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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

OMB No 1545-1150

2008**Open to Public
Inspection****A** For the 2008 calendar year, or tax year beginning

, 2008, and ending

, 20

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instruc-
tions**C** Name of organization**Hugh G. Ashcraft Foundation**

Number and street (or P O box, if mail is not delivered to street address) Room/suite

701 Crestdale Drive

City or town, state or country, and ZIP + 4

Matthews, NC 28105**D** Employer identification number**58 : 1840748****E** Telephone number**(704) 844-3100****F** Group Exemption
Number . . . ▶• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).****G** Accounting method. ☒ Cash ☐ Accrual
Other (specify) ▶**I** Website: ▶**J** Organization type (check only one)— ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**H** Check ☐ if the organization is not
required to attach Schedule B (Form 990,
990-EZ, or 990-PF)**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts. If \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **191,458.71****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	184,457.51
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	7000.84
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>	6	
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
	6b	Less direct expenses other than fundraising expenses	6b	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ▶ _____)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8.	9	191,458.71	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	143,391.03
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ▶ Insurance, Other	16	2,312.00
	17	Total expenses. Add lines 10 through 16	17	145,703.03
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	45,755.68
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	235,457.77
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	281,213.45

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	22	279,602.96
23 Land and buildings	23	
24 Other assets (describe ▶ Grant Loans)	24	1,610.49
25 Total assets	25	281,213.45
26 Total liabilities (describe ▶ _____)	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	27	281,213.45

For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990.

Cat No 106421

Form **990-EZ** (2008)

SCANNED JAN 08 2010

69

Expenses

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

(required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

28	Provide Funds to Harris Teeter associates to relieve financial hardships that result from sudden and i		
	(Grants \$ 143,391.03) If this amount includes foreign grants, check here	28a	2,312.00
29			
	(Grants \$) If this amount includes foreign grants, check here	29a	
30			
	(Grants \$) If this amount includes foreign grants, check here	30a	
31	Other program services (attach schedule)		
	(Grants \$) If this amount includes foreign grants, check here	31a	
32	Total program service expenses (add lines 28a through 31a)	32	2,312.00

[illegible]

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		✓
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		✓
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?		✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations. Enter		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		✓
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		✓
41 List the states with which a copy of this return is filed ▶ North Carolina		
42a The books are in care of ▶ Scott Nations C/O Harris Teeter Telephone no. ▶ (704) 844-3100 Located at ▶ 701 Crestdale Drive, Matthews NC ZIP + 4 ▶ 28105		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		✓
If "Yes," enter the name of the foreign country: ▶		
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?		✓
If "Yes," enter the name of the foreign country: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

- 46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If "Yes," was the related organization(s) a section 527 organization?
- 50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

	Yes	No
46		✓
47		✓
48		✓
49a		✓
49b		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
No paid employees		0	0	0
Total number of other employees paid over \$100,000 ▶	0			

- 51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		0
Total number of other independent contractors each receiving over \$100,000 ▶	0	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here ▶ Scott K Nations Date 12-21-09

Signature of officer

▶ **Scott K Nations, Treasurer**

Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ _____ Date _____ Check if self-employed ▶ ☐

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ _____ Preparer's Identifying Number (See instructions) _____

EIN ▶ _____ Phone no ▶ () _____

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

Hugh G. Ashcraft Foundation

Employer identification number

58 1840748

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the organizations the organization supports.

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	115,070	77,923	93,496	145,879	184,458	616,826
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3	115,070	77,923	93,496	145,879	184,458	616,826
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						193,000
6 Public support. Subtract line 5 from line 4						423,826

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	115,070	77,923	93,496	145,879	184,458	616,826
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,822	8,204	13,337	10,479	7,001	41,843
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						658,668
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	64.3 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	93.1 %
16a 33⅓ % support test—2008. If the organization did not check the box on line 13, and line 14 is 33⅓ % or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33⅓ % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓ % or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

- 19a 33⅓% support tests—2008.** If the organization did not check the box on line 14, and line 15 is more than 33⅓%, and line 17 is not more than 33⅓%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- b 33⅓% support tests—2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓%, and line 18 is not more than 33⅓%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

[illegible]

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

Hugh G. Ashcraft

Employer identification number

58 1840748

Filed form 990 EZ - below the \$1,000,000 in receipts.

