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## Form 990-PF

Department of the Treasury Internal Revenue Service

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

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

Fore	alen	dar year 2013 or tax year beginning		, and ending		
Nar	ne of	foundation			A Employer identification	number
_T	HE	MCCARTY FAMILY FOUNDAT	ION INC		20-4766769	)
		nd street (or P O box number if mail is not delivered to street	B Telephone number			
		5 AVALON RIDGE PARKWAY			770-447-43	332
_		own, state or province, country, and ZIP or foreign p CROSS, GA 30071	ostal code		C If exemption application is p	ending, check here
		CROSS, GA 30071 all that apply: Initial return	Initial return of a fo	rmer oublic charity	J D 1. Foreign organization:	c chack hara
u c	HEGK	Final return	Amended return	riner public charty	ib 1. Foreign organization	s, check liefe
		Address change	Name change		Foreign organizations me check here and attach or	beting the 85% test, brightness test, brightness test.
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
			Other taxable private founda	tion	under section 507(b)(1	
		rket value of all assets at end of year   J Account	-	Accrual	F If the foundation is in a	
(tr		Part II, col. (c), line 16) 0t 0t	her (specify) mn (d) must be on cash b	nasis )	under section 507(b)(1	)(B), check here
	rt I	203/3234		· · · · · · · · · · · · · · · · · · ·	(a) Adjusted not	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received  Check X If the foundation is not required to attach Sch B	100,000.		N/A	
	2	Interest on savings and temporary	1,404.	1,404.		STATEMENT 1
	4	cash investments  Dividends and interest from securities	483.	483.		STATEMENT 2
		Gross rents				
	Ь	Net rental income or (loss)				
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10	-6,359.	· · · · · · · · · · · · · · · · · · ·		
Revenue	Ь	Gross sales price for all assets on line 6a 130,086.		· •	<u> </u>	
Rev	7	Capital gain net income (from Part IV, line 2)		0.	<u>,                                    </u>	
	8	Net short-term capital gain Income modifications				
	10a	Gross sales less returns and allowances				
		Less Cost of goods sold				
	C	Gross profit or (loss)				
	11	Other income	-45.	0.		STATEMENT 3
	12	Total. Add lines 1 through 11	95,483. 0.	1,887. 0.		0.
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	0.	<u>U.</u>		0.
)	15	Pension plans, employee benefits		*		
ses	16a	Legal fees				
Expense	b	Accounting fees RECEVED				
Ä	C	Accounting fees RECEIVED Other professional fees				
ative	17 18	Interest Taxes  S  MAY 2 1 2014  Percentage and dealetters				
istra	19	Depreciation and depletion		<u>-</u>		
i i	20	A CONTRACTOR OF THE PARTY AND A CONT			· · · · · · · · · · · · · · · · · · ·	
Ad	21	Travel, conferences, and meetings				
and	22	Printing and publications	_			
ing	23	Other expenses STMT 4	45.	0.		0.
Operating and Administrative	24	Total operating and administrative expenses. Add lines 13 through 23	45.	0.		0.
o	25	Contributions, gifts, grants paid	45,500.			45,500.
	26	Total expenses and disbursements.	23,300.			=3,500.
	Ĺ	Add lines 24 and 25	45,545.	0.		45,500.
_	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	49,938.	1 000		
	i	Net investment income (if negative, enter -0-)  Adjusted net income (if negative, enter -0-)		1,887.	N/A	
	<u>ப ப்</u>	volasted tier tilentile (n nedative, euret -n-)	l		11/15	<u> </u>



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		nd(s) of property sold (e.g or common stock, 200 sh			(b) How ac P - Purcl D - Dona	quired ( hase ition (	c) Date a (mo., da		(d) Date sold (mo., day, yr.)
<u>a</u>									
SEE ATTACHE	D STA	PEMENT	<del></del>						
<u> </u>		_					,		
<u></u>	-								
e	<del></del>		<del>,</del>		1				
(e) Gross sales price	(f) I	Depreciation allowed (or allowable)		t or other basis xpense of sale				in or (loss) (f) minus (	
<u> </u>	<del></del> -	•	<del></del>						
<u> </u>							<u>.</u>		
<u> </u>		<del></del> · · · · · · · · · · · · · · · · ·			· <del></del>				
130,086	+			136,44	<u>-</u>				-6,359
Complete only for assets show		column (h) and owned by	the foundation		<del>3. </del>	///	Corpo (Co	ol (b) goin	
Complete only for assets show	7		ĭ					ol. (h) gain ot less thar	
(i) F.M.V. as of 12/31/69	'	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			Losses (	from col. (	h))
1			-						
	+								<u> </u>
<u>C</u>	-								
<u>d</u>	-								- 250
B	<u>. L</u>								<u>-6,359</u>
Capital gain net income or (net	capital loss	$ \begin{cases}     \text{If gain, also ente} \\     \text{If (loss), enter -C} \end{cases} $	r in Part I, line )- in Part I, line	7 7	} 2				-6,359
Net short-term capital gain or (	loss) as defi	ned in sections 1222(5) a	nd (6):						
If gain, also enter in Part I, line			• •		<b>}</b>				
If (loss), enter -0- in Part I, line		Section 4940(e) for			] 3			N/A	
as the foundation liable for the s "Yes," the foundation does not qu				•	ıod?				Yes X No
Enter the appropriate amount i	in each colu	mn for each year; see the	instructions be	fore making any ei	ntries.	-			
(a) Base period years	1	(b)			(c)		T		(d) ution ratio
Base period years Calendar year (or tax year begin	ומו מחוחי	Adjusted qualifying dis	stributions	Net value of no		use assets	1 (	Distrib col. (b) div	ution ratio ided by col. (c))
2012			11,500.		25	6,582			.16174
2011			1,000.			5,910			.16671
2010			2,400.			8,182			.24016
2009			14,800.			4,277			.19975
2008			0,471.			4,056			.34262
Total of line 1, column (d)							2		1.11099
Average distribution ratio for th	ne 5-vear ba	se period - divide the total	on line 2 by 5.	or by the number	of vears				
the foundation has been in exis	-	•					3		.22220
Enter the net value of nonchari	table-use as	sets for 2013 from Part X,	, line 5				4		203,421
Multiply line 4 by line 3							5		45,200
Enter 1% of net investment inc	ome (1% of	f Part I, line 27b)					6		19
Add lines 5 and 6							7		45,219
Enter qualifying distributions fr	rom Part XII	, line 4					8		45,500
If line 8 is equal to or greater th	han line 7 c	heck the box in Part VI. lin	e 1h and comr	olete that part usin	n a 1% tax	rate.			

