Form **990-PF**

EXTENDED TO NOVEMBER 16, 2020 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.

2019

Deg	artmer	nt of the Treasury			social security numbers on			2019
Inte	rnal Re	venue Service		Go to www	rs.gov/Form990PF for instr		ormation	Open to Public Inspection
_			r tax year beginning			, and ending	1	
		f foundation	אר מנואם דווא	DIE EO	INIDAMTON TAIC	,	A Employer identification	n number
			BEDINGFIEL		UNDATION, INC	•	58-2358064	4
_			OX number if mail is not de		udetroca)	Room/suite		<u> </u>
		•			(duress)	2400	B Telephone number (404)237-2	2000
_			REE ST. NE			2400		
		ANTA, GA	ovince, country, and ZI A 30303	P or toreign p	OSTAI CODE		C If exemption application is	pending, check here
G	Chec	k all that apply	Initial retur	'n	Initial return of a fo	ormer public charity	D 1 Foreign organization	ns, check here
			Final return	1	Amended return		2 Foreign organizations m	postuna the 95% test
			Address ch		Name change		2 Foreign organizations m check here and attach of	computation
H_	_	k type of organiza			empt private foundation	M	E If private foundation st	atus was terminated
L			nonexempt charitable	T	Other taxable private founda		under section 507(b)(1	I)(A), check here
			assets at end of year	. —	-	Accrual	F If the foundation is in a	
		Part II, col (c), lı			ther (specify)		under section 507(b)(1	I)(B), check here
	<u>►\$</u>	I Ameliania ad Di			nn (d), must be on cash bas	IS)		(4)
	art I	The total of amo	evenue and Expenses unts in columns (b), (c), and the amounts in column (a	d (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
ター	1	Contributions, (gifts, grants, etc , rece	ıved	106,267.		N/A	
	2		f the foundation is not required t	o atlach Sch B				
7	3	Interest on savings cash investments	s and temporary					
	4	Dividends and i	nterest from securities	S	6,395.	6,395.		STATEMENT 1
	5a	Gross rents						<u> </u>
	t	Net rental income	or (loss)					
	_в 6а		om sale of assets not on I		8,688.	 		
	Ž t	Gross sales price t assets on line 6a	12	,279.				
_	Tevenue 7	Capital gain net in	come (from Part IV, line 2)			8,688.		
	8	Net short-term	capital gain				A SECTION AND ASSESSMENT OF THE PERSON ASSESSM	A STATE OF THE STA
	9	Income modific Gross sales less re					1代地位	
	10a	l and allowances					(5) 1012	7 2020 3
		Less Cost of good	•					7 2020 法
		Gross profit or	(IOSS)					
	11	Other income	a 1 through 11		121,350.	15,083.	OGD	PEN. CI
_	12	Total Add lines		-1-	0.	13,003.		0.
	14		officers, directors trustees salaries and wages	, etc	- 0.			
			employee benefits					†
	ı	Legal fees	employee benefits					
2021	l se	Accounting fees	s S'	гмт 2	1,950.	975.		975.
20	g k	Other professio		rmt 3	3,061.	3,061.		0.
က်	비 의 17	Interest						
:	18	Taxes						
က -	Administrative Expenses 16	Depreciation an	d depletion			<u>-</u>		
FEB	20	Occupancy	•					
a	21		ices, and meetings					
II :	22	Printing and pu	•					
5	23	Other expenses						
₹`	23 24 25	Total operating	and administrative					
CANNED	Dec	expenses Add	lines 13 through 23		5,011.	4,036.		975. 73,700.
3 (25	Contributions, (jifts, grants paid		73,700.			73,700.
	26	Total expenses	and disbursements			_	i	
_	<u> </u>	Add lines 24 an	d 25		78,711.	4,036.		74,675.
	27	Subtract line 26	from line 12.					
	a	Excess of revenue	over expenses and disbur	sements	42,639.			
	6	Net investment	income (if negative, ent	er -0-)		11,047.		
_	c	Adjusted net in	come (if negative, enter -	-0-)			N/A	

