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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
P O BOX 35009

City or town, state or country, and ZIP + 4
CHARLOTTE, NC 28235

D Employer identification number
56-0890420

E Telephone number
(704) 330-6869

G Gross receipts $ 10,186,632

F Name and address of principal officer
KATHY DRUMM
P O BOX 35009
CHARLOTTE, NC 28235

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www cpcc edu/foundation

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | **L** Year of formation 1965 | **M** State of legal domicile NC

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO SUPPORT CENTRAL PIEDMONT COMMUNITY COLLEGE IN ITS COMMITMENT TO THE LIFE-LONG EDUCATIONAL DEVELOPMENT OF ADULTS

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	42
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	42
5	Total number of employees (Part V, line 2a)	**5**	0
6	Total number of volunteers (estimate if necessary)	**6**	42
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	4,756,426	7,395,944
9	Program service revenue (Part VIII, line 2g)		0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,259	2,655,970
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-40,933	219,304
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,727,752	10,271,218
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	3,151,378	3,668,941
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶378,773		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	697,644	981,016
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	3,849,022	4,649,957
19	Revenue less expenses Subtract line 18 from line 12	878,730	5,621,261

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	29,832,413	34,657,673
21	Total liabilities (Part X, line 26)	3,823,820	3,785,854
22	Net assets or fund balances Subtract line 21 from line 20	26,008,593	30,871,819

Part II Signature Block

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

Sign Here

****** | 2010-12-09
Signature of officer | Date

KATHY DRUMM ASSISTANT TREASURER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-empolyed	Preparer's identifying number (see instructions)
RONALD W LAMBERTH		☐	

Firm's name (or yours if self-employed), address, and ZIP + 4: Cherry Bekaert & Holland LLP, 1111 Metropolitan Avenue Suite 1000, Charlotte, NC 28204

EIN ▶

Phone no ▶ (704) 377-1678

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

The Central Piedmont Community College Foundation was established in 1965 as 501(c)(3) non-profit organization The Foundation's mission is to secure financial support for the College from corporations and businesses, charitable foundations, organizations, alumni, and other individuals Dollars raised by the Foundation are utilized for scholarships, instructional and job-training programs, equipment, and faculty support The Foundation also provides funding that allows the College to respond to emerging community needs and address shortfalls in public support

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 2,614,546 including grants of $ 2,614,546) (Revenue $)

MISCELLANEOUS SPONSORED PROGRAMS AT CENTRAL PIEDMONT COMMUNITY COLLEGE

4b (Code) (Expenses $ 1,054,395 including grants of $ 1,054,395) (Revenue $)

SCHOLARSHIP PROGRAMS AT CENTRAL PIEDMONT COMMUNITY COLLEGE 809 STUDENTS RECEIVED SCHOLARSHIPS DURING THE YEAR

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ $ 3,668,941

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? *If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*			
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? **Yes** **No**			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional **12A** No			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	**28c**	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35**		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0-* if not applicable	1a	11		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	3a			No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			No
b	If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .	7f		Yes	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .	7g			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

Part VI **Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a 42		
b	Enter the number of voting members that are independent	1b 42		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ NC

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

VIVIAN HAILEY
P O BOX 35009
CHARLOTTE, NC 28235
(704) 330-6758

Part VII Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See add'l data										

1b Total . . . . . ▶	1,547,880	871,010	94,401

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 2

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c 109,771				
	d	Related organizations . . . 1d				
	e	Government grants (contributions) 1e				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f 7,286,173				
	g	Noncash contributions included in lines 1a-1f $ 936,274				
	h	**Total.** Add lines 1a-1f . . . . . ▶	7,395,944			
Program Service Revenue		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	**Total.** Add lines 2a–2f . . . . . ▶				
	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶	361,775			361,775
	4	Income from investment of tax-exempt bond proceeds . . ▶				
	5	Royalties . . . . . ▶				
		(i) Real / (ii) Personal				
	6a	Gross Rents 253,500				
	b	Less rental expenses				
	c	Rental income or (loss) 253,500				
	d	Net rental income or (loss) . . . . . ▶	253,500			253,500
		(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory 2,126,545				
	b	Less cost or other basis and sales expenses -167,650				
	c	Gain or (loss) 2,294,195				
	d	Net gain or (loss) . . . . . ▶	2,294,195			2,294,195
Other Revenue	8a	Gross income from fundraising events (not including $ 109,771 of contributions reported on line 1c) See Part IV, line 18 . . . a 48,868				
	b	Less direct expenses . . . b 83,064				
	c	Net income or (loss) from fundraising events . . ▶	-34,196			-34,196
	9a	Gross income from gaming activities See Part IV, line 19 . . . a				
	b	Less direct expenses . . . b				
	c	Net income or (loss) from gaming activities . . ▶				
	10a	Gross sales of inventory, less returns and allowances . a				
	b	Less cost of goods sold . . b				
	c	Net income or (loss) from sales of inventory . . ▶				
		Miscellaneous Revenue / Business Code				
	11a					
	b					
	c					
	d	All other revenue				
	e	**Total.** Add lines 11a–11d . . . . . ▶				
	12	**Total revenue.** See Instructions . . . ▶	10,271,218	0	0	2,875,274

