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SCANNED JAN I 3 2011

Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

	TOTING I RASSITY 1	be able to use a copy of this		rtına reauirements.	2009
	ndar year 2009, or tax year beginning SEP			AUG 31, 2010	· · · · · · · · · · · · · · · · · · ·
Check	call that apply: Initial return Amended return	Initial return of a fo	ormer public charity	Final return	1
se the	IRS Name of foundation		-	A Employer identification	number
<u>label</u> herwi	se. BREWER FOUNDATION, IN	C.		56-0941242	
print	Number and street (or P O box number if mail is not de	elivered to street address)	Room/suite	B Telephone number	
or type e Spec	****			252-443-13	33
tructio	one I City of towir, State, and ZIF code			C If exemption application is p	
Charle	type of organization: X Section 501(c)(3) ex			D 1. Foreign organization: 2. Foreign organizations me check here and attach co	
_		Other taxable private foundation	ation		
	arket value of all assets at end of year J Account		Accrual	E If private foundation sta under section 507(b)(1	
	· —	ther (specify)		F If the foundation is in a	• • • • • • • • • • • • • • • • • • • •
- \$	1,039,740. (Part I, colu	mn (d) must be on cash	basis.)	under section 507(b)(1	
art 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).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	40,437.		N/A	
2	Check [If the foundation is not required to attach Sch 8 Interest on savings and temporary	10	4.0	ļ .	G
3	cash investments	18.	18.		Statement 1
4	Dividends and interest from securities Gross rents	17,947.	17,947.		Statement 2
1	Net rental income or (loss)				
- Ra	Net gain or (loss) from sale of assets not on line 10	-1,244.			
b 7	Gross sales price for all				
7	Capital gain net income (from Part IV, line 2)		0.		
8	Net short-term capital gain				
9	Income modifications Gross sales less returns		· · -		
	and allowances				
	Cless Cost of goods sold				
	Other income				
12	Total. Add lines 1 through 11	57,158.	17,965.		
13	Compensation of officers, directors, trustees, etc	0.	0.		0
14	Other employee salaries and wages				
	Pension plans, employee benefits				
108	Legal fees Accounting fees Stmt 3	1,875.	0.		0
}	Other professional fees Stmt 4	13,215.	13,215.		D i o
17	•				70
18	Taxes Stmt 5	-1,379.	0.	S 141 0 4 2	44 181 0
19	Depreciation and depletion .			ISI JAN V 4 Z	<u> </u>
20	Occupancy				<u> </u>
21	Travel, conferences, and meetings			OGDEN.	
22	Printing and publications				<u> </u>
23 24				 	 -
16a b c 17 18 19 20 21 22 23 24	expenses. Add lines 13 through 23	13,711.	13,215.		<u> </u>
25	Contributions, gifts, grants paid	51,837.			51,837
26					
<u> </u>	Add lines 24 and 25	65,548.	13,215.		51,837
27	Subtract line 26 from line 12:				
- 1	Excess of revenue over expenses and disbursements	-8,390.	4 555	ļ	
- 1	Net investment income (if negative, enter -0-)		4,750.		
3501 -02-10	Adjusted net income (if negative, enter -0-) LHA For Privacy Act and Paperwork Reduction	<u> </u>	<u>.</u>	N/A	Form 990-PF (2009

