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Department of the Treasury 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.

OMB No 1545-0052

For calendar year 2009, or tax year beginning		, and ending		
G Check all that apply: Initial return Amended return	Initial return of a fo	· —	Final retur	n
Name of foundation	Address chang	je	A Employer identification	n number
Use the IRS Name of fourtoautoff			Limployer localitation	
Otherwise, GAMBRELL FAMILY FOUND	ATION		56-212067	9
print Number and street (or P O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	
ortype. 6100 FAIRVIEW ROAD		640	704-553-83	296
See Specific City or town, state, and ZIP code		-	C If exemption application is	
CHARLOTTE, NC 28210			D 1. Foreign organization	is, check here
H Check type of organization:	• •		Foreign organizations m check here and attach or	computation .
	Other taxable private founda		E If private foundation st	
Fair market value of all assets at end of year J Accounting	•	Accrual	under section 507(b)(1	
(from Part II, col. (c), line 16) ▶\$ 559, 334. (Part I, colu	ther (specify)	nacie)	F If the foundation is in a	
Part Analysis of Revenue and Expenses			under section 507(b)((d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for chantable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	49,393.		N/A	(oabii basis siriy)
2 Check if the foundation is not required to attach Sch B			,	1
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	3,191.	3,191.		STATEMENT 2
5a Gross rents				1
b Net rental income or (loss)				
68. Net gain or (loss) from sale of assets not on line 10	-57,823.	<u></u>		STATEMENT 1
b Gross sales price for all assets in thin to assets in the sale of assets on line 6a 84,410. 7 Capital gain net income (from Part IV, line 2)				,
7 Capital gain net income (from Part IV, line 2)		0.		
8 Net Short-term capital gain				
9 Income modifications RECEIVED				
108 and allowances	<u> ၂</u>	<u>.</u>		
c Gross profit or (1953) NOV 1 5 ZUIU				+
11 Other income	ဗွ်			-
12 Total. Add lines a through in the little	-5,239.	3,191.		
13 Compensation of officers, directors, trustees, sto	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees STMT 3 b Accounting fees STMT 4 c Other professional fees	672.	168.		0.
b Accounting fees STMT 4	3,736.	934.		0.
- :				
9 17 Interest				
18 Taxes				-
19 Depreciation and depletion				+ <u>'</u>
20 Occupancy 21 Travel, conferences, and meetings		. <u> </u>		
22 Printing and publications				
2 23 Other expenses STMT 5	150.	150.		0.
문 24 Total operating and administrative				
17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 5 24 Total operating and administrative expenses. Add lines 13 through 23	4,558.	1,252.		0.
25 Contributions, gifts, grants paid	53,500.			53,500.
26 Total expenses and disbursements.				
Add lines 24 and 25	58,058.	1,252.		53,500.
27 Subtract line 26 from line 12:				,
8 Excess of revenue over expenses and disbursements	-63,297.	4 655		
b Net investment income (if negative, enter -0-)		1,939.	37/3	
c Adjusted net income (if negative, enter -0-)			N/A	

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923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.