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	3,668,941	3,668,941		
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal	4,588		4,588	
c	Accounting				
d	Lobbying				
e	Professional fundraising *See Part IV, line 17*				
f	Investment management fees	102,714		102,714	
g	Other	249,999		26,409	223,590
12	Advertising and promotion	32,095			32,095
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	128,912		128,912	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,492		15,492	
23	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	SHARED SERVICE AGREEMEN	320,000		320,000	
b	donor cultivation	83,339			83,339
c					
d					
e					
f	All other expenses	43,877		4,128	39,749
25	**Total functional expenses.** Add lines 1 through 24f	4,649,957	3,668,941	602,243	378,773
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		393,089	1	1,265,450
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		9,107,749	3	10,078,348
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 71,307			
	b	Less accumulated depreciation	10b 71,307	264	10c	0
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11		16,908,406	12	19,883,724
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		3,422,905	15	3,430,151
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		29,832,413	16	34,657,673
Liabilities	17	Accounts payable and accrued expenses		100,266	17	143,286
	18	Grants payable			18	
	19	Deferred revenue		229,167	19	479,167
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties		2,584,000	23	2,507,166
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		910,387	25	656,235
	26	**Total liabilities.** Add lines 17 through 25		3,823,820	26	3,785,854
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,358,978	27	1,759,104
	28	Temporarily restricted net assets		3,491,957	28	5,086,068
	29	Permanently restricted net assets		21,157,658	29	24,026,647
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		26,008,593	33	30,871,819
	34	Total liabilities and net assets/fund balances		29,832,413	34	34,657,673

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Employer identification number
56-0890420

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☑ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

h Provide the following information about the supported organization(s)

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

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	3,381,519	6,168,518	3,849,303	4,756,426	7,395,944	25,551,710
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	3,381,519	6,168,518	3,849,303	4,756,426	7,395,944	25,551,710
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						10,278,058
6 **Public Support.** Subtract line 5 from line 4						15,273,652

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	3,381,519	647,252	3,849,303	4,756,426	7,395,944	25,551,710
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	466,972	647,252	906,383	599,663	615,275	3,235,545
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	23,821	3,900		697		28,418
11 **Total support** (Add lines 7 through 10)						28,815,673

12	Gross receipts from related activities, etc (See instructions)	12	489,808

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	53 000 %
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	51 310 %

16a **33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☑

b **33 1/3% support test—2008.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ☐

b **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15
16	Public support percentage from 2008 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	17
18	Investment income percentage from **2008** Schedule A, Part III, line 17	18

19a **33 1/3% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b **33 1/3% support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶

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

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Employer identification number
56-0890420

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $

(ii) Assets included in Form 990, Part X ▶ $

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $

b Assets included in Form 990, Part X ▶ $

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain why in Part XIV and complete the following table

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a	Beginning of year balance	16,725,106				
b	Contributions	1,572,128				
c	Investment earnings or losses	1,884,452				
d	Grants or scholarships	337,583				
e	Other expenditures for facilities and programs	41,790				
f	Administrative expenses	1,348,586				
g	End of year balance	18,453,727				

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ 19 000 %
- b Permanent endowment ▶ 81 000 %
- c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		71,307	71,307	0
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				0

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
MONEY MARKET FUNDS	1,458,920	F
EQUITY MUTUAL FUNDS	11,639,750	F
FIXED INCOME MUTUAL FUNDS	3,664,220	F
PROPERTY HELD FOR SALE	422,000	F
alternative investments	2,698,834	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	19,883,724	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
OTHER CURRENT ASSETS	38,441
real estate held under operating lease	3,391,710
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	3,430,151

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of Liability	(b) Amount
Federal Income Taxes	
DEFERRED COMPENSATION PAYABLE	300,000
ANNUITY PAYMENT LIABILITY	356,235
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	656,235