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions

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Fo	rm 99	00-PF (2019) C/O LEISA BEDINGFIELD		58-	2358064 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
느		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	43,277.	120,832.	120,832.
	2	Savings and temporary cash investments	77,448.	46,210.	46,210.
	3	Accounts receivable			
	1	Less allowance for doubtful accounts		,	
	4	Pledges receivable >			
		Less; allowance for doubtful accounts	-		
	5	Grants receivable			
	1	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons			
	,	Other notes and loans receivable			
	l ′	Less: allowance for doubtful accounts		 	
	١.				
ssets	l °	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
_	1	Investments - U.S. and state government obligations	100 041	00 050	070 004
	ı	Investments - corporate stock STMT 4	102,841.	99,250.	270,224.
	ı	Investments - corporate bonds	_		
	11	Investments - land buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe DIVIDEND RECEIVABLE)	142.	55.	55.
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	223,708.	266,347.	437,321.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
Ë	l	Other liabilities (describe)			
		,			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow FASB ASC 958, check here	J.,		
		and complete lines 24, 25, 29, and 30			
ces	24	Net assets without donor restrictions			
<u>a</u>	25	Net assets with donor restrictions		· · · · · ·	
Ва	23	Foundations that do not follow FASB ASC 958, check here		 -	
Pu					
Ī		and complete lines 26 through 30.	0.	0.	
ō	26	Capital stock, trust principal, or current funds	0.	0.	
set	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ass	28	Retained earnings, accumulated income, endowment, or other funds	223,708.	266,347.	
Net Assets or Fund Balan	29	Total net assets or fund balances	223,708.	266,347.	
_			222 700	266 245	
	30	Total liabilities and net assets/fund balances	223,708.	266,347.	
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 2	29		
	(mus	t agree with end-of-year figure reported on prior year's return)		1	223,708.
	•	amount from Part I, line 27a		2	42,639.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	266,347.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 29	6	266,347.
_					

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COOPER CARRY CHARITABLE FOUNDATION, INC. Form 990-PF (2019) C/O LEISA BEDINGFIELD 58-2358064 Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (d) Date sold (mo, day, yr.) (a) List and describe the kind(s) of property sold (for example, real estate. (c) Date acquired (mo, day, yr) 2-story brick warehouse; or common stock, 200 shs MLC Co) D - Donation 1a PUBLICLY TRADED SECURITY b C d е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) 12,279 3,591. 8,688. b C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) (i) FMV as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any 8,688. C d е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 8,688. If (loss), enter -0- in Part I, line 7 2 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) N/A If (loss), enter -0- in Part I, line 8 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 X No If "Yes," the foundation doesn't qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year; see the instructions before making any entries (a) Base period years (d)
Distribution ratio Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) (col (b) divided by col (c)) 69,076. 306,670 .225245 2018 48,621. 221,323. .219683 2017 49,561. 213,514. 2016 .232121 201,583. 47,048. 2015 .233393 27,460. 217,356. .126337 2014 1.036779 2 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years .207356 the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 349,184. 72,405. Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) 110. 6

8 Enter qualifying distributions from Part XII, line 4

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

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72,515.

74,675.

