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50m 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning 10/01/09, and ending 09/30/10Final return G Check all that apply. Initial return Initial return of a former public charity Amended return Address change Name change A Employer identification number Name of foundation Use the IRS 58-1854794 label. Telephone number (see page 10 of the instructions) LUCY DANIELS FOUNDATION Otherwise, 919-677-9888 print Number and street (or P O box number if mail is not delivered to street address) Room/suite 9001 WESTON PARKWAY or type. If exemption application is pending, check here See Specific City or town, state, and ZIP code 1. Foreign organizations, check here Instructions. NC 27513 CARY 2. Foreign organizations meeting the 85% test, check here and attach computation Check type of organization |X| Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated unde section 507(b)(1)(A), check here J Accounting method Cash Accrual I Fair market value of all assets at end HYBRID X Other (specify) If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here 6,170,142 (Part I, column (d) must be on cash basis) line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for chantable expenses per total of amounts in columns (b), (c), and (d) may not necessarily equal books income the amounts in column (a) (see nane 11 of the instructions)) (cash basis only) 5,000 Contributions, gifts, grants, etc., received (attach schedule) 1 Check ▶ I If the foundation is **not** required to attach Sch B 2 3,918 3,918 3,918 3 Interest on savings and temporary cash investments 54,085 54,085 54,085 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) Revenue STMT 1 3,381 6a Net gain or (loss) from sale of assets not on line 10 881,085 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 8 Net short-term capital gain 9 Income modifications Gross sales less-returns à allowances Less Cost of goede-sold 10a Gross profit or (loss) (attach schedule) C STMT 2 12,049 12,049 Other income (attack schedine) 11 78,433 70,052 58,003 Total Add lines 1 through 11 12 13 Compensation of officers, directors, trustees, etc Operating and Administrative Expenses Other employee salaries and wages 42,433 42,433 14 9,747 9,747 15 Pension plans, employee benefits 24,664 28,952 Legal fees (attach schedule) SEE STMT 16a 10,463 STMT 4 8,713 Accounting fees (attach schedule) 9,472 9,472 Other professional fees (attach schedule) STMT 5 9,472 C 239 239 Taxes (attach schedule) (see page 14 of the instructions) STMT 6 1,068 18 Depreciation (attach schedule) and depletion STMT 7 57,733 20 Occupancy 1,849 1,363 21 Travel, conferences, and meetings

232,200

391,920

414,815

-336,382

22,895

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

STMT 8

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9,472

9,472

60,580

9,472

9,472

48,531

238,656

328,051

350,946

22,895

22

23

26 27

Printing and publications

Add lines 13 through 23

Contributions, gifts, grants paid

Subtract line 26 from line 12

Total operating and administrative expenses.

Total expenses and disbursements. Add lines 24 and 25

Excess of revenue over expenses and disbursements

Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-)

Other expenses (att sch)

	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
_	1 441 4 11	should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	50	50	
	2	Savings and temporary cash investments	675,113	489,984	489,984
	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)	e e 24 hetata akti	and the state of t	mer e u
		Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges	6,898	3,710	3,710
۷	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) SEE STMT 9	1,561,157	1,384,689	1,970,793
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
	4.0	Less accumulated depreciation (attach sch)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule) Land, buildings, and equipment basis ► 3,120,568			
	14		1 012 100	1 755 452	2 120 560
	45		1,813,188	1,755,453 585,037	
	15 16	`	513,019	363,037	585,037
		Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	4,569,425	4,218,923	6,170,142
\dashv	17	Accounts payable and accrued expenses	23,254	10,214	0,170,142
	18	Grants payable	25,251	10,214	
es	19	Deferred revenue			
Ħ	_	Loans from officers, directors, trustees, and other disqualified persons			
<u>Liabilities</u>	21	Mortgages and other notes payable (attach schedule)			
	22	Other habilities (describe SEE STATEMENT 12)	1,744	664	
		Total liabilities (add lines 17 through 22)	24,998	10,878	
٦		Foundations that follow SFAS 117, check here ▶ X			
S		and complete lines 24 through 26 and lines 30 and 31.			
힏	24	Unrestricted	4,538,253	4,201,871	
튑	25	Temporarily restricted	6,174	6,174	
ă	26	Permanently restricted			
Ы		Foundations that do not follow SFAS 117, check here ▶			
괴		and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds			
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Se	29	Retained earnings, accumulated income, endowment, or other funds			
As	30	Total net assets or fund balances (see page 17 of the			
<u>e</u>		instructions) .	4,544,427	4,208,045	
Z		Total liabilities and net assets/fund balances (see page 17			
┙		of the instructions)	4,569,425	4,218,923	
	Part II		<u></u>		· · · · · · · · · · · · · · · · · · ·
1		net assets or fund balances at beginning of year—Part II, column (a), line 30 (mus	st agree with		
		f-year figure reported on prior year's return)		_1	4,544,427
		amount from Part I, line 27a		2	-336,382
		increases not included in line 2 (itemize) ▶		3	
		nes 1, 2, and 3	-	4	4,208,045
		eases not included in line 2 (itemize)		5	4 800 01=
_6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b	o), line 30	6	4,208,045

