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Department of the Treasur Internal Revenue Service

# **Return of Private Foundation**

# or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2009

OMB No 1545-0052

For cale	ndar year 2009, or tax year beginning		, and ending			
G Check	all that apply: Initial return	Initial return of a former public charity Final return				
	Amended return	Address chan	ge L	Name change		
Use the	IRS Name of foundation	A Employer identification	number			
label	se Lonnie & Carol Poole	Family Found	ation	56-2087730	1	
Utnerwi prini	·		Room/suite			
or typ	· [	•		B Telephone number 919-818-91	01	
See Spe	p/O Caror O. roore, r	.O. DOX 2010	<u> </u>			
Instructi	Raleigh, NC 27619			C if exemption application is p D 1. Foreign organizations		
H Check	type of organization: X Section 501(c)(3) ex	emot private foundation		Foreign organizations me check here and attach co	eeting the 85% test,	
		Other taxable private founda	ition			
	arket value of all assets at end of year   J   Accounting	<del></del>	X Accrual	E If private foundation sta under section 507(b)(1)		
	· 1 —	her (specify)	[24] Noorda	, , , ,		
<b>▶</b> \$	1,543,158. (Part I, colui		basis)	F If the foundation is in a under section 507(b)(1)		
Part I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements	
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)	
1	Contributions, gifts, grants, etc., received			N/A		
2	Check X If the foundation is not required to attach Sch. B					
3	Interest on savings and temporary cash investments	21,028.	21,028.		Statement 1	
4	Dividends and interest from securities	14,682.	14,682.		Statement 2	
5a	Gross rents					
b	Net rental income or (loss)		,		,	
a 6a	Net gain or (loss) from sale of assets not on line 10	12,976.	,			
Revenue	Gross sales price for all assets on line 6a 423,177.					
8 7	Capital gain net income (from Part IV, line 2)		12,976.			
E 8	Net short-term capital gain	*, *	*			
9	Income modifications		· · · · · · · · · · · · · · · · · · ·		;	
10a	Gross sales less returns and allowances		·			
ŀ	Less Cost of goods sold				·	
	Gross profit or (loss)		* * * *	 		
11		40 606	10 606			
12	Total. Add lines 1 through 11	48,686.	48,686. 0.		0	
13	Other employee selaties and wages	U •	<u> </u>		0.	
	Pension plans, employee pensits					
22 16	121				<del></del>	
92 164 93 164	OPT 16 5 2010 Stmt 3	3,150.	0.		0.	
EXP.	-Other-professional fees	3,2300				
	GOEN UT					
- Colored	Taxes Stmt 4	13,248.	0.		0.	
19	Depreciation and depletion					
[ 20	Occupancy					
<b>Q</b> 21	Travel, conferences, and meetings	110.	0.		0.	
E 22	Printing and publications					
ဦး 23	Other expenses Stmt 5	8,459.	8,383.		0.	
[ 24	Total operating and administrative					
<u>a</u>	expenses. Add lines 13 through 23	24,967.	8,383.		0.	
25	Contributions, gifts, grants paid	596,820.			596,820.	
26	Total expenses and disbursements.					
	Add lines 24 and 25	621,787.	8,383.		596,820.	
27	Subtract line 26 from line 12:					
	Excess of revenue over expenses and disbursements	-573,101.				
	Net investment income (if negative, enter -0-)		40,303.			
	Adjusted net income (if negative, enter -0-)			N/A		
923501 02-02-10	LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instruc	tions. 1		Form <b>990-PF</b> (2009)	