<u> </u>		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
P	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	41,842.	107,869.	107,869.
	3	Accounts receivable ►			
		Less; allowance for doubtful accounts			
ı	4	Pledges receivable ▶			•
		Less; allowance for doubtful accounts ▶			
1	5	Grants receivable			
	_	Receivables due from officers, directors, trustees, and other			
1	٠	disqualified persons			
ı	7	Other notes and loans receivable			
	′	Less: allowance for doubtful accounts			
_	٥	Inventories for sale or use			
Assets	-				
Ass		Prepaid expenses and deferred charges			
`		Investments - U.S. and state government obligations	359,646.	418,182.	4E0 000
		Investments - corporate stock STMT 7	339,040.	410,102.	450,889.
		Investments - corporate bonds			
ı	11	Investments - land, buildings, and equipment: basis		1 mm mm manifes + 4 mans	
1		Less accumulated depreciation			
1	12	Investments - mortgage loans			
	13	Investments - other			
ł	14	Land, buildings, and equipment basis			a an east the management and an extension
ŀ		Less accumulated depreciation			
	15	Other assets (describe ► STATEMENT 8)	0.	576.	576.
	16	Total assets (to be completed by all filers)	401,488.	526,627.	559,334.
П	17	Accounts payable and accrued expenses			
	18	Grants payable	-		
္အ	19	Deferred revenue			>
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
[호	21	Mortgages and other notes payable			
ٿ		Other liabilities (describe)			
		,			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
-		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
S	24	Unrestricted			
ances	25	· ·			
		Temporarily restricted			
8	26	Permanently restricted Foundations that do not follow SFAS 117, check here		··- · · · · · · · · · · · · · · · · · ·	
ا جَ		•			
<u>5</u>		and complete lines 27 through 31.	401 400	E26 627	
Net Assets or Fund Ba	27	Capital stock, trust principal, or current funds	401,488.	526,627.	
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
۲	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
ž	30	Total net assets or fund balances	401,488.	526,627.	
	31	Total liabilities and net assets/fund balances	401,488.	526,627.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
_		····			
		net assets or fund balances at beginning of year - Part II, column (a), line	30		
((mus	st agree with end-of-year figure reported on prior year's return)		. 1	401,488.
		r amount from Part I, line 27a		2	-63,297.
3	Othe	r ıncreases not ıncluded in line 2 (itemize)	SEE ST	ATEMENT 6 3	188,436.
4	Add	lines 1, 2, and 3		. 4	526,627.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	<u> Tota</u>	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	526,627.
					Form 990-PF (2009)

Part IV Capital Gains	and Losses for Tax on I	nvestment	t Income							
(a) List and descr 2-story brick wa	ribe the kind(s) of property sold (e. rehouse; or common stock, 200 st	g., real estate, hs. MLC Co.)		l P⋅	łow ac - Purci - Dona	11456	c) Date a (mo., da	cquired ly, yr.)	(d) Date sold (mo., day, yr.)	
1a 2,000 SHARES -	DUKE ENERGY COL	RPORATI	ON	<u> </u>		7 C	ARIO	วบร	12/29/09	
b 2,000 SHARES -						7 D	ARIO	วบร	12/29/09	
C									-	
d										
e										
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale	ĺ			(h) Ga (e) plus	in or (loss (f) minus () (g)	
a 34,393.	<u> </u>		22,12						12,264.	
b 50,017.			88,02	8.					-38,011.	
C										
d										
е										
Complete only for assets showin	g gain in column (h) and owned by	the foundation	on 12/31/69			(1)	Gains (Co	ol. (h) gain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis		cess of col. (i)			col. (K), DUT N Losses (ot leśs that from col. (n -U-) or h))	
	as of 12/31/69	over	col. (j), if any						<u> </u>	
8									12,264.	
b									-38,011.	
С										
d		_								
e		<u>.) </u>								
2 Capital gain net income or (net ca	pital loss) { If gain, also enti-			}[2				-25,747.	
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) a	and (6):								
If gain, also enter in Part I, line 8,		• •		M						
If (loss), enter -0- in Part I, line 8			<u> </u>	<u> </u>	3			N/A		
Part V Qualification U	nder Section 4940(e) fo	r Reduced	Tax on Net	Inv	estm	ent Inco	me			
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	come	.)					
If section 4940(d)(2) applies, leave th	us nart hlank									
10 10(0)(2) applies, leave ti	no part blame									
Was the foundation liable for the sect			•	lod?					Yes X No	
If "Yes," the foundation does not qual										
1 Enter the appropriate amount in 6		ructions before	making any entric				1		760	
(a) Base period years	(b) Adjusted qualifying di	etributions	Net value of no	(C)	ıtahla.	iica accate	Ι,	Distrib	(d) oution ratio	
Calendar year (or tax year beginning	18 117 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		INCL VALUE OF HO	IICIIAI			(001. (0) divided by 601. (0))			
2008		65,500. 79,500.				0,618. 7,835.			.181633	
2007		33,000.				•			.321780	
2006		40,000.				3,397.			.421036	
2005		86,085.				7,268.			1.811876	
2004		00,000.		-	<u> </u>	9,084.	· 		3.149499	
O. Tatal of loss 4. solvens (d)									E 00E024	
2 Total of line 1, column (d)		l am lina O bi . C	h 4h				2		5.885824	
3 Average distribution ratio for the 5		on line 2 by 5,	or by the number	or yea	ars		1 . 1		1 177165	
the foundation has been in exister	ice ir iess than 5 years						3	-	1.177165	
4 Enter the net value of noncharitab	le-use assets for 2009 from Part X	, line 5					4		475,438.	
5 Multiply line 4 by line 3							5		559,669.	
						•	 			
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)						6		19.	
	,		-							
7 Add lines 5 and 6							7		559,688.	
	- Don't VIII. Inc. 4			٠						
8 Enter qualifying distributions from If line 8 is equal to or greater than	n Part XII, line 4 · line 7, check the box in Part VI, lin	e 1b. and comp	lete that nart usin	o a 19	6 tax r	ate.	8		53,500.	
See the Part VI instructions.	,			/	I'					

