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OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

For	cale	endar year 2012, or tax year beginning 01-	-01-2012 , and	d end	ding 12-31-	2012	
		undation			A Employer id	entification numbe	er
TH	IE COHE	EN CHARITABLE FOUNDATION INC			58-1817525		
Num	her and	d street (or P O box number if mail is not delivered to street addres	ss) Room/suite		B Telephone nu	ımber (see ınstructior	s)
		THOUSE POINT NW	ss) Room, suite		(404) 256-2666	5	
		n, state, and ZIP code			C If exemption	application is pending	g, check here 🕨 🦵
SANI	DY SPRI	INGS, GA 30328					
G C	hecka	all that apply Initial return		rıty	2. Foreign o	rganizations, check he rganizations meeting re and attach comput	the 85% test, 🕍 🦳
		ype of organization	ate foundation			·	
Γ_{S}	ection	n 4947(a)(1) nonexempt charitable trust Other tax			<u> </u>		
		ket value of all assets at end J Accounting method	l Cash I Acc	rual		undation status was t n 507(b)(1)(A), chec	
		from Part II, col. (c), \$\\$ 145,101	_ st be on cash basis.)			ation is in a 60-month	
Pa	rt I	Analysis of Revenue and Expenses (The	<u> </u>		under sectio	n 507(b)(1)(B), chec	(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	1 (d)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	96,402				
	2	Check F if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	1		1	1	
	4	Dividends and interest from securities	. 1		1	1	
	5a	Gross rents					
	Ь	Net rental income or (loss)					
Reveilue	6a	Net gain or (loss) from sale of assets not on line 10	55,702				
	b	Gross sales price for all assets on line 6a 94,414					
φ	7	Capital gain net income (from Part IV, line 2)			55,702		
	8	Net short-term capital gain	1				
	9	Income modifications	·				
	10a	Gross sales less returns and allowances Less Cost of goods sold					
	b c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11			55,704	2	
	13	Compensation of officers, directors, trustees, etc	0		0	0	0
,n	14	Other employee salaries and wages					
Ř	15	Pension plans, employee benefits					
¥	16a	Legal fees (attach schedule)					
Expense	Ь	Accounting fees (attach schedule)	1,800		900	0	0
	C	Other professional fees (attach schedule)					
Admını strative	17	Interest					
¥.	18	Taxes (attach schedule) (see instructions)	% 414		0	0	0
Ē	19	Depreciation (attach schedule) and depletion					
Αd	20	Occupancy					
and	21	Travel, conferences, and meetings					
	22	Printing and publications					
Ĭ	23	Other expenses (attach schedule)	·				
Operating	24	Add lines 13 through 23	2,214		900	0	0
Ö	25	Contributions, gifts, grants paid			300	<u> </u>	58,367
	26	Total expenses and disbursements. Add lines 24 and 25	60,581		900	0	58,367
	27	Subtract line 26 from line 12					·
	a	Excess of revenue over expenses and disbursements	91,525				
	ь	Net investment income (If negative, enter -0-)			54,804		
	С	Adjusted net income (If negative, enter -0-)				2	

End of year

		should be for end-of-year amounts only (See instructions)		(a) Book Value	(b) B	ook Value	(c) Faır Market Value
	1	Cash—non-interest-bearing		3,294		24,380	24,380
	2	Savings and temporary cash investments					
	3	Accounts receivable					
		Less allowance for doubtful accounts 🕨					
	4	Pledges receivable 🕨					
		Less allowance for doubtful accounts -					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see page 15 of the					
		instructions)					
	7	Other notes and loans receivable (attach schedule)					
	_						
۰		Less allowance for doubtful accounts 🕨					
Ķ	8	Inventories for sale or use					
î	9	Prepaid expenses and deferred charges					
	10a	$Investments-U\ S\ and\ state\ government\ obligations\ (attach\ schedule)$					
	b	Investments—corporate stock (attach schedule)					
	c	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶					
		Less accumulated depreciation (attach schedule)					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment basis					
		Less accumulated depreciation (attach schedule)					
	15	Other assets (describe 🟲)	92	92,721	1 93	102,941	120,721
	16	Total assets (to be completed by all filers—see the					
		instructions Also, see page 1, item I)		96,015	;	127,321	145,101
	17	Accounts payable and accrued expenses					
	18	Grants payable					
'n	19	Deferred revenue	-				
9	20	Loans from officers, directors, trustees, and other disqualified persons					
5	21	Mortgages and other notes payable (attach schedule)					
3	22	Other liabilities (describe					
		Other habilities (describe F					
	23	Total liabilities (add lines 17 through 22)		0		0	
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
Λ Φ	24	Unrestricted					
		Temporarily restricted					
Balance	26	Permanently restricted					
		Foundations that do not follow SFAS 117, check here					
FUILL		and complete lines 27 through 31.					
<u>-</u>	27	Capital stock, trust principal, or current funds		0	,	0	
л Л	28	Paid-in or capital surplus, or land, bldg, and equipment fund		0		0	
ň	29	Retained earnings, accumulated income, endowment, or other funds		96,015	;	127,321	
î	30	Total net assets or fund balances (see page 17 of the		,			
į	50	Instructions)		96,015		127,321	
2	31	Total liabilities and net assets/fund balances (see page 17 of		,			
	31	the instructions)		96,015		127,321	
		the histractions)		50,013	1	127,521	
•а	rt II	Analysis of Changes in Net Assets or Fund Balances					
<u> </u>		Total net assets or fund balances at beginning of year—Part II, column	າ (a)	line 30 (must a	aree		
-		with end-of-year figure reported on prior year's return)		•	_	. 1	96,015
2		Enter amount from Part I, line 27a				2	91,525
3		Other increases not included in line 2 (itemize)			·	3	0
ı		Add lines 1, 2, and 3				. 4	187,540
5		Decreases not included in line 2 (itemize)			 •2	5	60,219
		Total net assets or fund balances at end of year (line 4 minus line 5)—				. 6	127,321

