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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.

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052

2019

Open to Public Inspection

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation
GEORGIA HEALTH FOUNDATION INC

Number and street (or P.O. box number if mail is not delivered to street address)
4401 NORTHSIDE PARKWAY NO 950

City or town, state or province, country, and ZIP or foreign postal code
ATLANTA, GA 30327

G Check all that apply:

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☒ Address change

☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$** 11,073,876

J Accounting method:

☐ Cash

☒ Accrual

☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

A Employer identification number
58-1352076

B Telephone number (see instructions)
(404) 658-9066

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here..... ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ... ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I

Analysis of Revenue and Expenses (The 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	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check ☒ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	28,592	28,592		
	4 Dividends and interest from securities	126,804	126,804		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	29,103			
	b Gross sales price for all assets on line 6a 1,163,683				
	7 Capital gain net income (from Part IV, line 2)		29,103		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	184,499	184,499	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	28,350	3,150	0	16,200
	14 Other employee salaries and wages	18,400	0	0	11,040
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	7,380	820	0	4,217
	c Other professional fees (attach schedule)	68,365	40,365	0	28,000
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	5,690	2,946	0	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	11,878	0	0	11,878
	22 Printing and publications	460	0	0	460
	23 Other expenses (attach schedule)	2,187	0	0	2,187
	24 Total operating and administrative expenses. Add lines 13 through 23	142,710	47,281	0	73,982
	25 Contributions, gifts, grants paid	441,000			441,000
	26 Total expenses and disbursements. Add lines 24 and 25	583,710	47,281	0	514,982
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-399,211			
	b Net investment income (if negative, enter -0-)		137,218		
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

Form 990-PF (2019)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	42,392	40,795	40,795
	2 Savings and temporary cash investments	84,742	111,433	111,433
	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 instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	7,108,213 	7,484,745	7,484,745
	c Investments—corporate bonds (attach schedule)	38,463 	40,575	40,575
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	2,357,516 	3,356,578	3,356,578
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	 2,153 	39,750 	39,750	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	9,633,479	11,073,876	11,073,876	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ☒ and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	9,633,479	11,073,876	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ☐ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions)	9,633,479	11,073,876	
30 Total liabilities and net assets/fund balances (see instructions) .	9,633,479	11,073,876		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	9,633,479
2 Enter amount from Part I, line 27a	2	-399,211
3 Other increases not included in line 2 (itemize) ▶ _____ 	3	1,873,783
4 Add lines 1, 2, and 3	4	11,108,051
5 Decreases not included in line 2 (itemize) ▶ _____ 	5	34,175
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	11,073,876

Part IV Capital Gains and Losses for Tax on Investment Income

(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.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	29,103
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8		3	-46,589

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	485,845	10,727,208	0.045291
2017	475,447	10,285,643	0.046224
2016	481,989	9,507,667	0.050695
2015	471,632	9,969,966	0.047305
2014	461,004	10,087,928	0.045699

2 Total of line 1, column (d)	2	0.235214
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.047043
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	10,497,418
5 Multiply line 4 by line 3	5	493,830
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,372
7 Add lines 5 and 6	7	495,202
8 Enter qualifying distributions from Part XII, line 4	8	514,982

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b	1	1,372
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	1,372
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1,372
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	40,440
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	40,440
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	39,068
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 1,400 Refunded ▶	11	37,668

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
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		
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? <i>If "Yes," attach a detailed description of the activities.</i>		No
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? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		No
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ GA		
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? <i>If "No," attach explanation .</i>	Yes	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		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? Website address ► <u>HTTP://GAHEALTHFDN.ORG</u>	13	Yes	
14	The books are in care of ► <u>BETSEY KATES</u> Telephone no. ► <u>(404) 658-9066</u>			