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	10,271,218
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	4,649,957
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,621,261
4	Net unrealized gains (losses) on investments	4	-758,035
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-758,035
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	4,863,226

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	9,493,533
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-758,035		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	-758,035
3	Subtract line **2e** from line **1**			3	10,251,568
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	102,714		
b	Other (Describe in Part XIV)	4b	-83,064		
c	Add lines **4a** and **4b**			4c	19,650
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	10,271,218

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	4,630,307
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d	83,064		
e	Add lines **2a** through **2d**			2e	83,064
3	Subtract line **2e** from line **1**			3	4,547,243
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	102,714		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	102,714
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	4,649,957

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	THE PERMANENTLY ENDOWED PORTION OF THE FOUNDATION'S ENDOWMENT IS USED TO PROVIDE SCHOLARSHIPS TO STUDENTS AT CPCC AND TO FUND PROGRAMS AT CPCC THE BOARD DESIGNATED FUNDS INCLUDED IN THE ENDOWMENT ARE USED TO SUPPORT THE FOUNDATION'S OPERATIONS
Part X	Description of Uncertain Tax Positions Under FIN 48	The Foundation is exempt from federal income tax and applicable state statutes under the provisions of Section 501(c)(3) of the Internal Revenue Code During the year ended June 30, 2010, the Foundation adopted the Financial Accounting Standards Board guidance on Accounting for Uncertainty in Income Taxes The guidance clarifies the accounting for uncertainty in income taxes recognized in an entity's financial statements by prescribing a recognition threshold and measurement attribute for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return The Foundation's policy is to record a liability for any tax position taken that is beneficial to the Foundation, including any related interest and penalties, when it is more likely than not the position taken by management with respect to a transaction or class of transactions will be overturned by a taxing authority upon examination Management believes there are no such positions as of June 30, 2010 and, accordingly, no liability has been accrued
Part XII, Line 4b - Other Adjustments		SPECIAL EVENT DIRECT EXPENSES -83064
Part XIII, Line 2d - Other Adjustments		SPECIAL EVENT DIRECT EXPENSES 83064

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SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Employer identification number
56-0890420

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- **a** ☐ Mail solicitations
- **b** ☐ Internet and e-mail solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
Total . . . . . ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 SKYLINE 5K (event type)	(b) Event #2 CLAY PIGEON (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	51,591	107,048		158,639
	2 Less Charitable contributions	31,525	78,246		109,771
	3 Gross income (line 1 minus line 2)	20,066	28,802		48,868
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	33,623	49,441		83,064
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				83,064
	11 Net income summary Combine lines 3, column d, and line 10 ▶				-34,196

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1, column d, and line 7 ▶				

			Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____			
a	Is the organization licensed to operate gaming activities in each of these states?	9a		
b	If "No," Explain			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		
b	If "Yes," Explain			
11	Does the organization operate gaming activities with nonmembers?	11		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12		

			Yes	No
13	Indicate the percentage of gaming activity operated in			
a	The organization's facility	**13a**		
b	An outside facility	**13b**		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records			
	Name ▶			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	**15a**		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____			
c	If "Yes," enter name and address			
	Name ▶			
	Address ▶			
16	Gaming manager information			
	Name ▶			
	Gaming manager compensation ▶ $ _____			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions			
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	**17a**		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $			

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Employer identification number
56-0890420

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL PIEDMONT COMMUNITY COLLEGEPO BOX 35009 CHARLOTTE, NC 282355009	560797174	115(1)	2,199,291	486,083	FAIR MARKET VALUE	various items donated by donors for assistance in college programs	During FYE 2010 the Foundation paid $2,199,291 directly to Central Piedmont Community College for scholarships, instructional programs, faculty/staff development, etc Amounts from donor restricted funds are awarded in accordance with donors' criteria

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶ 1

3 Enter total number of other organizations . . . . . ▶ 0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 THE FOUNDATION MAINTAINS DOCUMENTATION REGARDING DONOR RESTRICTIONS ON FUNDS DONATED FOR SPECIFIC PURPOSES (SCHOLARSHIPS AND COLLEGE PROGRAMS) THE FOUNDATION IS INVOLVED IN THE PROCESS AWARDING STUDENT SCHOLARHIPS AND ASSURES THAT SCHOLARSHIPS ARE AWARDED IN ACCORDANCE WITH DONOR RESTRICTIONS COLLEGE DEPARTMENTS SUBMIT "RELEASE OF FUNDS" REQUEST FORMS TO THE FOUNDATION FOR DISBURSEMENTS FROM THE FOUNDATION TO THE COLLEGE FOR SPECIFIC PROGRAMS THE FOUNDATION ASSURES THAT FUNDS ARE AVAILABLE FOR THE SPECIFIC COLLEGE PROGRAM BEFORE DISBURSING TO THE COLLEGE

