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Form **990-PF**

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

OMB No 1545-0052

2009Department of the Treasury
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2009, or tax year beginning **07/01/09**, and ending **06/30/10**

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

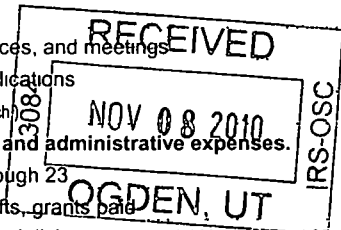
Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation VIRGINIA C. WARRINGTON MEMORIAL TRUST FUND		A Employer identification number 56-1586624
	Number and street (or P O box number if mail is not delivered to street address) Room/suite 511 PALADIN DRIVE		B Telephone number (see page 10 of the instructions) 252-752-8880
	City or town, state, and ZIP code GREENVILLE NC 27834		C If exemption application is pending, check here <input type="checkbox"/>
	H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 83,660		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
		(Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue				
1 Contributions, gifts, grants, etc., received (attach schedule)	6,454			
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	1,076	1,076		
4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)		0		
8 Net short-term capital gain			0	
9 Income modifications				
10a Gross sales less returns & allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	7,530	1,076	0	
Operating and Administrative Expenses				
13 Compensation of officers, directors, trustees, etc				
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule) Stmt 1	550		550	
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see page 14 of the instructions) Stmt 2	56	56	56	
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications	118	118	118	
23 Other expenses (attach schedule)				
24 Total operating and administrative expenses. Add lines 13 through 23	724	174	724	0
25 Contributions, gifts, grants paid	5,498			5,498
26 Total expenses and disbursements. Add lines 24 and 25	6,222	174	724	5,498
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	1,308			
b Net investment income (if negative, enter -0-)		902		
c Adjusted net income (if negative, enter -0-)			0	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form 990-PF (2009)



Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	8,469	8,701	8,701
	2 Savings and temporary cash investments	73,883	74,959	74,959
	3 Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)			
	7 Other notes and loans receivable (att. schedule) ▶ Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch.) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch.) ▶			
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I.)	82,352	83,660	83,660	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	52,670	52,670	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	29,682	30,990	
	30 Total net assets or fund balances (see page 17 of the instructions)	82,352	83,660	
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	82,352	83,660		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	82,352
2 Enter amount from Part I, line 27a	2	1,308
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3	4	83,660
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	83,660

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a N/A				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } 	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	2,449	60,276	0.040630
2007	3,425	45,310	0.075590
2006	1,661	45,310	0.036659
2005	1,199	45,310	0.026462
2004	2,617	45,310	0.057758

2 Total of line 1, column (d)	2	0.237099
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.047420
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	72,720
5 Multiply line 4 by line 3	5	3,448
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	9
7 Add lines 5 and 6	7	3,457
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.	8	5,498

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	9
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	9
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	9
6	Credits/Payments		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	9
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ _____ (2) On foundation managers \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
4b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) NC		
8b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► NONE	13	X	
14	The books are in care of ► CATHY ELLINGTON 511 PALADIN DRIVE Located at ► GREENVILLE, NC	Telephone no ► 252-752-8880 ZIP+4 ► 27834		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15 ► <input type="checkbox"/>		

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A 1b ► <input type="checkbox"/>	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	N/A 1c	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? If "Yes," list the years ► 20 , 20 , 20 , 20	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions)	N/A 2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20 , 20 , 20 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	N/A 3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here		N/A	5b	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d)		N/A <input type="checkbox"/> Yes <input type="checkbox"/> No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			6b	X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		N/A	7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
GRAHAM BYRUM 511 PALADIN DRIVE GREENVILLE NC 27834	PRESIDENT 2.00	0	0	0
THOMAS BURKART 511 PALADIN DRIVE GREENVILLE NC 27834	SECRETARY 2.00	0	0	0
WALTER J. NEWMAN 511 PALADIN DRIVE GREENVILLE NC 27834	TREASURER 2.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions).

