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#### Form **990-PF**

## **Return of Private Foundation**

#### or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2009

For calendar year 2009, or tax year beginning and ending Final return G Check all that apply: Initial return Initial return of a former public charity Amended return Address change Name change A Employer identification number Name of foundation Use the IRS MARK A. & RENA R. NORCROSS label. 56-2191282 FAMILY FOUNDATION Otherwise. Number and street (or P O box number if mail is not delivered to street address) Room/suite print B Telephone number or type. 336-883-8600 1049 ROCKFORD ROAD See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions. HIGH POINT, NC D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization; Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis ) ▶\$ 243, <u>.760.</u> under section 507(b)(1)(B), check here Analysis of Revenue and Expenses Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) charitable purposes (cash basis only) expenses per books ıncome ıncome 40,200 Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. 2 Interest on savings and temporary cash investments 13 13. STATEMENT 3 5,651. 5.651. STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 327 6a Net gain or (loss) from sale of assets not on line 10 SCANNED AUG 2 b Gross sales price for all assets on line 6a 1,924. 327. Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other IncompECEIVED 46,191 5,991 0 Total. Add lines-1-through 11 Compensation of officers, directors, Dise Other employee salaries and wages 0. 0. 0. 0. 13 Pension plans, employee benefits \\ 15 16a Legal fèes 2,200 1,100 0. 0. b Accounting-fees STMT 3 c Other professional fees 17 Interest 128 128. 0. 0. STMT 4 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 4,159 4,159 0 0. STMT 5 23 Other expenses 24 Total operating and administrative 0 expenses. Add lines 13 through 23 6,487. 5,387 25 Contributions, gifts, grants paid 53,337 26 Total expenses and disbursements. 59,824 5,387 0 53,337. Add lines 24 and 25 27 Subtract line 26 from line 12: <13,633. 8 Excess of revenue over expenses and disbursements 604. b Net investment income (if negative, enter -0-) 0. c Adjusted net income (if negative, enter -0-)

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Part II Balance Sheets Attached schedules and amounts in the description Beginning of your should be for end-of-year amounts only		Beginning of year		End of year			
_Pai	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1 Cash - non-interest-bearing						
	2 Savings and temporary cash investments	17,604.	46.	46.			
	3 Accounts receivable ► 2,500.						
	Less; allowance for doubtful accounts ▶	2,500.	2,500.	2,500.			
	4 Pledges receivable ►						
	Less: allowance for doubtful accounts						
- 1	5 Grants receivable			<del>_</del>			
ļ	6 Receivables due from officers, directors, trustees, and other						
	disqualified persons						
	7 Other notes and loans receivable						
	Less: allowance for doubtful accounts						
<b>不</b> !	8 Inventories for sale or use						
SS .	9 Prepaid expenses and deferred charges						
1	0a Investments - U.S. and state government obligations						
İ	b Investments - corporate stock		· · ·				
١.	c Investments - corporate bonds						
ין	1 Investments - land, buildings, and equipment basis						
١.	Less accumulated depreciation						
	2 Investments - mortgage loans 3 Investments - other STMT 6	186,568.	190,493.	241,214.			
	3 Investments - other STMT 6 4 Land, buildings, and equipment: basis ►	100,300.	130,433.				
'	Less accumulated depreciation						
١,	5 Other assets (describe )						
'	5 Other assets (describe >						
1	6 Total assets (to be completed by all filers)	206,672.	193,039.	243,760.			
$\overline{}$	7 Accounts payable and accrued expenses	200,072	1,00,00,00	243,700.			
- 1	8 Grants payable						
	9 Deferred revenue						
.9	0 Loans from officers, directors, trustees, and other disqualified persons						
를 2	11 Mortgages and other notes payable						
ے ا	2 Other liabilities (describe >						
i							
2	3 Total liabilities (add lines 17 through 22)	0.	0.				
$\Box$	Foundations that follow SFAS 117, check here						
	and complete lines 24 through 26 and lines 30 and 31.						
8 2	4 Unrestricted						
<u> </u>	5 Temporarily restricted						
<b>E</b> 2	6 Permanently restricted						
Fund Balance	Foundations that do not follow SFAS 117, check here	Ţ					
P. J.	and complete lines 27 through 31.						
g 2		0.	0.				
Net Assets		0.	0.				
2 <u>ک</u>	9 Retained earnings, accumulated income, endowment, or other funds	206,672.	193,039.				
<b>2</b>  3	O Total net assets or fund balances	206,672.	193,039.				
		006 670	102 020				
	1 Total liabilities and net assets/fund balances	206,672.	193,039.	<del></del>			
Pai	rt III Analysis of Changes in Net Assets or Fund Ba	lances					
1 T	atal net accets or fund halances at harmoning of year - Part II, column (a), line 9		1 1				
	otal net assets or fund balances at beginning of year - Part II, column (a), line 3 nust agree with end-of-year figure reported on prior year's return)	U		206 672			
	nust agree with end-of-year figure reported on prior year's return) hter amount from Part I, line 27a		2	206,672. <13,633.>			
	ther increases not included in line 2 (itemize)		3	<u> </u>			
	dd lines 1, 2, and 3		3	193,039.			
	ecreases not included in line 2 (itemize)		5	0.			
	otal net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 30	6	193,039.			
	the state of the s			Form <b>990-PF</b> (2009)			