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Employer identification number
56-0890420

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☐ First-class or charter travel	☑ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax idemnification and gross-up payments	☑ Health or social club dues or initiation fees		
	☑ Discretionary spending account	☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	☐ Compensation committee	☑ Written employment contract		
	☑ Independent compensation consultant	☑ Compensation survey or study		
	☐ Form 990 of other organizations	☑ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**	Yes	
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
DR ANTHONY ZEISS-see(a)	(i)	0	0	0	0	0	0	0
	(ii)	223,226	0	45,813	19,556	4,798	293,393	0
dr kathy drumm see(B)	(i)	0	0	0	0	0	0	0
	(ii)	252,665	0	17,402	22,028	4,824	296,919	0
(a) zeiss deferred compensation	(i)	0	0	1,169,636	0	0	1,169,636	770,000
	(ii)	0	0	0	0	0	0	0
(b) drumm deferred compensation	(i)	0	0	378,244	0	0	378,244	300,000
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
	Part I, Line 1a	Discretionary Spending Account / Social Club Dues The Foundation's Board of Directors reviews and approves the Foundation's annual budget Included in the annual budget is a discretionary spending amount for the College President The discretionary account is used by the President to fund travel-related expenses, foundation-related events, etc The President's office submits invoices and expense reimbursement forms (with proper supporting documentation) to the Foundation for payment as required Expenditures/reimbursements are made in accordance with the Foundation's disbursement policies and procedures (i e expenses less than $10,000 are reviewed and approved by the Executive Director of Finance and the Associate VP of Institutional Advancement, expenses greater than $10,000 are reviewed and approved by the Associate VP of Institutional Advancement and the President of the Foundation's Board of Directors) Housing Allowance On an annual basis the Executive Committee of the Foundation's Board of Directors approves the compensation package for the College president Included in the compensation package is a line item for housing/marketing/travel The President serves as the primary ambassador for the Foundation and uses his personal residence to provide assistance with the Foundation's fundraising efforts, campaigns and marketing activities Additionally, the amounts approved by the Executive Committee are reflected in the Foundation's annual budget that is reviewed and approved by the full Board of Directors Generally, the housing allowance is paid by the Foundation on a semi-annual basis in accordance with the Foundation's disbursement procedures Social Club Dues As indicated above, the College President assists with the Foundation's fundraising efforts In this capacity he entertains current and prospective donors and as a result the Foundation pays for membership to the Myers Park Country Club for this purpose Expenditures are made in accordance with the Foundation's disbursement procedures Companion Travel The Foundation would pay for two trips per year for the College President's spouse if she traveled with him The trips are approved by the President of the Foundation's Board of Directors Expenditures/reimbursements are made in accordance with the Foundation's disbursement procedures
	Part I, Line 4a	The reportable compensation for Dr Zeiss includes deferred retirement compensation distributions of $1,109,636 during calendar year 2009 under a section 457(f) plan This reflects contributions of $970,000 to the plan between the calendar years 2006 and 2009 for services performed during those years the annual contributions were reported in prior form 990s The plan was intended to provide a financial incentive to Dr Zeiss to encourage him to continue to devote his best efforts to the services for the Foundation and to the success of the Foundation Dr Zeiss became fully vested in the 457(f) plan in 2009, causing the deferred retirement compensation and interest to be reported as taxable income to him The reportable compensation for Dr Drumm includes deferred retirement compensation distributions of $358,244 during calendar year 2009 under a section 457(f) plan This reflects contributions of $300,000 to the plan between the calendar years 2006 and 2009 for services performed during those years the annual contributions were reported in prior form 990s The Plan was intended to provide a financial incentive to Dr Drumm to encourage her to continue to devote her best efforts to the services for the Foundation and to the success of the Foundation Dr Drumm became fully vested in the 457(f) plan in 2009, causing the deferred retirement compensation and interest to be reported as taxable income to her
	Part I, Line 5	THE FOUNDATION MET ITS REVENUE GOALS FOR FISCAL YEAR 2010 AND THE ORGANIZATION PAID BONUSES TO ALL CENTRAL PIEDMONT COMMUNITY COLLEGE EMPLOYEES WHO PERFORMED "EMPLOYEE RELATED" SERVICES FOR THE FOUNDATION
	Part I, Line 7	THE FOUNDATION PAID PREMIUMS FOR SUPPLEMENTAL INSURANCE COVERAGE FOR DR ZEISS, DR DRUMM AND BRENDA LEA (DISABILITY, LONG-TERM CARE, LIFE)
Supplemental Information	Part III	CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION DOES NOT HAVE ANY EMPLOYEES RATHER, INDIVIDUALS WHO PERFORM "EMPLOYEE RELATED" SERVICES FOR THE FOUNDATION ARE EMPLOYED BY CENTRAL PIEDMONT COMMUNITY COLLEGE BECAUSE THE FOUNDATION PAYS A SHARED SERVICE AGREEMENT FEE AND REIMBURSES THE COLLEGE FOR CERTAIN ADMINISTRATIVE EXPENSES, SUCH AMOUNTS ARE SHOWN ON FORM 990, PART Ix, LINE 24a COMPENSATION FOR KEVIN MCARTHY IS RECEIVED FROM CENTRAL PIEDMONT COMMUNITY COLLEGE FOR SERVICES PERFORMED AS THE ASSOCIATE VICE PRESIDENT OF THE FOUNDATION COMPENSATION FOR BRENDA LEA IS RECEIVED FROM CENTRAL PIEDMONT COMMUNITY COLLEGE FOR SERVICES PERFORMED AS THE EXECUTIVE DIRECTOR OF DEVELOPMENT FOR THE FOUNDATION COMPENSATION FOR WILLIAM BAKER IS RECEIVED FROM CENTRAL PIEDMONT COMMUNITY COLLEGE FOR SERVICES PERFORMED AS THE DIRECTOR OF DEVELOPMENT FOR THE FOUNDATION COMPENSATION FOR DR KATHY DRUMM IS RECEIVED FOR SERVICES RENDERED AS EXECUTIVE VICE PRESIDENT OF THE CENTRAL PIEDMONT COMMUNITY COLLEGE COMPENSATION FOR DR ANTHONY ZEISS IS RECEIVED FOR SERVICES RENDERED AS PRESIDENT OF CENTRAL PIEDMONT COMMUNITY COLLEGE