	1990-PF (2013) THE MCCARTY FAMILY FOUNDATION INC		<u>-4766</u>			Page 4
	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ii	nstru	ctior	<u>15)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1	<u> </u>			<u> 19.</u>
	of Part I, line 27b		1			
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.
	Add lines 1 and 2	3	Ţ			<del>19.</del>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	İ			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				<del>19.</del>
	Credits/Payments;					
	2013 estimated tax payments and 2012 overpayment credited to 2013 6a					
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868)  6c	7	1			
	Backup withholding erroneously withheld  6d	1				
	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	<del>                                     </del>			
		9				19.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					<u> </u>
10	1	10				
	Enter the amount of line 10 to be: Credited to 2014 estimated tax Introduced	11	<u> </u>	<del></del>		
					Yes	No
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	ie in			165	
_	any political campaign?	٠.		1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition			16		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	nea or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			10		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0	<u>•</u>				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		_X_
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
t	If "Yes," has it filed a tax return on Form 990-T for this year?	1	A\N	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		_X_
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state in the state of the state	ite law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part >	(V		7	X	
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
-	GA .		<del></del>			ļ
ı	of 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			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	alendar			_==	<u> </u>
•	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x
10		STM	г 6	10	X	<del></del>
	The daily persons become substantial containations during the tax year: it res, attach a schedule listing their names and addresses	<u>~ +1'4 .</u>		m <b>99</b> 0		2013)

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Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	<u> </u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ CELIA MCCARTY  Telephone no. ▶ 770 – 4	47-4	332	
	Located at ▶4995 AVALON RIDGE PARKWAY SUITE 250, NORCROSS, GA ZIP+4 ▶3	0071	-57	12_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>&gt;</b>	· 🗀
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X_
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country			
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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		i	
	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	ı		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		<u> </u>
	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	ŀ		
	before the first day of the tax year beginning in 2013?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		1	
	defined in section 4942(j)(3) or 4942(j)(5));	İ		
8	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2013? Yes X No			
	If "Yes," list the years $\blacktriangleright$			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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.) N/A	2b	<u> </u>	
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	<b>)</b>	ļ		
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	l		
	during the year?		ļ	
t	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after		1	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2013.)  N/A	3b	<u> </u>	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		X
		Form <b>99</b>	U-PF	(2013)

10-10-13

orm 990-PF (2013) THE MCCARTY FAMILY FOUND	ATION INC		<u> 20-4/66/6</u>	9 Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4/20 May Be P	equired (continu	Jed)	<del></del>
5a During the year did the foundation pay or incur any amount to:		<del></del>		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ctly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		1 1
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A 5	ь
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned		
expenditure responsibility for the grant?		/A Ye	s No	
If "Yes," attach the statement required by Regulations section 53.494		,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay promiumo on	□ Ve	s X No	
<ul><li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a p</li></ul>	personal henefit contract?			b X
If "Yes" to 6b, file Form 8870.	isi sonai benem comi acti			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?		s X No	
		16		Ъ
b If 'Yes,' did the foundation receive any proceeds or have any net income attributed attributed by the foundation About Officers, Directors, Trust		nagere Highly		<u> </u>
Paid Employees, and Contractors	ees, roundation wa	nagers, mgm	7	
List all officers, directors, trustees, foundation managers and their	compensation.			
Elot dit officero, directoro, a detecto, realization managero and tree	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
DAVID W WOODDW	to position	enter -0-)	compensation	allowalices
DAVID M MCCARTY	CHAIRMAN, TRE	ASURER		
4995 AVALON RIDGE PARKWAY SUITE 250	1 00			0
NORCROSS, GA 30071	1.00	0.	0.	0.
CELIA MCCARTY	VICE CHAIRMAN	, SECRETA	KY	
4995 AVALON RIDGE PARKWAY SUITE 250	4 00			
NORCROSS, GA 30071	1.00	0.	0.	0.
	-			
	<u> </u>			
	<u> </u>			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(el) Contributance to	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of cash employee paid more man possess	devoted to position	(O) componential	compensation	allowances
NONE				
		}		
	1			
				<del> </del>
	1	1		
Total number of other employees paid over \$50,000		· · · · · · · · · · · · · · · · · · ·	<u> </u>	0
Total number of other empresses paid over woodood	· · · · · · · · · · · · · · · · · · ·		Form	990-PF (2013)
			1 01111	(2010)