7 Add lines 5 and 6

7

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Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	see instru	ctions)	_
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			7
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			1
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		110.	_
	of Part I, line 27b		_	ī
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-)		0.	_
3	Add lines 1 and 2		110.	_
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.	_
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		110.	_
6	Credits/Payments.			7
а	2019 estimated tax payments and 2018 overpayment credited to 2019			1
b	Exempt foreign organizations - tax withheld at source 6b 0.			ı
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.			İ
	I Backup withholding erroneously withheld 6d 0 .			
7	Total credits and payments Add lines 6a through 6d	 	366.	-
8	Enter any penalty for underpayment of estimated tax. Check here		0.	-
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			-
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		256.	-
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax 256. Refunded 11		0.	_
Pa	art VII-A Statements Regarding Activities			-
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes No	-
	any political campaign?	1a	Х	-
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	Х	-
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			Ì
	distributed by the foundation in connection with the activities			i
C	Did the foundation file Form 1120-POL for this year?	1c	X	-
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			Ì
	(1) On the foundation \blacktriangleright \$ 0 . (2) On foundation managers \blacktriangleright \$ 0 .			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		-	
	managers ► \$O.]
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			Ī
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	_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	/A 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	}		ĺ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			l
	By language in the governing instrument, or	li		ı
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	<u></u>]
	remain in the governing instrument?	6	Х	_
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	5
8a	Enter the states to which the foundation reports or with which it is registered. See instructions			İ
	GA			1
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			İ
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	,
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		<u> </u>	-
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV	9	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X	
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Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12				
	If "Yes," attach statement. See instructions	12		х
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 ► LEISA BEDINGFIELD Telephone no ► (404)2	77-	200	<u> </u>
14	Located at > 191 PEACHTREE ST, NE, SUITE 2400, ATLANTA, GA ZIP+4 > 30		200	
45		,303		$\overline{}$
10	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here). N	/ >	· L
	and enter the amount of tax-exempt interest received or accrued during the year		/A	NI -
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. 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?			
	(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			j
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			- 1
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		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			ļ
	defined in section 4942(j)(3) or 4942(j)(5))	1 1		l
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			ŀ
	If "Yes," list the years \blacktriangleright			
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		ļ	l
	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		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
•	•	1 1		
30	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
38	during the year? Yes X No			1
			ļ	1
D	If "Yes," did it have excess business holdings in 2019 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		1	
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
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		X
	Fo	rm 99 0)-PF (2019)

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Part VII-B Statements Regarding Activities for Which F	orm 4/20 May be R	equirea (contin	ued)	——————————————————————————————————————	
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		_	es X No		
(2) Influence the outcome of any specific public election (see section 4955), or	to carry on, directly or indire	• •	[
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section	 1			
4945(d)(4)(A)? See instructions	4		es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		(V)		
the prevention of cruelty to children or animals?	lor the eventions described		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance? See instru	•	n negulations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance. See instru			*/A	3D	+-1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from		ned			
expenditure responsibility for the grant?		- /	es No		
If "Yes," attach the statement required by Regulations section 53 4945-5(d)	10	1/ 44 11	53 NU		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	av nremums on		ŀ		
a personal benefit contract?	a, prominanto un	□ v	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal benefit contract?		~ ~	6b	X
If "Yes" to 6b, file Form 8870	Sonone soniave				 -
7a At any time during the tax year, was the foundation a party to a prohibited tax si	nelter transaction?	□ Y	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribut			/-	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$			-		1
excess parachute payment(s) during the year?			es X No		
Part VIII Information About Officers, Directors, Truste	es, Foundation Mar	nagers, Highly			
Paid Employees, and Contractors					
List all officers, directors, trustees, and foundation managers and th	•	I (-) Company	(d) Contributes :		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp account	pense I, other
(=) reality with debut one	to position	enter -0-)	compensation	allowa	nces
CPP CMAMPMPAM 5					0
SEE STATEMENT 5		0.	0.		0.
			-		
			-		
2 Compensation of five highest-paid employees (other than those incli	uded on line 1). If none, e	enter "NONE."			
(a) Name and address of each arrategy and area than \$50,000	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Ex	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account allowa	
NONE	•				
					_
Total number of other employees paid over \$50,000	· .		<u>▶</u>		0
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COOPER CARRY CHARITABLE FOUNDATION, INC. Form 990-PF (2019) C/O LEISA BEDINGFIELD

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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 "NC	NE."	
(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 i	nformation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced,	etc	Expenses
1 NONE		
		0.
2		
		
3		
		
<u> </u>		
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 NONE		-
		<u> </u>
2		
All other pregram valeted investments Conventions	-	
All other program-related investments. See instructions 3		
-		
	-	
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2019)

C/O LEISA BEDINGFIELD

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IP,	art∤X■ Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	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	252,043.
b	Average of monthly cash balances	1b	252,043. 102,459.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	354,502.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	354,502.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,318.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	349,184.
6	Minimum investment return Enter 5% of line 5	6	17,459.
ĮP,	art XII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	,
	foreign organizations, check here 🕨 🔛 and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	17,459.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	110.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	17,349.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	17,349.
6	Deduction from distributable amount (see instructions)	6	<u> </u>
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	17,349.
IP.	artXIII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	74,675.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	74,675.
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	110. 74,565.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	74,565.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	jualifies for	the section
_	4940(e) reduction of tax in those years		