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	4948	- see	instr	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	-			39
	of Part I, line 27b		1			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3				39.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	1			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	 			39
	Credits/Payments:	<u> </u>				
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1, 224					
	Exempt foreign organizations - tax withheld at source 6b	\exists				
	Tax paid with application for extension of time to file (Form 8868) 6c	\dashv				
	Backup withholding erroneously withheld 6d	\dashv				
	Total credits and payments. Add lines 6a through 6d	-	.		1,2	24
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	+		<u> </u>	. 2 -
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9	+-			
	•		+		1,1	0 E
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2010 estimated tax 1,185. Refunded	► 10 ► 11		-	<u> </u>	0
	rt VII-A Statements Regarding Activities		<u>. I</u>			
				т	Yes	LNIA
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervi	ene in			res	
	any political campaign?	_	-	1a		X
	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 publis	hed or				
	distributed by the foundation in connection with the activities.					<u></u> -
	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:				,	
		<u>.</u>				
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			ŀ		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporatio	n, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	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?		N/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.					1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the s	tate law				l .
	remain in the governing instrument?			6	X	T
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NC -					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
-	of each state as required by General Instruction G? If "No," attach explanation			8b	~x~	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for o	alendar				1
-	year 2009 or the taxable year beginning in 2009 (see 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
	7 F. Too, attach a schooling their halfes and addresses		Fo			

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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3b

4a

___ Yes 🛣 No

N/A

during the year?

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Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be I	requirea (contin	ued)			
5a During the year did the foundation pay or incur any amount to:			- Ceep	1 !		
(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 indirectly,						
any voter registration drive?			es X No	_		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	8 X No			
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1 1		
509(a)(1), (2), or (3), or section 4940(d)(2)?			es 🗶 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?		Ye	8 X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations				
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?	-	N/A L	5b		
Organizations relying on a current notice regarding disaster assistance check t	nere	•	. ▶∟			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				- 1		
expenditure responsibility for the grant?	N	[/A	s L No			
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					
a personal benefit contract?	•	Yo	es 🗶 No 📙			
\boldsymbol{b} Did the foundation, during the year, pay premiums, directly or indirectly, on a $\boldsymbol{\mu}$	personal benefit contract?		[6b X		
If "Yes" to 6b, file Form 8870.						
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	🗀 Y	es 🗶 No 📙			
b If yes, did the foundation receive any proceeds or have any net income attribut				7b		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	y			
1 List all officers, directors, trustees, foundation managers and their	compensation.					
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) Expense account, other		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances		
SARAH BELK GAMBRELL	PRESIDENT/PAR		compensation			
6100 FAIRVIEW ROAD, SUITE 640	1	T				
CHARLOTTE, NC 28210	0.00	0.	0.	0.		
SARAH GAMBRELL KNIGHT	VICE PRESI/PA					
1811 QUEENS ROAD WEST	1	T				
CHARLOTTE, NC 28207	0.00	0.	0.	0.		
LARRY ESTRIDGE	SECRETARY/PAR	I .				
550 SOUTH MAIN ST., SUITE 400]				
GREENVILLE, SC 29601	0.00	0.	0.	0.		
			•			
	†					
	†					
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances		
NONE			compensation			
	1					
						