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	IE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inf	ormation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, e	etc.	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0 . Form <b>990-PF</b> (2013)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	102,745.
	Average of monthly cash balances	1b	102,745. 103,774.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	206,519.
	Reduction claimed for blockage or other factors reported on lines 1a and		<u>,                                      </u>
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	206,519.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,098.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	203,421.
6	Minimum investment return. Enter 5% of line 5	6	10,171.
_	foreign organizations check here and do not complete this part.)  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here	id certain	
1	Minimum investment return from Part X, line 6	1	10,171.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	19.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,152.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10,152.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	10,152.
_	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	45,500.
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	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	45,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	19.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	45,481.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for t	he section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,	Со. рос	, , , , , , , , , , , , , , , , , , ,		
line 7				10,152.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008 77,326.				
b From 2009 33,652.				
c From 2010 41,854.				
d From 2011 36,337.				
e From 2012 28,699.				
f Total of lines 3a through e	217,868.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ► \$ 45,500.				
a Applied to 2012, but not more than line 2a			0.	
<b>b</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.			40 450
d Applied to 2013 distributable amount	25 240			10,152.
e Remaining amount distributed out of corpus	35,348.		<del></del>	
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	253,216.			
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) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	•			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008	77 30C			
not applied on line 5 or line 7	77,326.		<u> </u>	
9 Excess distributions carryover to 2014.	175 000			
Subtract lines 7 and 8 from line 6a	175,890.		-	
10 Analysis of line 9:				
a Excess from 2009 33,652.				
b Excess from 2010 41,854. c Excess from 2011 36,337.			1	
c Excess from 2011 36,337. d Excess from 2012 28,699.				
e Excess from 2013 35,348.				
6 E A COSS II O III 20 10   33,3 40 .	· · · · · · · · · · · · · · · · · · ·		1	Form <b>990-PF</b> (2013)

Part XIV Private Operating Fo	ARTY FAMILY				-4/00/09 Page II
	<del></del>			N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	·	=		] 4040(\\2) == [	7.4040(3/5)
b Check box to indicate whether the found		ng roundation described T	Prior 3 years	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
income from Part I or the minimum	(4) 2010	(0) 2012	(6) 2011	(4)2010	(0) 10(2)
investment return from Part X for					
each year listed			<del></del>		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed			<del> </del>	<del></del>	
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:		İ			
a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) <b>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)		ļ			
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income  Part XV Supplementary Info	rmetion (Comple	to this part only	(if the foundation	n had \$5 000 a	r more in accete
at any time during t			i tile loulidatio	11 11au \$5,000 0	111016 111 255615
1 Information Regarding Foundation					
a List any managers of the foundation wh	•	than 2% of the total co	ntributions received by th	ne foundation before t	he close of any tax
year (but only if they have contributed n					
SEE STATEMENT 7					
b List any managers of the foundation wh			n (or an equally large por	tion of the ownership	of a partnership or
other entity) of which the foundation ha	s a 10% or greater intere	SL.			
NONE 2 Information Regarding Contribut	ion Grant Ciff I	Sabalership etc.	Programo:		
2 Information Regarding Contribute Check here ► X if the foundation of				and accept unsolicite	d requests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	olications should be addr	ressed:	
, , ,					
b The form in which applications should b	pe submitted and informa	ation and materials they	should include:		
c Any submission deadlines:	<del></del>				
d Any restrictions or limitations on award	e cuch ac hy coography	nal areae inhanitahla fiold	e kinde of inclitutions of	r other factors	
u Any restrictions of miniations of award	o, sucii as ny geographii	ها ما حمی دانطا الطبات الخال	ə, ranus vi məmununə, 0	i onici iacivis.	