Located at ► 4401 NORTHSIDE PARKWAY SUITE 950 ATLANTA GAZIP+4 ► 30327

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 ► 15			
16	At any time during calendar year 2019, 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	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ 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)? ☐ Yes ☒ No		
	(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.) ☐ Yes ☒ No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	No
	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 2019?	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)):		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ Yes ☒ No 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	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	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 2019?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to:		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	☐ Yes ☐ No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see 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	10,365,789
b	Average of monthly cash balances.	1b	291,488
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	10,657,277
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	10,657,277
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	159,859
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,497,418
6	Minimum investment return. Enter 5% of line 5.	6	524,871

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	524,871
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	1,372
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	1,372
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	523,499
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	523,499
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	523,499

Part XII 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	514,982
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	514,982
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	1,372
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	513,610

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				523,499
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			480,858	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>514,982</u>				
a Applied to 2018, but not more than line 2a			480,858	
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 2019 distributable amount.				34,124
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019. (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:	0			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
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 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				489,375
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	0			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c 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					
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:					
a "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. . .					
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). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:	
a 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). (See section 507(d)(2).)	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: ROLAND MATTHEWS 4401 NORTHSIDE PKWY SUITE 950 ATLANTA, GA 30327 (404) 363-2525	
b The form in which applications should be submitted and information and materials they should include: APPLICATION FORM COMPLETED AND AVAILABLE APPLICATION GUIDELINES FOLLOWED	
c Any submission deadlines: AUGUST 1	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: PER APPLICATION GUIDELINES - PRIMARILY RESTRICTED TO GEORGIA HEALTH RELATED CHARITIES	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	441,000
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated.

[illegible]

Part XVII

	Yes	No
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1a(1)		No
1a(2)		No

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1b(1)	No
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1b(2)	No
--------------	-----------

1b(3)		No
--------------	--	-----------

1b(4)		No
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1b(5)	No
--------------	-----------

1b(6)		No
--------------	--	-----------

1c		No
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value
ue

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (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 relationship

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ **Yes** ☐ **No**

(see instr.) ☒ Yes ☐ No

Print/Type preparer's name MARY JO ALEXANDER	Preparer's Signature	Date 2020-05-26	Check if self-employed ☐	PTIN P00002534
Firm's name ► MAULDIN & JENKINS LLC				Firm's EIN ► 58-0692043
Firm's address ► 200 GALLERIA PKWY SE STE 1700 ATLANTA, GA 303395946				Phone no. (770) 955-8600

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
TR TUSSELL 2000	P	2018-05-14	2019-01-10
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-02-12
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-02-12
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-03-12
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-03-12
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-03-12
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-04-15
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-04-15
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-04-15
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-07-10

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
40,022		45,075	-5,053
39,995		50,655	-10,660
5		6	-1
39,992		50,077	-10,085
6		7	-1
2		3	-1
23		28	-5
39,971		47,445	-7,474
6		7	-1
18,560		21,914	-3,354

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
			-5,053
			-10,660
			-1
			-10,085
			-1
			-1
			-5
			-7,474
			-1
			-3,354

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-07-10
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-07-10
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-07-10
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-07-10
ISHARES CORE S&P MID CAP	P	2018-05-14	2019-08-12
ISHARES RUSSELL 1000 GROWTH	P	2018-05-14	2019-09-12
MFS VALUE FD CL I	P	2013-09-13	2019-11-12
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-12-10
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-12-10
DELAWARE SM CAP CORE FD	P	2018-09-14	2019-12-10

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
408		482	-74
46,015		55,892	-9,877
5		6	-1
11		13	-2
54,956		57,061	-2,105
55,025		48,268	6,757
55,000		39,282	15,718
4,743		4,743	0
536		536	0
49,721		57,600	-7,879

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
			-74
			-9,877
			-1
			-2
			-2,105
			6,757
			15,718
			0
			0
			-7,879