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Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Years prior to 2018 2018 2019 Corpus 1 Distributable amount for 2019 from Part XI, 17,349. line 7 2 Undistributed income, if any, as of the end of 2019 0. a Enter amount for 2018 only b Total for prior years. 0. 3 Excess distributions carryover, if any, to 2019: 17,189. a From 2014 36.973. **b** From 2015 38,905. c From 2016 37,913. d From 2017 53.860. e From 2018 184,840 f Total of lines 3a through e 4 Qualifying distributions for 2019 from 74,675. Part XII, line 4: ► \$_ 0 . a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0. 17,349. d Applied to 2019 distributable amount 57,326 e Remaining amount distributed out of corpus Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount 0. 0. must be shown in column (a)) Enter the net total of each column as indicated below. 242,166 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract 0. line 4b from line 2b 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 0. assessed d Subtract line 6c from line 6b Taxable 0 amount - see instructions e Undistributed income for 2018 Subtract line 0. 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0. may be required - see instructions) 8 Excess distributions carryover from 2014 17,189 not applied on line 5 or line 7 9 Excess distributions carryover to 2020 224,977. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 36,973. a Excess from 2015 38,905. b Excess from 2016 37,913. c Excess from 2017 53,860. d Excess from 2018

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e Excess from 2019

Form 990-PF (2019)

57,326.

COOPER CARRY CHARITABLE FOUNDATION, INC. C/O LEISA BEDINGFIELD Form 990-PF (2019) 58-2358064 Page 10, Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a 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 4942(j)(3) or 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (a) 2019 (b) 2018 (c) 2017 (d) 2016 (e) Total income from Part I or the minimum investment return from Part X for each year listed **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 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 (interesta 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 #942(j)(3)(B)(iii) (3) Largest amount of support from arl exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) 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. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here X 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 a The name, address, and telephone number or email address of the person to whom applications should be addressed.

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b The form in which applications should be submitted and information and materials they should include:

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

c Any submission deadlines

Form 990-PF (2019) C/O LEISA BEDINGFIELD 58-2358064

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or contribution Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year 501(C)3 NONE POVERTY ADVACAY CARPENTER SHELTER 930 NORTH HENRY STREET ALEXANDRIA, VA 22314 1,000. COALITION FOR SMARTER GROWTH NONE 501(C)3 EDUCATIONAL 316 F STREET NE, SUITE 200 WASHINGTON, DC 20002 2,500. EMORY UNIVERSITY 501(C)3 MEDICAL/RESEARCH NONE 201 DOWMAN DR ATLANTA, GA 30322 1,500. HIGHER ACHIEVEMENT NONE 501(C)3 EDUCATIONAL 1701 K STREET, NW, STE 625 WASHINGTON, DC 20006 5,000. SOCIETY OF ST VINCENT DE PAUL 501(C)3 POVERTY ADVOCACY NONE 5463 PEACHTREE ROAD CHAMBLEE, GA 30341 5,000. SEE CONTINUATION SHEET(S) 73,700. Total ▶ 3a b Approved for future payment NONE <u>3b</u> 0. Total Form 990-PF (2019)

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Page 11

| Part XVI-A1 | Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
2.11.01 gross amounts amous strict wise molecules	_ (a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b					
с	1				
d	1				
f				-	
g Fees and contracts from government agencies				-	
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities	<u> </u>		14	6,395.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					· <u>-</u>
b Not debt-financed property					,
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	8,688.	
9 Net income or (loss) from special events		-		5,000.	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					-
a					
b					
c					
d			i		
e		- 12 2 11 21			
12 Subtotal Add columns (b), (d), and (e)		0.		15,083.	0.
13 Total Add line 12, columns (b), (d), and (e)	L.=	· · · · · · · · · · · · · · · · · · ·		13	4 - 4 - 4
(See worksheet in line 13 instructions to verify calculations)				_	
[Part:XVI_B] Relationship of Activities to	the Acco	molichment of Eve	mnt	Durnosas	
Relationship of Activities to	J lile Acco	inpusiment of Exe	mpt	- urposes	
Line No. Explain below how each activity for which inco	me is reported i	in column (e) of Part XVI-A	contrib	outed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than	by providing fur	nds for such purposes)			
NOT APPLICABLE					
		_			
		· · · · · · · · · · · · · · · · · · ·			
					· · · <u>-</u> · · · · · · · · · · · · · · · · · · ·
					