P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<u>·                                      </u>
=		Column Should be for this -or-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	1.	2.	716 042
	1	Savings and temporary cash investments	1,230,275.	716,043.	716,043.
	3	Accounts receivable	]		
	١.	Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	ı	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts	414,756.		
şţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
4	10a	Investments - U.S. and state government obligations Stmt 6	7,139.	133,120.	131,928.
	b	Investments - corporate stock			
	C	Investments - corporate bonds Stmt 7	10,387.	154,545.	154,773.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other Stmt 8	427,169.	512,916.	540,412.
	14	Land, buildings, and equipment: basis ►			
		Less accumulated depreciation			
	15	Other assets (describe ► )			
	,				
	16	Total assets (to be completed by all filers)	2,089,727.	1,516,626.	1,543,158.
	17	Accounts payable and accrued expenses			
	18	Grants payable			· ·
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			4
_	22	Other liabilities (describe )			
					ŧ
	23	Total liabilities (add lines 17 through 22)	0.	0.	t
		Foundations that follow SFAS 117, check here			ı
		and complete lines 24 through 26 and lines 30 and 31.		ļ	
nces	24	Unrestricted	2,089,727.	1,516,626.	t.
	25	Temporarily restricted			
Ва	26	Permanently restricted			
Ę		Foundations that do not follow SFAS 117, check here			
Ē	l	and complete lines 27 through 31.			
Net Assets or Fund Bala	27	Capital stock, trust principal, or current funds			
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds			
Ne	30	Total net assets or fund balances	2,089,727.	1,516,626.	
_	31	Total liabilities and net assets/fund balances	2,089,727.	1,516,626.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	t agree with end-of-year figure reported on prior year's return)		1	2,089,727.
2	2 Enter amount from Part I, line 27a				-573,101.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	ines 1, 2, and 3		4	1,516,626.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	1,516,626.
					Form <b>990-PF</b> (2009)

596,820.

7

8

See the Part VI instructions.

7 Add lines 5 and 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.

	1990-PF (2009) Lonnie & Carol Poole Family Foundation 56-208			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctio	าร)
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 X and enter 1%		4	03.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		4	03.
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-		4	03.
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 7, 440.			
b	Exempt foreign organizations - tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d		7,4	40.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
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		7,0	37.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 7,037. Refunded ▶ 11			0.
Pa	rt 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	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$ 0 .			1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$0 .	_		;
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<del></del>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T.			
ь	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?	6	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Х	<u> </u>
٥.	If "Yes," complete Part II, col (c), and Part XV			
ва	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NC	.		
Ď	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	ا	v	
^	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
y	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
40	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
IU	Did any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their names and addresses	I 10 I		ıΛ

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	990-PF(2009) Lonnie & Carol Poole Family Foundation 56-208  ort VII-A   Statements Regarding Activities (continued)	7730	1	Page <b>5</b>
		1		<del></del>
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			x
40	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>~</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	40		x
	August 17, 2008?	12	Х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Δ	
	Website address ► N/A	10 0	1 0 1	
14	The books are in care of ► Lori Newsome  Telephone no. ►919-8		TOT	
	Located at $\triangleright$ P.O. Box 20105, Raleigh, NC ZIP+4 $\triangleright$ 2	7619		<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>,</b> ▶	
_	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
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		1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			Í
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			l
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		i	
	(5) Transfer any income or assets to a disqualified person (or make any of either available			1
	for the benefit or use of a disqualified person)?			,
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			,
	if the foundation agreed to make a grant to or to employ the official for a period after			·
	termination of government service, if terminating within 90 days.)			ŧ
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			. 1
Ī	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?  N/A	116		
	Organizations relying on a current notice regarding disaster assistance check here			1
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
Ĭ	before the first day of the tax year beginning in 2009?	1c	*** ***	X
,	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)):			;
	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			,
a	before 2009? Yes X No			
				4
	If "Yes," list the years			
U				1
	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	١؞		
		2b	<u> </u>	
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			,
_	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3a				
	during the year?	1		
_ b	If 'Yes,' did it have excess business holdings in 2009 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			1
	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,			1
	Form 4720, to determine if the foundation had excess business holdings in 2009 ) N/A	3b	<u> </u>	<u></u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
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 2009?	4b	L_	X
_	F	orm <b>990</b>	)-PF	2009)