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
OAKMARK INTL FD CL	P	2013-09-13	2019-01-07
OAKMARK INTL FD CL	P	2013-09-13	2019-01-07
OAKMARK INTL FD CL	P	2013-09-13	2019-01-07
OAKMARK INTL FD CL	P	2013-09-13	2019-01-07
OAKMARK INTL FD CL	P	2013-09-13	2019-01-07
OAKMARK INTL FD CL	P	2013-12-20	2019-01-07
OAKMARK INTL FD CL	P	2013-12-20	2019-01-07
OAKMARK INTL FD CL	P	2013-12-20	2019-01-07
OAKMARK INTL FD CL	P	2014-02-10	2019-01-07
OAKMARK INTL FD CL	P	2014-04-02	2019-01-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
56,475		69,217	-12,742
2		3	-1
21		31	-10
7,559		9,507	-1,948
15,579		19,593	-4,014
1,926		2,354	-428
21		25	-4
1,298		1,586	-288
63,197		77,999	-14,802
21		26	-5

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
			-12,742
			-1
			-10
			-1,948
			-4,014
			-428
			-4
			-288
			-14,802
			-5

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
OAKMARK INTL FD CL	P	2014-04-02	2019-01-07
OAKMARK INTL FD CL	P	2014-12-19	2019-01-07
OAKMARK INTL FD CL	P	2014-12-19	2019-01-07
OAKMARK INTL FD CL	P	2014-12-19	2019-01-07
OAKMARK INTL FD CL	P	2014-12-19	2019-01-07
OAKMARK INTL FD CL	P	2015-04-07	2019-01-07
OAKMARK INTL FD CL	P	2015-04-07	2019-01-07
OAKMARK INTL FD CL	P	2015-12-18	2019-01-07
OAKMARK INTL FD CL	P	2015-12-18	2019-01-07
OAKMARK INTL FD CL	P	2015-12-18	2019-01-07
OAKMARK INTL FD CL	P	2015-12-18	2019-01-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
102,041		129,991	-27,950
21		25	-4
6,031		6,800	-769
11,014		12,420	-1,406
1,759		1,983	-224
21		24	-3
12,899		15,617	-2,718
2,282		2,318	-36
8,208		8,333	-125
4,712		4,784	-72

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
			-27,950
			-4
			-769
			-1,406
			-224
			-3
			-2,718
			-36
			-125
			-72

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
OAKMARK INTL FD CL	P	2016-11-29	2019-01-07
OAKMARK INTL FD CL	P	2016-11-29	2019-01-07
OAKMARK INTL FD CL	P	2017-12-15	2019-01-07
OAKMARK INTL FD CL	P	2017-12-15	2019-01-07
OAKMARK INTL FD CL	P	2017-12-15	2019-01-07
OAKMARK INTL FD CL	P	2017-12-15	2019-01-07
CLEARBRIDGE LARGE CAP GROWTH FUND CL I	P	2017-09-18	2019-10-16
JH DISC VAL MV FD CL I	P	2011-09-06	2019-05-10
JH DISC VAL MV FD CL I	P	2011-09-06	2019-05-10
JH DISC VAL MV FD CL I	P	2011-09-06	2019-05-10

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
21		23	-2
4,712		4,912	-200
4,251		5,716	-1,465
21		27	-6
21		26	-5
5,319		7,152	-1,833
55,000		44,811	10,189
24,989		12,586	12,403
11		6	5
34,999		17,585	17,414

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
			-2
			-200
			-1,465
			-6
			-5
			-1,833
			10,189
			12,403
			5
			17,414

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
JH DISC VAL MV FD CL I	P	2011-09-06	2019-06-10
CD CIT BANK NA	P	2014-05-21	2019-05-29
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
1			1
200,000		200,000	0
94,249			94,249

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(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	
			1
			0
			94,249