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Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Employer identification number
56-0890420

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
Total . . . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
DR KATHY DRUMM	OFFICER	60,820	DR DRUMM PERFORMS CONSULTING SERVICES FOR THE FOUNDATION, CONSISTING OF THE FOLLOWING (1) PROMOTING THE MISSION OF THE FOUNDATION, (2) GARNERING THE SUPPORT FOR THE FOUNDATION, AND (3) ASSISTING IN PLANNING, ORGANIZING AND OVERSEEING THE FOUNDATION'S FUNDRAISING AND MARKETING ACTIVITIES		No
DR ANTHONY ZEISS	OFFICER	361,497	DR ZEISS PERFORMS CONSULTING SERVICES FOR THE FOUNDATION, CONSISTING OF THE FOLLOWING (1) PROMOTING THE MISSION OF THE FOUNDATION, (2) GARNERING THE SUPPORT FOR THE FOUNDATION, AND (3) ASSISTING IN PLANNING, ORGANIZING AND OVERSEEING THE FOUNDATION'S FUNDRAISING AND MARKETING ACTIVITIES		No
DR KEVIN MCCARTHY	OFFICER	9,000	BONUS		No
first trust bank	jim bolt, foundation director is president of the bank	2,507,166	the foundation has a loan with the bank the transaction was negotiated at arm's length and is at fair market value		No

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Employer identification number
56-0890420

Part I Types of Property

		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1	Art—Works of art	X	2	84,000	appraisal
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications	X		34,439	fair market value
5	Clothing and household goods	X		5,732	FAIR MARKET VALUE
6	Cars and other vehicles	X	4	7,611	fair market value
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded	X	3	4,108	AVG HIGH/LOW PRICE
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential	X	2	422,000	appraisal/sales price
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies	X	1	240	fair market value
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (equipment)	X	34	305,537	fair market value
26	Other ▶ (miscellaneous)	X	57	76,716	fair market value
27	Other ▶( )				
28	Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . **29**

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a		No
b	If "Yes," describe in Part II			
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Employer identification number
56-0890420