orm 990-PF (2009) Lonnie & Carol Poole Fam			<u> 56-2087-</u>	30-	- Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
54 During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y6	s X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	· · · · · · · · · · · · · · · · · · ·	1		,
any voter registration drive?			s X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes	Y6	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or f				
the prevention of cruelty to children or animals?			es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	•	n Regulations	/-		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		· · · · · · · · · · · · · · · · · · ·			1
expenditure responsibility for the grant?		Γ/A	s No		٠,
If "Yes," attach the statement required by Regulations section 53 494	• •				1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	г <del></del> , ,	<b>₩</b>	,	. !
a personal benefit contract?		Y6	es X No		•
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	<u> </u>
If "Yes" to 6b, file Form 8870	shaltar transaction O		es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s b If yes, did the foundation receive any proceeds or have any net income attribut		16	N/A	7b	+-
Information About Officers Directors Tweet		nagore Highly		70	
Part VIII Paid Employees, and Contractors	ees, i oundation ma	magers, mgm	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e)	Expense unt, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation		unt, other owances
Carol J. Poole	Pres/Direct				
700 N. Peninsula					
New Smyrna Beach, FL 32169	5.00	0.	0.		0.
Robert H. Hall	Sec/Treas				
2600 Hilltop Farms Road					
Apex, NC 27502	1.00	0.	0.		0.
	]				
				ļ	
2 Compensation of five highest-paid employees (other than those inc	luded on line 4\ Manne	anter HNONE II			<del></del>
Compensation of the highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(6)	Expense
(a) Name and address of each employee paid more than \$50,000	' 'hours per week '	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acco	unt, other
NONE	devoted to position		compensation	all	owances
NOME	<del> </del>				
	-	<del> </del>		+	<del> </del>
	4				
<del></del> -	<del> </del>	1		†	
· · · · · · · · · · · · · · · · · · ·	1				
	<del> </del>			$\dagger$	
	1				
		<del> </del>	-	1 -	
	1				
Total number of other employees paid over \$50,000	<u> </u>	•	<b></b>	*	0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(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		<u>▶</u> 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 number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the	Expenses
	:u, etc.	
1 N/A	···-	
<del></del>		-
0		<del> </del>
2		-
		-{
3		
<u> </u>		7
4		
· · · · · · · · · · · · · · · · · · ·		7
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2.	Amount
1 N/A		
		_
2		
		4
All other program-related investments. See instructions.		
3		-
Total Add lines 1 through 2		0.
Total. Add lines 1 through 3		<u> </u>

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Form **990-PF** (2009)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndatior	ns, 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	779,813.
b	Average of monthly cash balances	1b	779,813. 775,282.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,555,095.
е	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	1,555,095.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	23,326.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,531,769.
6	Minimum investment return. Enter 5% of line 5	6	76,588.
Б	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and	d certa	in
<u></u>	foreign organizations check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	76,588.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	403.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	76,185.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	76,185.
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	76,185.
P	art XII 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	596,820. 0.
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	596,820.
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	403.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	596,417.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	
	4040(a) radication of tay in those years	-	

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		•		
line 7				76,185.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:			<del></del>	
		0.		
3 Excess distributions carryover, if any, to 2009:	· · · · · · · · · · · · · · · · · · ·			
a From 2004   15,224.				
bFrom 2005 54,047.				
c From 2006 20,960.				
dFrom 2007 947,830.				
eFrom 2008 541,360.				ŧ
f Total of lines 3a through e	1,579,421.			ŧ
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 596,820.	İ			,
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				76,185.
e Remaining amount distributed out of corpus	520,635.	.***		7072031
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )			·	•
6 Enter the net total of each column as indicated below:				,
a Corpus. Add lines 31, 4c, and 4e Subtract line 5	2,100,056.			;
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 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
_ f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	15,224.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	2,084,832.			
10 Analysis of line 9.	-			
a Excess from 2005 54,047.	Ì			
<b>b</b> Excess from 2006 20,960.				
c Excess from 2007 947,830.				
d Excess from 2008 541,360.				
e Excess from 2009 520,635.				
				Corres 000 DE (0000)