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JOHN M BOREK	TREASURER 0.50	4,050	0	0
3050 PEACHTREE ROAD SUITE 270 ATLANTA, GA 30305				
NANCY M PARIS	SECRETARY 0.55	4,500	0	0
3050 PEACHTREE ROAD SUITE 270 ATLANTA, GA 30305				
ROLAND P MATTHEWS	CHAIR 0.50	4,950	0	0
3050 PEACHTREE ROAD SUITE 270 ATLANTA, GA 30305				
JAQUELIN GOLIEB	VICE CHAIR 0.50	5,400	0	0
3050 PEACHTREE ROAD SUITE 270 ATLANTA, GA 30305				
JARVIN LEVISON	DIRECTOR 0.50	4,950	0	0
3050 PEACHTREE ROAD SUITE 270 ATLANTA, GA 30305				
MARTHA KATZ	DIRECTOR 0.50	4,500	0	0
3050 PEACHTREE ROAD SUITE 270 ATLANTA, GA 30305				

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BLUE DOVE FOUNDATION 1200 ASHWOOD PKWY ATLANTA, GA 30338		PC	PROGRAM SUPPORT	10,000
CENTER FOR BLACK WOMENS WELLNESS ATLANTA 477 WINDSOR STREET SUITE 309 ATLANTA, GA 30312		PC	PROGRAM SUPPORT	15,000
MURPHY-HARPST CHILDRENS CENTERS ATLANTA 50 HURT PLAZA SUITE 1620 ATLANTA, GA 30303		PC	PROGRAM SUPPORT	15,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTER FOR NEW BEGINNINGS 250 E 6TH ST WAYNESBORO, GA 30830		PC	PROGRAM SUPPORT	15,000
CHILDKIND1990 LAKESIDE PKWY 350 TUCKER, GA 30084		PC	PROGRAM SUPPORT	20,000
THE COMMUNITY FOUNDATION FOR GREATER ATLANTA 191 PEACHTREE STREET SUITE 1000 ATLANTA, GA 30303		PC	DONOR ADVISED FUND	15,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COVENANT HOUSE GEORGIA 1559 JOHNSON RD NW ATLANTA, GA 30318		PC	PROGRAM SUPPORT	20,000
FRIENDS OF DISABLED ADULTS AND CHILDREN 4900 LEWIS RD STONE MOUNTAIN, GA 30083		PC	PROGRAM SUPPORT	15,000
FRIENDS OF REFUGEES INC 733 JOLLY AVE S CLARKSTON, GA 30021		PC	PROGRAM SUPPORT	20,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FLOYD HEALTHCARE FOUNDATION INC 304 TURNER MCCALL BLVD ROME, GA 30165		PC	EQUIPMENT SUPPORT	15,000
GEORGIA APPLESEED 1600 PARKWOOD CIR ST STE 200 ATLANTA, GA 30339		PC	PROGRAM SUPPORT	20,000
GEORGIA CAMPAIGN FOR ADOLESCENT POWER AND POTENTIAL 1718 PEACHTREE RD NW UNIT 465 ATLANTA, GA 30309		PC	PROGRAM SUPPORT	15,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GEORGIA HEALTH NEWS 2635 RANGEWOOD COURT ATLANTA, GA 30345		PC	GENERAL SUPPORT	12,000
GEORGIANS FOR A HEALTHY FUTURE 50 HURT PLAZA SE ATLANTA, GA 30303		PC	PROGRAM SUPPORT	20,000
GOOD NEWS CLINICS810 PINE ST GAINESVILLE, GA 30501		PC	PROGRAM SUPPORT	15,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HEALING COMMUNITY CENTER 2600 MLK JR DR SW 100 ATLANTA, GA 30311		PC	PROGRAM SUPPORT	15,000
HEALTHY MOTHERS HEALTHY BABIS COALITION OF GEORGIA 2300 HENDERSON MILL RD 410 ATLANTA, GA 30345		PC	PROGRAM SUPPORT	15,000
JEWISH HOME LIFE COMMUNITIES 3150 HOWELL MILL RD NW ATLANTA, GA 30327		PC	PROGRAM SUPPORT	10,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MACON VOLUNTEER CLINIC INC 376 ROGERS AVE MACON, GA 31204		PC	GENERAL SUPPORT	15,000
MEALS ON WHEELS ATLANTA 1705 COMMERCE DR NW ATLANTA, GA 30318		PC	GENERAL SUPPORT	15,000
METHODIST HOME OF THE SOUTH GEORGIA CONFERENCE 304 PIERCE AVE MACON, GA 31204		PC	PROGRAM SUPPORT	15,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ODYSSEY FAMILY COUNSELING CENTER 1919 JOHN WESLEY AVENUE COLLEGE PARK, GA 30337		PC	PROGRAM SUPPORT	15,000