If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶ **0**

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 See Statement 3	
	5,498
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
All other program-related investments See page 24 of the instructions	
3	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	73,827
b	Average of monthly cash balances	1b	0
c	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	73,827
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	73,827
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions)	4	1,107
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	72,720
6	Minimum investment return. Enter 5% of line 5	6	3,636

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	3,636
2a	Tax on investment income for 2009 from Part VI, line 5	2a	9
b	Income tax for 2009 (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	9
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,627
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	3,627
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,627

Part XII Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	5,498
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	5,498
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	9
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,489

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				3,627
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	1,540			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 5,498				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)				
d Applied to 2009 distributable amount				3,627
e Remaining amount distributed out of corpus	1,871			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,411			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	358			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	3,053			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007	1,182			
d Excess from 2008				
e Excess from 2009	1,871			

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year SCHEDULE ATTACHED VARIOUS PATIENTS			ASSIST RENAL DISEASE PATIENTS	5,498
Total			► 3a	5,498
b Approved for future payment N/A				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					1,076
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)		0		0	1,076
13	Total. Add line 12, columns (b), (d), and (e)					1,076

(See worksheet in line 13 instructions on page 28 to verify calculations)

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

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of
- (1) Cash
- (2) Other assets
- b** Other transactions
- (1) Sales of assets to a noncharitable exempt organization
- (2) Purchases of assets from a noncharitable exempt organization
- (3) Rental of facilities, equipment, or other assets
- (4) Reimbursement arrangements
- (5) Loans or loan guarantees
- (6) Performance of services or membership or fundraising solicitations
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees
- d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)		X
1b(4)		X
1b(5)		X
1b(6)		X
1c		X

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

- b If "Yes," complete the following schedule**

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

Date _____

Title

Sign Here

**Paid
Preparer's
Use Only**

Preparer's
signature

Firm's name (or yours if self-employed), address, and ZIP code

nda R. Spence, C.P.A.

Date _____

10/15/10

Check if
self-employed

Preparer's identifying
number (see **Signature** on
page 30 of the instructions)

P00963107

Mag Mutual HealthCare Solutions, Inc.

2511 N. Queen St.

Kinston, NC 28501

EIN ▶ 58-2244533

Phone no **252-522-1220**

Form **990-PF** (2009)

Federal Statements

56-1586624

FYE: 6/30/2010

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INDIRECT ACCOUNTING FEES	\$ 550	\$	550	\$
Total	\$ 550	\$ 0	550	\$ 0

Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INDIRECT TAXES AND LICENSES	\$ 56	\$ 56	56	\$
Total	\$ 56	\$ 56	56	\$ 0

Statement 3 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable ActivitiesDescription

MEDICAL EXPENSES OF VARIOUS INDIVIDUALS WITH END-STAGE RENAL DISEASE WERE PAID BY THE FOUNDATION. SEE PART XV FOR A LIST OF RECIPIENTS AND THE SPECIFIC AMOUNTS PAID ON THEIR BEHALF.

Federal Statements**Statement 4 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000**

<u>Name of Manager</u>	<u>Amount</u>
MEMBERS OF EASTERN NEPHROLOGY ASSOCIATES, PLLC CONTRIBUTE THE MAJORITY OF CONTRIBUTIONS TO THE FOUNDATION	\$
Total	\$ 0

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

<u>Description</u>
DEPARTMENT OF SOCIAL SERVICES CERTIFICATE OF NEED

Form 990-PF, Part XV, Line 2c - Submission Deadlines

<u>Description</u>
NONE

Statement 5 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

<u>Description</u>
REGION IV OF THE NC HEALTH SYSTEMS AGENCY DOMICILE END-STAGE RENAL DISEASE PATIENTS

PUBLISHER'S AFFIDAVIT

**NORTH CAROLINA
PITT COUNTY:**

Bennette Rouse ~~advertising assistant~~ affirms that she is
of The Daily Reflector, a newspaper
published daily at Greenville, Pitt County, North Carolina, and that the
advertisement, a true copy of which is hereto attached, entitled
Public Notice

was published in said The Daily Reflector on the following dates:

10-10-10

and that the said newspaper in which such notice, paper, document or
legal advertisement was published, was, at the time of each and every
publication, a newspaper meeting all of the requirements and
qualifications of Chapter 1, Section 597 of the General Statutes of North
Carolina and was a qualified newspaper within the meaning of Chapter
1, Section 597 of the General Statutes of North Carolina.