Filing Schedule O since Return was filed late

Return was filed late due to loss of PC certain records related to the return. Additionally, due to other reporting

requirements with regular duties with employer, additional delays were incurred. Since no tax is due, it is requested that
any penalties be waived.

Name of the organization

Employer identification number

2008 CALENDAR YEAR
HUGH ASHCRAFT STATISTICAL REPORT

	+		+		-	+		-	+	+		-	+	
	OUTS LOANS	CASH ON HAND	TOTAL POTENTIAL	TOTAL GRANTS	TOTAL LOANS	TOTAL CONTR	TOTAL REPAYMTS	TOTAL DONATIONS	INT PAID	EXPENSE	ADJMTS/ OTHER	ENDING CASH ON HAND	TOTAL OUTS LOANS	NEW TOTAL ASSETS
AP04	\$ 778 94	\$ 234,678 83	\$ 233,899 89	\$ (1,715 84)	\$ -	\$ 5,649 29	\$ (43 25)	\$ -	\$ -	\$ 650 00	\$ -	\$ 238,005 53	\$ 735 69	\$ 238,741 22
AP05	\$ 735 69	\$ 238,005 53	\$ 237,269 84	\$ (2,757 47)	\$ -	\$ 6,011 54	\$ (34 60)	\$ -	\$ -	\$ -	\$ -	\$ 241,294 20	\$ 701 09	\$ 241,995 29
AP06	\$ 701 09	\$ 241,294 20	\$ 240,593 11	\$ (9,096 95)	\$ -	\$ 5,641 51	\$ (34 60)	\$ -	\$ -	\$ -	\$ -	\$ 237,873 36	\$ 666 49	\$ 238,539 85
AP07	\$ 666 49	\$ 237,873 36	\$ 237,206 87	\$ (12,418 77)	\$ -	\$ 13,440 19	\$ (43 25)	\$ -	\$ -	\$ -	\$ -	\$ 238,938 03	\$ 623 24	\$ 239,561 27
AP08	\$ 623 24	\$ 238,938 03	\$ 238,314 79	\$ (5,141 35)	\$ -	\$ 9,573 91	\$ (44 60)	\$ -	\$ -	\$ -	\$ -	\$ 243,415 19	\$ 578 64	\$ 243,993 83
AP09	\$ 578 64	\$ 243,415 19	\$ 242,836 55	\$ (6,111 50)	\$ -	\$ 15,615 07	\$ (34 60)	\$ -	\$ -	\$ 655 00	\$ -	\$ 252,298 36	\$ 544 04	\$ 252,842 40
AP10	\$ 544 04	\$ 252,298 36	\$ 251,754 32	\$ (15,377 81)	\$ -	\$ 9,682 97	\$ (43 25)	\$ -	\$ -	\$ 1,705 00	\$ -	\$ 244,941 77	\$ 500 79	\$ 245,442 56
AP11	\$ 500 79	\$ 244,941 77	\$ 244,440 98	\$ (13,227 66)	\$ -	\$ 54,759 39	\$ (34 60)	\$ -	\$ -	\$ -	\$ -	\$ 286,508 10	\$ 466 19	\$ 286,974 29
AP12	\$ 466 19	\$ 286,508 10	\$ 286,041 91	\$ (28,680 69)	\$ -	\$ 8,411 30	\$ (43 25)	\$ -	\$ -	\$ -	\$ -	\$ 266,281 96	\$ 422 94	\$ 266,704 90
AP01	\$ 422 94	\$ 266,281 96	\$ 265,859 02	\$ (28,469 50)	\$ 2,200 00	\$ 13,230 17	\$ (34 60)	\$ -	\$ -	\$ (698 00)	\$ -	\$ 249,575 23	\$ 2,588 34	\$ 252,163 57
AP02	\$ 2,588 34	\$ 249,575 23	\$ 246,986 89	\$ (11,108 88)	\$ -	\$ 24,363 56	\$ (434 60)	\$ -	\$ -	\$ -	\$ -	\$ 263,264 51	\$ 2,153 74	\$ 265,418 25
AP03	\$ 2,153 74	\$ 263,264 51	\$ 261,110 77	\$ (9,284 61)	\$ -	\$ 18,078 97	\$ (543 25)	\$ -	\$ 7,000 84	\$ -	\$ -	\$ 279,602 96	\$ 1,610 49	\$ 281,213 45