	& Carol Poo			56-20	87730 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2009, enter the date of t	the ruling	▶		
b Check box to indicate whether the foun	dation is a private operatir	ng foundation described i	n section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for		: "			
each year listed	i				
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					<del>-</del>
used directly for active conduct of				1	
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	<del></del>			<del> </del>	
alternative test relied upon:					
a "Assets" alternative test - enter:			}		
(1) Value of all assets	ļ				
(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 Info	rmation (Comple	te this part only	if the foundation	had \$5.000 or mo	re in assets
at any time during				40,000 01 1111	
1 Information Regarding Foundation	<del></del>				
a List any managers of the foundation wh		than 2% of the total cont	ributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed i					o or any tan
Carol J. Poole					
b List any managers of the foundation wh	own 10% or more of th	e stock of a cornoration i	or an equally large portion	on of the ownership of a na	ertnership or
other entity) of which the foundation ha	is a 10% or greater interes	st.	or all equally large porti	on or the ownership of a pe	inticising of
None	•				
2 Information Regarding Contribut	tion Grant Gift Loop	Scholarchin etc. Dr	ograma		
Check here X if the foundation				act account uncalicated requ	anto for fundo. If
the foundation makes gifts, grants, etc					
	<del></del>			omplete temo Eu, e, e, and	<del></del>
a The name, address, and telephone num	iber of the person to who	n applications should be	aduressed		
h The form in which and setting about	ha as has its dan dan farana				
<b>b</b> The form in which applications should	DE SUDIFICIEU AND INTORMA	non and materials they st	iouia incluae:		
c Any submission deadlines:					
a rang outstandown doublined.					
d Any restrictions or limitations on award	is, such as by geographica	al areas, charitable fields,	kinds of institutions, or	other factors:	

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
	or substantial contributor	recipient	33.11.12.3.1	
Name and address (home or business)  a Paid during the year  See attached list	or substantial contributor	recipient		596,820.
				1
Total			<b>▶</b> 3a	596,820.
b Approved for future payment				
None				
Total		1	<b>▶</b> 3b	0.
10141			<b>₽</b> 00	

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated (a) Business	d business income (b)	Exclu- (C) Exclu- sion	ded by section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14		
4 Dividends and interest from securities			14	14,682.	
5 Net rental income or (loss) from real estate:					,
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income		<del></del>		_	
8 Gain or (loss) from sales of assets other				400-6	
than inventory		<del></del>	18	12,976.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	}			!	
a	ļ				
b				_	
<u> </u>	ļ		ļ		
d					
e			ļ	40.606	
12 Subtotal. Add columns (b), (d), and (e)	<u>l</u>	0.		48,686.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	48,686.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acco	mplishment of Ex	emp	t Purposes	
Line No.					-1
Explain below how each activity for which incore the foundation's exempt purposes (other than the foundation).			contrib	outed importantly to the accom	plishment of
the foundation's exempt purposes (other than i	by providing far	ida idi addii purposes j.			<del></del>
	<del></del>				
					<del></del>
····		· "	-		<del></del>
					·····
	<del> </del>				
			. – .		
		<del></del>	<del>, , , , , , , , , , , , , , , , , , , </del>		
		<del></del>			

orm 990-Fr (2009) Lonnie & Carol Poole Family Foundation 56-208//30 Page 13										
P	Part:XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations									
1	Did th	e organization directly or indi	rectly engage in any of the followi	ng with any other organization	n described in section 501(c) of		Yes	No		
	the Co	ode (other than section 501(c	)(3) organizations) or in section 5	27, relating to political organi	zations?					
1	a Trans	fers from the reporting found	ation to a noncharitable exempt or	ganization of:						
	(1) (					1a(1)		X		
		ther assets				1a(2)		X		
ı		transactions:						x		
	(1) Sales of assets to a noncharitable exempt organization									
(2) Purchases of assets from a noncharitable exempt organization								X		
		tental of facilities, equipment, teimbursement arrangements				1b(3) 1b(4)		x		
		oans or loan guarantees				1b(4)		X		
			mbership or fundraising solicitation	ากร		1b(6)		X		
•			illing lists, other assets, or paid en			10		X		
			• • •	• •	ays show the fair market value of the goods	التنا	ets.			
					e in any transaction or sharing arrangement		• • • •			
			other assets, or services received.							
(a)	Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, an	d sharing an	rangeme	ents		
			N/A							
				<del> </del>						
					· · · · · · · · · · · · · · · · · · ·					
				· <del></del> · · ·						
				-						
				<del></del>	-					
28	a Isthe	foundation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organiz	ations described					
	ın sec	tion 501(c) of the Code (othe	r than section 501(c)(3)) or in sec	tion 527?		Yes	X	☐ No		
t	o If Yes	s," complete the following sch		• · · · · · · · · · · · · · · · · · · ·						
		(a) Name of org	anization	(b) Type of organization	(c) Description of relation	iship 				
		N/A								
_		<del></del>	·- <del></del>	-						
	Under p	enalties of perjury, I declare that I h	nave examined this return, including acc	ompanying schedules and stateme	ents, and to the best of my knowledge and belief, it	is true, corre	ect,			
	and con	plete Declaration of preparer (other	er than taxpayer or fiduciary) is based or	all information of which preparer i	has any knowledge					
-		Trabet	141424	10/10/10	Trustee					
lere	Si	gnature of officer or trustee	· · · · · · · · · · · · · · · · · · ·	Date	Title					
		Preparer's				arer's identif	ying nur	nber		
5	Paid Preparer's Use Only	signature	M Willy		F.29.10   self- employed ▶ □					
	Paid spare		es Pittman & Gu		EIN ►					
	_ asy	d self-employed), 1500	Sunday Drive,	Suite 300						
		address, and ZIP code Rale	igh, North Card	lina 27607	Phone no. 919	-232 <b>-</b>	<u>590</u>	0		