FAMILY FOUNDATION

P	Part IV Capital Gains a	ind Losses for Tax on In	vestmen	t Income							
	(a) List and descri 2-story brick war	be the kınd(s) of property sold (e.g. ehouse; or common stock, 200 shs	., real estate, s. MLC Co.)		( <b>b)</b> H	How ac - Purch - Dona	nase j	<b>c)</b> Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.	
1a RUSSELL INTL DEVLPD MRKTS P 1							2/1	8/08	01/09/0	9	
								8/08	01/09/0		
	RUSSELL STRATEC								8/08	04/09/0	
d	RUSSELL EMERGIN	IG MKTS			<u> </u>		P 1	2/1	8/08	VARIOUS	;
е					Ц,						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(0)	st or other basis expense of sale					ain or (loss (f) minus (		
_a					1.						1.
_ <u>b</u>				37	$\overline{}$						5.
_ <u>C</u>				43	$\overline{}$						<u>:7.</u>
d	· '			74	4.	<u>.</u>				32	8.
<u>e</u>		gain in column (h) and owned by t	he foundation	on 12/21/60	-		40	Causa (C	a) (b) sava		
	Complete only for assets showing	·							ol. (h) gaın ıot less thaı		
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1)					(from col. (		
_					-						1.
<u>a</u> b					$\neg \dagger$		<u> </u>				5.
 C											7.
d	1										8.
<u></u> -е											
<u> </u>		C If goin also enter	un Dort I. lino	7	7						
2	Capital gain net income or (net cap	oital loss) $\begin{cases} If gain, also enter \\ If (loss), enter -0. \end{cases}$	ın Part I. ime	7	•	2				32	7.
		s) as defined in sections 1222(5) an		•							
J	If gain, also enter in Part I, line 8, c		u (0).		1						
	If (loss), enter -0- in Part I, line 8				ľ	3			N/A		
F	Part V Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net	Inv	estm	nent Inco	me	•	-	
(Fo	or optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment in	come	e.)					
I	control 4040(d)(2) applied leave the	a port blank									
11 3	section 4940(d)(2) applies, leave thi	s part ularik.									
Wa	as the foundation liable for the secti	on 4942 tax on the distributable am	ount of any ye	ear in the base per	od?					Yes X	No
		y under section 4940(e). Do not co						_			
1	<del></del>	ach column for each year; see instru	uctions before	making any entrie	S.					(4)	
	(a) Base period years	(b)	tributions	Net value of no	(c)	utabla	uco accata		Distrib	(d) ution ratio	
	Calendar year (or tax year beginning			Net value of flor	licitat				(col. (b) div	ided by col. (c))	4.0
_	2008		4,605.				3,336			.4338	
	2007		0,199.				3,050.			.3841	
_	2006		1,055.				<u>4,370.</u>			.7559	
	2005		7,722.				6,336.			1.1574	
	2004	_ 0	5,227.			24	<u>5,074.</u>	1		.2661	<u>54</u>
_	Table floor described									2.9975	<i>C</i> 1
	Total of line 1, column (d)	was been saved, douds the total s	n line O bu E	or hu the aumher	of			2		2.3313	01
3	the foundation has been in existen	-year base period - divide the total o	Jii iiile Z by 5,	or by the number	OI yea	di S		,		.5995	12
	the foundation has been in existen	ce il less than 5 years						3		• 3333	12
	Enter the net value of pencharitable	e-use assets for 2009 from Part X, I	ino 5					4		203,81	1
4	Effet the fiet value of noncharitable	e-use assets for 2009 from Part A, i	iiie 3							203,01	4.
E	Multiply line 4 by line 3							5		122,18	q
J	Multiply line 4 by line 3							1		122,10	<u> </u>
	Enter 19/ of pat investment income	o (19/, of Bort I, line 27h)						,			6.
U	Enter 1% of net investment income	5 ( 1/0 ULF ALL I, IIIIC 2/U)						6			<u>.</u>
7	Add lines 5 and 6							7		122,19	5
′	AUU IIIIGS J AIIU U							<del>'  </del>			<u>., .</u>
8	Enter qualifying distributions from	Part XII, line 4						8		53,33	7.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax r	ate.				