SUMMARY	\$ (143,391 03)	\$ 2,200 00	\$ 184,457 87	\$ (1,368 45)	\$ -	\$ 7,000 84	\$ 2,312 00	\$ -
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Expense Class

Insurance	1,050 00
Cards	2,605 00
Other	-914

**2008 YEARLY RECAP
HUGH ASHCRAFT FOUNDATION**

BEGIN. TOTAL ASSETS (1/1/08)	235,457.77
BEGINNING CASH	234,678.83
FOUNDATION INCOME (01/01/01 - 12/31/01)	
CONTRIBUTIONS	184,457.87
DONATIONS	-
INTEREST REC'D	7,000.84
ADJUSTMENTS	-
GRANTS	(143,391.03)
EXPENSE	(2,312.00)
LOANS MADE	(2,200.00)
REPAYMENTS	1,368.45
ENDING CASH BAL (12/31/08)	279,602.96
BEGIN. LOANS OUTST. (01/01/08)	778.94
REPAYMENTS	(1,368.45)
LOANS MADE	2,200.00
ENDING TOTAL ASSETS (12/31/08)	281,213.45

December 31, 2008
Hugh G. Ashcraft Foundation
Board Members

President	Bob Ramsey
Vice President	Craig Parker
Treasurer	Scott Nations
Board Member	John Gruener
Board Member	Iris Burch
Board Member	Leah Belk
Board Member	Maria Descalzi