919-232-5900 Form **990-PF** (2009)

Part IV Capital Gains and Losse	es for Tax on Investment Income						
	escribe the kind(s) of property sold warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)			
1a 704.733 Shares BB&T Inter US Govt CL I Fund				05/04/0905/05/09			
b 950.57 Shares Va	. P	Various Various					
c 399.776 Shares E	P	11/25/0911/27/09					
d 775.276 Shares E			P	11/02/0911/03/09			
e 187.526 Shares H			P	11/25/0911/27/09			
		id Cap Value CL I		11/25/0911/27/09			
g 3,058.03 Shares			P	11/02/0911/03/09			
h 1,027.516 Shares				11/02/0911/03/09			
16,774.02 Shares		al RTN Gov't Bond	P	12/22/0912/23/09 12/22/0912/23/09			
k 6,363.4 Shares V				11/02/09/11/03/09			
		ed-Term TX_EX Fun		11/02/0911/03/09			
m 613.051 Shares H			P	11/25/0911/27/09			
n	<del>-</del>						
0							
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis		) Gain or (loss)			
	(or allowable)	plus expense of sale	(e) p	olus (f) minus (g)			
a 7,694.		7,139.		555.			
b 12,536.		12,529.		7.			
c 3,885.		5,035.		-1,150.			
d 7,714. e 1,682.		10,331.		-2,617. -565.			
e 1,682. f 19,955.		16,754.		3,201.			
g 77,246.		68,000.		9,246.			
h 11,118.		10,387.		731.			
16,355.	-	16,515.		-160.			
68,282.		69,095.		-813.			
k 101,051.		100,000.		1,051.			
92,367.		87,471.		4,896.			
m 3,292.		4,698.		-1,406.			
n							
Complete only for assets showing g	rain in column (h) and owned by t	he foundation on 12/21/60	W1 -	(f			
Complete only for assets showing g	(i) Adjusted basis	(k) Excess of col. (i)		sses (from col. (h)) of col. (h) gaın over col. (k),			
(i) F.M.V. as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) over col. (j), if any			but not less than "-0-")				
a				555.			
b				7.			
С				-1,150.			
d				-2,617.			
_e				-565.			
f				3,201.			
g				9,246.			
<u>h</u>				-160·			
1	· · · · · · · · · · · · · · · · · · ·			-813.			
<u>,</u>		+		1,051.			
1				4,896.			
m				-1,406.			
Π							
0			* **				
	( If nam, also enter	ın Part I, line 7					
2 Capital gain net income or (net capital	al loss) { If gain, also enter -0	-* in Part I, line 7	2	12,976.			
3 Net short-term capital gain or (loss)		d (6):	j				
If gain, also enter in Part I, line 8, col If (loss), enter "-0-" in Part I, line 8	lumn (c).	<b>P</b>		NT / 7\			
in (1055), enter -0- in Part i, line 8		<u> </u>	3	N/A			