	00-PF (2012)		fa., Ta., a., Ta., a						Page 3
Part 1	Capital Gains a	na Losses	ror lax on inve	stment Inc		(b) How acquire	ا ا	I	
	(a) List and describe the 2-story brick warehou					P—Purchase D—Donation	(c) D	ate acquired , day, yr)	(d) Date sold (mo , day, yr)
1 a	REPORTED BY SMITH	IBARNEY				Р	20:	10-01-01	2012-02-22
b	REPORTED BY SMITH	IBARNEY				Р	20:	10-01-01	2012-03-28
С	REPORTED BY SMITH	IBARNEY				Р	20:	10-01-01	2012-04-09
d	REPORTED BY SMITH	IBARNEY				Р	20:	10-01-01	2012-05-08
e									
(e) Gross sales price	(f)	Depreciation allowe (or allowable)			or other basis ense of sale			or (loss)) mınus (g)
а	9	9,985				4,0	74		5,911
b	20	0,025				8,1	5 2		11,873
С	14	1,799				6,1	14		8,685
d	4 9	9,605				20,3	7 2		29,233
е						<u>_</u>			
	mplete only for assets sh	lowing gain in	column (h) and own	ed by the found	dation	on 12/31/69		Caune (Col	(h) gain minus
			(i) Adjusted basis			ess of col (i)			less than -0-) or
(i)	FM V as of 12/31/69		as of 12/31/69		-	l (j), ıf any		Losses (fr	
а									5,911
b									11,873
С									8,685
d									29,233
e									<u> </u>
2	Capital gain net income	e or (net capit	ral loss)	If gain, also e If (loss), ente		n Part I, line 7 n Part I, line 7	,		
-	Not short tarm canital	dain or (loss)	ا as defined in sectio			, , , , , , , , , , , , , , , , , , , ,	2		55,702
- 1	net Short-term cabitar								
3						tor 0	ı l		
<i>3</i>	If gain, also enter in Pa in Part I, line 8					ter -0 - • •	} 3		C
	If gain, also enter in Pa	art I, line 8, co	olumn (c) (see ınstru 	ictions) If(los	ss), ent		· I	come	C
Part '	If gain, also enter in Pa in Part I, line 8 .	art I, line 8, co	olumn (c) (see instru on 4940(e) for F	ictions) If (los	ss), ent • •	 Net Investm	ent In		C
Part S	If gain, also enter in Pa in Part I, line 8 . V Qualification Ur ional use by domestic pri	art I, line 8, co	olumn (c) (see instru • • • • • • • • • • • • • • • • • • •	ictions) If (los	ss), ent • •	 Net Investm	ent In		(
Part S	If gain, also enter in Pa in Part I, line 8 . V Qualification Ur	art I, line 8, co	olumn (c) (see instru • • • • • • • • • • • • • • • • • • •	ictions) If (los	ss), ent • •	 Net Investm	ent In		(
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Part For opt f section Was the f "Yes," 1 Ent	If gain, also enter in Pain Part I, line 8. V Qualification Ur Ional use by domestic pri Ion 4940(d)(2) applies, lead foundation liable for the refoundation does not the rethe appropriate amount (a) period years Calendar	nart I, line 8, conder Section Ivate foundation ave this part I section 4942 qualify under nt in each column	olumn (c) (see instru on 4940(e) for Forms subject to the second the distribute section 4940(e) Do	Reduced Taxection 4940(a)	x on the instance of the insta	Net Investment of the second o	ent In t income period?	any entries (d) Distribution	Γ Yes Γ No
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Part For opt f section Was the f "Yes," 1 Ent Base year (o	If gain, also enter in Pain Part I, line 8 . V Qualification Ur Ional use by domestic pri Ion 4940(d)(2) applies, lead Ional to foundation liable for the refoundation does not the foundation does not the foundation does not the appropriate amount (a) Ional years Calendar per tax year beginning in) 2011 2010 2009 2008 2007 Total of line 1, column A verage distribution rathe number of years the Enter the net value of reformation in the reformation of the second control o	art I, line 8, conder Section Ivate foundation section 4942 qualify under nt in each column Adjusted quality (d)	on 4940(e) for Forms subject to the solank tax on the distribut section 4940(e) Doumn for each year, s (b) Infying distributions 127,767 104,450 98,608 139,132 129,093 Vear base period—disas been in existence	able amount of o not complete ee page 18 of to Net value of not englished the total of englished the strain 5 of the strain 5	x on) tax o fany y this p the ins (c) oncharite	Net Investment of the last of	ent In t income period? e making	any entries (d) Distribution	Tratio (by col (c)) 7 554813 1 931541 0 939437 0 635225 0 322014 11 383030 2 276606 146,006
Part For opt f section Was the f "Yes," 1 Ent Base year (o	If gain, also enter in Pain Part I, line 8 . V Qualification Ur Ional use by domestic pri Ion 4940(d)(2) applies, lead Ional foundation liable for the result of the foundation does not the foundation does not the street of the appropriate amount (a) Ional years Calendar or tax year beginning in) 2011 2010 2009 2008 2007 Total of line 1, column A verage distribution rathe number of years the Enter the net value of resulting the street of the street o	art I, line 8, conder Section ave this part if section 4942 qualify under the in each column and in each column and in each column and in for the 5-ye foundation in the inconcharitable.	on 4940(e) for Forms subject to the solank tax on the distribut section 4940(e) Doumn for each year, s (b) Infying distributions 127,767 104,450 98,608 139,132 129,093 year base period—dias been in existence use assets for 201.	able amount of o not complete ee page 18 of to Net value of not englished the total of englished the strain 5 of the strain 5	x on) tax o fany y this p the ins (c) oncharite	Net Investment of the last of	ent In t income period? e making	any entries (d) Distribution	7 554813 1 931541 0 939437 0 635225
Part For opt f section Was the f "Yes," 1 Ent Base year (of 2 3 4 5	If gain, also enter in Pain Part I, line 8 V Qualification Ur Ional use by domestic pri Ion 4940 (d)(2) applies, lead foundation liable for the reference of the foundation does not the foundation does not the remaining that year beginning in) 2011 2010 2009 2008 2007 Total of line 1, column A verage distribution rathe number of years the Enter the net value of remaining the foundation of the remaining that is a second to the foundation of the foundatio	art I, line 8, conder Section ave this part if section 4942 qualify under the in each column and in each column and in each column and in for the 5-ye foundation in the inconcharitable.	on 4940(e) for Forms subject to the solank tax on the distribut section 4940(e) Doumn for each year, s (b) Infying distributions 127,767 104,450 98,608 139,132 129,093 year base period—dias been in existence use assets for 201.	able amount of o not complete ee page 18 of to Net value of not englished the total of englished the strain 5 of the strain 5	x on) tax o fany y this p the ins (c) oncharite	Net Investment of the last of	ent In t income period? making	any entries (d) Distribution	Tyes V No nratio by col (c)) 7 554813 1 931541 0 939437 0 635225 0 322014 11 383030 2 276606 146,006 332,398
Part For opt f section Was the f "Yes," 1 Ent Base year (of 2 3 4 5	If gain, also enter in Pain Part I, line 8 V Qualification Ur Ional use by domestic pri Ion 4940 (d)(2) applies, lead foundation liable for the reference of the foundation does not the foundation does not the remaining that year beginning in) 2011 2010 2009 2008 2007 Total of line 1, column A verage distribution rathe number of years the Enter the net value of remaining the foundation of the remaining that is a second to the foundation of the foundatio	art I, line 8, conder Section ave this part if section 4942 qualify under not in each column adjusted qualify under the foundation in each column adjusted qualify under the 5-ye foundation in each column and for the 5-ye foundation in each column and for the 5-ye foundation in each column and for the foundation in each column and foundation in each co	on 4940(e) for Forms subject to the second subject to the second subject to the second summ for each year, summ for each year base period—disas been in existence. The summ for each year,	able amount of o not complete ee page 18 of to Net value of not e if less than 5 of the complete expression and th	x on the ins (c) on charite	Net Investment of the last of	ent In t income period? making	any entries (d) Distribution	Tratio by col (c)) 7 554813 1 931541 0 939437 0 635225 0 322014 11 383030 2 276606 146,006