HUGH G. ASHCRAFT FOUNDATION

GRANTS 2008

ASSOCIATE	SS#	Store #	ADDRESS	GRANT AMOUNT	Gift Card	Hire	Term	DATE APPROVED	CRITERIA	Assisted with
Lee, Corinna			317 Jones Street, Charlotte NC 28208	225.26		Sep-04		1/18/08	Disconnection Notice on Power	Power Bill
Smith, William Cozart			283 1199 Lakewood Rd, Four Oaks, NC 27524	1490.58	200	Feb-06		2/1/08	Sudden and Unforeseen	Mortgage/Power/gift cards
Abusamra, Sabia			258 8930 F University City Blvd, Charlotte NC 28213	248.14	100	May-01	8-Nov	2/19/08	Loss of his income	Power Bill, gift card
Boord, Linda			179 19809 Smith Circle, Cornelius, NC 28031	394.07		Dec-07	Jul-08	3/7/08	Seperation	Utilities
Miller, Ebony			256 1038 Kings Min Lane, Ranko NC 28054	500		Jan-04	Mar-08	3/7/08	Fire	Cash
Michael, Jade			220 4745 Grasset Avenue, Charlotte N 28289	1614.06		Mar-06		3/12/08	Loss of spouse income	Rent and Power
Eaton, Loretta			242 81 Aspen Lane, Bluemont VA 20135	1987.86		Jul-06		3/26/08	Death	Mortgage
Marcotte, Travis			27 4859 Truesdale Place, Charlotte NC 28277	1529.64		Mar-08		3/26/08	Loss of his income	Rent and Utilities
Jeffery, Heidi			82 4092 Windward, Tega Cay SC 29108	1950		Jul-07		3/26/08	Loss of spouse income	Rent
Brown, Kennette			133 5030 57th Avenue Bladenburg, MD 20710	945		Jul-06		4/4/08	Homeless	Rent
Daniels, Erick			344 1406 Chaplain Bay, Chester VA 23838	2085.45		Jan-06	Aug-08	4/10/08	Loss of spouse income	Rent/Utilities
Vann, Anita			298 1278 Masengill Pond Rd, Lot 4, Angier NC 27501	857.3		Dec-07		4/18/08	Death	Mortgage
Cooper, Denise			133 101 Nomandy Hills Dr, Alexandria VA 22304	162.8	200	Sep-06		4/18/08	Death	Utilities/gift card
Brewington, Doretta			174 3707 Ashley Hall Drive, Charlotte NC 28227	840		Oct-00		4/18/08	Eviction Notice	Rent
Short, Charles			82 4114 Providence Rd, Apt M, Charlotte NC 28211	927.4		Jun-07		4/18/08	Loss of spouse income	Rent
Mitchell, Andrea			38 1031 Circle Dr, Apt D, Angier NC 27501	950		Aug-00		4/18/08	Loss of spouse income	Rent
Deacon, Nicole			81 101 Ft Evans Rd SE #8, Leesburg VA 20175	985		Nov-07	Sep-08	4/18/08	Loss of spouse income	Rent
Fincham, JoAnn			313 15085 Germanna Hwy, Culpeper, VA 22701	1000		May-07		4/18/08	Death	Funeral Expenses
Romero, Santia			171 8109 Chimora Lane, Matthews NC 28105	811.18		Sep-03		5/2/08	Loss of child support	Rent/Utilities
Smith, Gary			208 6012 Linda Vista Lane, Charlotte NC 28218	680.59		Aug-07		5/2/08	Loss of his income	Utilities - note to file - check
Stupis, Rebecca			149 4270 Malone Place, Rock Hill SC 29732	777.65		Jul-05		5/2/08	Loss of her income	Utilities
Morris, Thomas			322 7508 Abbingdon Drive, Oxon Hill MD 20745	1328		Apr-07		5/2/08	Sudden and Unforeseen	Rent/Deposit
Powell, Roger		SB	802 Beaumont Avenue, Greensboro, NC 27401	1350		Oct-07		5/2/08	Death in Family	Rent
Coulck, Ann			249 1106 Longmeadow Lane, Monroe NC 28110	1970.5			DIED	5/8/08	Loss of her income	Mortgage/Utilities
Lynch, Geneva			132 2954 Branch Road, Scottsville VA 24590	875	200	Oct-07		6/6/08	Medical and loss of spouse income	Rent
Fraser, Alliea			289 1104 Mailwood Drive, Knightsdale NC 27545	1950		Oct-01		6/6/08	Death of Family Member	Funeral Expenses
Williams, Jonathan			344 8421 Millbrook Wood Drive #8, Raleigh, NC 27604	2516.35		May-07		6/9/08	Facing Eviction	Rent