DISASTER ASSISTANCE AND LONG TERM REBUILDING OF AREAS HIT BY DISASTER. 5,000  ATLANTA HABITAT FOR HUMANITY S19 MEMORIAL DRIVE SE ATLANTA, GA 30312  MOTHERS 2 MOTHERS ATLANTA, GA 30312  MOTHERS 2 MOTHERS ATLANTA HOUSE BLUD SUITE 205 LOS ANGELES, CA 90046  MOTHERS 2 MOTHERS ATLANTA, GA 30333  MA  PRIVATE  MORKS WITH PREGNANT HIV POSITIVE WOMEN IN 9 APRICAN COUNTRIES (714 CLINICS) TO HELP PREVENT 5,000  MOTHER AT WORK MINISTRY PO BOX 133192  ATLANTA, GA 30333  MORLD WATER RELIEF BOARD AND APRIVATE  MORLD WATER RELIEF BOARD AND APRIVATE  PRIVATE  PRIVATE  PRIVATE  PRIVATE  PROVIDE CLEAN DRINKING WATER AND HYGIENE BOUGATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAIT. 15,500	Part XV Supplementary Informa	ation (continued)			
Show any relationship to show any relationship to show any relationship to substantial continuation of substantial	3 Grants and Contributions Paid During	the Year or Approved for Future	Payment		
NAME and address (home or business)  a Pard during the year  ALL HANDS VOLUNTEERS POON 546  CARLISLE, MA 0.741  ATLANTA HABITAT FOR HUMANITY 13 MEMORITAL DRIVE SE ATLANTA, GA 30312  N/A  PRIVATE  BUILDS INTEREST-FREE AFFORDABLE HOUSING FOR LOW ITEREST-FREE AFFORDABLE TO HOUSING FOR LOW ITEREST-FREE AFFORDABLE TO HOUSING FOR LOW ITEREST-FREE AFFORDABLE TO HOUSING FOR LOW ITEREST-FREE AFFORDABLE TO HOUSING FOR LOW ITEREST-FREE AFFORDABLE TO HOUSING FOR LOW ITEREST-FREE AFFORDABLE TO HOUSING	Recipient		Foundation	Purpose of grant or	
ALL NAMES VOLUNTEERS PO BOX 546 CARLISLE, MA 01741  AND LONG TERM RESULIDING OF AREAS HIT BY DISASTER.  5.000  ATLANTA HABITAT FOR HUMANITY \$19 MERGRIALD DRIVE SE AFFORDABLE MOUSING FOR LOW INCOME WORKING FAMILIES IN ATLANTA,  5.000  MOTHERS 2 MOTHERS ANGELES, CA 90046  N/A  PRIVATE  MORKS WITH PERGNANT HIP POSITIVE WOMEN IN 9 APRICAN COUNTRIES (714 CLINICS) TO RELP PREVENT  DE DOX 133192  ATLANTA, GA 30333  ATLANTA, GA 30333  WORLD MATER RELIEF  BASE SOMELL ROAD SUITE 455  MORKS WITH PERGNANT HIP POSITIVE WOMEN IN 9 APRICAN COUNTRIES (714 CLINICS) TO RELP PREVENT  FRUNTE  INSTALLS WATER PULIFICATION SYSTEMS IN THIRD WORLD COUNTRIES TO PROVIDE SAFE DESTRINING WATER SAFE OR STRINING WATER SAFE DESTRINING WATER AND HOUSENERS ATLANTA, GA 30350  MORKD MATER RELIEF  BASE SOMELL ROAD SUITE 455  ATLANTA, GA 30350  ***SEE CONTINUATION SHEET(S)  ***APPROVED FOR MUMB PRIVATE  NOONE  ***NOONE	Name and address (home or business)	any foundation manager	status of	contribution	Amount
DISASTER ASSISTANCE AND LONG TERM RESULLDING OF AREAS HIT BY DISASTER. 5,000  ATLANTA HABITAT FOR HUMANITY N/A PRIVATE SUILOS INTEREST-FREE AFFORDABLE HOUSING FOR LOW INCOME WORKING PAMILIES IN ATLANTA, GA 30312  MOTHERS 2 MOTHERS N/A PRIVATE WORKING PAMILIES IN ATLANTA, 5,000  MOTHERS 2 MOTHERS N/A PRIVATE WORKING PAMILIES IN ATLANTA, 5,000  MOTHERS 2 MOTHERS (714 CLINICS) TO MELP PREVENT FOR DOX 133192  MATER AT WORK MINISTRY N/A PRIVATE INSTALLS WATER PURIFICATION SYSTEMS IN THIRD WORLD COUNTRIES TO PROVIDE SAFE DRINKING WATER, 5,000  MOTHER 3343 ROSWELL ROAD SUITE 455  ATLANTA, GA 30350  MORELD WATER RELIEF SATLANTA, GA 30350  MORE SEE CONTINUATION SHEET(S)  DAY APPROVED FOR A SCHOOL IN THE DOKUNION REPUBLIC AND HAIT. 15,500  MORELD WATER RELIEF SATLANTA, GA 30350  MORELD WATER RELIEF SATLANTA, GA 30350  MORELD WATER RELIEF SATLANTA, GA 30350  MORE SEE CONTINUATION SHEET(S)  DAY APPROVED FOR A SCHOOL IN THE DOKUNION REPUBLIC AND HAIT. 15,500  MORELD WATER RELIEF SATLANTA GA 30350	a Paid during the year				
ARLISLE, MA 01741  REBUILDING OF AREAS MIT BY DISASTER,  5,000  ARLIANTA HABITAT FOR HUMANITY 513 MEMORIAL DEIVE SE ARLANTA, GA 30312  MOTHERS 2 MOTHERS 7441 W SUNSET BLVD SUITE 205 LOS ANGELES, CA 90046  MATER AT WORK MINISTRY FO BOX 133192  ARLIANTA, GA 30333  MOTHER STATEMARY FO BOX 133192  ARLIANTA, GA 30333  MORID MATER RELIEF 9341 ROSWELL ROAD SUITE 455 ARLANTA, GA 30350  MORID MATER RELIEF 1044  MATER AND HYDIENE MORE WITH PREVENT  5,000  MORID MATER RELIEF 9341 ROSWELL ROAD SUITE 455 ARLANTA, GA 30350  TOM  TOM  SEE CONTINUATION SHEET(S)  NONE	ALL HANDS VOLUNTEERS	N/A	PRIVATE	PROVIDES EMERGENCY	