5 Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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' (a) List and describe	d Losses for Tax on Ir the kind(s) of property sold (e.g			(b) H	ow acquired Purchase	(c) Date	acquired	(d) Date sold
2-story brick wareh	2-story brick warehouse; or common stock, 200 shs. MLC Co.)				Purchase Donation	(mo., d	ay, yr.)	(mo., day, yr.)
18								
b See Attached S	Statement	<u> </u>						
d								
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis kpense of sale				ain or (loss) s (f) minus (
<u>a</u>				\dashv				<u> </u>
<u>b</u>				\dashv	- ·			
d d		-		\dashv				
e 231,100.			232,34	4.	· · ·	. <u>_</u>		-1,244
Complete only for assets showing g	ain in column (h) and owned by	the foundation				(I) Gains (C	ol. (h) gain	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (į), if any		С	ol. (k), but r	not less than (from col. (1 -0-) or
a								
b								
C								
d			 -				·····	-1,244
e <u> </u>	∫ If gain, also ente	r in Part I line 7	7	7		-		1,233
2 Capital gain net income or (net capital	ul loss) 🐧 If (loss), enter -0	- in Part I, line		}	2			-1,244
3 Net short-term capital gain or (loss) a If gain, also enter in Part I, line 8, coli If (loss), enter -0- in Part I, line 8		nd (6):		}			N/A	
	ler Section 4940(e) for	Reduced	Tax on Net	Inve	estment In	come	N/A	
(For optional use by domestic private for	undations subject to the section	4940(a) tax on	net investment in	come.)			
If section 4940(d)(2) applies, leave this p	nart hlank							
.,,,,,								
Was the foundation liable for the section If "Yes," the foundation does not qualify it	under section 4940(e). Do not co	omplete this pai	rt.					Yes X No
1 Enter the appropriate amount in each		ructions before	making any entre					(d)
Base period years Calendar year (or tax year beginning i	(b) Adjusted qualifying dis	stributions	Net value of no	(c) nchari	table-use asse	ts	Distrib	(d) oution ratio ided by col. (c))
2008		5,189.			850,64		(001: (0) 011	.04136
2007		6,823.		1,	269,71			.02900
2006		3,090.			213,60			.05198
2005		1,597.		1,	040,12			.07844
2004		2,973.			923,52	5.	T	.17646
2 Total of line 1, column (d)						2		.37727
3 Average distribution ratio for the 5-ye the foundation has been in existence		on line 2 by 5,	or by the number	of yea	-	3		.07545
4 Enter the net value of nonchardable-	use assets for 2009 from Part X,	line 5				4		1,056,872
5 Multiply line 4 by line 3						5		79,745
6 Enter 1% of net investment income (1% of Part I, line 27b)	_				6		48
7 Add lines 5 and 6		·		_		7		79,793
8 Enter qualifying distributions from Pa	art XII, line 4	-		-	•	8		51,837
4 70	• • • • • • • • • • • • • • • • • • • •		•					

_		<u> </u>		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee instru	ictio	<u>15)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			<u>95.</u>
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2			9.5
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			95.
	Credits/Payments:			
	2009 estimated tax payments and 2008 overpayment credited to 2009			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			<u> </u>
8				95.
	,			90.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ► Refunded ► 11 Int VII-A Statements Regarding Activities			
_			Vac	No
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	4-	163	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	-	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.		ļ	
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$ 0 .			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$O.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	ļ	X
	If "Yes," attach a detailed description of the activities.		İ	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	-		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 <u>a</u>	-	X
þ	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?	5	├	X
	If "Yes," attach the statement required by General Instruction T.		1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1	
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	ļ
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	<u> </u>
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-		
h	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	86	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	53	T	Γ_
,	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
<u></u>	11 100, direct a description of the second o	Form 99	0-PF	

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

Part VII-B Statements Regarding Activities for Which I	orm 4720 May Bo E		36-094129	<u>* 4</u>	Page 6
	OTHER TIZO WAY DE P	equiled (contin	ueu)		1
5a During the year did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section)	n AQA5(a)\2	□ v.	s X No		
(2) Influence the outcome of any specific public election (see section 4955); of			s Lau NU	i	
any voter registration drive?	i to carry on, unechy or muse	cuy,	s X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		s X No		
(4) Provide a grant to an individual for travel, study, or other similar purposes		٠٠ ــــــ			
509(a)(1), (2), or (3), or section 4940(d)(2)?	ii described in section		s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses or f			-	
the prevention of cruelty to children or animals?	or caucational parposos, or i	Ve Ve	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the excentions described i				1
section 53.4945 or in a current notice regarding disaster assistance (see instru		rrogololiono	N/A 5	ь	1
Organizations relying on a current notice regarding disaster assistance check h					<u> </u>
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ned	_		1
expenditure responsibility for the grant?		/A	s 🔲 No		ļ
If "Yes," attach the statement required by Regulations section 53 494.		•			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				1	1
a personal benefit contract?		☐ Ye	s X No		1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		6	ib	x
If "Yes" to 6b, file Form 8870.					_
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	s X No		
b. If yes, did the foundation receive any proceeds or have any net income attribut	able to the transaction?		N/A 7	'b	.L
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/		
		 			
