.	0
1 P.RUSSELL HARDIN	(ii)	47	0.		51	23442.	566968.	0.
	Ξ					1121.	12550.	0
2 J. LEE TRIBBLE	Ξ			22085.		28605.	320327.	0
i	Ξ	5768.		395.	480.	197.	6840.	0
3 ERIK S. JOHNSON	▣		0.	10091.		5025.	174613.	0
	Ξ							
4	▤							
	Ξ							
5	≞							
	Ξ							
9	Ξ							
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7	Ξ							
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16	▤							
				C C			Schedul	Schedule J (Form 990) 2011

and

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Employer identification number Name of the organization Lettie Pate Evans Foundation, Inc. 58-6004644 Form 990, Part I, Line 1, Description of Organization Mission: particular focus on private secondary and higher education, arts and culture, and museums and historic preservation. Form 990, Part III, Line 4d, Other Program Services: Grants for Museums and Historical Preservation. One grant was paid to the Museum of Arts and Sciences in Macon, Georgia for capital improvements to its planetarium. One grant was paid for replacement of the furnace in the Old Customhouse in Virginia. Expenses \$ 254961. including grants of \$ 253000. Revenue \$ 0. Grants for Performing Arts. One grant was paid for critical capital improvements to a small theater in Atlanta. Expenses \$ 352714. including grants of \$ 350000. Revenue \$ 0. Grants for Public Affairs. One grant was paid to the Georgia State University Foundation to provide operating support for its World Affairs Council program at the Robinson School of Business. Expenses \$ 100775. including grants of \$ 100000. Revenue \$ 0. Form 990, Part VI, Section A, line 2: Two foundation trustees share a business relationship. James B. Williams and Wilton Looney are directors of Rollins, Inc.; RPC, Inc. and Marine Products Corporation. Form 990, Part VI, Section A, line 4: Trustees adopted unanimously an amendment to the Lettie Pate Evans Foundation's Articles of Incorporation LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011) 132211 01-23-12

Lettie Pate Evans Foundation, Inc.

Employer identification number 58-6004644

organizations. Those changes were limited to updating the names of certain organizations that formally changed names and substituting one new beneficiary for a supported organization that no longer exists due to cessation of business. Treasury Regulations section 1.509(a)-4 permits a supporting organization to substitute beneficiaries under certain circumstances if permitted in the Foundation's Articles of Incorporation. The Foundation's Articles of Incorporation permit substitution of another organization that "has received support from the late Lettie Pate Evans or her sons or the foundations created by them" for any supported organization that "shall cease to exist or fail or cease to qualify as an organization described in section 509(a)(1) or (2)" of the Internal Revenue Code. The amended list of supported organizations satisfies the requirements of the Treasury Regulations and the Foundation's Articles of Incorporation.

Form 990, Part VI, Section B, line 11: The Form 990 is prepared with audited financial data which has been reviewed by the governing board.

Internal accounting staff prepare the 990 with the aid of preparation software. Accounting team members individually review the 990 according to a checklist. Numbers are verified against audited financial statements.

The 990 is then reviewed by the Controller, Treasurer, Secretary and President. A draft of the 990 is provided to all governing board members prior to filing.

Form 990, Part VI, Section B, Line 12c: Officers and trustees disclose annually those affiliations which may give rise to a conflict of interest.

The Secretary keeps conflict disclosures on file. Each grant application is checked against the full conflicts list. Trustees consider conflicts or Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-EZ) (2011) Name of the organization **Employer identification number** Lettie Pate Evans Foundation, Inc. 58-6004644 potential conflicts before making grant determinations. Disclosure is made on the record. Officers consult the list of conflicts or potential conflicts when making vendor decisions. Form 990, Part VI, Section B, Line 15: The governing board determines compensation for all officers (including the President, Treasurer and Secretary) and all staff. In setting compensation, trustees consult three independent compensation studies showing compensation data at comparable organizations. Individual compensation amounts are evaluated and determined annually as part of the budgeting process conducted at the board's November meeting; 2011 compensation was determined during the November 2010 board meeting.

Form 990, Part VI, Section C, Line 19: The organization's governing documents, conflict of interest policy and audited financial statements are kept by the organization's Secretary and are made available upon request.

Form 990, Part VII, Section A, Column B:

The Lettie Pate Evans Foundation participates in a common

administrative arrangement with five other charitable organizations

that are governed by independent boards but that share a common staff.