	1	li .				
· · · · · · · · · · · · · · · · · · ·	1					
		<u></u>				
T. A. Laumber of other employees and even #50,000		<u> </u>				
Total number of other employees paid over \$50,000			▶	0		

56-2120679

Part VIII Paid Employees, and Contractors (continued)	tion managers, riigniy	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	4	
	┥	
	╡	
	<u> </u>	
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 statist number of organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1 NONE		
		_
		0.
2		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	Inna 1 and 0	Amaiint
Describe the two largest program-related investments made by the foundation during the tax year on 1 N/A	illies I and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		- · · · · · · · · · · · · · · · · · · ·
3		
		0.
Total. Add lines 1 through 3	<u> </u>	U .

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; 455,148. a Average monthly fair market value of securities 1a 26,954. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 1d 482.678. d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 482.678 3 Subtract line 2 from line 1d 7.240. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 475,438. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4 23,772. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 23,772. Minimum investment return from Part X, line 6 39. Tax on investment income for 2009 from Part VI, line 5 2a 2b Income tax for 2009. (This does not include the tax from Part VI.) Add lines 2a and 2b C 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 5 6 Ō. Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 53,500. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a 3b Cash distribution test (attach the required schedule) 53,500 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 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 Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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4940(e) reduction of tax in those years.

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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,		<u>.</u>		
line 7		_		<u>23</u> ,733.
2 Undistributed income, if any, as of the end of 2009			_	
a Enter amount for 2008 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 183,131.				
bFrom 2005 136,147.				
c From 2006 205,640.				
dFrom 2007 153,705. eFrom 2008 48,342.				
• — —	726,965.			'
f Total of lines 3a through e	720,303.			<u> </u>
4 Qualifying distributions for 2009 from Part XII, line 4: ►\$ 53,500.	-			i
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior			0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			'
d Applied to 2009 distributable amount		-		23,733.
e Remaining amount distributed out of corpus	29,767.			
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:				:
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	756,732.			
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				* 3 227
be distributed in 2010				* 3,227.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			,
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	183,131.			
9 Excess distributions carryover to 2010.	103,131.			
Subtract lines 7 and 8 from line 6a	573,601.			,
10 Analysis of line 9:	3,3,001			
a Excess from 2005 136,147.				
b Excess from 2006 205,640.				
c Excess from 2007 153,705.				
d Excess from 2008 48,342.	ļ			,
e Excess from 2009 29,767.				t

Form **990-PF** (2009)