ATLANTA ASSOCIATION FOR CONVALESCENT AGED PERSON INC 1821 ANDERSON AVE NW ATLANTA, GA 30314		PC	EQUIPMENT SUPPORT	5,000
SAVANNAH CENTER FOR BLIND AND LOW VISION 1141 CORNELL AVENUE SAVANAH, GA 31406		PC	PROJECT SUPPORT	15,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SER FAMILIA1700 WATER PL ATLANTA, GA 30339		PC	GENERAL SUPPORT	10,000
YMCA OF METROPOITANT ATLANTA 569 MARTIN LUTHER KING JR DRIVE ATLANTA, GA 30314		PC	PROGRAM SUPPORT	17,000
PARTNERSHIP FOR SOUTHERN EQUITY 55 IVAN ALLEN BLVD SUITE 530 ATLANTA, GA 30308		PC	PROGRAM SUPPORT	25,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN LEADERSHIP INSTITUTE & SEMINARY 9810-B MEDLOCK BRIDGE ROAD SUITE 102 JOHNS CREEK, GA 30097		PC	GENERAL OPERATING SUPPORT	4,500
AMERICAN ACADEMY OF PEDIATRICS 345 PARK BOULEVARD ITASCA, IL 60143		PC	GENERAL OPERATING SUPPORT	750
PEDIATRIC FOUNDATION OF GEORGIA 1330 WEST PEACHTREE STREET NW STE 500 ATLANTA, GA 30309		PC	GENERAL OPERATING SUPPORT	375
Total			3a	441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AHAVATH ACHIM SYNAGOGUE 600 PEACHTREE BATTLE AVENUE NW ATLANTA, GA 30327		PC	GENERAL OPERATING SUPPORT	900
GEORGIA STATE FOUNDATION THEATRE ARTS GUILD PO BOX 2668 ATLANTA, GA 30301		PC	GENERAL OPERATING SUPPORT	1,500
ATLANTA JEWISH FEDERATION 1440 SPRING STREET NW ATLANTA, GA 30309		PC	GENERAL OPERATING SUPPORT	825
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GEORGIA HEALTH NEWS 2635 RANGWOOD COURT ATLANTA, GA 30345		PC	GENERAL OPERATING SUPPORT	150
AMERICAN CANCER SOCITY SOUTH ATLANTIC DIVISION 250 WILLIAMS STREET NW 6000 ATLANTA, GA 30303		PC	GENERAL OPERATING SUPPORT	150
ANTI-DEFAMATION LEAGUE 3490 PIEDMONT ROAD NE SUITE 616 ATLANTA, GA 30305		PC	GENERAL OPERATING SUPPORT	300
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEWSH FAMILY & CAREER SERVICES 4549 CHAMBLEE DUNWOODY ROAD ATLANTA, GA 30338		PC	GENERAL OPERATING SUPPORT	450
WILLIAM BREMAN JEWISH HERITAGE MUSEUM 1440 SPRING STREET NW ATLANTA, GA 30309		PC	GENERAL OPERATING SUPPORT	3,150
WILLIAM BREMAN JEWISH HOME 31050 HOWELL MILL ROAD ATLANTA, GA 30327		PC	GENERAL OPERATING SUPPORT	450
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTRAL PRESBYTERIAN CHURCH OUTREACH & ADVOCACY CENTER 201 WASHINGTON STREET NW ATLANTA, GA 30303		PC	GENERAL OPERATING SUPPORT	750
MEDSHARE 3240 CLIFTON SPRINGS ROAD DECATUR, GA 30034		PC	GENERAL OPERATING SUPPORT	1,500
MERCY CARE FOUNDATION 5134 PEACHTREE ROAD CHAMBLEE, GA 30341		PC	GENERAL OPERATING SUPPORT	1,500
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ORDER OF ST JOHN 1850 M STREET NW 1070 WASHINGTON DC, DC 20036		PC	GENERAL OPERATING SUPPORT	750
GEORGIA BUDGET & POLICY INSTITUTE 50 HURT PLAZA SUITE 720 ATLANTA, GA 30303		PC	GENERAL OPERATING SUPPORT	375
FLYING CARPET THEATRE COMPANY 1205 ROCKSPRINGS RD NW ATLANTA, GA 30306		PC	GENERAL OPERATING SUPPORT	3,000
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GEORGIANS FOR A HEALTHY FUTURE 50 HURT PLAZA SUITE 806 ATLANTA, GA 30303		PC	GENERAL OPERATING SUPPORT	375
GLOBAL VILLAGE PROJECTPO BOX 1548 DECATUR, GA 30031		PC	GENERAL OPERATING SUPPORT	750
GRADY HEALTH FOUNDATION 191 PEACHTREE STREET SUITE 820 ATLANTA, GA 30303		PC	GENERAL OPERATING SUPPORT	2,250
Total ▶ 3a				441,000