Messrs. Hardin, Tribble and Johnson and Mmes. Smith and Morton work, in

total, about 49.5 hours per week for the participating organizations.

Mr. Williams devotes about 18 hours per week to related organizations,

Mr. Sibley about five hours per week, Mr. Looney about 3.5 hours per

week, Dr. Claiborne about six hours per week and Mr. McTier about three

hours per week.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships

► See separate instructions.

▶ Attach to Form 990.

OMB No 1545-0047

2011 Open to Public Inspection

Name of the organization

Employer identification number 58-6004644

Section 512(b)(13) controlled ŝ × entity? Direct controlling Yes entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) $\boldsymbol{arepsilon}$ Direct controlling entity End-of-year assets N/A e status (if section Public charity 501(c)(3)) <u>e</u> Total income PF Exempt Code Ð section 501(C)(3) Ð Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or Legal domicile (state or foreign country) foreign country) **Seorgia** Inc. Pate Evans Foundation, Primary activity Primary activity 9 **Srantmaking** 58-1695425, 191 Peachtree St., NE Suite Robert W. Woodruff Foundation, Inc. Lettie Name, address, and EIN Name, address, and EIN of related organization of disregarded entity 3540, Atlanta, GA 30303 Part Part II

or Paperwork Reduction Act Notice, see the Instructions for Form 990.

GA 30303

3540, Atlanta,

Schedule R (Form 990) 2011

A/A

11d; III-0

501(C)(3)

eorgia

×

11d; III-0

501(C)(3)

Seorgia

3rantmaking

Lettie Pate Evans Foundation, Inc. Restr u/w

Lettie Pate Evans - 23-7282939, 191

Joseph B. Whitehead Foundation - 58-6001954

191 Peachtree St., NE Suite 3540

30303

Atlanta, GA

Peachtree St. NE, #3540, Atlanta, GA 30303

Lettie Pate Whitehead Foundation, Inc. -58-6012629, 191 Peachtree St., NE Suite

×

11d; III-0

501(C)(3)

eorgia

Grantmaking

(a)	(p)	(c)	(p)	(e)	(£)	(g) Section 512(b)(13)	(5)(13)
of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	status (if section	Direct controlling entity	controlled organization?	ollad ation?
ì	-			501(c)(3))	•	Yes	2
Robert W. Woodruff Health Sciences Center							
Fund, Inc 58-2229271, 191 Peachtree St.,							
NE Suite 3540, Atlanta, GA 30303	Grantmaking	Georgia	501(C)(3)	11b; II	N/A		×
Ichauway, Inc 58-1824778							
3988 Jones Center Drive							
Newton, GA 39870	Ecological Research	Georgia	501(C)(3)	Fid	N/A		×
Agnes Scott College - 58-0566116							
141 E. College Ave.	,						
Decatur, GA 30030	Higher Education	Georgia	501(C)(3)	2	N/A	•	×
American Cancer Society Inc 58-0659875							
1599 Clifton Rd							
Atlanta, GA 30329	Health Care Assistance	Georgia	501(C)(3)	4	N/A		×
Andrew College - 58-0568687							
413 College Street	-						
Cuthbert, GA 39840	Higher Education	Georgia	501(C)(3)	7	N/A	_	×
Archdiocese of Atlanta - 58-0867213							
680 W. Peachtree St., N.W.	-						
Atlanta, GA 30308	Religion	Georgia	501(C)(3)	1	N/A		×
Associated Colleges of the South -							
58-1948807, 1975 Century Blvd, Suite 10,							
Atlanta, GA 30345	Higher Education	Georgia	501(C)(3)	11a, I	N/A		×
Atlanta Ballet, Inc 58-1047778						-	
1400 W. Peachtree St							
Atlanta, GA 30309	Arts & Culture	Georgia	501(C)(3)	6	N/A		×
City of Atlanta - 58-6000511							
55 Trinity Ave							
Atlanta, GA 30303	Municipality	Georgia		9	N/A		×
Atlanta Contemporary Arts Center -							
58-1174492, 55 Means St, Atlanta, GA 30318	Arts & Culture	Georgia	501(C)(3)	2	N/A		×
Atlanta-Fulton Public Library Foundation -							
58-1837951, 1 Margaret Mitchell Square,	,						
Atlanta, GA 30303	Education	Georgia	501(C)(3)	11b, II	N/A		×
Atlanta History Center - 58-0566162							
130 W. Paces Ferry Rd.							
Atlanta, GA 30305	Museum	Georgia	501(C)(3)	7	N/A	-	×