	L FAMILY FO			56-21	20679 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling o			į		
foundation, and the ruling is effective fo		=	▶ └	, , , , , , , , , , , , , , , , , , , 	
b Check box to indicate whether the found		ng foundation described i		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					
b 85% of line 2a					
c Qualifying distributions from Part XII,		-			
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				}	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed		1			
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		ļ			
an exempt organization					
(4) Gross investment income		<u> </u>			
Part XV Supplementary Info			if the foundatior	n had \$5,000 or mo	re in assets
at any time during t	he year-see the	instructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			ributions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			
SARAH BELK GAMBRELL					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha	s a 10% or greater intere:	st			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	Scholarship, etc., Pr	ograms:		
		• • • • • • • • • • • • • • • • • • • •	_	not accept unsolicited reque	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	her of the nerson to who	m annlications should be	addressed:		
	bor of the person to who	m approationo onotita bo	20010000		
SEE STATEMENT 9					
b The form in which applications should b	e submitted and informa	tion and materials they sh	only ruchide.		·
The form in which applications should t	o outmitted and mittilla	non and materials they Si	ioulu moidus.		
e Any submission deadlines:					
c Any submission deadlines:					
d Any restrictions or limitations on success	e cuch ac hu accaran	al arose sharetable field-	kindo of institutions	other factors:	-
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitable lielos,	kinus of institutions, or	other factors.	

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
		:		
			:	
ann am marray 10				
SEE STATEMENT 10 Total	<u></u>	<u> </u>	▶ 3a	53,500.
b Approved for future payment	T			
		:		
NONE				
Total	<u> </u>			0.
Total .			▶ 3b	

Page 12

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	Unrelated business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a	Couc		1		
b	·		 		
	·	••	1 1		
ų	·		+	· · · · · · · · · · · · · · · · · · ·	
ρ			+	· ·	···
1	-		+ -		
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			14	3,191.	
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			1 1		
8 Gain or (loss) from sales of assets other than inventory		· · · · · · · · · · · · · · · · · · ·	18	-57,823.	
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0	•	-54,632.	0.
13 Total. Add line 12, columns (b), (d), and (e)				. 13	-54,632.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
<u> </u>	

Form 990-PF (2009) GAMBRELL FAMILY FOUNDATION 56-2120679 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1			rectly engage in any of the followin	-			Yes	No
	the Co	de (other than section 501(c))(3) organizations) or in section 52	27, relating to political organi	zations?			1
1	a Trans	fers from the reporting founda	ation to a noncharitable exempt or	ganization of:			. 45	
	(1) 0	ash				1a(1)		_X_
	(2) C	ther assets				1a(2)		X
1	Other	transactions:				_ ,_``		
	(1) S	ales of assets to a noncharital	ble exempt organization			1b(1)		_X_
	(2) P	urchases of assets from a not	ncharitable exempt organization			1b(2)		X
	(3) R	ental of facilities, equipment,	or other assets		-	1b(3)		X
	(4) R	eimbursement arrangements				1b(4)		X
	(5) L	oans or loan guarantees				1b(5)		X
	(6) P	erformance of services or me	embership or fundraising solicitation	ons		1b(6)		X
(Sharii	ng of facilities, equipment, ma	illing lists, other assets, or paid em	ployees		1c		X
(d If the	answer to any of the above is	"Yes," complete the following sche	edule. Column (b) should alw	ays show the fair market value of the goods	other ass	ets,	
				• •	e in any transaction or sharing arrangement,		•	
			other assets, or services received.					
(a)	Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions, and	sharing an	rangeme	nts
		·	N/A				-	
_	-	·				·		
								—
_								—
								—
			 		 			—
_				<u> </u>				
			· · · -					—
								—
-								
					-			
			-					
_	-							
			· · · -					
					-			
_								
2			tly affiliated with, or related to, one		ations described		- TE	1
			r than section 501(c)(3)) or in sec	tion 527?		Yes	X] No
	b If Yes	s," complete the following sch		I (6) ÷ (425			
		(a) Name of org	janization	(b) Type of organization	(c) Description of relation	snip		
		N/A						
				ļ l				
			nave examined this return, including acco or than taxpayer or fiduciary) is based on		ents, and to the best of my knowledge and belief, it i	s true, corre	ct,	
	u	5 1 13 11		1 . 1				
•	L _	work will	e yambrell	11/8/10	President			
Sign Here	Sı	gnature of officer or trustee	U	Date	Title			
ב	,,	Preparer's	0 1	Da	ate Check if Prepa	rer's identify	ring nun	iber
Š	투호	signature / Ish	N. W leyle	un 11	1 /8 /10 employed ► □			
-	Paid Preparer's Use Only	Firm's name (or yours / ELLI	OTT DAVIS, PLLC		(EIN ►			
	L s S	if self-employed), 1300	~	, SUITE 300				
_		address, and ZIP code CHAR	LOTTE, NC 28203	<u> </u>	Phone no. 704 -	<u> 333-</u>	888	1
					F	orm 990	-PF(2009)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization **Employer identification number** 56-2120679 GAMBRELL FAMILY FOUNDATION Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. ☑ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, chantable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