Public Notice

The annual report of the Warrington Trust
Fund Foundation is available, at the address
noted below, for inspection during normal
business hours, by any citizen who so
requests within 180 days after publication
of this notice of its availability.

The Warrington Trust is a fund set up to help
Kidney Transplant and Dialysis patients.
Donations are welcomed.

**Warrington Trust Foundation
511 Paladin Drive
Greenville, NC 27834**

The principal manager is Martha Futrell.

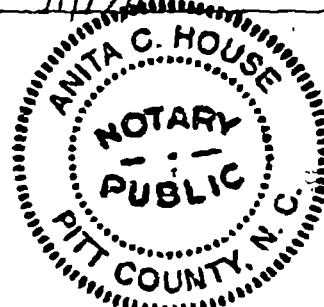
Bennette Rouse

Affirmed and subscribed before me this 11th day

of October, 20 10

Antia C. House
(Notary Public)

My commission expires 11/17/11



✓

Virginia C. Warrington Memorial Trust Fd
General Ledger

Date	Reference T	Description	Beginning Balance	Current Amount	Period End Amount	YTD Balance
		610 Charitable Payments	0.00			
06/30/10	99 B	Check #3010-VOID		(50.00)		
07/14/09	3013	EMC-BETTY SAUNDERS		50.00		
07/14/09	3014	CLARKS HOME MED EQUIP-				
		GLORISTEEN MATTHEWSON		28.07		
07/14/09	3015	CLARKS DME-GLADYS BROWN		28.07		
07/14/09	3016	CLARKS HOME MED-DIANE				
		BARNHILL		30.22		
07/17/09	3017	FOOD LION-BRENDA WHITE		50.00		
07/31/09	3020	VDU/COMFORTHOUSE COM-JAMES				
		CASPER		89.90		
09/02/09	3022	INNEA FOGG-LARRY FOGG				
		TRANSPORTATION		50.00		
09/02/09	3023	REALO DRUG-SANDRA POLLOCK		50.00		
09/02/09	3024	NUTRA BALANCE PROD		50.00		
09/02/09	3025	ALADDIN CABS-ZEB MOORE		20.00		
09/02/09	3026	MARTIN CO TRANSIT-MARTHA				
		ALEXANDER		50.00		
09/02/09	3027	LORI HERNANDEZ-MEDICATION		50.00		
10/06/09	3029	WALGREENS-JAMES DALY		50.00		
10/06/09	3030	EMC-BETTY SAUNDERS LIGHTBILL		50.00		
10/06/09	3031	VERIZON-RAYMOND CALLIS		50.00		
10/06/09	3032	LORI HERNANDEZ-MEDICATION		50.00		
10/06/09	3033	VERIZON-BRENDA WELCH		50.00		
10/06/09	3034	CYNTHIA CRISP-WILLIAM CRISP		42.00		
10/06/09	3035	SHIRLEY GRIFFIN-CARMICHAEL				
		GRIFFIN		47.00		
10/06/09	3036	NUTRA BALANCE PRODUCTS-JOHN				
		RIDDICK		49.75		
10/06/09	3037	VERIZON-ELEANORA KEYS		50.00		
10/08/09	3038	CITY CAB CO-FREDERICK SESSOMS		90.00		
11/10/09	3039	VERIZON-ELEANORA KEYS		50.00		
11/10/09	3040	VERIZON-BRENDA WELCH		50.00		
11/10/09	3041	VERIZON-RAYMOND CALLIS		50.00		
11/10/09	3042	JOE BOND-LINDA WHITE RENT		50.00		
11/10/09	3043	FOOD LION-NELLIE BEST		50.00		
11/10/09	3044	DINNIA WHITFIELD-MEDICATION		50.00		
11/10/09	3045	JANICE WILSON-JAMES WILSON				
		TRANSPORTATION		25.00		
11/10/09	3047	EMC-EDGEcombe-MINNIE KNIGHT		50.00		
12/17/09	3051	TIDEWATER ENERGY-MESLIN				
		BLOUNT		50.00		
12/17/09	3052	REALO-DELPHINE SMITH		9.62		
12/17/09	3053	LORI HERNANDEZ-MEDICATION		50.00		
12/17/09	3054	VERIZON-RAYMOND CALLIS		50.00		
12/17/09	3055	VERIZON-BRENDA WELCH		50.00		
12/17/09	3056	VERIZON-ELEANOR KEYS		50.00		
12/17/09	3057	PITT & GREENE EMC-ELVIS GRAY		50.00		
12/18/09	3058	CLAYBELLE THIGPEN-ANITA EASON				
		TRANSPORTATION		50.00		
12/18/09	3059	PENDER SQ APTS-CAROLYN HYMAN		200.00		
12/22/09	3060	PITT/GREENE EMC-ELVIS GRAY		50.00		
01/12/10	3061	SHIRLEY GRIFFIN-CARMICHAEL				
		GRIFFIN TRANSPORT		43.20		
01/12/10	3062	ALADDIN TAXI-ZEB MOORE		50.00		
01/12/10	3063	REALO-CARLENE BRYANT		40.00		
01/12/10	3064	TIDE WATER ENERGY-MESLIN				
		BLOUNT		50.00		
01/12/10	3065	LORI HERNANDEZ-MEDICATIONS		50.00		