Part IV Capital Gains an	d Losses for Tax on Investmer	t Income			
(a) List and describe 2-story brick wareh	the kind(s) of property sold (e g , real estate, ouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acqu (mo , day,)	
1a N/A					
b					
_с					
d			<u> </u>		
<u>e</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	or other basis ense of sale		h) Gain or (loss)) plus (f) minus (g)
a					
b					
<u> </u>					
d			-		
Complete only for assets showing	gain in column (h) and owned by the fou	ndation on 12/31	/69		
- Complete only for assets showing	(i) Adjusted basis		ess of col (i)		ns (Col (h) gain minus but not less than -0-) or
(i) F M V as of 12/31/69	as of 12/31/69		ol (j), if any		sses (from col (h))
_a					·
<u>b</u>					
<u>c</u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
e					
2 Capital gain net income or (net ca	pital loss) If gain, also enter in F	•			
2. Not short town southell some or disco	If (loss), enter -0- in P	art I, line /	ŀ	2	
· ·	s) as defined in sections 1222(5) and (6)	tt			
If (loss), enter -0- in Part I, line 8	column (c) (see pages 13 and 17 of the	nstructions)		3	
	der Section 4940(e) for Reduce	d Tay on Net	Investment Inco		 :
	foundations subject to the section 4940(a				
	,	2) tax on not invo	June 11. June 11. June 1		
If section 4940(d)(2) applies, leave this	s part blank		_	_	
Was the foundation liable for the section	on 4942 tax on the distributable amount	of any year in the	base penod? U Ye	s X No	
If "Yes," the foundation does not qualif	fy under section 4940(e) Do not comple	e this part.			
1 Enter the appropriate amount in ea	ach column for each year, see page 18 o	of the instructions	before making any en	tnes	
(a) Base penod years	(b)		(c)		(d) Distribution ratio
Calendar year (or tax year beginning in			e of nonchantable-use ass	10	col (b) divided by col (c))
2008	321,		4,740,	161	0.06785
2007	523,		5,879,		0.08897
2006	675,		5,956,2		0.11343
2005	512,		6,032,		0.08496
2004		064	6,268,	310	0.11726
2 Total of line 1, column (d)				2	0.47250
3 Average distribution ratio for the 5	-year base period—divide the total on lin	e 2 by 5, or by th	e		
number of years the foundation ha	as been in existence if less than 5 years			3	0.09450
4 Enter the net value of nonchantab	le-use assets for 2009 from Part X, line			4	6,647,81
5 Multiply line 4 by line 3				5	628,21
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6	48
7 Add lines 5 and 6				7	628,70
8 Enter qualifying distributions from	Part XII, line 4			8	350,94
If line 8 is equal to or greater than Part VI instructions on page 18.	line 7, check the box in Part VI, line 1b,	and complete tha	at part using a 1% tax r	ate. See the	