	-		_	
ioe	1	of	1	of Part

Schedule B (Form 990, 990-FZ, or 990-PF) (2009)					
	Cahadula D	Æ~~~ 000	990-E7	~ 000-00	(2000)

Name of organization

Employer identification number

GAMBRELL FAMILY FOUNDATION

56-2120679

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SARAH BELK GAMBRELL 6100 FAIRVIEW ROAD, SUITE 640 CHARLOTTE, NC 28210	\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	SARAH BELK GAMBRELL 6100 FAIRVIEW ROAD, SUITE 640 CHARLOTTE, NC 28210	\$\$.	Person Payroli Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II of there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
923452 02-0	1-10	Schedule B (Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page 1 of 1 of Part II
Employer identification number

GAMBRELL FAMILY FOUNDATION

56-2120679

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	2,000 SHARES OF DUKE ENERGY STOCK		
		\$\$34,393.	12/29/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	· · · · · · · · · · · · · · · · · · ·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—		 \$	00, 990-EZ, or 990-PF) (2

FORM 990-PF	G	AIN OR (LOSS)	FROM SALE	OF	ASSETS		STA	TEMENT	1
(A) DESCRIPTION OF	PROPERTY					MANNER ACQUIRED	DA' ACQU		DATE S	OLD
2,000 SHARES -	DUKE ENE	RGY CORP	ORATIO	N	_	DONATED	VAR	IOUS	12/29	/09
GR	B) OSS PRICE	(C) VALUE TIME OF		(D) EXPENSE SALE		(E) DEPRE		GAIN	(F) OR LOS	s
	34,393.	3.	4,393.		0	•	0.			0.
(A) DESCRIPTION OF	PROPERTY					MANNER ACQUIRED	DA'		DATE S	OLD
2,000 SHARES -	LINCOLN	 NATIONAL	CORPO	RATION		DONATED	VAR	ious	12/29	/09
GR	B) OSS PRICE	(C) VALUE TIME OF		(D) EXPENSE SALE		(E) DEPRE			(F) OR LOS	s
	50,017.	10	7,840.	-	0	•	0.		-57,8	23.
CAPITAL GAINS	DIVIDENDS	FROM PA	RT IV							0.
TOTAL TO FORM	990-PF, P	ART I, L	INE 6A				=		-57,8	23.
FORM 990-PF	DI	VIDENDS A	AND IN	TEREST FR	OM	SECURITIE	S	STA	TEMENT	2
SOURCE			GR	OSS AMOUN	т	CAPITAL DIVIDE			LUMN (A AMOUNT	.)
MERRILL LYNCH				3,19	1.		0.		3,1	91.
TOTAL TO FM 99	0-PF, PAR	TI, LN	4	3,19	1.	1 1 2	0.		3,1	91.
					_ =	-				