1 List all officers, directors, trustees, foundation managers and their		Las Companyation	(d) Cookibuitose to	4) 5:	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred compensation	accour	rpense nt, other
	to position	enter -0-)	compensation	allow	ances
JOSEPH B. BREWER, JR	PRESIDENT/DIR	ECTOR			
P. O. BOX 7906	0.00				•
ROCKY MOUNT, NC 27804	0.00	0.	0.		0.
JOSEPH B. BREWER, III	DIRECTOR				
P. O. BOX 7906	0.00	0.	0.		0.
ROCKY MOUNT, NC 27804	DIRECTOR	<u> </u>			<u> </u>
VIRGINIA H. BREWER P. O. BOX 7906	DIRECTOR				
P. O. BOX 7906 ROCKY MOUNT, NC 27804	0.00	0.	0.		0.
ROCKI MODNI, NC 27004	0.00	-			
		ŀ			
	1				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) E	kpense nt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allow	ances
NONE					
	<u> </u>				
	1				
	1				
		ļ			
	_				
		<u> </u>	<u> </u>		· <u>-</u>
Total number of other employees paid over \$50,000				200 5	0
			Form	990-PF	- (2009)

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Part VIII Information About Officers, Directors, Trustees, Fou Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant	statistical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers 1 N/A	s produced, etc.	
2		
3		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax ye	er on lines 1 and 2	Amount
1 NONE	ar on mics Tand 2.	Amount
		0
2		0.
		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	>	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		· · · · · · · · · · · · · · · · · · ·
a		1a	1,046,302.
b		1b	1,046,302. 26,664.
_	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	1,072,966.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,072,966.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	16,094.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,056,872.
6	Minimum investment return. Enter 5% of line 5	6	52,844.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	52,844.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	95.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	52,749.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	52,749.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	52,749.
P	art XII Qualifying Distributions (see 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	51,837.
b	Program-related investments - total from Part IX-B	15	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
8	Surtability test (prior IRS approval required)	3a	
þ	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	51,837.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	51,837.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	r the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	Оограз	rears prior to 2000	2000	2003
line 7				52,749.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only		į	0.	
b Total for prior years:				
_ ,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005 30,420.				
c From 2006 4,018.				
d From 2007				
e From 2008	Ì			
f Total of lines 3a through e	152,359.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 51,837.	j			
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			'	·
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				51,837.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	912.			912.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 31, 4c, and 4e Subtract line 5	151,447.			
b Prior years' undistributed income. Subtract			-	
line 4b from line 2b		0.		
c Enter the amount of prior years'				· · · · · · · · · · · · · · · · · · ·
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.	`	
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		<u> </u>	<u></u>
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	117,009.	<u> </u>		
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	34,438.			
10 Analysis of line 9:				
a Excess from 2005 30,420.				
b Excess from 2006 4, 018.				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009	1		L	L

Part XIV Private Operating F	FOUNDATION, oundations (see in:		I-A. guestion 9)	N/A	141242 Pa
a If the foundation has received a ruling o			17 1, 400011011 0)	M/A	
-					
foundation, and the ruling is effective fo		=	in control	4042(1)(2) or 4	942(j)(5)
b Check box to indicate whether the found		ig ioungation described I		4942(j)(3) or4	942())(3)
a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(8) 2003	(6) 2000	(0) 2001	(4) 2000	(0) 10121
investment return from Part X for					
each year listed					
b 85% of line 2a	<u> </u>		 	-	
c Qualifying distributions from Part XII,					
line 4 for each year listed				+	1
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				 	
e Qualifying distributions made directly					
for active conduct of exempt activities. Subtract line 2d from line 2c					
Complete 3a, b, or c for the			 		<u> </u>
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
(1)					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	1				
b "Endowment" alternative test - enter					
2/3 of minimum investment return	ļ				
shown in Part X, line 6 for each year listed		1			
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in		1			
section 4942(j)(3)(B)(ii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		<u> </u>		<u> </u>	<u> </u>
Part XV Supplementary Info		•	if the foundation	n had \$5,000 or m	ore in assets
at any time during t	the year-see the	instructions.)			
Information Regarding Foundation	_				
a List any managers of the foundation wh			tributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed r	nore man \$5,000). (See s	SECTION 507(0)(2).)			
one	4004				
b List any managers of the foundation who ther entity) of which the foundation ha			(or an equally large port	ion of the ownership of a	partnership or
• • • • • • • • • • • • • • • • • • • •	s a 10 % of greater intere	J.			
one		0.1.1.1.1.			
Information Regarding Contribut					
Check here fithe foundation of the foundation makes gifts, grants, etc.					
	•				
			e audi esseu.		
a The name, address, and telephone num					
a The name, address, and telephone num B. BREWER, JR., 2	52-443-1333				
a The name, address, and telephone num B. BREWER, JR., 2 O BOX 7906, ROCKY M	52-443-1333 OUNT, NC 27	804	shorild include.		
a The name, address, and telephone num B. BREWER, JR., 2 BOX 7906, ROCKY M The form in which applications should be	152-443-1333 IOUNT , NC 27 the submitted and information	1804 Ition and materials they :	should include:		
a The name, address, and telephone num B. BREWER, JR., 2 O BOX 7906, ROCKY M b The form in which applications should l ETTER FORM-STATING	152-443-1333 IOUNT , NC 27 the submitted and information	1804 Ition and materials they :	should include:		
a The name, address, and telephone num B. BREWER, JR., 2 O BOX 7906, ROCKY M b The form in which applications should better FORM-STATING c Any submission deadlines:	152-443-1333 IOUNT , NC 27 the submitted and information	1804 Ition and materials they :	should include:		
a The name, address, and telephone num B. BREWER, JR., 2 O BOX 7906, ROCKY M b The form in which applications should I ETTER FORM-STATING	152-443-1333 MOUNT, NC 27 the submitted and informate PURPOSE AND	1804 ation and materials they so NEED		other factors:	