REBUILDING OF AREAS ATLANTA HABITAT FOR HUMANITY  519 MEMORIAL DRIVE SE ATLANTA, GA 30312  N/A  PRIVATE  BUILDS INTEREST-FREE AFFORDABLE HOUSING FOR LOW INCOME WORKING PAMILIES IN ATLANTA,  5,000  MOTHERS 2 MOTHERS  N/A  PRIVATE  MORKS WITH PREGNANT HIV FOSITIVE WOMEN IN 9 AFRICAR COUNTRIES (714 CLINICS) TO HELP PREVENT  5,000  MATER AT WORK MINISTRY PO BOX 133192  ATLANTA, GA 30333  N/A  PRIVATE  N/A  PRIVATE  INSTALLS WATER PURIFICATION SYSTEMS IN THIRD WORLD COUNTRIES TO PROVIDE SAFE DRIWKING WATER, 5,000  MORALD WATER RELIEF B341 ROSWELL ROAD SUITE 455  ATLANTA, GA 30350  N/A  PRIVATE  RIVATE  ROUTE CLEAN DRINKING WATER AND HYDIRE EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI.  15,500  NOONE	PO BOX 546			DISASTER ASSISTANCE	
ATLANTA HABITAT FOR HUMANITY 519 MEMORIAL DRIVE SE ATLANTA, GA 30312  MOTHERS 2 NOTHERS 7441 W SUNSET BLUD SUITE 205 LOS ANGELES, CA 98046  MATER AT WORK MINISTRY PO BOX 131192  MATER AT WORK MINISTRY PO BOX 131192  MORID WATER RELIEF 9343 ROSWELL ROAD SUITE 455  ATLANTA, GA 30350  Total SEE CONTINUATION SHEET(S)  NONE  **REVISION HUMANITY**	CARLISLE, MA 01741			AND LONG TERM	
ATLANTA HABITAT FOR HUMANITY 519 MEMORIALD DRIVE SE ATLANTA, GA 30312  MOTHERS 2 MOTHERS  N/A  PRIVATE  MORKS WITH PREGNANT HIV POSITIVE WOMEN IN 9 APRICANC COUNTRIES (714 CLINICS) TO HELP PREVENT  5,000  MATER AT WORK MINISTRY PO BOX 133192  ATLANTA, GA 30333  MORID MATER RELIEF 8143 ROSWELL ROAD SUITE 455 ADJANCALE ROAD SUITE 455 ATLANTA, GA 30350  MORID MATER RELIEF STATEMARD HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOUGHLING MATER AND HYGIEME SHOULATION FOR A SCHOOL IN THE DOMINICAN REFUELIC AND HAIT, 15,500  NONE  NONE				REBUILDING OF AREAS	
APPORDABLE HOUSING FOR LOW INCOME WORKING FAMILIES IN ATLANTA, GA 30312  MOTHERS 2 MOTHERS  N/A  PRIVATE  MORKS WITH PREGNANT MIV POSITIVE WOMEN IN 9 APRICAN COUNTRIES (7/14 CLINIES) TO HELP PREVENT  S,000  MATER AT WORK MINISTRY N/A  PRIVATE  INSTALLS WATER PULBICATION SYSTEMS IN THIRD WORLD COUNTRIES TO PROVIDE BAFE DRINKING WATER, 5,000  MORID WATER RELIEF 8343 ROSWELL ROAD SUITE 455  ATLANTA, GA 30350  MORID WATER RELIEF STATEMARY AND HYGIENE EDUCATION FOR A SCIOOL IN THE DOMINICAN REPUBLIC AND HAITI  Total  SEE CONTINUATION SHEET(S)  Approved for future payment  NONE				HIT BY DISASTER.	5,000
APPORDABLE HOUSING FOR LOW INCOME WORKING FAMILIES IN ATLANTA, GA 30312  MOTHERS 2 MOTHERS  N/A  PRIVATE  MORKS WITH PREGNANT MIV POSITIVE WOMEN IN 9 APRICAN COUNTRIES (7/14 CLINIES) TO HELP PREVENT  S,000  MATER AT WORK MINISTRY N/A  PRIVATE  INSTALLS WATER PULBICATION SYSTEMS IN THIRD WORLD COUNTRIES TO PROVIDE BAFE DRINKING WATER, 5,000  MORID WATER RELIEF 8343 ROSWELL ROAD SUITE 455  ATLANTA, GA 30350  MORID WATER RELIEF STATEMARY AND HYGIENE EDUCATION FOR A SCIOOL IN THE DOMINICAN REPUBLIC AND HAITI  Total  SEE CONTINUATION SHEET(S)  Approved for future payment  NONE	ATLANTA WARTTAT FOR HIMANITY	N/A	PRIVATE	RIIILDS INTEREST-PREE	
ATLANTA, GA 30312  MOTHERS 2 MOTHERS  MOTHERS 2 MOTHERS  N/A PRIVATE MORKS WITH PREGNANT HIV POSITIVE WOMEN IN 9 AFRICAN COUNTRIES (714 CLINICS) TO HELP PREVENT 5,000  MATER AT WORK MINISTRY N/A PRIVATE INSTALLS WATER PURIFICATION SYSTEMS IN THIRD WORLD COUNTRIES (714 CLINICS) TO PROVIDE SAFE DRIWKING WATER, 5,000  WORLD WATER RELIEF 8343 ROSWELL ROAD SUITE 455  ATLANTA, GA 30350  N/A PRIVATE PROVIDE CLEAN DRINKING WATER, 5,000  MORED WATER RELIEF BY N/A PRIVATE PROVIDE CLEAN DRINKING WATER AND HYGIENE EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI, 15,500  Total SEE CONTINUATION SHEET(S)  Approved for future payment  NONE		B/A	KIVAIL	i	
MOTHERS 2 MOTHERS  N/A  MOTHERS 2 MOTHERS  N/A  PRIVATE  MORKS WITH PREGNANT HIV POSITIVE WOMEN IN 9 APRICAN COUNTRIES (714 CLINICS) TO HELP PREVENT  S,000  MATER AT WORK MINISTRY PO BOX 133192  ATLANTA, GA 30333  MORALD WATER RELIEF  3141 ROSWELL ROAD SUITE 455 ATLANTA, GA 30350  MORALD WATER AS DO SUITE 455 ATLANTA, GA 30350  MORALD WATER PRIVATE  PROVIDE CLEAN DRINKING ANTER AND HYGIENE SDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI.  15,500  NONE		i		l l	
HIV POSITIVE WOMEN IN 5 AFRICAN COUNTRIES (714 CLINICS) TO HELP PREVENT 5,000  WATER AT WORK MINISTRY N/A FRIVATE INSTALLS WATER PO BOX 133192 ATLANTA, GA 30333  WORLD WATER RELIEF N/A PRIVATE PROVIDE CLEAN DRINKING WATER AND HYGIEME EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  Total SEE CONTINUATION SHEET(S)  HIV POSITIVE WOMEN IN S AFRICAN COUNTRIES OF HELP SAFE DELEGATION SYSTEMS IN THE WATER AND HYGIEME EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  NOONE				}	5,000