(a)	(q)	(၁)	(p)	(e)	(£)	(g) Section 512(b)(13)) (2(b)(13)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlled	lled
of related organization		foreign country)	section	status (if section 501(c)(3))	entity	organization?	ation? No
Atlanta International Museum, Inc							
58-1829492, 285 Peachtree Center Ave.,							
Atlanta, GA 30303	Museum	Georgia	501(C)(3)	6	N/A		×
Atlanta International School - 58-1581116							
2890 North Fulton Drive							
Atlanta, GA 30305	Education	Georgia	501(C)(3)	2	N/A		×
Atlanta Landmarks, Inc 13-1240132							
Fox Theatre Building							
Atlanta, GA 30365	Theater	Georgia	501(C)(3)	7	N/A		×
Atlanta Legal Aid Society, Inc 58-0568691							
151 Spring Street							
Atlanta, GA 30303	Charity Legal Services	Georgia	501(C)(3)	7	N/A		×
Atlanta Speech School - 58-0566198							
3160 NorthBide Parkway, N.W.							
Atlanta, GA 30327	Education	Georgia	501(C)(3)	2	N/A		×
Bath County Community Hospital - 54-0505913			= -				
PO Box 774							
Hot Springs, VA 24445	Health Care	Virginia	501(C)(3)	3	N/A		×
Berry College - 58-0566133							
39 Mount Berry Station							
Rome, GA 30149	Higher Education	Georgia	501(C)(3)	2	N/A		×
Boy Scouts of America, Atlanta Area Council							
- 58-1681556, 1800 Circle 75 Parkway,	•						
Atlanta, GA 30339	Recreation	Georgia	501(C)(3)	7	N/A		×
Boys and Girls Clubs of America - 13-5562976							
1230 W. Peachtree St., N.W.							
Atlanta, GA 30309	Recreation	Georgia	501(C)(3)	9	N/A		×
Boys and Girls Clubs of Metro Atlanta -							
58-0566123, 100 Edgewood Avenue, N.E.,	T						
Atlanta, GA 30303	Recreation	Georgia	501(C)(3)	7	N/A		×
Boys' Home, Inc 54-0505870							
306 Boys' Home Road							
Covington, VA 24426	Child Welfare	Virginia	501(C)(3)	1	N/A		×
Brenau University - 58-0566143							
One Centennial Circle							;
Gainesville, GA 30501	Higher Education	Georgia	501(C)(3)	2	N/A		×

(a) Name address and FIN	(b) Primary activity	(c) legal domicile (state or	(d) Exempt Code	(e) Public charity	(f) Direct controlling	Section 5	(g) Section 512(b)(13)
of related organization	וווימוץ מכנוטון	foreign country)	section	status (if section	entity	controllod	controllod organization?
				501(c)(3))		Yes	No
Brewton-Parker College - 58-0619030							
Mount Vernon, GA 30445	Higher Education	Georgia	501(C)(3)	2	N/A		×
Bruton Parish Church Endowment Fund, Inc							
54-6036077, 102 Willoughby Drive,							
Williamsburg, VA 23185	Religion	Virginia	501(C)(3)	П	N/A		×
Center for Advanced Technology Solutions,							
Inc 58-1600482, 555 14th Street, Atlanta,							
GA 30318	Disability Assistance	Georgia	501(C)(3)	6	N/A		×
Center for the Visually Impaired -							
58-1168874, 739 West Peachtree Street,							
Atlanta, GA 30308	Disability Assistance	Georgia	501(C)(3)	7	N/A		×
Children's Healthcare of Atlanta -							
58-2367819, 1600 Tullie Cir., Atlanta, GA							
	Health Care	Georgia	501(C)(3)	8	N/A		×
Clark Atlanta University - 58-1825259							
240 Chestnut Street, S.W.							
Atlanta, GA 30314	Higher Education	Georgia	501(C)(3)	2	N/A		×
Coca-Cola Scholars Foundation, Inc							_
58-1686023, P.O. Box 442, Atlanta, GA 30301	Education	Georgia	501(C)(3)	7	N/A		×
Columbia Theological Seminary - 58-0566165							
701 Columbia Dr.							
Decatur, GA 30031	Higher Education	Georgia	501(C)(3)	2	N/A		×
The Community Foundation for Greater							
Atlanta, Inc 58-1344646, 50 Hurt Plaza,							
Suite 449, Atlanta, GA 30303	Charity Legal Services	Georgia	501(C)(3)	7	N/A		×
Council on Foundations - 13-6068327							
2121 Crystal Drive							
Arlington, VA 22202	Foundation Association	District of Columbia	501(C)(3)	6	N/A		×
The Darlington School - 58-0566169							
1014 Cave Spring Road			-				
Rome, GA 30161	Education	Georgia	501(C)(3)	2	N/A		×
Daughters of The American Revolution -							
Atlanta Chapter, 3305 Brownwood Drive,							
Snellville, GA 30078	Historical Society	Georgia	501(C)(3)	9	N/A		×