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS WILL REVIEW THE 990 PRIOR TO FILING AFTER REVIEW BY THE FINANCE COMMITTEE, A COPY OF THE 990 WILL BE PROVIDED TO ALL BOARD MEMBERS PRIOR TO FILING
Form 990, Part VI, Section B, line 12c		THE FOUNDATION WILL ASK BOARD MEMBERS TO COMPLETE THE FAMILY & BUSINESS RELATIONSHIP QUESTIONNAIRE AND THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS THE FOUNDATION WILL REVIEW THE RESPONSES AND DETERMINE WHETHER ANY DISCLOSURES NEED TO BE REPORTED TO THE BOARD OF DIRECTORS FOR REVIEW In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the directors and members of committees with governing board delegated powers considering the proposed transaction or arrangement After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest is discussed and voted upon The remaining board or committee members shall decide if a conflict of interest exists
Form 990, Part VI, Section B, line 15		The CPCC Foundation has no full time employees Key personnel in support of the Foundation are College employees and are subject to compensation, classification and all other personnel policies of the College The College periodically reviews its classification and compensation structure Histories of those reviews are (1) In 1997 the William M Mercer firm reviewed the salary structure, as a result, in September 1997 the College adopted a new Classification and Compensation System (2) In spring 2004 The Segal Company (a benefits, compensation and HR consulting firm) conducted a Faculty and Non-Faculty compensation program review This compared College positions, including those positions supporting the CPCC Foundation, to various market data Modifications and recommendations were adopted as appropriate (3) In spring 2007 the Segal Company updated their previous study and researched additional positions to the market (4) The CPCC Human Resource department periodically researches certain positions to the market to determine adequacy and reasonableness of the compensation (5) The League of Innovation CEO Compensation Study is reviewed annually This study provides data on CEO and 2nd level senior administrators' salaries and benefits In October 2010 Mercer completed a competitive assessment of total rewards for the College President consistent with the standards set forth for the Intermediate Sanctions guidelines established by the Internal Revenue Service CPCC and the Foundation seek to compensate the President in a fair and equitable manner Fair and equitable compensation for an individual with the President's qualifications means providing total reward opportunities commensurate with the 75th percentile to the 90th percentile of like top performing community colleges and/or the 25th percentile to median of the broader higher educational market The President is responsible for carrying out the mission and strategy of CPCC established by the Board and has proven to be a top performing executive It is CPCC's philosophy to provide compensation through recurring base salary, and a competitive benefits package, including retirement benefits The study required an in-depth understanding of the President's position Representatives from Mercer held discussions with the Chair of CPCC's Board of Trustees, the College's Executive Vice President and the President of the Board of Directors for CPCC Foundation to gain an understanding of the President's position at CPCC, the major objectives for the college over the next few years and to understand the duties and responsibilities of the top executive position in achieving these objectives The analysis provided data necessary for determining the reasonableness of the compensation rewards package for the top executive position The competitive market for the analysis included comparably sized community colleges and private educational institutions of comparable size and scope of operations or those that could be competitors for talent To supplement the peer group analysis, Mercer also looked to published survey data The study concluded that CPCC is in general paying consistently, if not slightly below the philosophy of providing total reward opportunities commensurate with the 75th percentile to the 90th percentile of like top performing community colleges and/or the 25th percentile to median of the broader higher educational market The president is positioned at the 75th percentile of comparable community colleges and below the 25th percentile of other higher private education organizations However, when the executive benefits are reflected, being at the higher end of the market helps toward the competitive standing
Form 990, Part VI, Section C, line 19		THE FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST
SCHEDULE R, PART V, LINES 1M, 1N & 1O	SHARED SERVICES AGREEMENT	THE FOUNDATION OFFICES ARE ON COLLEGE FACILITIES THAT ARE MAINTAINED AND OPERATED BY THE COLLEGE DURING FISCAL YEAR 2010, THE COLLEGE WAIVED THE ANNUAL SHARED SERVICE AGREEMENT FEE FOR THE FOUNDATION, BUT THE FOUNDATION RECORDED A CONTRIBUTION AND AN EXPENSE IN THE AMOUNT OF $320,000 TO RECOGNIZE THE VALUE OF THE AGREEMENT THE FOUNDATION DOES NOT TECHNICALLY HAVE ANY EMPLOYEES STAFF SUPPORT TO THE FOUNDATION IS PROVIDED BY EMPLOYEES OF THE cOLLEGE DURING FISCAL YEAR 2010, THE COLLEGE WAIVED THE ANNUAL SHARED SERVICE AGREEMENT FEE BUT THE FOUNDATION RECORDED A CONTRIBUTION AND EXPENSE IN THE AMOUNT OF $320,000 TO RECOGNIZE THE VALUE OF THE AGREEMENT
FORM 990, PAGE 8, PART VII, SECTION B	independent contractor compensation	DR ZEISS AND DR DRUMM PERFORM CONSULTING SERVICES FOR THE FOUNDATION, CONSISTING OF THE FOLLOWING (I) PROMOTING THE MISSION OF THE FOUNDATION, (II) GARNERING SUPPORT FOR THE FOUNDATION, AND, (III) ASSISTING IN PLANNING, ORGANIZING, AND OVERSEEING THE FOUNDATION'S FUNDRAISING AND MARKETING ACTIVITIES
GENERAL INFORMATION	DIRECTORS OF CPCC FOUNDATION	CERTAIN DISABILITY AND LIFE INSURANCE PRODUCTS COVERING EMPLOYEES OF THE COLLEGE WERE PURCHASED THROUGH THE INSURANCE AGENCY OF JAMES R WORRELL, INC (NORTHWESTERN MUTUAL) OF WHICH MR JAMES R WORRELL, SR , A FOUNDATION DIRECTOR, IS PRINCIPAL AND OWNER MRS PATRICIA A RODGERS, A FOUNDATION DIRECTOR, IS PRESIDENT OF RODGERS BUILDERS, WHICH MANAGES CONSTRUCTION PROJECTS FOR THE COLLEGE PAYMENTS MADE TO RODGERS BUILDERS ARE MADE BY THE COLLEGE HARVEY B GANTT, A FOUNDATION DIRECTOR, IS A PRINCIPAL OF GANTT HUBERMAN ARCHITECTS WHICH PROVIDES ARCHITECTURAL SERVICES TO THE COLLEGE PAYMENTS MADE TO GANTT HUBERMAN ARE MADE BY THE COLLEGE DARRELL WILLIAMS, A FOUNDATION DIRECTOR, IS A PRINCIPAL OF NEIGHBORING CONCEPTS WHICH PROVIDES ARCHITECTURAL SERVICES TO THE COLLEGE PAYMENTS MADE TO NEIGHBORING CONCEPTS ARE MADE BY THE COLLEGE
SCHEDULE J, PART II, (A) & (B)	DEFERRED COMPENSATION ARRANGEMENT	The reportable compensation for Dr Zeiss includes deferred retirement compensation distributions of $1,109,636 during calendar year 2009 under a section 457(f) plan This reflects contributions of $970,000 to the plan between the calendar years 2006 and 2009 for services performed during those years The plan was intended to provide a financial incentive to Dr Zeiss to encourage him to continue to devote his best efforts to the services for the Foundation and to the success of the Foundation Dr Zeiss became fully vested in the 457(f) plan in 2009, causing the deferred retirement compensation and interest to be reported as taxable income to him The reportable compensation for Dr Drumm includes deferred retirement compensation distributions of $358,244 during calendar year 2009 under a section 457(f) plan This reflects contributions of $300,000 to the plan between the calendar years 2006 and 2009 for services performed during those years The Plan was intended to provide a financial incentive to Dr Drumm to encourage her to continue to devote her best efforts to the services for the Foundation and to the success of the Foundation Dr Drumm became fully vested in the 457(f) plan in 2009, causing the deferred retirement compensation and interest to be reported as taxable income to her