Form 990-PF Interest on Savi	ngs and	Tem	porary Ca	ash Ir	nvestments	Statement	1
Source						Amount	
BB&T Checking Account #99935 BB&T Investment Account #243 BB&T Investment Account #340						20,	7. 734. 287.
Total to Form 990-PF, Part I,	line 3	, Co	lumn A			21,(	028.
Form 990-PF Dividend	ls and I	nter	est from	Secur	rities	Statement	2
Source	G	ross	Amount		tal Gains vidends	Column (A	A)
BB&T Investment Account #243 BB&T Investment Account #340		10,237. 4,445.		0.	10,237 4,445		
Total to Fm 990-PF, Part I, 1	n 4	14,682.			0.	14,682.	
Form 990-PF	Acco	unti	ng Fees			Statement	3
Description	(a) Expens Per Bo				(c) Adjusted Net Incom		
Professional Fees	3,	150.		0.			0.
To Form 990-PF, Pg 1, ln 16b	3,	150.		0.			0.
Form 990-PF		Тах	es			Statement	4
Description	(a) Expens Per Bo		(b) Net Inve		(c) Adjusted Net Incom		
Taxes	13,	248.		0.		<del></del>	0.
To Form 990-PF, Pg 1, ln 18	13,	248.		0.			0.

Form 990-PF	Other Expenses				Statement 5	
Description	(a) Expenses Per Books	·		(c) Adjusted Net Incom	(d) Charitable Purposes	
Management fees Bank Fees Membership Dues	8,383. 33. 43.				0.00.00.00	
To Form 990-PF, Pg 1, ln 23	8,459.				0.	
Form 990-PF U.S. and S	State/City G	overnment	Obli	gations	Statement 6	
Description	U.S Gov'		Вос	ok Value	Fair Market Value	
US & State Government Obligat	cions X	<del></del>		133,120.	131,928.	
Total U.S. Government Obligat	cions	•		133,120.	131,928.	
Total State and Municipal Gov	vernment Obl	igations				
Total to Form 990-PF, Part II	I, line 10a	:		133,120.	131,928	
Form 990-PF	Corporat	e Bonds			Statement 7	
Description			Вос	ok Value	Fair Market Value	
Corporate bonds		•		154,545.	154,773	
Total to Form 990-PF, Part II	I, line 10c	•		154,545.	154,773	

Form 990-PF	Other Investments		Statement	8
Description	Valuation Method	Book Value	Fair Market Value	5
Corporate Obligations International Obligations	COST	414,642. 98,274.	-	
Total to Form 990-PF, Part II	, line 13	512,916.	540,41	12.

### LONNIE & CAROL POOLE FAMILY FOUNDATION EIN 56-2087730 For the Year Ended December 31, 2009

**CONTRIBUTIONS MADE FROM THE Lonnie & Carol Poole Family Foundation TO PUBLIC CHARITIES (All Gifts are to Non-related Organizations)** 

Contributions to	<u>Date</u>	Foundation Status of <u>Recipient</u>	Purpose of <u>Deduction</u>	<u>Deduction</u>
	<del></del>			
NC State University	1/2/2009	Public	Charitable	500,000.00
Wake Enterprises	1/15/2009	Public	Charitable	500 00
Phil Lloyd Education Fund	1/15/2009	Public	Charitable	200.00
Theatre in The Park	3/18/2009	Public	Charitable	10,000 00
St. David's School	3/25/2009	Public	Charitable	10,000.00
Ravenscroft School	3/25/2009	Public	Charitable	10,000.00
Camp Seagull/Seafarer	3/25/2009	Public	Charitable	2,000.00
UpMC/Russell	4/7/2009	Public	Charitable	2,500.00
NC State University Alumni Assoc.	4/7/2009	Public	Charitable	1,000.00
Marathon Equipment Company	5/22/2009	Public	Charitable	18,765.43
Halifax Health Hospice Volusia Flagler	6/1/2009	Public	Charitable	2,000.00
Boy Scouts of America	6/4/2009	Public	Charitable	1,004.56
Trinity Baptist Church	6/4/2009	Public	Charitable	10,000.00
First Presbyterian Church Outreach	7/22/2009	Public	Charitable	500.00
Usaa	9/18/2009	Public	Charitable	1,750.00
Hospice of Wake County	10/14/2009	Public	Charitable	100.00
Boy Scouts of America	10/14/2009	Public	Charitable	400.00
Hospice of Wake County	11/16/2009	Public	Charitable	500.00
The Salvation Army	11/16/2009	Public	Charitable	500.00
Food Bank of Central & Eastern NC	11/23/2009	Public	Charitable	100.00
Environmental Research & Education	12/15/09	Public	Charitable	25,000.00
Total to Form 990-PF Part XV				596,819.99