Virginia C. Warrington Memorial Trust Fd
General Ledger

Date	Reference T	Description	Beginning Balance	Current Amount	Period End Amount	YTD Balance
610 Charitable Payments (cont.)						
01/12/10	3066	ALADDIN TAXI-BOBBY TYSON		25 00		
01/12/10	3067	EMC EDGECOMBE-BETTY SAUNDERS		50 00		
01/26/10	3068	VERIZON-ELEANOR KEYS		50 00		
01/26/10	3069	VERIZON-BRENDA WELCH		50 00		
01/26/10	3070	VERIZON-RAYMOND CALLIS		50.00		
01/26/10	3071	ROANOKE ELECTRIC COOP-GLORIA HALL		200 00		
01/26/10	3072	ALADDIN TAXI-ZEB MOORE		30 00		
01/26/10	3073	WALMART-LAWRENCE DOVE		98 96		
02/15/10	3074	VERIZON WIRELESS-BRENDA WELCH		50 00		
02/15/10	3075	VERIZON WIRELESS-RAYMOND CALLIS		50 00		
02/15/10	3076	VERIZON WIRELESS-ELEANOR KEYS		50 00		
02/15/10	3077	GUC-BETTY FULFORD		50 00		
02/15/10	3078	ALADDIN TAXI-KENNETH OUTERBRIDGE		16 00		
02/15/10	3079	TIDE WATER ENERGY-MESLIN BLOUNT		50 00		
02/15/10	3080	PITT & GREENE EMC-ELVIS GRAY		50 00		
02/15/10	3081	CYNTHIA CRISP-WILLIAM CRISP TRANSPORTATION		46 00		
02/19/10	3082	WALGREENS-JAMES DALY		20.00		
02/19/10	3083	CITY OF NEW BERN-MATTIE FARROW		50 00		
02/19/10	3084	REALO DRUG-SAM REED		50 00		
02/19/10	3085	SHIRLEY GRIFFIN-CARMICHAEL GRIFFIN TRANSPORTATION		46 00		
03/16/10	3086	CHERRY ENERGY-JULIUS FORDHAM		50 00		
03/16/10	3087	ALADDIN TAXI-JACQUELINE PORTER		50 00		
03/16/10	3088	PITT & GREENE EMC-ELVIS GRAY		50.00		
03/16/10	3089	GUC-BETTY FULFORD		50 00		
03/16/10	3090	ALADDIN TAXI-MAE ARTIS		20 00		
03/16/10	3091	ALADDIN TAXI-KENNETH OUTERBRIDGE		20 00		
03/16/10	3093	VERNON LEGGETT-JAMIE ANDREWS		50 00		
03/16/10	3094	TIDE WATER ENERGY-MESLIN BLOUNT		50 00		
03/16/10	3095	BRENDA MITCHELL-MAGGIE PITT		50 00		
03/16/10	3096	NUTRA BALANCE-JOHN RIDDICK		50 00		
04/01/10	3097	VERIZON WIRELESS-BRENDA WELCH		50 00		
04/01/10	3098	VERIZON-RAYMOND CALLIS		50.00		
04/01/10	3099	VERIZON-ELEANOR KEYS		50.00		
04/01/10	3100	BCOC-AUDREY WILLIAMS		50 00		
04/01/10	3101	BCOC-PRIMOUS COBB		50.00		
04/01/10	3102	BCOC-GARRETT TUTEN		50.00		
04/20/10	3103	VALERIE UTEN-GARRETT TUTEN		48.00		
04/20/10	3104	CYNTHIA CRISP-WILLIAM CRISP		50 00		
04/20/10	3105	SHIRLEY GRIFFIN-CARMICHAEL GRIFFIN		50 00		
04/20/10	3106	BCDC-AUDREY WILLIAMS		50.00		
04/20/10	3107	BCDC-PRIMOUS COBB		50.00		
04/20/10	3108	REALO PHARM-CARLENE BRYANT		9 27		
04/20/10	3109	REALO PHARM-HELEN EZZELL		9.90		
04/20/10	3110	DOMINION VA POWER-LEON MASON		50 00		
04/20/10	3111	MUTRA BALANCE-JOHN RIDDICK		45 70		
04/20/10	3112	TIDE WATER ENERGY-MESLIN BLOUNT		50 00		
04/20/10	3113	EMC-BETTY SAUNDERS		50 00		
04/20/10	3114	PITT/GREENE EMC-ELVIS GRAY		50 00		