(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
672.	168.		0.
672.	168.		0.
ACCOUNTI	NG FEES	S	TATEMENT 4
(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES
3,736.	934.		0.
3,736.	934.		0.
OTHER E	XPENSES	S	TATEMENT 5
(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES
150.	150.		0.
150.	150.		0.
IN NET ASS	ETS OR FUND BA	LANCES S	TATEMENT 6
			AMOUNT
BELK GAMBRI	ELL FOUNDATION		188,436.
	ACCOUNTING (A) EXPENSES PER BOOKS 3,736. 3,736. OTHER EXPENSES PER BOOKS 150. 150.	ACCOUNTING FEES (A) (B) EXPENSES NET INVEST- MENT INCOME 3,736. 934. 3,736. 934. OTHER EXPENSES (A) (B) EXPENSES NET INVEST- MENT INCOME 150. 150.	ACCOUNTING FEES (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME 3,736. 934. OTHER EXPENSES (A) (B) (C) EXPENSES S (A) (B) (C) ADJUSTED ADJUSTED ADJUSTED NET INVEST- PER BOOKS MENT INCOME 150. 150. 150. 150.

ASSETS FROM THE SARAH BELK GAMBRELL FOUNDATION.

FORM 990-PF CO	ORPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
LINCOLN NATIONAL CORPORATION - STORMARK OF AMERICA CORPORATION - STORMERCK AND COMPANY INC - STOCK PFIZER INC - STOCK WELLS FARGO & COMPANY - STOCK		251,806. 43,710. 14,510. 27,200. 80,956.	
TOTAL TO FORM 990-PF, PART II, LI	418,182.	450,889.	
FORM 990-PF	OTHER ASSETS		STATEMENT 8
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
EXCISE TAX REFUND RECEIVABLE FROM SARAH BELK GAMBRELL FOUNDATION	0.	576.	576.
TO FORM 990-PF, PART II, LINE 15	0.	576.	576.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SARAH BELK GAMBRELL 6100 FAIRVIEW ROAD, SUITE 640 CHARLOTTE, NC 28210

TELEPHONE NUMBER

704 553-8296

FORM AND CONTENT OF APPLICATIONS

REQUESTS FOR FUNDS SHOULD BE SUBMITTED IN WRITING AND INCLUDE A DESCRIPTION OF THE FOLLOWING: (1) ORGANIZATION/INDIVIDUAL REQUESTING FUNDS (2) WHAT THE FUNDS WILL BE USED FOR (3) WHOM THE FUNDS WILL BENEFIT

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NO RESTRICTIONS

	AND CONTRIBUTIONS DURING THE YEAR	STATEMENT 10		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT	
ARTS AND SCIENCE COUNCIL 227 WEST TRADE STREET, SUITE 250 CHARLOTTE, NC 28202	NONE GENERAL PURPOSES	PUBLIC CHARITY	10,000.	
CHARLOTTE MUSEUM OF HISTORY 3500 SHAMROCK DRIVE CHARLOTTE, NC 28215		PUBLIC CHARITY	5,000.	
FURMAN UNIVERSITY 3300 POINSETT HIGHWAY GREENVILLE, SC 296136480	NONE GENERAL PURPOSES	PUBLIC CHARITY	10,000.	
QUEENS UNIVERSITY 1900 SELWYN AVE. CHARLOTTE, NC 28274	NONE GENERAL PURPOSES	PUBLIC CHARITY	5,000.	
YWCA OF THE CENTRAL CAROLINAS 3420 PARK ROAD CHARLOTTE, NC 28209	NONE GENERAL PURPOSES	PUBLIC CHARITY	12,500.	
TRINITY EPISCOPAL SCHOOL 750 EAST 9TH STREET CHARLOTTE, NC 28202	NONE GENERAL PURPOSES	PUBLIC CHARITY	10,000.	
WARREN WILSON COLLEGE P.O. BOX 9000 ASHEVILLE, NC 28815	NONE GENERAL PURPOSES	PUBLIC CHARITY	1,000.	
TOTAL TO FORM 990-PF, PART XV, LI	INE 3A		53,500.	