	990-PF (2012)					age 4
Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page	18 of th	e instr	uctio	ns)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here T and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see					
ь	instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check	1				1,096
_	here F and enter 1% of Part I, line 27b					
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0
3	Add lines 1 and 2	3				1,096
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5				1,096
6	Credits/Payments					
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a					
b	Exempt foreign organizations—tax withheld at source 6b					
С	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7				0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				10
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				1,106
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				<u> </u>
11	Enter the amount of line 10 to be Credited to 2013 estimated tax	11				
Pai	t VII-A Statements Regarding Activities	'				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did				Yes	No
	ıt partıcıpate or ıntervene ın any political campaign?			1a		No
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see pag	e 19 of				
	the instructions for definition)?			1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities.					
c	Did the foundation file Form 1120-POL for this year?		. L	1 c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation \blacktriangleright \$0 (2) On foundation managers \blacktriangleright \$0					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo	sed				
	on foundation managers 🕨 \$0					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? $$. $$.			2		No
	If "Yes," attach a detailed description of the activities.					
3	$Has the foundation \ made \ any \ changes, \ not \ previously \ reported \ to \ the \ IRS, in its \ governing \ instrument, \ and \ any \ changes \ and \ ch$	ticles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		↓	3		No
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		· [4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?		. [4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		No
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions	5				
	that conflict with the state law remain in the governing instrument?		• ↓	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		L	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	<u>GA</u>					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney					
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .		L	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j					
	or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XI	V) ⁷		_		<u>.</u> .
	If "Yes," complete Part XIV		· †	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and address	にち	L	10		No