MARK A. & RENA R. NORCROSS

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	- see ir	ıstrı	uctio	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_				<u> 12.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2	3				12.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			,	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				<u>12.</u>
6	Credits/Payments:					
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld					_
	Total credits and payments. Add lines 6a through 6d	7				<u>0.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				<u>12.</u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	11				
	rt VII-A Statements Regarding Activities				<b>N</b>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın	-	<del></del>	res	No
	any political campaign?		-	1a		X
Þ	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	d or	İ			
	distributed by the foundation in connection with the activities.					
	Did the foundation file Form 1120-POL for this year?		-	_1c	ļ	X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		1		!	
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		İ			
_	managers. • \$					7.
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		}	_2		<u> </u>
•	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 bylane, or other similar instruments? If "You " attach a conformed copy of the changes.	н	l	•		v
40	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  Did the foundation have unrelated business gross income of \$1,000 or more during the year?		-	3 4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	NT	/A	4a 4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	14	<b>′</b> Դ ⊦	5		X
٠	If "Yes," attach the statement required by General Instruction T.		F	<u> </u>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
Ū	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	law				
	remain in the governing instrument?			6	х	
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.			•		_
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		j			
	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	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calei	ndar	ľ			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		F	10		X

MARK A. & RENA R. NORCROSS Form 990-PF (2009) FAMILY FOUNDATION 56-2191282 Page 5 Part VII-A Statements Regarding Activities (continued) 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) X 11 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 12 Х 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ► MARK A. NORCROSS Telephone no. ►336-883-8600 Located at ► 1049 ROCKFORD ROAD, HIGH POINT, NC ZIP+4 **►27262** 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year N/A Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly); Yes 🗓 No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No 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? Yes X No (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No 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 Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? 1b Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X before the first day of the tax year beginning in 2009? 1c 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? 」Yes 【X】No If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions.) 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

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

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

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?

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

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X

3b

4a

Yes X No

N/A

during the year?

MARK A. & RENA R. NORCROSS FAMILY FOUNDATION 56-2191282 Page 6 Form 990-PF (2009) Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly. Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained N/Aexpenditure responsibility for the grant? Yes If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average (e) Expense account, other hours per week devoted to position (If not paid. (a) Name and address enter -0-) allowances PRES., MARK A. NORCROSS TRES. & CHAIRMAN 1049 ROCKFORD ROAD HIGH POINT, NC 27262 5.00 0 0 0. VICE-PRES. SECRETARY RENA R. NORCROSS 1049 ROCKFORD ROAD 5.00 HIGH POINT, NC 27262 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation allowances NONE