			_		
000004 40 47 40					Form 990-PF (2019)

		LEISA BED	INGFIEL	D		58-2358064	Page '	13
{Part			nsfers to a	nd Transactions an	d Relationships Wit	h Noncharitable		
4 Du	Exempt Organ		v of the follows	as with any other arganization	a department in control FO1(a)		Yes N	_
	d the organization directly or inc ther than section 501(c)(3) orga				i described in Section 50 f(c)	İ	163 14	Ĕ
-	ansfers from the reporting found	•	-	• •				
) Cash			g		1a(1)	Х	
(2	Other assets					1a(2)	Х	_
b Ot	her transactions:							
(1)) Sales of assets to a noncharit	able exempt organiz	ation			16(1)	X	
(2)) Purchases of assets from a no	oncharitable exempt	organization			1b(2)	X	
• •) Rental of facilities, equipment					1b(3)	X	
) Reimbursement arrangements	S				1 <u>b(4)</u>	X	_
) Loans or loan guarantees					<u>1b(5)</u>	X	
• •) Performance of services or m	*	-			1b(6)	X	
	iaring of facilities, equipment, m the answer to any of the above is			• •	ava about the four market unly	1c	X	<u>:</u>
	services given by the reporting						ers,	
	lumn (d) the value of the goods			oo loos than lan market value	in any transaction of sharing	arrangement, snow in		
(a) Line r	no (b) Amount involved	(c) Name	of noncharitable	e exempt organization	(d) Description of transfers	, transactions, and sharing arri	angements	_
			N/A					
		ļ						
		<u> </u>						_
		 	<u> </u>					_
		+						_
								_
								_
								_
			_					
	the foundation directly or indirec	•		or more tax-exempt organiza	ations described	()	₹ 7	
	section 501(c) (other than section		section 5277			Yes	X No)
	Yes," complete the following scl (a) Name of or			(b) Type of organization	(c) Descrir	otion of relationship		_
N/A	(a) Hamo or or	gamzaton		(b) Type of organization	(6) 2000.1	out of foldations in p	-	_
			_					_
						-		_
	Under penalties of perjuit declare and belief, it salue, correct, in co	that I have examined the		accompanying schedules and stat taxpayer) is based on all information		May the IRS of	iscuss this	_
Sign Here	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Z []/]//R		- 11.		return with the shown below?	Preparer See instr	
Here		OVVV		11/11/2020	TRUSTEE	X Yes	N	0
	Signature of officer or truste Print/Type preparer's n		Prepar s s	Date '	Title Date Check [ıf PTIN		_
	Fillio Type preparer S II	ame	l Tepater 5 5		self- emp	_		
Paid	STEPHEN J.	NADEAH	7500	m & Nedeau	11-10-20	P00399	865	
Prep			& INGR	AM/ LLC		IN ► 72-13966		_

Form **990-PF** (2019)