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of FELLIOTT COHEN Telephone no	1256-	2666	
	Located at ►310 LIGHTHOUSE POINT NW SANDY SPRINGS GA ZIP+4 ►30328	, 230	2000	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		'	-
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over			
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign			
	country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	I		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
la	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes Vo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2012?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years 🕨 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine	3b		
4a	If the foundation had excess business holdings in 2012.)	4a		No
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			140
b	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		No
	charteaste parpose that had not been removed hom jeopardy before the first day of the tax year beginning in 2012.	טד ו	, !	.10

5a	During the year did the foundation	pay or incurany amoun	it to		_	•				
	(1) Carry on propaganda, or otherv	vise attempt to influenc	e leg	ıslatıon (section 49	45(e)) [?]	No			
	(2) Influence the outcome of any s	pecific public election (see (section 4955), or to	carı	ry				
	on, directly or indirectly, any ve		-			·	- No			
	(3) Provide a grant to an individua	-				☐ Yes ☐	No			
	(4) Provide a grant to an organizat				scrib					
	in section 509(a)(1), (2), or (3		•	· -			- No			
	(5) Provide for any purpose other t					, , , , , , , , , , , , , , , , , , , ,				
	educational purposes, or for the					Yes ▽	- No			
b	If any answer is "Yes" to 5a(1)-(5									
	Regulations section 53 4945 or in							5b		
	Organizations relying on a current	_	_			· _	_ ⊢		-+	
_	If the answer is "Yes" to question 5					,				
	tax because it maintained expendi			•		Γ v es Γ	- _{No}			
	If "Yes," attach the statement requir				•		""			
6a	Did the foundation, during the year				pror	nume on				
oa	a personal benefit contract?						No			
h	Did the foundation, during the year					, ,		6b		No
U		, pay premiums, unecu	y Oi i	nunectry, on a perso	Jilai i	benefit contract	•	OD	-+	140
7 _	If "Yes" to 6b, file Form 8870.	a tha faundation a naut				ransaction? TYes F	- Na			
	At any time during the tax year, wa							76		
	If yes, did the foundation receive a							7b		
Pa	Information About and Contractors	Officers, Directors	5, 11	rustees, rounda	ıuoı	i Managers, nigniy	Palu	Emp	loyee	5,
1	List all officers, directors, trustees,	foundation managers a	and t	heir compensation (see i	nstructions).				
		(b) Title, and average		c) Compensation		(d) Contributions to	(a) E	, nonc	e accou	unt.
	(a) Name and address	hours per week	(1	If not paid, enter		mployee benefit plans			wances	
		devoted to position	-	-0-)	and	deferred compensation				
ee	Additional Data Table									
2	Compensation of five highest-paid	employees (other than	thos	e included on line 1–	-see	instructions). If none, er	ter "N	ONE."		
, ,		(b) Title, and aver	age			(d) Contributions to				
(a)	Name and address of each employed paid more than \$50,000	hours per week	((c) Compensation	n	employee benefit plans and deferred		-	e accou owances	-
	p a. a	devoted to positi	on			compensation	• • •			
10 L	IE									
	I number of other employees hald ov					<u> </u>				
OT 2	or contribet of other employees hald over									()

Part VIII Information About Officers, Directors, True and Contractors (continued)	stees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional service	es	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include organizations and other beneficiaries served, conferences convened, research papers is		Expenses
1		
		1
		1
2		
		-
		-
3		
4		
]
		1
Part IX-B Summary of Program-Related Investment	s (see instructions)	
Describe the two largest program-related investments made by the foundation dur		Amount
1		
		1
2		-
All other program-related investments See page 24 of the instruct	ons	
3		
Total. Add lines 1 through 3		0