Form **990-PF** (2009)

Total number of other employees paid over \$50,000

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Paid Employees, and Contractors (continued)		<del></del>
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) T	Type of copyee	(a) Companyation
	ype of service	(c) Compensation
NONE		1
		<del></del>
	<del>-</del>	
	<del></del>	
<del></del>		
<b>7</b>		
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	as the	Expenses
	-	· · · · · · · · · · · · · · · · · · ·
1 <u>N/A</u>		
2		
3		
·		
4 <sub></sub>		
Part IV-B Common of Discours Deleted Investments		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	<del></del>	Amount
		Amount
1 <u>N/A</u>		
2		
All about a constant of the district of the constant of the co		
All other program-related investments. See instructions.		
3		
<del></del>		
7.1.1.4.4.1		
Total. Add lines 1 through 3	<u> </u>	0.

P	art X Minimum Investment Return (All domestic foundations in	nust complete this part	Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc., purposes:			<del></del> -
а	Average monthly fair market value of securities			1a	202.704.
b	Average of monthly cash balances			1b	202,704. 4,214.
C	Fair market value of all other assets			1c	
đ	Total (add lines 1a, b, and c)			1d	206,918.
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	206,918.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	, see instructions)		4	3,104.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and or	Part V, line 4		5	203,814.
6	Minimum investment return. Enter 5% of line 5			6	10,191.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) are foreign organizations check here  and do not complete this part.)		oundations ar	nd certain	
1	Minimum investment return from Part X, line 6			1	10,191.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	12.		<u> </u>
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	12.
3	Distributable amount before adjustments. Subtract line 2c from line 1		•	3	10,179.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	10,179.
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	10,179.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	ooses:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	<u>53,337.</u>
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	le, 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	nd Part XIII, line 4		4	<u>53,337.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investigations.	stment			
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	53,337.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years w	hen calculation whether th	e foundation o	malifies for the	section

4940(e) reduction of tax 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,	Colpas	Tours prior to 2000	2555	
line 7				10,179.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	<del></del>
<b>b</b> Total for prior years:				
- Fyene distributions correspond to 2000s		0.		
3 Excess distributions carryover, if any, to 2009:			İ	
a From 2004 53,037. b From 2005 361,787.				
c From 2006 327, 990.				
d From 2007 148, 471.				
e From 2008 127, 938.				
f Total of lines 3a through e	1,019,223.			
4 Qualifying distributions for 2009 from				· · · · · · · · · · · · · · · · · · ·
Part XII, line 4: ►\$ 53,337.				
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				<u>10,179.</u>
e Remaining amount distributed out of corpus	43,158.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:			:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,062,381.			
<b>b</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	F2 027			
not applied on line 5 or line 7	53,037.		- · · · · · · · · · · · · · · · · · · ·	
9 Excess distributions carryover to 2010.	1 000 344			
Subtract lines 7 and 8 from line 6a	1,009,344.			
10 Analysis of line 9: a Excess from 2005 361, 787.				
b Excess from 2006 327, 990.				
c Excess from 2007 148, 471.				
d Excess from 2008 127, 938.				
e Excess from 2009 43, 158.				
				Form <b>990-PF</b> (2009)