Glover, Ann			123 PO Box 2412, Bluffton, SC 29910	1300		Aug-03		6/27/08	Loss of her income	Rent
Berger, Eunice			204 3409 Teversham Lane, Charlotte NC 28210	2047.5		Sep-06		6/27/08	Death of Family Member	Funeral Expenses
Rateman, Barbara			99 1185 Stowhill Lane, Calabwa, NC 28609	2764		Jan-03		6/27/08	Loss of her income	Mortgage
Clark, Kenneth			272 128 Fawwood Drive, Statesville NC 28625	1673.07		Oct-07		7/11/08	Loss of his income	Utilities/Rent
Dolph, Richard			272 2706 Thistle Brook Drive, Concord, NC 28027	3885.8				7/11/08	Sudden and Unforeseen	Associate
Dargan, Chavonya			161 9605 19th Bay St #A, Norfolk VA 23518	654.5	200	May-08		7/14/08	Loss of spouse income	Rent/gift cards
Leach, Erica			58 420 Washington Street, Fuquay-Varine, NC 27526	800		Jun-88		7/14/08	Loss of her income	Rent
Harris, Jeremy Todd			104 100 Woodcreek Dr, Apt E, Cary NC 27511	905.65		Jul-05		7/14/08	Sudden and Unforeseen	Rent and deposits - \$300
Brown Shantell, Kamikka			171 830 W Crisphead Rd, Charlotte NC 28208	1116.41		Jul-06		7/14/08	Loss of child support	Rent and Power
Deisch, Justin			238 820 Gmmer Golden Road, Linden, VA 22642	2000		Nov-07		7/14/08	Fire	Cash
Dunman, Darrell			345 713 Lynn Wood Drive, Burlington NC 27215	0	400	Feb-02		7/14/08	Medical Bills	Gift Cards
Steinhuser, Susan			257 213 Wrenn Drive Apt C, Cary NC 27511	690.99		Jan-07	Aug-08	8/1/08	Death of child's father - created decrease in	Rent
Coleman-Cosby, Linda			177 506 9th Street, SW, Charlottesville VA 22903	1567.5	300			8/1/08	Loss of child support	rent
Fuller, Danna			82 257 Chelveston Drive, Rock Hill SC 29732	1644.26		May-02		8/1/08	Loss of spouse income	rent, utilities, gift cards
Slade, Trevi			341 5200 Mystic Oak Dr, Browns Summit, NC 27214	1707.13		Apr-07		8/1/08	Loss of his income	Mortgage
Stephenson, Jamie			81 104 Pritz St, Edinburg, VA	1074.97		Mar-05		8/1/08	Loss of her income	rent, utilities
Horne, Priscilla			174 8914 Cedar Creek Drive, Charlotte NC 28215	1800		Jun-00		8/18/08	Loss of his income	Rent, Utilities
Jackson, Deborah			191 8447 Gordon Rd #10, Wilmington NC 28411	1482				8/18/08	Loss of his income	Rent
Allen-Young, Melinda			21 1531 Crest Road #26, Raleigh NC 27608	2500		Jan-88		8/21/08	Facing Eviction	Rent
Knapp, Renee			180 4012 Melrose Club Drive, Matthews NC 28105	2500		Dec-06		8/27/08	Flood	Cash
Willson, Amelia			180 3814 Sheffield Drive, Charlotte NC 28205	2500				8/27/08	Flood	Cash
Nagui, Grace			201 3207 K Myra Street, Durham NC 27707	250		Apr-08	Oct-08	9/5/08	Sudden and Unforeseen	Power Bill
Woods, Ella			140 5223 Ephesus Church Road, Durham NC 27707	288.25		Nov-93		9/5/08	Loss of her income	Utilities
Aldridge, Suzanne			171 7956 Travers Run Dnve, Charlotte NC 28215	692.6		Feb-06		9/5/08	Loss of her income	Mortgage
Mahatha, Shevonna			201 1809 Rushwind Drive, Charlotte NC 28206	1042		Sep-97		9/5/08	Loss of her income	Rent
Winston, Keith			11 200 Seven Oaks Rd, Durham, NC 27704	1359		Mar-07		9/5/08	Flood	Rent/Deposit
Devis, Kathryn			96 600 Brewster Lane, Wilmington, n 28412	1564.33		Oct-02		9/5/08	Medical Bills	Mortgage, Utilities
Johnson, Markisha			201 3834 Pauline Lane, Charlotte NC 28216	1720.44		May-94		9/5/08	Loss of his income	Rent, Utilities