Page 8 lations,	eign found	rt X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	
		Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,	1
		purposes	
0	1a	A verage monthly fair market value of securities	а
27,508	1b	A verage of monthly cash balances	b
120,721	1c	Fair market value of all other assets (see instructions)	C
148,229	1d	Total (add lines 1a, b, and c)	d
		Reduction claimed for blockage or other factors reported on lines 1a and	e
		1c (attach detailed explanation)	
0	2	Acquisition indebtedness applicable to line 1 assets	2
148,229	3	Subtract line 2 from line 1d	3
		Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	1
2,223	4	ınstructions)	
146,006	5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5
7,300	6	Minimum investment return. Enter 5% of line 5	5
ations and	ting found	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera certain foreign organizations check here F and do not complete this part.)	Par
7,300	1	Mınımum ınvestment return from Part X, line 6	L
		Tax on investment income for 2012 from Part VI, line 5 2a 1,096	2a
		Income tax for 2012 (This does not include the tax from Part VI) 2b	b
1,096	2c	Add lines 2a and 2b	С
6,204	3	Distributable amount before adjustments Subtract line 2c from line 1	3
0	4	Recoveries of amounts treated as qualifying distributions	ı
6,204	5	Add lines 3 and 4	5
0	6	Deduction from distributable amount (see instructions)	5
		Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	,
6,204	7	line 1	

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	58,367
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	58,367
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	58,367
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	ner the	foundation qualifies for

P	art XIII Undistributed Income (see instr	uctions)			
		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1	Distributable amount for 2012 from Part XI, line 7				6,204
2	Undistributed income, if any, as of the end of 2012				
а	Enter amount for 2011 only			0	
b	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2012				
а	From 2007	3			
b	From 2008 128,247	<u>'</u>			
C	From 2009 93,616	5			
d	From 2010				
е	From 2011 127,749	<u>)</u>			
f	Total of lines 3a through e	580,607			
4	Qualifying distributions for 2012 from Part				
	XII, line 4 🕨 \$ 58,367				
	Applied to 2011, but not more than line 2a			0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
C	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2012 distributable amount				6,204
e	Remaining amount distributed out of corpus	52,163			
5	Excess distributions carryover applied to 2012	0			(
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	632,770			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
c	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		0		
	tax has been previously assessed				
	Subtract line 6c from line 6b Taxable amount —see instructions		0		
е	Undistributed income for 2011 Subtract line				
	4a from line 2a Taxable amount—see instructions			0	
f	Undistributed income for 2012 Subtract				
·	lines 4d and 5 from line 1 This amount must be distributed in 2013				C
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see	0			
_	instructions)				
8	Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	129,093			
٥	Excess distributions carryover to 2013.				
3	Subtract lines 7 and 8 from line 6a	503,677			
10	Analysis of line 9				
	Excess from 2008 128,247	1			
	Excess from 2009 93,616	5]			
	Excess from 2010 101,902]			
d	Excess from 2011 127,749				
е	Excess from 2012 52,163	3			

P	Part XIV Private Operating Fou	ndations (see ા	nstructions and F	Part VII-A, questi	on 9)	
1a	If the foundation has received a ruling or of foundation, and the ruling is effective for 2					
Ь	Check box to indicate whether the organiz	ation is a private o	perating foundation	n described in secti	on 4942(1)(3) (or — 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year	T	Prior 3 years		
	income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	investment return from Part X for each	(4) 2012	(5) 2011	(6) 2010	(4) 2003	
h	year listed					
	Qualifying distributions from Part XII,					
_	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
3	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed.					
С	"Support" alternative test—enter		1	1		
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income		1			
Рa	rt XV Supplementary Information	on (Complete t	this part only if	the organizati	on had \$5,000	or more in
	assets at any time during			ine organizati	on maa 40,000	oo. o
1	Information Regarding Foundation Manag					
а	List any managers of the foundation who h					ıdatıon
	before the close of any tax year (but only	if they have contrib	outed more than \$5	,000) (See section	507(a)(2))	
	See Additional Data Table					
b	List any managers of the foundation who o	wn 10% or more of	f the stock of a corr	oration (or an equa	lly large portion of t	he
_	ownership of a partnership or other entity)		· ·	•	my range percion or c	
2	Information Regarding Contribution, Gran					
	Check here 🕨 If the foundation only ma					
	unsolicited requests for funds If the found	- :	grants, etc (see in	nstructions) to indiv	iduals or organization	ons under
	other conditions, complete items 2a, b, c,	anu u				
а	The name, address, and telephone numbe	r or e-mail of the p	erson to whom app	lications should be	addressed	
	ELLIOTT OR JUDITH COHEN 310 LIGHTHOUSE POINT NW					
	SANDY SPRINGS, GA 30328					
	(404) 256-2666					
b	The form in which applications should be			•	ude	
	REQUESTS SHOULD BE SUBMITTED IN	WRITING TO TH	E ABOVE ADDRES	SS		
C	Any submission deadlines NO DEADLINES AT THIS TIME					
		augh as hir see.	unhand areas - t-	toble fields 1 4.	finatitutiana in il	or
đ	Any restrictions or limitations on awards, factors	such as by geogra	ipilicai areas, chari	table lields, Kinds o	i institutions, or oth	eı
	MUST BE A 501(C)(3) ORGANIZATION					