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Employer identification number
56-0890420

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
central piedmont community college po box 35009 charlotte, NC 28235 56-0797174	education	NC	115(1)	school	

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

		Yes	No
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	**1a**	**No**
b	Gift, grant, or capital contribution to other organization(s)	**1b**	**Yes**
c	Gift, grant, or capital contribution from other organization(s)	**1c**	**No**
d	Loans or loan guarantees to or for other organization(s)	**1d**	**No**
e	Loans or loan guarantees by other organization(s)	**1e**	**No**
f	Sale of assets to other organization(s)	**1f**	**No**
g	Purchase of assets from other organization(s)	**1g**	**No**
h	Exchange of assets	**1h**	**No**
i	Lease of facilities, equipment, or other assets to other organization(s)	**1i**	**Yes**
j	Lease of facilities, equipment, or other assets from other organization(s)	**1j**	**No**
k	Performance of services or membership or fundraising solicitations for other organization(s)	**1k**	**No**
l	Performance of services or membership or fundraising solicitations by other organization(s)	**1l**	**No**
m	Sharing of facilities, equipment, mailing lists, or other assets	**1m**	**Yes**
n	Sharing of paid employees	**1n**	**Yes**
o	Reimbursement paid to other organization for expenses	**1o**	**Yes**
p	Reimbursement paid by other organization for expenses	**1p**	**No**
q	Other transfer of cash or property to other organization(s)	**1q**	**No**
r	Other transfer of cash or property from other organization(s)	**1r**	**No**