(a) Name address and EIN	(b)	(c)	(b)	(e) Bublic charty	(f) Direct control	(g) Section 512(b)(13)	/ 12(b)(13)
of related organization	י וווומן מכוועון	foreign country)	section	status (if section	entity	controlled organization?	ation?
				501(c)(3))		Yes	õ
Daughters of The American Revolution -							
54-6052460, 2064 Horne's Lake Road,							
Williamsburg, VA 23185	Historical Society	Virginia	501(C)(3)	6	N/A		×
Emory University - 58-0566256							
1440 Clifton Road, N.E.							
Atlanta, GA 30322	Higher Education	Georgia	501(C)(3)	7	N/A		×
Episcopal Diocese of Atlanta - 58-0572411							
2744 Peachtree Road							
Atlanta, GA 30363	Religion	Georgia	501(C)(3)	-	N/A		×
Episcopal Diocese of Georgia - 58-0566215							
2744 Peachtree Road							
Atlanta, GA 30363	Religion	Georgia	501(C)(3)	- CL	N/A		×
Episcopal Diocese of Southwestern Virginia -							
54-0506420, 1002 First Street, PO Box 2279,							
Roanoke, VA 24009	Religion	Virginia	501(C)(3)	<u>-</u>	N/A		×
Episcopal High School - 54-0506326							
1200 North Quaker Lane							
Alexandria, VA 22302	Education	Virginia	501(C)(3)	7	N/A		×
Fernbank, Inc 58-6028607							
767 Clifton Rd.							
Atlanta, GA 30307	Museum	Georgia	501(C)(3)	4	N/A		×
The Foundation Center - 13-1837418							
79 Fifth Avenue							
New York, NY 10003	Nonprofit Resources	New York	501(C)(3)	6	N/A		×
The Friends School of Atlanta - 58-1918318							
121 Sams Street							
Decatur, GA 30030	Education	Georgia	501(C)(3)	7	N/A		×
Fulton County Arts Council - 58-6001729							
141 Pryor Street, Suite 2030							
Atlanta, GA 30303	Arts & Culture	Georgia	501(C)(3)	9	N/A		×
The Galloway School - 58-1052217							
215 West Wieuca Road, N.W.							
Atlanta, GA 30342	Education	Georgia	501(C)(3)	- 73	N/A		×
Georgia Council for the Arts - 58-0973190							
260 14th Street, Suite 401							
Atlanta, GA 30318	Arts & Culture	Georgia	501(C)(3)	7	N/A		×