3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient -	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table	or substantial contributor			
				58,367
b Approved for future payment				
	1			

	-PF (2012)					Page 1 2
	/I-A Analysis of Income-Production ss amounts unless otherwise indicated		ISINESS INCOME	Excluded by section	512 513 or 514	(e)
	im service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See
a b c d e g Fees 2 Memb 3 Interes 4 Divide 5 Net re a Deb b Not 6 Net rer 7 Other 8 Gain of	s and contracts from government agencies pership dues and assessments		Amount	14 14 14	1 1 55,702	Instructions)
11 Other b c d e 12 Subto 13 Total. (See Part XV	tal Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). worksheet in line 13 instructions to verify Relationship of Activities to Explain below how each activity for wh	calculations)	plishment of I	Exempt Purpos		55,704
Line No.	the accomplishment of the foundation?	s exempt purpos	ses (other than by	providing funds for	such purposes) (See

Description accepts or selective capages any of the billowing with any other organization of the control of th	Part XVII	Information Re Noncharitable B					sactio	ns and	Relationships '	With			
a Transfers from the reporting foundation to a nonchantable exempt organization of (3) Sesh	1 Did the orga		-				ganızatıon	described ii	n section			Yes	No
(3) Other assets. 14(2) No 10 Other transactions (1) Sales of assets to a nonchantable exempt organization. (2) Purchase of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. 11(3) No (3) Rental of facilities, equipment, or other assets. 11(3) No (3) Rental of facilities, equipment, or other assets. 11(3) No (5) Loans or loan guarantees. 11(3) No (6) Performance of services or membership or fundraising solicitations. 11(5) No d If the answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation returned less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) The Code (other than section 501(c)(3)) or in section 527? . Yes No b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of triabtionship If yes, complete the following schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Proparer Prim's representative of Date Proparer's signature Primy Type preparer's name Preparer's signature Primy Self P 55-1963804 Preparer Primy Self P 55-1963804	501(c) of th	he Code (other than section 5	01(c)(3) oi	rganızatı	ons) or in se	ection 527, relatin	g to politica	al organizati	ions?				
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2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	ın any tra	nsaction or sharing arra	ngement,	, show	ın column	(d) the value	of the go	ods, othe	r assets, or service	es receive	:d		nte
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a) Line No	(b) Amount involved	(c) Name	OT HOTICI	iditable ex	empt organization	 (u)	Description	or transiers, transaction	5113, and 311a	ing and	rigerrier	11.5
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?													
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	2- I- H- f-	d - b d b											
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Print/Type preparer's name Preparer's Signature Date David A JOHNSON CPA Preparer Firm's name THOMAS JUDY & TUCKER P A 4700 FALLS OF NEUSE ROAD SUITE 400 Phone po (919) 571-7055	described	d in section 501(c) of the	Code (o		ian sectio	n 501(c)(3)) o	r ın sectı		-		.F _Y	es F	No
the best of my knowledge and belief, it is true, correct, and complete based on all information of which preparer has any knowledge ******* 2013-11-15 *******		(a) Name of organization			(1	b) Type of organi	zation		(c) Descript	tion of relation	onship		
the best of my knowledge and belief, it is true, correct, and complete based on all information of which preparer has any knowledge ******* 2013-11-15 *******													
the best of my knowledge and belief, it is true, correct, and complete based on all information of which preparer has any knowledge ******* 2013-11-15 *******													
the best of my knowledge and belief, it is true, correct, and complete based on all information of which preparer has any knowledge ******* 2013-11-15 *******													
the best of my knowledge and belief, it is true, correct, and complete based on all information of which preparer has any knowledge ******* 2013-11-15 *******													
Print/Type preparer's name	Sign bas	best of my knowledge ar ed on all information of w *****	ıd belıef, <i>ı</i> hıch pre _l	ıt ıs trı	ue, correc	t, and complet lowledge 2013-11-1	e Declar	*****	reparer (other than	n taxpayeı Maythe I	r or fidu RS discus	s this ret	IS urn
Paid DAVID A JOHNSON CPA DAVID A JOHNSON CPA Preparer Use Only THOMAS JUDY & TUCKER P A 4700 FALLS OF NEUSE ROAD SUITE 400 Check if self-employed ▶ P01301605 Firm's EIN ▶ 56-1965804		Drint/Type neg : :	5 m 5	D	roris Co	natura	Date			PTIN			
Preparer Use Only THOMAS JUDY & TUCKER P A 4700 FALLS OF NEUSE ROAD SUITE 400 Phono po. (919) 571-7055	Paid	DAVID A JOHNSON		DAVID A JOHNSON					P(013016	505		
Use Only 4700 FALLS OF NEUSE ROAD SUITE 400	Preparer		THOM			^KFR P Δ	l		Firm's EIN ► 56	-1965804	4		
Phono no. (919) 571-7055		sams				//			_				
Firm's address RALEIGH, NC 27609	Only		4700	FALLS	OF NEU	SE ROAD SUI	TE 400						
ı l		Fırm's address ▶	RALE	IGH, N	C 27609)			Phone no (919)	571-705	55		