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	central piedmont community college	B	2,685,374
(2)	central piedmont community college	I	500,000
(3)	central piedmont community college - see schedule o	M	320,000
(4)	central piedmont community college - see schedule o	N	320,000
(5)	central piedmont community college - see schedule o	O	320,000
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations? Yes	(d) No	(e) Share of end-of-year assets	(f) Disproprtionate allocations? Yes	(f) No	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner? Yes	(h) No

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
mr downie saussy jr DIRECTOR	1 00	X						0	0	0
mr albert f pete slo DIRECTOR	1 00	X						0	0	0
mr robert h stolz DIRECTOR	1 00	X						0	0	0
mr h allen tate jr DIRECTOR	1 00	X						0	0	0
mrs agnes b weisiger DIRECTOR	1 00	X						0	0	0
mr darrel williams DIRECTOR	1 00	X						0	0	0
mr james r worrell sr DIRECTOR	1 00	X						0	0	0
ms larita barber DIRECTOR	1 00	X						0	0	0
dr walter b beaver jr DIRECTOR	1 00	X						0	0	0
mr harvey gantt DIRECTOR emeritus	1 00	X						0	0	0
mr george macbain iv DIRECTOR	1 00	X						0	0	0
mr william h williamso dIRECTOR emeritus	1 00	X						0	0	0
mr ralph a pitts non-VOTING - EX-OFFICIO	1 00	X						0	0	0
MR JIM BOLT SECRETARY	1 00			X				0	0	0
MR WILLIAM M CLAYTOR VICE PRESIDENT	1 00			X				0	0	0
MR EDWIN A DALRYMPLE TREASURER	1 00			X				0	0	0
MR CAMERON M HARRIS VICE PRESIDENT	1 00			X				0	0	0
MR THOMAS E NORMAN PRESDIENT	1 00			X				0	0	0
DR ANTHONY ZEISS-seea NON-VOTING - EX-OFFICIO	1 00			X				0	269,039	24,354
dr kathy drumm seeB non- voting assistant tr	1 00			X				0	270,067	26,852
kevin mccarthy non-voti assistant secretary	40 00			X				0	124,612	15,350
a zeiss deferred compe retirement see sch 0	1 00			X				1,169,636	0	0
b drumm deferred compe retirement SEE SCH 0	1 00			X				378,244	0	0
brenda lea exec director - developm	40 00					X		0	107,150	14,573
william baker dir - development	40 00					X		0	100,142	13,272

Additional Data

Software ID:
Software Version:
EIN: 56-0890420
Name: CENTRAL PIEDMONT COMMUNITY COLLEGE FOUNDATION

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MRS JUDY ALLISON directoR	1 00	X						0	0	0
MRS CLAUDIA W BELK directoR	1 00	X						0	0	0
MR BENTON BRAGG directoR	1 00	X						0	0	0
MR JEFFERSON BROWN director	1 00	X						0	0	0
MR JAMES B BUCHANAN dIRECTOR	1 00	X						0	0	0
MRS MADELYN L CAPLE dIRECTOR	1 00	X						0	0	0
MR WILTON CONNOR dIRECTOR	1 00	X						0	0	0
MR RODDEY DOWD JR dIRECTOR	1 00	X						0	0	0
MR DAVID J DZURICKY DIRECTOR	1 00	X						0	0	0
MR CHARLES L FONVILLE dIRECTOR	1 00	X						0	0	0
MRS HILDA H GURDIAN dIRECTOR	1 00	X						0	0	0
MR THOMAS J HALL dIRECTOR	1 00	X						0	0	0
MR JOSEPH HALLOW III dIRECTOR	1 00	X						0	0	0
MR SHAWN HEATH DIRECTOR	1 00	X						0	0	0
MS CAROL HEVEY DIRECTOR	1 00	X						0	0	0
MR GARY E LABROSSE DIRECTOR	1 00	X						0	0	0
MR SCOTT LEA DIRECTOR	1 00	X						0	0	0
MR JEFFREY MERRIFIELD DIRECTOR	1 00	X						0	0	0
MRS CHRISTA OVERCASH DIRECTOR	1 00	X						0	0	0
MR ROBERT M PITTENGER DIRECTOR	1 00	X						0	0	0
ms frances queen DIRECTOR	1 00	X						0	0	0
mr dan ramirez DIRECTOR	1 00	X						0	0	0
mrs patricia a rodgers DIRECTOR	1 00	X						0	0	0
mr caldwell rose DIRECTOR	1 00	X						0	0	0
mr kenneth robert samue DIRECTOR	1 00	X						0	0	0