Phone no 770.394.8000

Use Only

Firm's address ▶ 4004 SUMMIT BLVD NE, SUITE 800 ATLANTA, GA 30319

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
THE JT WALK	NONE	501(C)3	MEDICAL	
596A S. BIRDNECK ROAD VIRGINIA BEACH, VA 23451				5,00
WINSHIP CANCER INSTITUTE	NONE	501(C)3	MEDICAL	
1365 CLIFTON ROAD NE				
ATLANTA, GA 30322				5,00
ATLANTA AREA COUNCIL OF BOY SCOUTS	NONE	501(C)3	EDUCATIONAL	
1800 CIRCLE 75 PKWY ATLANTA, GA 30339				1,50
BEVERLY WILLIS ARCHITECTURE	NONE	501(C)3	EDUCATIONAL	
FOUNDATION L41 W BROADWAY				
NEW YORK, NY 10013				5,00
BLACK WOMEN IN ARCHITECTURE	NONE	501(C)3	EDUCATIONAL	
PO BOX 801, 1205 BOULEVARD COLONIA HEIGHTS, VA 23834				1 00
CODONIA REIGHTS, VA 23034				1,00
CAPITAL AREA FOOD BANK - CANSTRUCTION	NONE	501(C)3	COMMUNITY WELL-BEING	
4900 PUERTO RICO AVE NE WASHINGTON, DC 20017				1,00
CITY OF REFUGE 1300 JOSEPH E. BOONE BLVD NW	NONE	501(C)3	COMMUNITY WELL-BEING	
ATLANTA, GA 30314	-			5,000
FOR THE LOVE OF CHILDREN	NONE	501(C)3	COMMUNITY WELL-BEING	
301 PENNSYLVANIA AVE. SE				5 00
ASHINGTON, DC 20003				5,000
GOIZUETA ALZHEIMERS RESEARCH CENTER	NONE	501(C)3	MEDICAL	
2 EXECUTIVE PARK DRIVE NE				1,000
GRADY HEALTH FOUNDATION 191 PEACHTREE ST 820	NONE	501(C)3	MEDICAL	
ATLANTA, GA 30303				5,000
Total from continuation sheets				58,70

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	33777	
JUBILEE TO COLLEGE	NONE	501(C)3	EDUCATION	
1640 COLUMBIA ROAD				
WASHINGTON, DC 20009				2,500.
KENNESAW STATE UNIVERSITY FOUNDATION	NONE	501(C)3	EDUCATION	
3-MINUTE THESIS	NONE	501(0/3		
1000 CHASTAIN ROAD				
KENNESAW, GA 30144				3,000.
PRINCESH COMME INTURDATOR	NONE	501(C)3	EDUCATION	
KENNESAW STATE UNIVERSITY FOUNDATION SCHOLARSHIP FUND	NOME	B01(C)3	EDUCATION	
1000 CHASTAIN ROAD				
KENNESAW, GA 30144				1,000.
KSU DEPARTMENT OF ARCHITECTURE	NONE	501(C)3	EDUCATION	
1000 CHASTAIN ROAD	NONE	1	BBCMIION	
KENNESAW, GA 30144		İ		3,000.
TANDALDA GABAGATAN GGAGGA	VOLUM	E01/0\2	TRUCK WICK	
LANDMARK CHRISTIAN SCHOOL 50 SE BROAD ST	NONE	501(C)3	EDUCATION	
FAIRBURN, GA 30213				2,500.
•				·
LANDMARK CHRISTIAN SCHOOL 50 SE BROAD ST	NONE	501(C)3	EDUCATION	
FAIRBURN, GA 30213				2,500.
				, ,
LEUKEMIA AND LYMPHOMA SOCIETY	NONE	501(C)3	MEDICAL	
2859 PACES FERRY ROAD SE SUITE 725 ATLANTA, GA 30339				1,000.
MIDTOWN ASSISTANCE CENTER	NONE	501(C)3	COMMUNITY WELL-BEING	
30 PORTER PL NE ATLANTA, GA 30308				1,000.
ALDMIN, ON JUJUU				1,000.
MUSEUM OF DESIGN ATLANTA	NONE	501(C)3	EDUCATION	
1315 PEACHTREE ST NE				2 000
ATLANTA, GA 30309		 		2,000.
SUNSHINE ON A RANNEY DAY	NONE	501(C)3	COMMUNITY WELL-BEING	
42-C OAK ST				
ROSWELL, GA 30075	<u> </u>			1,200.
Total from continuation sheets				

C/O LEISA BEDINGFIELD
Part XV Supplementary Information

58-2358064

Part XV Supplementary Information						
3 Grants and Contributions Paid During the Year (Continuation)						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient	Contribution	Amount		
THE LEUKEMIA & LYMPHOMA SOCIETY	NONE	501(C)3	MEDICAL RESEARCH			
2859 PACES FERRY ROAD SE SUITE 725 ATLANTA, GA 30339				1,000.		
THE SANDY SPRINGS CONSERVANCEY INC 1 GALAMBOS WAY	NONE	501(C)3	COMMUNITY WELL BEING			
SANDY SPRINGS, GA 30328			-	1,000.		
THE UNIVERSITY SYSTEM OF GEORGIA FOUNDATION	NONE	501(C)3	EDUCATION			
270 WASHINGTON ST. SW ATLANTA, GA 30334				2,500.		
		-				
Total from continuation sheets	<u> </u>					