(2)	(4)	3	(7)	(6)	(4)	5	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	12(t)(13)
of related organization		foreign country)	section	status (if section	entity	organization?	ation?
				501(c)(3))		Yes	٩
Georgia Foundation for Independent Colleges							
- 58-0684740, 945 E. Paces Ferry Road, Suite							
1730, Atlanta, GA 30326	Education Association	Georgia	501(C)(3)		N/A		×
Georgia Military College - 58-0616992							
201 East Greene Street	1						
Milledgeville, GA 31061	Education	Georgia	501(C)(3)	2	N/A		×
Georgia Partnership for Excellence in							
Education - 58-1974586, 233 Peachtree				·			
Street, Suite 2000, Atlanta, GA 30303	Education Association	Georgia	501(C)(3)	4	N/A		×
Georgia Radio Reading Service, Inc							
58-1336856, 1580 Peachtree Street, Atlanta,						•	
GA 30309	Disability Assistance	Georgia	501(C)(3)	4	N/A	•	×
Georgia Shakespeare Festival, Inc							
58-1495460, 4484 Peachtree Road, N.E.,							
Atlanta, GA 30319	Arts & Culture	Georgia	501(C)(3)	4	N/A		×
State of Georgia							
no unique tax ID							
Atlanta, GA 30334	Government	Georgia		و	N/A		×
Georgia State University Foundation, Inc							
58-6033185, University Plaza, Atlanta, GA							
30303	Higher Education	Georgia	501(C)(3)	4	N/A		×
Georgia Tech Foundation, Inc 58-6043294							
Georgia Institute of Technology							
Atlanta, GA 30332	Higher Education	Georgia	501(C)(3)	ın.	N/A		×
Georgia Trust for Historic Preservation,							
Inc 23-7357226, 1516 Peachtree Street,	•						
Atlanta, GA 30309	Historic Preservation	Georgia	501(C)(3)	4	N/A		×
University of Georgia Foundation -							
20-2779492, 394 South Milledge Ave, Athens,							
	Higher Education	Georgia	501(C)(3)	io.	N/A		×
Georgia, University System Board of Regents							
- 58-6333106, 270 Washington Street,						_	
Atlanta, GA 30334	Higher Education	Georgia	501(C)(3)	11	N/A	•	×
Georgia Women of Achievement - 58-1949306						_	
PO Box 5851							
Marietta, GA 31107	Gender-based Association	Georgia	501(C)(3)	7	N/A		×
					t t		

(a)	(q)	(0)	(P)	(e)	€	<u>b</u>)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	[2(b)(13)
of related organization	`	foreign country)	section	status (if section	entity	organization?	ation?
				501(c)(3))		Yes	No
Girls Incorporated - 58-1276804							
1422 W. Peachtree St., Suite 616							
Atlanta, GA 30309	Gender-based Education	Georgia	501(C)(3)	4	N/A		×
Goodwill Industries of North Georgia, Inc							
58-0566173, 2201 Glenwood Avenue, Atlanta,							
GA 30316	Disability Assistance	Georgia	501(C)(3)	4	N/A		×
Grace Yorktown Hampton Church - 54-0681945							
111 Church Street							
Yorktown, VA 23690	Religion	Virginia	501(C)(3)	-	N/A		×
The Heritage School - 58-1077670							
2093 Highway 29 North							
Newnan, GA 30263	Education	Georgia	501(C)(3) -	- 72	N/A		×
Holy Innocents' Episcopal School -							
58-1120296, 805 Mt. Vernon Highway, N.W.,							
Atlanta, GA 30327	Education	Georgia	501(C)(3)	. 72	N/A		×
The Howard School - 58-0611768							
1246 Ponce de Leon Ave.							
Atlanta, GA 30306	Education	Georgia	501(C)(3)	2	N/A		×
Independent Sector - 52-1081024							
1200 Eighteenth St, Suite 200							
Washington, DC 20036	Nonprofit Association	District of Columbia	501(C)(3)	6	N/A		×
Interdenominational Theological Center -							
58-0814544, 700 Martin Luther King, Jr. Dr.,							
S.W., Atlanta, GA 30314	Higher Education	Georgia	501(C)(3)	2	N/A		×
Kenmore Association, Inc 54-0525507							
1201 Washington Avenue							
Fredericksburg, VA 22401	Historic Preservation	Virginia	501(C)(3)	6	N/A		×
LaGrange College - 58-0566199							
1014 Cave Spring Road							
Rome, GA 30161	Higher Education	Georgia	501(C)(3)	2	N/A		×
Literacy Action, Inc 58-1053728							
100 Edgewood Avenue N.E.							
Atlanta, GA 30303	Education	Georgia	501(C)(3)		N/A		×
The Lovett School - 58-0619038							
4075 Paces Ferry Rd., N.W.							
Atlanta, GA 30327	Education	Georgia	501(C)(3)	2	N/A		×