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	(e) Expense account, other allowances	
	devoted to position	-0-)	and deferred compensation		
JUDITH COHEN	PRES/TREAS	0	0	0	
310 LIGHTHOUSE POINT NW SANDY SPRINGS, GA 30328	0 00				
ELLIOTT COHEN	VP/SECRETARY	0	0	0	
310 LIGHTHOUSE POINT NW SANDY SPRINGS, GA 30328	0 00				
JILL COHEN	ASSISTANT VP	0	0	0	
2612 ARLENE WAY ATLANTA,GA 30305	0 00				
MICHAEL M MERLIN	ASSISTANT VP	0	0	0	
3280 PEACHTREE RD NE STE 1900 ATLANTA,GA 30305	0 00				
MICHAEL E AXELROD	ASSISTANT VP	0	0	0	
7740 N SPALDING LAKE DRIVE ATLANTA,GA 30350	0 00				

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

JUDITH COHEN

ELLIOTT COHEN

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

			the real of Approved to	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year				
AARP FOUNDATION PO BOX 93207	NONE	PUBLIC	COMMUNITY SUPPORT	25
LONG BEACH, CA 90809				
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVENUE DALLAS,TX 75231	NONE	PUBLIC	MEDICAL	50
AMERICAN JEWISH COMMITTEE 165 E 56TH STREET NEW YORK,NY 10022	NONE	PUBLIC	COMMUNITY AWARENESS	150
AMERICAN JEWISH JOINT DISTRIBUTION COMMI 711 THIRD AVENUE NEW YORK,NY 10017	NONE	PUBLIC	COMMUNITY SUPPORT	5,000
ANTI DEFAMATION LEAGUE PO BOX 96226 WASHINGTON,DC 20090	NONE	PUBLIC	COMMUNITY SUPPORT	250
ATLANTA BOTANICAL GARDENS 1345 PIEDMONT AVENUE NE ATLANTA,GA 30309	NONE	PUBLIC	EDUCATIONAL	50
ATLANTA SYMPHONY ORCHESTRA 1280 PEACHTREE STREET NE SUITE 4074 ATLANTA,GA 30309	NONE	PUBLIC	COMMUNITY SUPPORT	150
BRANDON HALL SCHOOL 1701 BRANDON HALL DRIVE ATLANTA,GA 30350	NONE	PUBLIC	EDUCATIONAL	500
CONGREGATION OR HADASH 6751 ROSWELL ROAD ATLANTA,GA 30328	NONE	PUBLIC	RELIGIOUS	35,000
DESERT COMMUNITY FOUNDATION 75105 MERLE DRIVE PALM DESERT,CA 92211	NONE	PUBLIC	COMMUNITY AWARENESS	400
EISENHOWER MEDICAL CENTER 39000 BOB HOPE DRIVE RANCHO MIRAGE,CA 92270	NONE	PUBLIC	MEDICAL	1,000
EMORY UNIVERSITY 201 DOWMAN DRIVE ATLANTA,GA 30322	NONE	PUBLIC	EDUCATIONAL	100
HIGH MUSEUM OF ART 1280 PEACHTREE STREET NE ATLANTA,GA 30309	NONE	PUBLIC	CULTURAL PROMOTION	150
JEWISH FAMILY & CAREER SERVICES 4549 CHAMBLEE DUNWOODY ROAD ATLANTA,GA 30338	NONE	PUBLIC	COMMUNITY SUPPORT	250
JEWISH FEDERATION OF GREATER ATLANTA 1440 SPRING STREET NW ATLANTA,GA 30309	NONE	PUBLIC	COMMUNITY SUPPORT	13,950

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

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JEWISH FEDERATION OF PALM SPRINGS 69930 HWY 111 STE 204 RANCHO MIRAGE,CA 92270	NONE	PUBLIC	COMMUNITY SUPPORT	200
KVCR 701 S MT VERNON AVENUE SAN BERNARDINO,CA 92410	NONE	PUBLIC	COMMUNITY SUPPORT	75
NATIONAL MULTIPLE SCLEROSIS SOCIETY 1117 PERIMETER CENTER W STE E101 ATLANTA,GA 30338	NONE	PUBLIC	MEDICAL	150
PALM SPRINGS ART MUSEUM 101 MUSEUM DRIVE PALM SPRINGS,CA 92262	NONE	PUBLIC	CULTURAL PROMOTION	125
THE WILLIAM BREMAN JEWISH HOME 3150 HOWELL MILL RD NW ATLANTA,GA 30327	NONE	PUBLIC	COMMUNITY SUPPORT	72
WABCPBA 740 BISMARCK RD NE ATLANTA,GA 30324	NONE	PUBLIC	EDUCATIONAL	170
WEINSTEIN HOSPICE 3150 HOWELL MILL ROAD NW ATLANTA,GA 30327	NONE	PUBLIC	MEDICAL	100
CONGREGATION ETZ CHIAM 1190 INDIAN HILLS PARKWAY MARIETTA,GA 30068	NONE	PUBLIC	RELIGIOUS	300
HIAS 3337TH AVENUE 16TH FLOOR NEW YORK,NY 10001	NONE	PUBLIC	COMMUNITY SUPPORT	100
THE TOLERANCE EDUCATION CENTER 35147 LANDY LANE RANCHO MIRAGE,CA 92270	NONE	PUBLIC	COMMUNITY AWARENESS	50
Total				58,367