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complete only Part I and check this box	
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)	
A corpor Part I on	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and con	·
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar ome tax returns.	n extension of time
noted be (not auto you mus	ic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or continuity the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file for Chanties & Nonprofits	ically if (1) you want the additional insolidated Form 990-T. Instead,
Type or	Name of Exempt Organization	Employer identification number
print	GAMPRELL BANTAN BOIDING MICH	56 0100650
File by the	GAMBRELL FAMILY FOUNDATION	56-2120679
due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions. 6100 FAIRVIEW ROAD, NO. 640	
return, See		
	CHARLOTTE, NC 28210	
Check ty	pe of return to be filed(file a separate application for each return):	
Fo	rm 990 Form 990-T (corporation) Form 4	720
☐ Fo	rm 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52	227
===	rm 990-EZ Form 990-T (trust other than above) Form 60	
X Fo	rm 990-PF	870
	SARAH BELK GAMBRELL cooks are in the care of ► 6100 FAIRVIEW ROAD - CHARLOTTE, NC 2821 chone No.► (704)553-8296 FAX No.►	.0
	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) If the	-
box 🕨	. If it is for part of the group, check this box 🕨 📖 and attach a list with the names and EINs of all	members the extension will cover.
_	equest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto AUGUST 15, 2010 , to file the exempt organization return for the organization named a corporation or the organization return for: X calendar year 2009 or tax year beginning , and ending	
		
2 lf t	his tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any prefundable credits. See instructions	3a \$ 975.
b If t	his application is for Form 990-PF or 990-T, enter any refundable credits and estimated	
	payments made Include any prior year overpayment allowed as a credit	3b \$ 1,224.
	lance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	1
	posit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	
<u>5e</u>	e instructions	3c \$ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

Form 8868 (Rev. 4-2009)

LOI III 0000	(Nev. 4-2009)		Page 2	
• If you a	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this	box	▶ X	
	ly complete Part II if you have already been granted an automatic 3-month extension on a previously fil		8868.	
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copies	needed).	
Type or	Name of Exempt Organization	Employer Identification numb		
print File by the	GAMBRELL FAMILY FOUNDATION	5	66-2120679	
extended due date for filing the	Number, street, and room or suite no. If a P.O. box, see Instructions. SARAH BELK GAMBRELL, 6100 FAIRVIEW ROAD, SUIT	For I	RS use only	
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHARLOTTE, NC 28210			
For	ppe of return to be filed (File a separate application for each return): rm 990		orm 5227 Form 8870 orm 6069	
STOP! D	o not complete Part II if you were not already granted an automatic 3-month extension on a previ	ously file	ed Form 8868.	
• The bo	SARAH BELK GAMBRELL cooks are in the care of 6100 FAIRVIEW ROAD - CHARLOTTE, NC 282	10		
	none No. ► (704)553-8296 FAX No. ►			
	organization does not have an office or place of business in the United States, check this box			
	is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If			
box 🕨	If it is for part of the group, check this box I and attach a list with the names and EINs of			
	equest an additional 3-month extension of time until NOVEMBER 15, 2010.			
5 For	r calendar year 2009 , or other tax year beginning , and ending		<u> </u>	
6 If th	his tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period	
	ate in detail why you need the extension			
	DDITIONAL TIME IS NEEDED IN ORDER TO PREPARE A COMPI	ETE	AND ACCURATE	
	ETURN.			
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		20	
	nrefundable credits. See instructions.	8a	\$ 39.	
	his application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
	payments made. Include any prior year overpayment allowed as a credit and any amount paid	<u> </u>	1 224	
	eviously with Form 8868.	8b	\$ 1,224.	
	lance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	_ _	s 0.	
With	h FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See Instruction Signature and Verification	s. 8c	[\$ 0.	
Under pen it is true, c	alties of perjury, declare that I have examined this form, including accompanying schedules and statements, and to correct, and complete, and that I am authorized to prepare this form.	the best o	of my knowledge and belief,	
Signature		Date	8 halia	
<u>gratury</u>		Date	Form 8868 (Rev. 4-2009)	