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization?	12(b)(13) siled atlon?
				501(c)(3))		Yes	No
Marietta/Cobb Museum of Art - 58-1528144							
30 Atlanta Street							
Marietta, GA 30060	Museum	Georgia	501(C)(3)	4	N/A		×
Marist School - 58-0566204							
3790 Ashford-Dunwoody Road, N.E.						•	
Atlanta, GA 30319	Education	Georgia	501(C)(3)	73	N/A		×
Mercer University - 58-0566167							
1400 Coleman Avenue							
Macon, GA 31207	Higher Education	Georgia	501(C)(3)	8	N/A		×
Metropolitan Atlanta Arts Fund - 58-1344646							
50 Hurt Plaza, Suite 449							
Atlanta, GA 30303	Arts & Culture	Georgia	501(C)(3)	7	N/A		×
Morehouse College - 58-0566205							
830 Westview Dr., S.W.							
Atlanta, GA 30314	Higher Education	Georgia	501(C)(3)	01.	N/A		×
Morehouse School of Medicine - 58-1438873							
720 Westview Drive	,						
Atlanta, GA 30310	Medical Education	Georgia	501(C)(3)	2	N/A		×
Morgan County Foundation, Inc 58-6067915							
434 S. Main Street							
Madison, GA 30650	Charity Legal Services	Georgia	501(C)(3)	6	N/A		×
Morris Brown College - 58-0607083							
643 Martin Luther King, Jr. Drive							
Atlanta, GA 30314	Higher Education	Georgia	501(C)(3)	2	N/A		×
The Museum of Arts and Sciences - 58-0806933							
4182 Forsyth Road							
Macon, GA 31210	Auseum	Georgia	501(C)(3)	7	N/A		×
The Museum of Aviation - 58-1451656							
PO Box 2469							
Warner Robins, GA 31099	Auseum	Georgia	501(C)(3)	4	N/A		×
National Black Arts Festival - 58-1736780							ļ
236 Forsyth Street Suite 400						_	
Atlanta, GA 30303	Arts & Culture	Georgia	501(C)(3)	7	N/A		×
The Nature Conservancy - 53-0242652							
Peach							
Atlanta, GA 30309	Conservation	Georgia	501(C)(3)	6	N/A		×

(a)	(q)	(c)	(p)	(e)	(£)	(g) Section 512(b)(13)	12(0)(13)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlled	offed
כן יסומים כן שם ואמים		roreign country)		501(c)(3))	A CHILLIA	Yes No	2
Oglethorpe University - 58-0568698							
4484 Peachtree Road, N.E.							
Atlanta, GA 30319	Higher Education	Georgia	501(C)(3)	7	N/A		×
Pace Academy - 58-0706812							
966 W. Paces Ferry Road							
Atlanta, GA 30327	Education	Georgia	501(C)(3)	7	N/A	-	×
The Paideia School - 23-7089522							
1509 Ponce de Leon Avenue, N.E.							
Atlanta, GA 30307	Education	Georgia	501(C)(3)	2	N/A		×
Paine College - 23-7434499							
1235 15th Street							
Augusta, GA 30901	Higher Education	Georgia	501(C)(3)	.02	N/A		×
Piedmont College - 58-0568698							
P. O. Box 10							
Demorest, GA 30535	Higher Education	Georgia	501(C)(3)	7	N/A		×
Protestant Episcopal Theological Seminary in							
Virginia - 54-0505937, 3737 Seminary Road,							
Alexandria, VA 22304	Higher Education	Virginia	501(C)(3)	2	N/A		×
Rabun Gap-Nacoochee School - 58-0593430							
339 Nacoochee Drive							
Rabun Gap, GA 30568	Education	Georgia	501(C)(3)	2	N/A		×
Recording for the Blind, Georgia Unit -							
58-0899523, 120 Florida Avenue, Athens, GA							
30605	Disability Assistance	Georgia	501(C)(3)	7	N/A		×
Reinhardt College - 58-0603153							
7300 Reinhardt College Circle							
Waleska, GA 30183	Higher Education	Georgia	501(C)(3)	72	N/A		×
St. James Episcopal Church - 54-0577302							
4515 Delray Street							
Roanoke, VA 24012	Religion	Virginia	501(C)(3)		N/A		×
St. Joseph's Mercy Foundation, Inc							
58-1448522, 5673 Peachtree Dunwoody Rd., Ste							
650, Atlanta, GA 30342	Indigent Health Care	Georgia	501(C)(3)	11b; II	N/A		×
St. Luke's Episcopal Church - 54-1789512							
PO box 779							
Hot Springs, VA 24445	Religion	Virginia	501(C)(3)	1	N/A		×