HIV POSITIVE WOMEN IN 5 AFRICAN COUNTRIES (714 CLINICS) TO HELP PREVENT 5,000  WATER AT WORK MINISTRY N/A FRIVATE INSTALLS WATER PO BOX 133192 ATLANTA, GA 30333  WORLD WATER RELIEF N/A PRIVATE PROVIDE CLEAN DRINKING WATER AND HYGIEME EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  Total SEE CONTINUATION SHEET(S)  HIV POSITIVE WOMEN IN S AFRICAN COUNTRIES OF HELP SAFE DELEGATION SYSTEMS IN THE WATER AND HYGIEME EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  NOONE	MOMUEDS 2 MOMUEDS	NT / B	DDTWAMP	MODES MIND DESCRIPM	
LOS ANGELES, CA 90046    Description of the provided continues of the		N/A	PRIVATE		
WATER AT WORK MINISTRY PO BOX 133192 ATLANTA, GA 30333  WORLD WATER RELIEF 8343 ROSWELL ROAD SUITE 455 ATLANTA, GA 30350  WORLD WATER AND HYGIENE BULGATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI.  15,500  NONE  1714 CLINICS) TO HELP PREVENT 5,000  PRIVATE INSTALLS WATER PURIFICATION SYSTEMS IN THE DWINTING WATER, 5,000  PRIVATE PROVIDE CLEAN DRINKING WATER AND HYGIENE BULGATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  NONE					
PREVENT 5,000  WATER AT WORK MINISTRY PO BOX 133192 ATLANTA, GA 30333  WORLD WATER RELIEF 8343 ROSWELL ROAD SUITE 455 ATLANTA, GA 30350  Total SEE CONTINUATION SHEET(S)  NONE  PRIVATE INSTALLS WATER PURIFICATION SYSTEMS IN THIRD WORLD COUNTRIES TO PROVIDE SAFE DRINKING WATER.  5,000  WATER ARD HYGIENE EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  NONE	DOS ANGELES, CA 90040			1	
water at work ministry po Box 133192 atlanta, Ga 30333  world water relief 8343 ROSWELL ROAD SUITE 455 atlanta, Ga 30350  Total SEE CONTINUATION SHEET(S)  N/A  PRIVATE  INSTALLS WATER PURIFICATION SYSTEMS IN THIRD WORLD COUNTRIES TO PROVIDE SAFE DRINKING WATER 5,000  WATER ARD HYGIENE EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI 15,500  Approved for future payment  NONE				1	5 000
PO BOX 133192  ATLANTA, GA 30333  ATLANTA, GA 30333  BOUNTRIES TO PROVIDE SAFE DRINKING WATER, 5,000  WORLD WATER RELIEP B343 ROSWELL ROAD SUITE 455  ATLANTA, GA 30350  Total SEE CONTINUATION SHEET(S)  NONE  PROVIDE CLEAN DRINKING WATER AND HYGIEME EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  NONE					
ATLANTA, GA 30333  IN THIRD WORLD COUNTRIES TO PROVIDE SAFE DRINKING WATER,  5,000  WORLD WATER RELIEF N/A  PRIVATE PROVIDE CLEAN DRINKING WATER AND HYGIENE EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI,  15,500  Approved for future payment  NONE	WATER AT WORK MINISTRY	N/A	PRIVATE	INSTALLS WATER	
COUNTRIES TO PROVIDE SAFE DRINKING WATER. 5,000  WORLD WATER RELIEF 8343 ROSWELL ROAD SUITE 455 ATLANTA, GA 30350  Total SEE CONTINUATION SHEET(S)  Approved for future payment  NONE	PO BOX 133192			PURIFICATION SYSTEMS	
WORLD WATER RELIEF 8343 ROSWELL ROAD SUITE 455 ATLANTA, GA 30350  Total SEE CONTINUATION SHEET(S)  NONE  SAFE DRINKING WATER, 5,000  PRIVATE PROVIDE CLEAN DRINKING WATER AND HYGIENE SDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI, 15,500  NONE	ATLANTA, GA 30333			IN THIRD WORLD	
WORLD WATER RELIEF 8343 ROSWELL ROAD SUITE 455 ATLANTA, GA 30350  Total SEE CONTINUATION SHEET(S)  NONE  PROVIDE CLEAN DRINKING WATER AND HYGIENE EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  Approved for future payment  NONE				COUNTRIES TO PROVIDE	
### AND HYGIENE EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  Total SEE CONTINUATION SHEET(S)  Approved for future payment  NONE				SAFE DRINKING WATER.	5,000
EDUCATION FOR A SCHOOL IN THE DOMINICAN REPUBLIC AND HAITI. 15,500  Total SEE CONTINUATION SHEET(S) ▶ 3a 45,500  NONE  NONE	WORLD WATER RELIEF	N/A	PRIVATE	PROVIDE CLEAN DRINKING	
Total SEE CONTINUATION SHEET(S) ▶ 3a 45,500  NONE  NONE	8343 ROSWELL ROAD SUITE 455			WATER AND HYGIENE	
Total SEE CONTINUATION SHEET(S) ▶ 3a 45,500  b Approved for future payment  NONE	ATLANTA, GA 30350			EDUCATION FOR A SCHOOL	
Total SEE CONTINUATION SHEET(S) 3a 45,500  b Approved for future payment  NONE				IN THE DOMINICAN	
NONE NONE					15,500
NONE		CONTINUATION SHE	ET(S)	▶ 3a	45,500
	6 Approved for future payment				
Total	NONE				
Total					
Total				ļ.	-
Total					
Total					
Total					
Total			· ·		
Total					
Total					
	Total			<b>N</b> 01	