Brimmer, Chanel			201 3513 Goldeneye Drive, Charlotte NC 28218	2500		Nov-07		9/5/08	Storm	Cash
Brown, Ryan			201 3411 Teal Pt Dnve, Charlotte NC 28205	2500		Jan-05		9/5/08	Storm	Cash
Kenlon, Reeco			201 7527 CreekRidge Apt 415, Charlotte NC 28212	2500		Jun-99		9/5/08	Flood	Cash
Long, Amy			180 820 Cavalier Ct, Apt E, Charlotte NC 28205	2500		Nov-07		9/5/08	Storm	Cash
Woodward, Paul			201 3243 Shamrock Road, Apt C, Charlotte NC 28215	2500		May-07		9/5/08	Storm	Cash
Haskell, Emma		6080	1840 Heather Chase Drive, Fort Mill, SC 29715	2526	200	Sep-05		9/5/08	Loss of child support	Mortgage
Drummer, Dawn			218 14024 Woodstar Rd, Matthews NC 28105	252.54		Feb-88		9/10/08	Loss of her income/car repair	Utilities
Colon, Emmamannel			179 2100 El Verno Circle, Charlotte NC 28210	500		Aug-08		9/10/08	Storm	Cash
Neely, Charles			182 7429 Quail Wood Apt F, Charlotte NC 28226	485.66		Nov-00		9/19/08	Loss of his income	Rent/Utilities
Oddo, Donna			209 14312 Chenauff, Huntersville NC 28078	611.12		Aug-99		9/19/08	Sudden and Unforeseen	Utilities
Hartley, James			175 PO Box 27, Kill Devil Hills NC 27348	2700		Jul-01		9/19/08	Divorce	Mortgage payment
Burrell, James			30 CANCEL - JAMES WAS TERMED - check returned 1224 95	0				9/24/08	Divorce	Mortgage payment
Ramsey, Angela			140 901 Park Ridge B2, Durham NC 27713	943.5		Oct-06		9/24/08	Sudden and Unforeseen	Rent
Kroner, Donna			188 118 North End Drive, Brunswick CA 31525	83	200	Mar-07		10/3/08	Loss of her income	Utility/Gift Cards
Williams, Loma			188 2318 Demere Rd, St Simons, GA 31522	750		Mar-08		10/3/08	Loss of income	Rent
Nauta, Melanesse			316 723 Sledgehammer Rad, Fredricksburg VA 22405	900		Jun-07		10/3/08	Foreclosure	Deposit
Kaczowski, Donna			176 4149 Peridot Drive, Virginia Beach VA 23456	1400		Jan-01		10/3/08	Foreclosure	Deposit/Rent
Bailey, Eva			209 3237 Shamrock Drive, Charlotte NC 28215	2500		Oct-07		10/3/08	Flood	Cash
Nowlin, Barbara			21 7016 Beaverwood Drive, Raleigh NC 27604	840.5		Oct-01		10/8/08	Loss her income	Rent
Mack, Jodi			322 908 Woodson Apt E, Baltimore MD 21212	910.75		May-07		10/8/08	Loss of his income	Rent
Vest, John			58 105 Ribbon Lane, Cary NC 27511	1350		Oct-07		10/8/08	Sudden and Unforeseen	Deposit, Rent
Lindsey, Mark			177 824 Mallside Forest Ct, Charlottesville NC 22901	576.08				10/17/08	Loss of his income - hrs cut	Power
Scott, Deborrah			11 2410 D Celanese Rd, Rock Hill SC 29732	913		Nov-06		10/17/08	Sudden and Unforeseen	Deposit, rent
Chase, Cynthia			117 1106 Horton Rd, Durham NC 27704	2153.38		Apr-05		10/17/08	Loss of spouse income	Rent
Charter, Clifford			201 704 Matheson Avenue, Charlotte NC 28205	2500		Feb-08	8-Oct	10/17/08	storm	Cash
Tyree, Faye			117 1514 Coleman Loop Rd, Hillsborough NC 27278	273.42		Oct-07		10/31/08	Loss of both incomes	Utilities
Young, Brenda			200 134 Cline Falls Drive, Holly Springs NC 27540	832.01		Jun-05		10/31/08	Loss of her income	Mortgage
Brown, Tori			104 1519 Bullfinch Lane, Apex NC 27523	840		Feb-03		10/31/08	Spouse hours cut - replacement check cut on	Deposit
Swalte, Carolyn			88 1246 Winding Pt Rd, Lake Wylie, SC 29710	970.9		Sep-02		10/31/08	Loss of spouse income	Mortgage, Utilities
Calloway, Fondell			21 4713 Windbreak Lane, Raleigh NC 27616	1345		Oct-02		10/31/08	Facing Eviction	Rent