(a)	(a)	(0)	(p)	(e)	(£)	9	_
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13) controlled	12(t)(13) olled
of related organization		foreign country)	section	status (if section 501(c)(3))	entity	organization?	ation?
Senior Citizen Services - 58-0960309							
1705 Commerce Drive							
Atlanta, GA 30318	Elderly Care	Georgia	501(C)(3)	6	N/A		×
Servants for Relief of Incurable Cancer -							
58-0566234, 760 Pollard Boulevard, S.W.,							
Atlanta, GA 30315	Health Care	Georgia	501(C)(3)	3	N/A		×
Shepherd Center - 51-0141601							
2020 Peachtree Road, N.W.							
Atlanta, GA 30309	Health Care	Georgia	501(C)(3)	3	N/A		×
Shorter College - 58-2624570							
315 Shorter Avenue							
Rome, GA 30165	Higher Education	Georgia	501(C)(3)	2	N/A		×
Southeastern Council of Foundations, Inc							
56-0995114, 50 Hurt Plaza, Suite 350,			_				
Atlanta, GA 30303	Foundation Association	Georgia	501(C)(3)	4	N/A		×
Southern Association of Colleges and Schools							
- 58-0566240, 1866 Southern Lane, Decatur,							
GA 30033	Education Association	Georgia	501(C)(3)	6	N/A		×
Southern Center for International Studies -							
58-1285654, 320 W. Paces Ferry Road,							
Atlanta, GA 30305	International Policy	Georgia	501(C)(3)	2	N/A		×
Southern Education Foundation - 13-5562388							
135 Auburn Avenue							
Atlanta, GA 30303	Education Policy	Georgia	501(C)(3)	7	N/A		×
Southern Growth Policies Board - 23-7344523							
100 Capitola Drive Suite 100			-				
Durham, NC 27713	Economic Development	North Carolina	501(C)(3)	7	N/A		×
Southern Regional Education Board -							
58-0566141, 592 10th Street, Atlanta, GA							
30318	Education Policy	Georgia	501(C)(3)	S.	N/A		×
Spelman College - 58-0566243							
350 Spelman Lane, S.W.							
Atlanta, GA 30314	Higher Education	Georgia	501(C)(3)	2	N/A		×
Tallulah Falls School, Inc 58-0600867							
201 Campus Drive							ł
Clarksville, GA 30523	Education	Georgia	501(C)(3)	2	N/A		×

(a)	(q)	(c)	(p)	(e)	(J)	9	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section \$12(b)(13)	12(5)(13) olled
of related organization		foreign country)	section	status (if section 501(c)(3))	entity	organization?	ation?
Telfair Academy of Arts and Sciences Inc -				<i>X</i> -X		Les	2
	-						
	Museum	Georgia	501(C)(3)	o.	N/A		×
Trinity School - 58-1197585							
4301 Northside Parkway, N.W.							
Atlanta, GA 30327	Education	Georgia	501(C)(3)	2	N/A		×
United Negro College Fund - 13-1624241							
120 Wall Street #9	1						
New York, NY 10005	Education Access	New York	501(C)(3)	2	N/A		×
United Way of Metropolitan Atlanta, Inc							
58-0566194, 100 Edgewood Avenue N.E.,			_				
Atlanta, GA 30303	Charity Legal Services	Georgia	501(C)(3)	7	N/A		×
Virginia Historical Society - 54-0419452							
428 North Boulevard							
Richmond, VA 23220	Arts & Culture	Virginia	501(C)(3)	4	N/A		×
Virginia Museum of Fine Arts Foundation,							
Inc 54-6001804, 200 North Boulevard,		_					
Richmond, VA 23220	Museum	Virginia	501(C)(3)	4	N/A		×
The Walker School - 58-0940220							
700 Cobb Parkway North							
Marietta, GA 30062	Education	Georgia	501(C)(3)	7	N/A		×
Washington and Lee University - 54-0505977							
Washington and Lee University							
Lexington, VA 24450	Higher Education	Virginia	501(C)(3)	2	N/A		×
Wesley Homes, Inc 58-0909393							
1817 Clifton Rd., N.E.	1						
Atlanta, GA 30329	Elderly Care	Georgia	501(C)(3)	6	N/A		×
Wesleyan College - 58-0593438							
4760 Forsyth Road						_	
Macon, GA 31297	Higher Education	Georgia	501(C)(3)	. 81	N/A		×
Wesleyan School - 58-2147411							
5405 Spalding Dr.							
Norcross, GA 30092	Education	Georgia	501(C)(3)	2	N/A		×
The Westminster Schools - 58-0566206							
Paces		_					
Atlanta, GA 30327	Education	Georgia	501(C)(3)	2	N/A		×

Lettie Pate Evans Foundation, Inc.