**Virginia C. Warrington Memorial Trust Fd
General Ledger**

Date	Reference T	Description	Beginning Balance	Current Amount	Period End Amount	YTD Balance
610 Charitable Payments (cont.)						
04/20/10	3115	CHERRY ENERGY-JULIUS FORDHAM		50 00		
05/13/10	3116	DELORES HARRISON-HUBERT				
		HARRISON RENT ASSIST		50.00		
05/13/10	3117	JOE BOND-LINDA WHITE RENT ASSIS		50.00		
05/13/10	3118	DOMINION VA POWER-LEON MASON		50 00		
05/13/10	3119	CLAYBELLE THIGPEN-ANITA EASON		50 00		
05/13/10	3120	VERIZON-ELEANOR KEYS		50 00		
05/13/10	3121	VERIZON-RAYMOND CALLIS		50 00		
05/13/10	3122	VERIZON-BRENDA WELCH		50.00		
05/13/10	3123	REALO-CARLENE BRYANT		24 57		
05/13/10	3124	REALO-FRED LOONEY		40 83		
06/30/10	3125	MARTIN CO TRANSIT-MARTHA				
		ALEXANDER		50 00		
06/30/10	3126	PITT & GREENE EMC-ELVIS GRAY		50 00		
06/30/10	3127	BEAUFORT CO DEV CTR-AUDREY				
		WILLIAMS		50.00		
06/30/10	3128	BEAUFORT CO DEV CTR-PRIMOUS				
		COBB		50 00		
06/30/10	3129	VALERIE TUTEN-GARRETT TUTEN				
		TRANSPORTATION		49 25		
06/30/10	3130	SHIRLEY GRIFFIN-CARMICHAEL				
		GRIFFIN		50.00		
06/30/10	3131	DOMINION VIRGINIA POWER-				
		MANNIE SALLEY		50 00		
06/30/10	3132	REALO DRUGS-TRAVIS WHITE		6 00		
06/30/10	3133	TOWN OF LAGRANGE-SANDRA				
		POLLOCK		50 00		
06/30/10	3134	WALGREENS-HENRY STREET		50 00		
			June	5,498 31	5,498 31	
				<u>5,498 31</u>		<u>5,498.31</u>

Range of Accounts Specified.

YTD Profit/(Loss) (5,498.31)

Number of Transactions

114

The General Ledger is in balance

0 00