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

To do to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization

COOPER CARRY CHARITABLE FOUNDATION, INC. C/O LEISA BEDINGFIELD

Employer identification number

58-2358064

Organization type (check one)				
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private foundation			
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
	nion is covered by the General Rule or a Special Rule . 11(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions			
General Rule				
	eation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or any one contributor Complete Parts I and II. See instructions for determining a contributor's total contributions			
Special Rules				
sections 509(a any one contri	cation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from abutor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, 0-EZ, line 1 Complete Parts I and II			
year, total con	cation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the stributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the cruelty to children or animals. Complete Parts I, II, and III			
year, contribut is checked, en purpose Don'	tation described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the tions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box inter here the total contributions that were received during the year for an exclusively religious, charitable, etc., to complete any of the parts unless the General Rule applies to this organization because it received nonexclusively intable, etc., contributions totaling \$5,000 or more during the year.			
but it must answer "No	on that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), i" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)			

.. .

Name of organization
COOPER CARRY CHARITABLE FOUNDATION, INC.
C/O LEISA BEDINGFIELD

Employer identification number

58-2358064

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	COOPER CARRY, INC. 191 PEACHTREE STREET NE, STE 2400 ATLANTA, GA 30303-1740	- s 106,267.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Oncash Ocomplete Part II for noncash contributions)

Name of organization
COOPER CARRY CHARITABLE FOUNDATION, INC.
C/O LEISA BEDINGFIELD

Employer identification number

58-2358064

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part i (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions) Part I

	organization R CARRY CHARITABLE FOUN	DAMION INC		Employer identification number
C/O L	EISA BEDINGFIELD	DATION, INC.		58-2358064
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	through (e) and the following line charitable, etc., contributions of \$1,000	entry For organizations	nat total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of g	aift	
	Transferee's name, address, a			nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
- raiti				
		(e) Transfer of g	nift	
	Transferee's name, address, a			sferor to transferee
(a) No. from	(IND)			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held
	_ ,	(e) Transfer of g		
	Transferee's name, address, a	nd ZIP + 4	Relationship of tran	sferor to transferee
(a) No				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held
		(e) Transfer of g	ift	<u> </u>
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of tran	sferor to transferee

FORM 990-PF DIV	/IDENDS	AND INTER	EST FROM SECUR	ITIES S'	PATEMENT 1
	ROSS MOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	
NEUBERGER BERMAN	6,395.		0. 6,395.	6,395.	
TO PART I, LINE 4	6,395.		0. 6,395.	6,395.	
FORM 990-PF		ACCOUNTI	NG FEES	S	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES		1,950.	975.	· · · · · ·	975.
TO FORM 990-PF, PG 1, LA	16B	1,950.	975.		975.
FORM 990-PF	OT	HER PROFES	SIONAL FEES	Si	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
NEUBERGER & BERMAN-INVEST.FEES		3,061.	3,061.		0.
TO FORM 990-PF, PG 1, LN	 I 16C	3,061.	3,061.		0.

FORM 990-PF CORPORATE STOCK		STATEMENT 4
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
EQUITIES - SEE ATTACHED	99,250.	270,224.
TOTAL TO FORM 990-PF, PART II, LINE 10B	99,250.	270,224.

	ST OF OFFICERS, D		STAT	EMENT 5
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
E. POPE BULLOCK 1282 OAKDALE ROAD ATLANTA, GA 30307	PRESIDENT 0.00	0.	0.	0.
C ROBERT NEAL 1229 ZIMMER DRIVE ATLANTA, GA 30306	VP/SEC 0.00	0.	0.	0.
BRENT AMOS 191 PEACHTREE ST. NE, STE 2400 ATLANTA, GA 30303	TRUSTEE 0.00	0.	0.	0.
ALEX LOPATYNSKY 191 PEACHTREE ST. NE, STE 2400 ATLANTA, GA 30303	TRUSTEE 0.00	0.	0.	0.
KEITH SIMMEL 571 RIDGEWATER DR MARIETTA, GA 30068	TRUSTEE 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.