ASSOCIATE	SS#	Store #	ADDRESS	GRANT AMOUNT	Gift Card	Hire	Term	DATE APPROVED	CRITERIA	Assisted with
Marrone, Cheryl		88	12129 Teragate Drive, Charlotte NC 28273	2053.48				10/31/08	Foreclosure	Deposit, rent, power
Cavacos, Brian		45	9602 Ashlon Manor Way, Waxhaw, NC 28173	2121.58		Nov-93		10/31/08	Loss of both incomes due to death	Mortgage, Utilities
Carter, Carmice		277	2195 McCrady Street, Charleston SC 29405	3000.69		Mar-06		10/31/08	Loss of her income	Rent, Utilities
Ward, Antoinett		83	7981 Audubon Avenue #201, Virginia 22306	3968.77		Aug-02		10/31/08	Funeral	Funeral Expenses
Barrett, Naomi		218	5400 B Pin Oak Circle, Apt C, Charlotte NC 28211	1608.51		Sep-94		11/6/08	Facing Eviction	Rent, Power
Holcomb, Angela		84	3908 Hunt Chase Ct, Greensboro, NC 27407	202.06	200			11/24/08	Loss of spouse income - lost job	Utilities, Gift Card
Peeden, Mary Lee		84	2713 Fairfax, Greensboro, nc 27407	404.01	200			11/24/08	Loss of her income - medical	Power, Gift Card
Maynard, Amy		140	4119 Redwood Road, Durham NC 27704	686.34				11/24/08	Loss of her income	Mortgage
Tobe, Larry		218	201 Plaza Hollow Drive, Apt 47B, Winston Salem, NC 27107	699.07				11/24/08	Loss of his income - medical	Rent, Utilities
McAdams, Angelean		61	1506 Luther St, Charlotte NC 28204	724.5				11/24/08	Loss of spouse income - medical	Rent
Wilson, Dusty		149	144 Jordan Road, York SC 29745	1075				11/24/08	Sudden and Unforeseen	Repair Bill
Fago, Kathy Ann		182	7920 McCall Road, Waxhaw, NC 28173	1093.37				11/24/08	Loss of spouse income - medical	Utilities, Rent
Johnson, Tammy		61	732 East 8th St, Charlotte, nc 28202	1856.04				11/24/08	Loss of spouse income - lost job	Mortgage
Burlew, Janet		257	3000 Silky Dogwood TR, Apex, NC 27502	2850				11/24/08	Loss of her income - medical	Rent
Austin, Kwesha		218	1508 #L Seneca Place, Charlotte NC 28209	350.35				12/5/08	Sudden and Unforeseen	Gas Bill
Robinson, Robert Wayne		28	2140 Coker Ave, Charleston SC 29412	372.56				12/5/08	Loss of his income, medical bills	Utilities
Harris, Coretta		136	312 Burwell Avenue, Henderson NC 27536	625				12/5/08	Storm Damage	Rent
Lewis, Annette		201	600 DeAnna Lane, Charlotte NC 28217 Apt B	1039.47				12/5/08	Sudden and Unforeseen	Rent, Power
Williams, Jonathan		344		2409.5				12/19/08	Death of Family Member	Rent
Roberson, Vicky		142		774				12/19/08	Loss of spouse income	Rent
Helms, Lindsay		7600		1377.47				12/19/08	Seperation	Rent, Utilities
Nichol, Sabnna		222		1045.53	200			12/19/08	Loss of spouse income	Mortgage, gift cards
Giles, Shelley Davis		122		3500				12/30/08	Death	Funeral Expenses
TOTAL				143212.47	2400					