923611 02-02-10

Grants and Contributions Paid During the	If recognises to an individual			
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
	or substantial contributor	recipient		
a Paid during the year EE ATTACHED SCHEDULE			EDUCATIONAL AND	51,83
			RELIGIOUS	
				•
		İ		
	,			
				:
Total		<u> </u>	▶ 3a	51,83
Total b Approved for future payment				32,03
, , , , , , , , , , , , , , , , , , ,				
None				
	Í	ł		
		ļ		
		<u> </u>		
Total			▶ 3b	<u> </u>

11

Form **990-PF** (2009)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	United	en nasiliess liteolite		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
8	ļ		ļ		
b					
			ļ		
d					
e					
1					-
Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	18.	
4 Dividends and interest from securities			18		
5 Net rental income or (loss) from real estate:			10	1/,/3/	
		 			
a Debt-financed property			 		
b Not debt-financed property	<u> </u>		<u> </u>		
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income	<u> </u>				
8 Gain or (loss) from sales of assets other	-		l		
than inventory			18	-1,244.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
8			<u> </u>		
b					
C		Į.			
· · · · · · · · · · · · · · · · · · ·					·- ·-
d					
d		0.		16.721.	0.
d e 12 Subtotal. Add columns (b), (d), and (e)		0.		16,721.	0. 16.721.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		16,721.	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	0. 16,721.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)				13	0. 16,721.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	kemp	13	16,721.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1	to the Acc	omplishment of Ex	kemp	13	16,721.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	kemp	13	16,721.
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d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	kemp	13	16,721.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	kemp	13	16,721.
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d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1 Line No. Explain below how each activity for which inco	to the Acc	omplishment of Ex	kemp	13	16,721.
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Under penalties of pergury, 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, Signature of officer or trustee Date Trtle Check if Preparer's identifying number Preparer's signature employed > PO1221998 RSM McGladrey, Firm's name (or yours 41-1944416 if self-employed), 111 Roundabout Court address, and ZIP code Phone no. <u> 252-446-0731</u> Form **990-PF** (2009)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number

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

В	REWER FOUNDATION, INC.	56-0941242					
Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
•	4947(a)(1) nonexempt charatable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.					
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in m	oney or property) from any one					
contributor. Comp	blete Parts I and II.						
Special Rules							
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
aggregate contrib	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contri- utions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, cruelty to children or animals. Complete Parts I, II, and III.						
contributions for u If this box is chec purpose. Do not d	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not agained, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because it le, etc., contributions of \$5,000 or more during the year.	gregate to more than \$1,000. ely religious, charitable, etc.,					
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule & Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

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

for Form 990, 990-EZ, or 990-PF.

Employer identification number

BREWER FOUNDATION, INC.

56-0941242

Part i	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	BREWER FOODS 1021 NOEL LANE ROCKY MOUNT, NC 27802	\$11,000.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	BREWER FOODS 1021 NOEL LANE ROCKY MOUNT, NC 27802	\$4,188.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZiP + 4	(c) Aggregate contributions	(d) Type of contribution
3	BREWER FOODS 1021 NOEL LANE ROCKY MOUNT, NC 27802	\$1,039.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	BREWER FOODS 1021 NOEL LANE ROCKY MOUNT, NC 27802	\$6,610.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	BREWER FOODS 1021 NOEL LANE ROCKY MOUNT, NC 27802	\$ <u>16,334.</u>	Person Payroli Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	BREWER FOODS 1021 NOEL LANE ROCKY MOUNT, NC 27802	s443.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

BREWER FOUNDATION, INC.