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MOREHOUSE SCHOOL OF MEDICINE 720 WESTVIEW DRIVE SW ATLANTA, GA 30310		PC	GENERAL OPERATING SUPPORT	2,250
Total  3a				441,000

TY 2019 Accounting Fees Schedule**Name:** GEORGIA HEALTH FOUNDATION INC**EIN:** 58-1352076

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	7,380	820	0	4,217

TY 2019 Investments Corporate Bonds Schedule

Name: GEORGIA HEALTH FOUNDATION INC

EIN: 58-1352076

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE BOND	40,575	40,575

TY 2019 Investments Corporate Stock Schedule**Name:** GEORGIA HEALTH FOUNDATION INC**EIN:** 58-1352076**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	7,484,745	7,484,745

TY 2019 Investments - Other Schedule**Name:** GEORGIA HEALTH FOUNDATION INC**EIN:** 58-1352076**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
REGISTERED INVESTMENT FUNDS	AT COST	1,339,592	1,339,592
BROKERED CERTIFICATES OF DEPOSIT	AT COST	1,143,746	1,143,746
ESG	AT COST	873,240	873,240

TY 2019 Other Assets Schedule**Name:** GEORGIA HEALTH FOUNDATION INC**EIN:** 58-1352076**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ACCRUED INCOME	2,153	2,054	2,054
PREPAID EXCISE TAX		2,760	2,760
DUE FROM INTERNAL REVENUE SERVICE		34,936	34,936

TY 2019 Other Decreases Schedule

Name: GEORGIA HEALTH FOUNDATION INC
EIN: 58-1352076

Description	Amount
LESS PRIOR YEAR EXCISE TAX DUE	34,175

TY 2019 Other Expenses Schedule**Name:** GEORGIA HEALTH FOUNDATION INC**EIN:** 58-1352076**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TELEPHONE	761	0	0	761
DUES, SECF	1,240	0	0	1,240
MISCELLANEOUS	186	0	0	186

TY 2019 Other Increases Schedule

Name: GEORGIA HEALTH FOUNDATION INC
EIN: 58-1352076

Description	Amount
UNREALIZED LOSS ON INVESTMENTS	1,873,783

TY 2019 Other Professional Fees Schedule**Name:** GEORGIA HEALTH FOUNDATION INC**EIN:** 58-1352076

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	40,365	40,365	0	0
CONSULTANT	28,000	0	0	28,000

TY 2019 Taxes Schedule**Name:** GEORGIA HEALTH FOUNDATION INC**EIN:** 58-1352076

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX ON INVESTMENT INCOME	2,744	0	0	0
FOREIGN TAXES PAID ON INVESTMENTS	2,946	2,946	0	0