Part XVI-A	Analysis of	Income-Producing	<b>Activities</b>

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b	_		<u> </u>		
c	_		<b> </b>		
d	-		<b> </b>		
e	_				
f	-		<b> </b>		
g Fees and contracts from government agencies			<del>                                     </del>		
2 Membership dues and assessments			-		<del></del>
3 Interest on savings and temporary cash				1 404	
investments	<b> </b>		14	1,404.	
4 Dividends and interest from securities	ļ		14	483.	
5 Net rental income or (loss) from real estate:			$\vdash$		
a Debt-financed property			<del>                                     </del>		
b Not debt-financed property	-				
6 Net rental income or (loss) from personal					
property			<del></del>		·
7 Other investment income			<del>     </del>		
8 Gain or (loss) from sales of assets other			18	-6,359.	
than inventory  9 Net income or (loss) from special events			10	0,337.	<u> </u>
10 Gross profit or (loss) from sales of inventory			<del>                                     </del>		
11 Other revenue:	<del>                                     </del>		<del>  -</del>		
a US OIL FUND K-1	211110	-45.	14		
b				· · · · · · · · · · · · · · · · · · ·	<del></del>
c	1 1	=			_
d	1 )				_
e	-				_
12 Subtotal. Add columns (b), (d), and (e)		-45.	İ'' İ	-4,472.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	cempt	Purposes	
					-1-6
Line No. Explain below how each activity for which in the foundation's exempt purposes (other that			contribi	ited importantly to the accom	plishment of
the foundation's exempt purposes (other tha	in by providing full	us for such purposes).			
			<del></del>	<del></del>	
					<del></del>
					<del></del>
			•		
			<del></del> -	<del>"</del>	
		<del></del>			<del></del>
	<del> </del>			· · -·	
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323821 10-10-13					Form <b>990-PF</b> (2013)

Form 990-PF (2013) THE MCCARTY FAMILY FOUNDATION INC 20-4766769 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) X (2) Other assets X 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c 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. If the foundation received 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. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A2a 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? Yes X No b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge ; of perjury, I declare that I have examined this return, including accompany to based on all information of which preparer has any knowledge true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

VICE CHAIRMAN, Sign return with the prepare Here SECRETARY X Yes Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Check | If Date self- employed Paid PAT BIGGERS P00172436 Preparer Firm's name ► HLB GROSS COLLINS, Firm's EIN ► 58-1367012 **Use Only** 

Form **990-PF** (2013)

Phone no. 770-433-1711

Firm's address ► 3330 CUMBERLAND BOULEVARD, # 900

ATLANTA, GA 30339

Vapital dallis allu Lui	9969 IOL LEY ON HIACORNICH MICONIC				
(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.				(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
			D - Donation		
MORGAN STANLEY INVESTMENTS			P		04/13/13
	MORGAN STANLEY PASS-THROUGH ENTITIES US OIL FUND K-1 1256 CONTRACTS				04/13/13
d US OIL FUND K-					12/31/13 12/31/13
e POWERSHARES K-		P P		$\frac{12/31/13}{12/31/13}$	
	OWERSHARES K-1 1256 CONTRACTS OWERSHARES K-1 1256 CONTRACTS				$\frac{12/31/13}{12/31/13}$
	1 1230 CONTRACTS	<del></del>	P		12/31/13
<u>9</u> h					
<u>-''</u>	<del></del>				
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0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h (e) p	) Gain or (loss) plus (f) minus (g)	
a 75,179.		72,741.		· · · · · · · · · · · · · · · · · · ·	2,438.
b 53,676.	,	63,677.			-10,001.
c 492.		•			492.
d 739.					739.
e		11.			-11.
f		16.		<u></u>	-16.
0					
h					
ı			<del> </del>		
<u> </u>				· · ·	
k					
<u> </u>				·	
m n					
0					*
	ng gain in column (h) and owned by	the foundation on 12/31/69	(I) Los	sses (from col. (h))	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) F.M.V. as of 12/31/69  (j) Adjusted basis as of 12/31/69  (k) Excess of col. (i) over col. (j), if any		Gains (excess of col. (h) gain over col. (k), but not less than "-0-")			
a			<del></del>	• •	2,438.
b					-10,001.
С					492.
d			·		739.
e					-11.
f	<u> </u>				-16.
9					
h			<del> </del>		<del></del>
I					<del></del>
J					
<u>k</u>					<del></del>
<u></u>					
m n				-	<del></del>
n o				<del></del>	<del></del>
•	<u> </u>				
2 Capital gain net income or (net ca	apital loss) {   If gain, also enter   If (loss), enter "-(	r in Part I, line 7	2		-6,359.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) ar				
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8	column (c). 8	<b>P</b>		NT / N	
ii (1033), GIRGI "O" III FAILI, IIIIE (	<u> </u>		3	N/A	