56-0941242

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	BREWER FOODS 1021 NOEL LANE ROCKY MOUNT, NC 27802	\$\$ <u>823.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Page 1 of 1 of Part II
Employer identification number

BREWER FOUNDATION, INC.

56-0941242

(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) <u>Date received</u>
2 2	431.749 SHARES DFA REAL ESTATE SECURITIES		
		\$4,188.	12/16/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	94.627 SHARES DFA REAL ESTATE SECURITIES		
		\$	12/16/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	646.719 SHARES DFA US LARGE CAP VALUE		
_ _		\$6,609.	12/16/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	850.31 SHARES VANGUARD GROWTH INDEX		
		\$ 16,334.	12/16/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	39.625 SHARES VANGUARD GROWTH INDEX		
		\$\$	12/16/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	81.115 SHARES VANGUARD GROWTH INDEX		
_ -			

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Part IV Capital Gains and Lo	sses for Tax on investment income				
(a) List and	d describe the kind(s) of property solo rick warehouse; or common stock, 20	l, e.g., real estate, 10 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a TRUST COMPANY	OF THE SOUTH SEE	ATTACHED SCHEDUI	LE P		
D TRUST COMPANY					
c TRUST COMPANY					
d TRUST COMPANY		ATTACHED SCHEDU	LE P		
e Capital Gains					
f					
g					
h					
1					
_k					
<u> </u>					
m					
<u>n</u>					
0		<u></u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e) t (µ) Gain or (loss) Plus (f) minus (g)	
a 33,300.		34,138.			-838.
b 55,562.		48,240.			1,322.
c 129,862.		136,943.			-7,081.
d 11,000.		13,023.			-2,023.
e 1,376.					1,376.
<u>f</u>					
9					
h					
<u> </u>					
1.	-		· · · · · · · · · · · · · · · · · · ·	-	
<u>k</u>					
m n					
0		····	.		
	ng gain in column (h) and owned by t	the foundation on 12/31/69	(i) Los	sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess	of col. (h) gain over not less than "-0-")	
2					-838.
<u>a</u> b					7,322.
C					-7,081.
d				•	-2,023.
e					1,376.
f					
g					
h					
<u> </u>					
<u>1</u>			.		
<u>k</u>					
1					
<u>m</u>				·	
<u>n</u>					
0	<u> </u>	·			
2 Capital gain net income or (net c	apıtal loss) { If gain, also enter -0	in Part I, line 7 -" in Part I, line 7	2		-1,244.
	ess) as defined in sections 1222(5) an	`			
If gain, also enter in Part I, line 8. If (loss), enter "-0-" in Part I, line	, column (c).)	3	N/A	

Form '990-PF Interest on Savi	ngs and Te	mporary Ca	ash In	vestments	Statement	1
Source TRUST COMPANY OF THE SOUTH						
						18.
Total to Form 990-PF, Part I,	line 3, Co	olumn A				18.
Form 990-PF Dividend	s and Inte	rest from	Secur	rities	Statement	2
Source	Gros	s Amount		tal Gains vidends	Column (A)
TRUST COMPANY OF THE SOUTH TRUST COMPANY OF THE SOUTH		1,376.		0. 1,376.	0.	
Total to Fm 990-PF, Part I, 1	n 4			1,376.		
Form 990-PF	Account	ing Fees			Statement	3
Description	(a) Expenses Per Books	(b) Net Invent Inc		(c) Adjusted Net Incom		
ACCOUNTING FEES	1,875	•	0.			0.
To Form 990-PF, Pg 1, ln 16b	1,875	•	0.			0.
Form 990-PF C	ther Profe	ssional F	ees		Statement	4
Description	(a) Expenses Per Books	(b) Net Inv ment In		(c) Adjusted Net Incom		
FIDUCIARY FEES	13,215	. 13	,215.			0.
To Form 990-PF, Pg 1, ln 16c	13,215	. 13	,215.			0.

Form 990-PF	Taxes			Statement 5		
Description	(a) Expenses Per Books	(b) Net Inve		(c) Adjusted Net Incom		
FOREIGN TAX INCOME TAX REFUND	53. -1,432.		0.			0.
To Form 990-PF, Pg 1, ln 18	-1,379.		0.		_	0.
Form 990-PF	Corporat	e Stock			Statement	6
Description			Вос	ok Value	Fair Marke Value	t
THE TRUST COMPANY OF THE SOU	гн		1	1,157,206.	1,024,0	49.
Total to Form 990-PF, Part II, line 10b						