Schedule R (Form 990)

(a)	(q)	(3)	(6)	وا	(4)	9	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	2(b)(13)
of related organization	`	foreign country)	section	status (if section	entity	controlled organization?	fion?
				501(c)(3))		Yes	₽
Westminster-Canterbury Foundation -							
52-1189655, 1600 Westbrook Avenue, Richmond,							
VA 23227	Elderly Care	Virginia	501(C)(3)	7	N/A		×
College of William and Mary - 54-0734117							
College of William and Mary							
Williamsburg, VA 23187	Higher Education	Virginia	501(C)(3)	N	N/A		×
Robert W. Woodruff Arts Center, Inc							
58-0633971, 1280 Peachtree St., Atlanta, GA						_	
30309	Arts & Culture	Georgia	501(C)(3)	4	N/A		×
Woodward Academy - 58-0625584							
1662 Rugby Ave.							
Atlanta, GA 30337	Education	Georgia	501(C)(3)	- 2	N/A		×
Young Harris College - 58-0593414							
P. O. Box 98							
Harris, GA 30582	Higher Education	Georgia	501(C)(3)	2	N/A		×
YMCA of Metropolitan Atlanta - 58-0566253							
100 Edgewood Avenue, Suite 902							
	Recreation	Georgia	501(C)(3)	<u> </u>	N/A		×
The State YMCA of Georgia - 58-0566244							
3015 Flowers Road South							
Atlanta, GA 30341	Recreation	Georgia	501(C)(3)	<u></u>	N/A		×
Zoo Atlanta - 58-1655184							
800 Cherokee Avenue	•						
Atlanta, GA 30315	Recreation	Georgia	501(C)(3)		N/A		×
	,						
						-	
				-			

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Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations? Yes No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	(j) (k) General or Percentage managing ownership
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ganizations Taxable a	s a Corpo	oration or Trust (Cor	mplete if the o	organizatio	n answered "Yes"	to Form 990, Par	t IV, line 34	because it had o	ne or m	ore related
(a) Name, address, and EIN of related organization	NII.		(b) Primary activity		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership
									:		
132162 01-23-12				47					Schedule	e R (For	Schedule R (Form 990) 2011

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Part V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	;		!	Yes 'No
T During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more r	elated organizations listed	in Parts II-IV?	×
Get area a constant contact the tendence of (a) representation a control of				×
				+
c Girt, grant, or capital contribution from related organization(s)				1
d Loans or loan guarantees to or for related organization(s)				T P
e Loans or loan guarantees by related organization(s)				1e X
f Sale of assets to related organization(s)				πX
g Purchase of assets from related organization(s)				1g X
				± X
i Lease of facilities, equipment, or other assets to related organization(s)				1i X
j Lease of facilities, equipment, or other assets from related organization(s)				dj.
k Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			1
Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			>
	ion(s)			+
n Snaring of paid employees with related organization(s)				4
 Reimbursement paid to related organization(s) for expenses 				₩ ×
				T dt
q Other transfer of cash or property to related organization(s)				Tq.
r Other transfer of cash or property from related organization(s)				1r X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete t	his line, including covered	relationships and transaction thresholds	
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	
(1)				
(2)				
(3)				
(4)				
(5)				
(9)				
(9)	N N		- podo	200 (000 mind) 0 (1:40-400)
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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

1	<u>е</u> с	1	l		ı	1		I			ì		1			J		ı		1		ı
3	Percentag ownership																					
9	neral or naging rtner?	Yes No																ightharpoonup				\Box
-	. 20 Ge	Ğ	_			_					_					-		\dashv		 ╀		\dashv
(e)	Ospropor- Code V-UBI General or Percentage tonate amount in box 20 managing ownership allocations? Of Schedule K-1 partner?	(Form 1065)																	 			
Ξ	Dispropor- tionate Hocations?	Yes No														_		+		┡		_
	Share of cond-of-year	assets												-								
	Share of total	ıncome																				
(e)	e partners sec 501(c)(3) orgs?	Yes No														-		 +		F		\dashv
(P)	Predominant income pa (related, unrelated, secluded from tax	under section 512-514)													-							
(c)	Legal domicile (state or foreign	country)																				
(q)	Primary activity																					
(a) (b) (c) (d)	Name, address, and EIN of entity								:													:

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