20-4766769

THE MCCARTY FAMILY FOUNDATION INC

3 Grants and Contributions Paid During the				<del></del> -
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
		recipient	NON DENOMINATIONAL	
YOUNG LIFE PO BOX 520	N/A	PRIVATE	A NON-DENOMINATIONAL CHRISTIAN MINISTRY	
			THAT WORKS WITH	
COLORADO SPRINGS, CO 80901	SPRINGS, CO 80901  P OF CHRISTIAN ATHLETES N/A PRIVATE		1	
			HIGH-SCHOOL KIDS - NURTURING THEM,	5,000
			NORTORING THEM,	3,000,
PELLOWCUTD OF CUPICALIN NAME EARS	N/A	DRIVATE	PROVIDE SUPPORT TO THE	
8701 LEEDS ROADS	W/A	RIVALD	CHAPLAINCY PROGRAM AT	
			GEORGIA INSTITUTE OF	
RANSAS CITI, MO 04129			TECHNOLOGY	5,000,
			and monday.	3,000
Total from continuation sheets	<u> </u>	<del></del>	*	10 000

D-+10/1	THE MCCARTY	FAMILY	FOUNDATION	INC	20-4766769
Part XV Supplementary I					
3a Grants and Contributions Paid	During the Year Continu	uation of Purp	ose of Grant or Cont	ribution	
NAME OF RECIPIENT -	- ALL HANDS V	OLUNTEE	RS		
PROVIDES EMERGENCY	DISASTER ASS	ISTANCE	AND LONG T	ERM REBUI	LDING OF
AREAS HIT BY DISAST	rer. Specific	ALLY FO	R PHILIPPIN	E TYPHOON	RELIEF IN
2013.				<u> </u>	
NAME OF RECIPIENT	- MOTHERS 2 M	OTHERS			
WORKS WITH PREGNAN	r HIV POSITIV	E WOMEN	in 9 AFRIC	AN COUNTE	RIES (714
CLINICS) TO HELP PI	REVENT MOTHER	-TO-CHI	LD TRANSMIS	SION OF H	IIV.
NAME OF RECIPIENT	- YOUNG LIFE				
		MINICOD	V MUNM WORK	C WITHU UI	CH-SCHOOT
A NON-DENOMINATION					
KIDS - NURTURING TI	HEM, MONITORI	NG THEM	, HELPING T	HEM IN TH	EIR FAITH
JOURNEY.					
		_			
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FORM 990-PF INTERE	ST ON SAVINGS	AND TEMPOR	ARY CASH	INVESTMENTS	STATEMENT 1	
SOURCE  BB&T  MORGAN STANLEY  PASS THROUGH ENTITIES  TOTAL TO PART I, LINE 3		(A) REVENUE NET PER BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
		1,3	23. 77. 4.	23. 1,377. 4.		
		1,4	04.	1,404.		
FORM 990-PF	DIVIDENDS A	ND INTEREST	FROM SEC	JRITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS		NET INVES	(C) T- ADJUSTED ME NET INCOME	
MORGAN STANLEY 075896 PASS THROUGH	482.	0.	482			
TO PART I, LINE 4		0.	48:		1. 3.	
FORM 990-PF		OTHER INCC	ME		STATEMENT 3	
DESCRIPTION			(A) VENUE BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
US OIL FUND K-1			-45.	0		
TOTAL TO FORM 990-P	F, PART I, LI	NE 11	-45.	0		

FORM 990-PF	OTHER EXPENSES			STATEMENT	
DESCRIPTION		(B) NET INVEST- MENT INCOME	- ADJUSTEI	CHARITA	
BANK SERVICE CHARGES	7.	(	).		0.
OTHER DEDUCTIONS FROM PASSTHROUGH	38.	(	).		0.
TO FORM 990-PF, PG 1, LN 23	45.	(	).		0.
FORM 990-PF OTHER INVESTMENTS				STATEMENT	5
DESCRIPTION		LUATION ETHOD E	BOOK VALUE	FAIR MARKE VALUE	T
INVESTMENTS - SECURITIES INVESTMENTS - PASS THROUGH EN		COST	90,174.	94,1	33.
TOTAL TO FORM 990-PF, PART II	, LINE 13	<del></del>	90,174.	94,1	33.
	F SUBSTANTIA PART VII-A,	L CONTRIBUTO	DRS	STATEMENT	6
NAME OF CONTRIBUTOR	ADDR	ESS			
DAVID M MCCARTY		AVALON RIDO	SE PKWY SUITE )71	250	
FORM 990-PF	PART XV - L OF FOUNDATI			STATEMENT	7

NAME OF MANAGER

DAVID M MCCARTY CELIA MCCARTY