## MARK A. & RENA R. NORCROSS

	FOUNDATION	· —— — — —		56-21	91282 Page 1
Part XIV Private Operating I	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter that	t it is a private operating			
foundation, and the ruling is effective for	or 2009, enter the date of	the ruling	▶		
<b>b</b> Check box to indicate whether the foun	dation is a private operatii	ng foundation described i	n section	4942(j)(3) or 49	942(1)(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>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					<del> </del>
each year listed					
<b>b</b> 85% of line 2a		-		<del></del>	
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					
exempt activities					
e Qualifying distributions made directly				<del>-</del>	<del>-</del> -
for active conduct of exempt activities.					}
,					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the				-	<del></del>
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>b</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					i
(4) Gross investment income  Part XV Supplementary Info	rmation (Comple	te this part only i	if the foundation	had \$5 000 or me	nre in assets
at any time during	the vear-see the i	instructions.)		παα φο,σσο στ ππ	Jie iii assets
				<del> </del>	
1 Information Regarding Foundation	-	4b 00/ -64b- 4-4-14-			
a List any managers of the foundation where year (but only if they have contributed in the contributed in			ibutions received by the	e touridation before the clos	se of any tax
• • •		00			
NONE					
<ul> <li>b List any managers of the foundation who other entity) of which the foundation has</li> </ul>			or an equally large porti	ion of the ownership of a pa	artnership or
• ,	ou to to or grouter interes	, <b>u</b>			
NONE			-		
2 Information Regarding Contribut					
Check here <b>X</b> if the foundation of the foundation makes gifts, grants, etc.					
	<del></del>	<u>-</u> `		ompiete nems za, b, c, and	<u> </u>
a The name, address, and telephone num	iber of the person to whon	n applications should be	addressed:		
<b>b</b> The form in which applications should	 oe submitted and informat	ion and materials they sh	ould include:		
c Any submission deadlines;					
d Any restrictions or limitations on award	s. such as by geographics	l areas, charitable fields	kinds of institutions or	other factors:	
and the second s	,			<del></del>	

Form **990-PF** (2009)

Part XV

923611 02-02-10

FAMILY FOUNDATION

56-2191282 Page 11

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient a Paid during the year SEE STATEMENT 7 53,337. **▶** 3a Total b Approved for future payment NONE 0. **▶** 3b Total

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

Enter grace amounts unless atherwise indicated	Unrelate	d business income	Exclud	ed by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated.	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		1000		
ab	-		1		
			1		
C			1		
0			+-+		
e	-		1		
g Fees and contracts from government agencies	·		+-+		
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash		= 11 11	11		
investments	.		14	13.	
4 Dividends and interest from securities		<u> </u>	14	13. 5,651.	
5 Net rental income or (loss) from real estate:		· · · · · · · · · · · · · · · · · · ·	<del> </del>	3,0020	<del></del>
a Debt-financed property		** * * * * * * * * * * * * * * * * * * *	<del>                                     </del>		
b Not debt-financed property					
6 Net rental income or (loss) from personal			1 1	-	
property					
7 Other investment income				-	<del></del>
8 Gain or (loss) from sales of assets other		· · · · · · · · · · · · · · · · · · ·			
than inventory			18	327.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue:					
a					
					· · · · · · · · · · · · · · · · · · ·
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		5,991.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	5,991.
(See worksheet in line 13 instructions to verify calculations.)					
Explain below how each activity for which inc the foundation's exempt purposes (other than			A contribu	uted importantly to the accomp	olishment of
			_		
923621 02-02-10					Form <b>990-PF</b> (2009)