### Form 8868

(Rev April 2009)

Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev. 4-2009)

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	· ·	<b>▶</b> [X]				
<ul> <li>If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2</li> </ul>	of this form).					
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	ously filed Fo	rm 8868.				
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).	<del></del>					
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box ar	nd complete					
Part I only	•	▶ □				
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to requ	uest an exter	nsion of time				
<i>to file income tax returns</i> E <b>lectronic Filing (e-file).</b> Generally, you can electronically file Form 8868 if you want a 3-month automatic e	vtancian of t	ime to file one of the returns				
noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 el- (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electrowww.irs.gov/efile.and.click.on.e-file.for.Charities.&Nonprofits	ectronically i e or consolid	f (1) you want the additional ated Form 990-T Instead,				
Type or Name of Exempt Organization	Emp	Employer identification number				
print Lonnie & Carol Poole Family Foundation		66-2087730				
File by the		0-2001130				
filing your c/o Carol J. Poole, P.O. Box 20105						
return See Instructions City, town or post office, state, and ZIP code For a foreign address, see instructions		-				
Raleigh, NC 27619						
Check type of return to be filed (file a separate application for each return)						
Form 990 Form 990-T (corporation)	orm 4720					
	orm 5227					
Form 990-EZ Form 990-T (trust other than above) Form 6069						
<b>X</b> Form 990-PF	orm 8870					
The books are in the care of ▶ P.O. Box 20105 - Raleigh, NC 27619  Telephone No. ▶ 919-818-9101  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  box ▶ □ . If it is for part of the group, check this box ▶ □ and attach a list with the names and EIN:	_	_				
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of the August 15, 2010 , to file the exempt organization return for the organization is for the organization's return for		The extension				
► X calendar year 2009 or						
tax year beginning						
2 If this tax year is for less than 12 months, check reason Initial return Final return		Change in accounting period				
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any						
nonrefundable credits See instructions	3a	\$ 0				
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated						
· · · · · · · · · · · · · · · · · · ·	3b	1 \$ 0				
tax payments made Include any prior year overpayment allowed as a credit.						
tax payments made Include any prior year overpayment allowed as a credit.  c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,	-   30					
tax payments made Include any prior year overpayment allowed as a credit.	3c	\$ 0				

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 88	868 (Rev. 4-2009)			Page 2
Note.	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this be Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	Form		<b>▶</b> X
Part	II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no c	opies r	eeded)	
Туре о	Name of Exempt Organization	Emp!	oyer iden	tification number
print		l _		
File by th	Lonnie & Carol Poole Family Foundation	5	<u>6-208</u>	7730
extended due date filing the	Number, street, and room or suite no. If a P.O. box, see instructions.	For II	RS use on!	y 
return Se	City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
□ F	type of return to be filed (File a separate application for each return):  Form 990  Form 990-EZ  Form 990-T (sec. 401(a) or 408(a) trust)  Form 990-BL  X  Form 990-PF  Form 990-T (trust other than above)  Form 4720		orm 5227 orm 6069	Form 8870
STOP!	Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	ısly file	d Form 8	368.
Tele If the lifth box   4	books are in the care of ▶ P · O · Box 20105 - Raleigh, NC 27619  sephone No. ▶ 919-818-9101  be organization does not have an office or place of business in the United States, check this box as is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  is if it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all request an additional 3-month extension of time until  For calendar year 2009, or other tax year beginning fithis tax year is for less than 12 months, check reason:  State in detail why you need the extension of the care of the care of the properties of the properties of the care of the properties of the care of the care of the properties of	memb	ers the ex	accounting period
_	Additional time is needed to gather the necessary info	rma	tion	to
	file a complete and accurate return.	Т		
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	8a	\$	403.
_	nonrefundable credits See instructions.  f this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	oa	<b>D</b>	4031
	ax payments made Include any prior year overpayment allowed as a credit and any amount paid			
	previously with Form 8868	8b	\$	7,440.
_	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	<del>  ∞</del>	Ψ	
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0.
	Signature and Verification	<del></del>	-	
Under p	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the, correct, and complete, and that I am authorized to prepare this form.	e best o	f my knowle	edge and belief,
Signatu	re ▶ Title ▶	Date	<b>•</b>	

Form **8868** (Rev. 4-2009)