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Schedule B		Schedule of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		► Attach to Form 990, 990-EZ, or 990-P	PF.	2012
Name of the organization THE COHEN CHARITABLE FOL			Employer id	dentification number
			58-18175	25
Organization type (che	:ck one)			
Filers of:	Section:			
Form 990 or 990-EZ	5 01(c)() (enter number) organization		
	Г 4947(a)(1)	nonexempt charitable trust not treated as a p	orivate foundation	
	□ 527 politica	al organization		
Form 990-PF	▽ 501(c)(3) €	exempt private foundation		
	F 4947(a)(1)	nonexempt charitable trust treated as a privat	te foundation	
	5 01(c)(3) t	axable private foundation		
	on filing Form 990, 99 ny one contributor Co	0-EZ, or 990-PF that received, during the year omplete Parts I and II	·, \$5,000 or more (in money or	•
under sections 5 greater of (1) \$5 For a section 50° during the year, t	09(a)(1) and 170(b)(1,000 or (2) 2% of the 1(c)(7), (8), or (10) or otal contributions of r	ling Form 990 or 990-EZ that met the 33 ¹ /3% su 1)(A)(vi) and received from any one contribute amount on (i) Form 990, Part VIII, line 1h, or (ii) ganization filing Form 990 or 990-EZ that recei more than \$1,000 for use exclusively for religiouses, or the prevention of cruelty to children or	or, during the year, a contribut) Form 990-EZ, line 1 Completived from any one contributor, ous, charitable,	e Parts I and II
For a section 50° during the year, on not total to more the year for an eapplies to this org	contributions for use enthan \$1,000 lf this book in the second of the se	ganization filing Form 990 or 990-EZ that receivex clusively for religious, charitable, etc., purpox is checked, enter here the total contributions charitable, etc., purpose Do not complete any or received nonexclusively religious, charitable, etc.	oses, but these contributions of s that were received during of the parts unless the Gene i etc, contributions of \$5,000 o	did ral Rule
990-EZ, or 990-PF), but if	t must answer "No"	by the General Rule and/or the Special Rules d on Part IV, line 2 of its Form 990, or check the 0-PF, to certify that it does not meet the filing re	box on line H of its	

990-EZ, or 990-PF)

Name of organization
THE COHEN CHARITABLE FOUNDATION INC

Employer identification number

58-1817525

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ELLIOTT AND JUDITH COHEN 310 LIGHTHOUSE POINT NW SANDY SPRINGS, GA 30328	\$40	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ELLIOTT AND JUDITH COHEN 310 LIGHTHOUSE POINT NW SANDY SPRINGS, GA 30328	\$96,362	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization
THE COHEN CHARITABLE FOUNDATION INC

Employer identification number

58-1817525

Part II	Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	DONATED VARIOUS STOCKS	\$96,362	2012-05-08
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization	
THE COHEN CHARITABLE FOUNDATION INC	

Part III

Employer identification number

58-1817525

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) \$
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ =			
-	Towns for each control of the contro	(e) Transfer of gift	
-	Transferee's name, address, and	d ZIP 4 Relat	ionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ =			
-		(e) Transfer of gift	
_	Transferee's name, address, and	d ZIP 4 Relat	ionship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
-	Transferee's name, address, and	(e) Transfer of gift	ionship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
-		(a) Transfer of eith	
	Transferee's name, address, and	(e) Transfer of gift d ZIP 4 Relat	ionship of transferor to transferee
-			

TY 2012 Accounting Fees Schedule

Name: THE COHEN CHARITABLE FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,800	900	0	0

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TY 2012 Other Assets Schedule

Name: THE COHEN CHARITABLE FOUNDATION INC

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
METLIFE LIFE INSURANCE POLICY	92,721	102,941	120,721

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TY 2012 Other Decreases Schedule

Name: THE COHEN CHARITABLE FOUNDATION INC

Description	Amount
DECREASE IN CSV OF LIFE INSURANCE	2,570
FMV ADJUSTMENT ON SALE OF ASSETS	57,649

TY 2012 Taxes Schedule

Name: THE COHEN CHARITABLE FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAX	414	0	0	0