FAMIL	.V 1	₽∕₹₹	ע עונע	TT	$\cap N$

	m 990-F				UNDATION					6-21912			ge 13
P	art X\	<b>/</b>				and Transactions	and	d Relationsl	nips With	Noncharit	able	•	
			Exempt Organ										
1	Did th	e orga	nization directly or ind	lirectly eng	gage in any of the followi	ng with any other organizat	tion d	described in secti	on 501(c) of	_		Yes	No
			-			27, relating to political orga	anızat	tions?					
ŧ			om the reporting found	dation to a	noncharitable exempt of	rganization of:							
	(1) C	ash								<u> </u> 1	la(1)		X
	٠.	ther a								<u> </u> 1	a(2)		Х
١	<b>O</b> ther												
			fassets to a noncharit							ſ	b(1)		<u> X</u>
					le exempt organization					_	b(2)		<u> X</u>
	٠,		of facilities, equipment	•	assets						b(3)		<u>X</u> _
			rsement arrangement	S							b(4)		<u> </u>
	٠,,		r Ioan guarantees								b(5)		<u> </u>
				•	or fundraising solicitati						b(6)		X
(		-		-	, other assets, or paid en	• •					1c		<u>X</u>
•						edule. Column (b) should a						eis,	
					ets, or services received	ved less than fair market va	liue II	ii aliy ii alisaciioli	or Sharing arra	ingement, sno	W III		
'a \	Line no	<del>_ ` _</del>	) Amount involved		(c) Name of noncharitable		Т	(d) Description	of transfers, trans	actions and sha	una ar		
-,-	Lillo No	,,,	774110411111111111111	<u> </u>	N/A	o oxompt or gamzation		(u) Description	OI II AII SIO S, U AII S		iiig ai	argerrie	
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				<del></del>									
				1		· · · · · · · · · · · · · · · · · · ·	1				-		
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					-		T						
_				1	· · · · · · · · · · · · · · · · · · ·		$\dashv$						
				1									
				1				· · ·		•			
2	a Is the	found	ation directly or indire	ctly affiliate	ed with, or related to, one	e or more tax-exempt organ	nizatio	ons described					
	ın sec	tion 50	1(c) of the Code (other	er than sec	ction 501(c)(3)) or in sec	tion 527?					Yes	X	No
1	f Yes	s," con	plete the following scl			,							
			(a) Name of or	ganization	<u> </u>	(b) Type of organization	_	(	c) Description	of relationship			
			N/A			<u> </u>	┸						
							-	<del></del>					
							1						
			-				_	**					
_					- n	<u> </u>	<u> </u>						
	and con		of perjury, I declare that I Declaration of preparement			ompanying schedules and state all information of which prepare			my knowledge an	id belief, it is true	corre	ct,	
			2004	A fa		• w. i		•					
ø	<u></u>	anotur	o of officer or tructes			XIINIO	_	PRESI	JEAT!				
Ĕ	<b>▶</b> 31	_	e of officer or trustee		<del></del>	Dale /	Date	Title	ck if	Preparer's	dentif	ing num	her
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ñ	Paid Preparer's Use Only	signa		10000	NOOFE C		70 ^	em]	oloyed 🚩 📙	<u>  ~/4</u>			
	Paid epare se On	l		RARD		O., P.A.			EIN ► ~	H			
	ا ج ج	l			5869	160			06	122610	0 4	0.4	1.0
	L.,	4551633	and ZIP code HIGH	1 LOT	NT, NC 272	.04			Phone no.	(336)8	04	<u>- 04.</u>	TU.

#### Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

## Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

MARK A. & RENA R. NORCROSS FAMILY FOUNDATION 56-2191282 Organization type (check one): Filers of: Section: Form 990 or 990-EZ \_\_\_\_ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable 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** X 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, charitable, 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, charitable, 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

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

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

_	- 1
Page	

of 1 of Part I

Name of organization

MARK A. & RENA R. NORCROSS

FAMILY FOUNDATION

Employer identification number

56-2191282

Part I Contri	<b>butors</b> (see	instructions)
---------------	--------------------	---------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MARK & RENA NORCROSS  1049 ROCKFORD ROAD  HIGH POINT, NC 27262	\$\$0,200.	Person X Payroll
(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
		\$	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
		\$	Person Payroll Payroll 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 Omnicash Omnicash (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 Occupate Part II of there is a noncash contribution.)

FORM 990-PF INTEREST ON SAVI	INGS AN	D TEM	PORARY C	ASH II	NVESTMENTS	STATEMEN	IТ 1
SOURCE						AMOUN	IT
WELLS FARGO							13.
TOTAL TO FORM 990-PF, PART I,	, LINE	3, CO	LUMN A				13.
FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUI	RITIES	STATEMEN	IT 2
SOURCE	(	GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN AMOUN	
WELLS FARGO			5,651.		0.	5	6,651.
TOTAL TO FM 990-PF, PART I, I	LN 4 =		5,651.		0.	5	651.
FORM 990-PF	ACC	TYNUC	NG FEES			STATEMEN	IT 3
DESCRIPTION	(A EXPEN PER B	SES	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		)) TABLE POSES
ACCOUNTING FEES	2	,200.	1	,100.		0.	0.
TO FORM 990-PF, PG 1, LN 16B	2	,200.	1	,100.		0.	0.
FORM 990-PF		TAX	ES			STATEMEN	T 4
DESCRIPTION		SES	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
FOREIGN TAXES	-	128.	· ·	128.		0.	0.
TO FORM 990-PF, PG 1, LN 18		128.		128.		0.	0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
FEES MISCELLANEOUS EXPENSE	1,966. 2,193.			0. 0.		
TO FORM 990-PF, PG 1, LN 23	4,159.	4,159	•	0. 0.		
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 6		
DESCRIPTION		LUATION ETHOD BO	OOK VALUE	FAIR MARKET VALUE		
MUTUAL FUNDS		COST	190,493.	241,214.		
TOTAL TO FORM 990-PF, PART I	I, LINE 13		190,493.	241,214.		

	AND CONTRIBUTIONS DURING THE YEAR	STATEMENT 7		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT	
FAMILY SERVICE OF THE PIEDMONT	NONE CHARITABLE CONTRIBUTION		250.	
HIGH POINT ARTS COUNCIL	NONE CHARITABLE CONTRIBUTION		2,500.	
IHM CATHOLIC CHURCH	NONE CHARITABLE CONTRIBUTION		11,050.	
MULTIPLE SCLEROSIS	NONE CHARITABLE CONTRIBUTION		6,750.	
SPECIAL OLYMPICS	NONE CHARITABLE CONTRIBUTION		3,000.	
THE COMMUNITY CLINIC OF HIGH POINT	NONE CHARITABLE CONTRIBUTION		1,500.	
THE VINEYARD	NONE CHARITABLE CONTRIBUTION		9,167.	
VARIOUS DONATIONS \$1,000 OR LESS	NONE CHARITABLE CONTRIBUTION		2,550.	

MARK'A. & RENA R. NORCROSS	FAMILY FOUNDA	56-2191282
WESLEY MEMORIAL	NONE CHARITABLE CONTRIBUTION	15,070.
NCSA FOUNDATION INC	NONE CHARITABLE CONTRIBUTION	1,500.
TOTAL TO FORM 990-PF, PART X	CV, LINE 3A	53,337.

## 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 are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this complete Part II unless you have already been granted an automatic 3-month extension on a previously fi		<b>▶ X</b>	
Part				
A corpo Part I o	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con nly	nplete	<b>&gt;</b> 🗆	
	r corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar icome tax returns	exten	sion of time	
noted b (not aut vou mu	inic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron comatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or const submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file gov/efile and click on e-file for Charities & Nonprofits	ically if nsolida	(1) you want the additional ated Form 990-T. Instead,	
Туре о	Name of Exempt Organization	Employer identification number		
print	MARK A. & RENA R. NORCROSS FAMILY FOUNDATION	5	6-2191282	
File by the due date i filing your	or Number, street, and room or suite no If a P.O. box, see instructions.			
return Se instruction	9			
☐ F	orm 990 orm 990-T (corporation) orm 990-BL orm 990-EZ orm 990-F Form 990-T (trust other than above) Form 990-F Form 1041-A  MARK A. NORCROSS books are in the care of 1049 ROCKFORD ROAD - HIGH POINT, NC 272	227 069 370		
Tele If the	books are in the care of \$\int \text{1049 ROCKFORD ROAD} - \text{HIGH POINT, NC 272} \\ phone No \$\int \text{336-883-8600} \\ phone 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 the state of the group, check this box \$\int \text{and attach a list with the names and EINs of all }\end{attach}.	ıs ıs fo		
ıs	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time uniformatic 15, 2010 , to file the exempt organization return for the organization named a corporation or the organization of time uniformatic for the organization of time uniformatic for the organization of time uniformatic for the organization of time uniformatic for the organization of time uniformatic formatic	The extension		
2 lf	this tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period	
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any onrefundable credits. See instructions.	3a	s 0.	
b if	this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		^	
_	ax payments made. Include any prior year overpayment allowed as a credit	3b	\$ 0.	
d	elalance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, eposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	3c	\$ 0.	
	ee ii suudendis.	_ 50		