***	990-PF (2009) LUCY DANIELS FOUNDATION 58-1854794			Pa	age 4
Pz	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruc	tions)			
la	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 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				971
	here ▶ ☐ and enter 1% 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)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				771
3	Add lines 1 and 2				971
1	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				971
6	Credits/Payments		•		
а	2009 estimated tax payments and 2008 overpayment credited to 2009	,			
b	Exempt foreign organizations—tax withheld at source	3		2.10	44
С	Tax paid with application for extension of time to file (Form 8868)	,		11	
d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d				
3	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8				28
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				999
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
1	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11			_	
Pa	art VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?	-	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				
	of the instructions for definition)?	ļ	1b		<u> </u>
	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				
С	Did the foundation file Form 1120-POL for this year?	Ĺ	1c		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?		2		X
	If "Yes," attach a detailed description of the activities.			·	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	[4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	[/A [4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
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?		6	х	
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		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) ▶ NC				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No." attach explanation	İ	8b	x	

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

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

19

FTP

29 TOT

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DAA

27)? If "Yes," complete Part XIV

names and addresses

8/15 INT

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

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Part VIII Information About Officers, Directors, Trustees, Foundard Contractors (continued)	ındation Managers, Highly Paid Em	ployees,
3 Five highest-paid independent contractors for professional services (see page	ge 23 of the instructions). If none, enter "NOI	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		ļ
·		
otal number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant state organizations and other beneficiaries served, conferences convened, research papers produced, e		Expenses
1 GRANT AWARDED TO EMORY UNIVERSITY COLLE SCIENCES.	GE OF ARTS AND	
		10,000
2 GRANT FOR SUPPORT OF LUCY DANIELS CENTE CHILDHOOD DEVELOPMENT	R FOR EARLY	
		500
3		
4		
	·	
Part IX-B Summary of Program-Related Investments (see page 2)	age 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year of	on lines 1 and 2	Amount
1 N/A		
2		
		<u></u>
All other program-related investments See page 24 of the instructions		
3		

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Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years.

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foresee page 24 of the instructions.)	eign fo	oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,		
	purposes;		
а	Average monthly fair market value of securities	1a	2,045,179
b	Average of monthly cash balances	1b	485,245
C	Fair market value of all other assets (see page 24 of the instructions)	1c	4,218,625
d	Total (add lines 1a, b, and c)	1d	6,749,049
e	Reduction claimed for blockage or other factors reported on lines 1a and	ŀ	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	6,749,049
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	101,236
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,647,813
6	Minimum investment return. Enter 5% of line 5	6	332,391
Pa	AFT XE Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perating	3
	foundations and certain foreign organizations check here		<u></u>
1	Minimum investment return from Part X, line 6	1	332,391
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)		
C	Add lines 2a and 2b	2c	971
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	331,420
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	331,420
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	331,420
P	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	350,946
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 chantable, etc.,		
	purposes	2	
3	Amounts set aside for specific chantable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	350,946
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	350,946
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	tion	

Pa	rt XIII Undistributed Income	(see page 26 of t	he instructions)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part	a.	Corpus	Years prior to 2008	2008	2009
-	line 7	·				331,420
2	Undistributed income, if any, as of the en	d of 2009				
	Enter amount for 2008 only					
	Total for pnor years 20 , 20	20				
	Excess distributions carryover, if any, to 2					
3	-	438,236				
	From 2004	220,943				
	From 2005					
С	From 2006	388,076				
d	From 2007	237,804				
е	From 2008	86,073				
f	Total of lines 3a through e		1,371,132			
4	Qualifying distributions for 2009 from Par	t XII,				
	line 4: ▶ \$350,946					
а	Applied to 2008, but not more than line 2	a Ĺ				
b	Applied to undistributed income of prior y	rears				1
	(Election required—see page 26 of the ir	structions)				
С	Treated as distributions out of corpus (El	ection				
	required—see page 26 of the instructions					
ď	Applied to 2009 distributable amount	· [331,420
	Remaining amount distributed out of corp	ous	19,526			
5	Excess distributions carryover applied to					
•	(If an amount appears in column (d), the	T	1.4" 7	· · · · · · · · · · · · · · · · · · ·		
	amount must be shown in column (a).)	020				
6	Enter the net total of each column as	ì				
U	indicated below:					
_		et lino E	1,390,658			
	Corpus. Add lines 3f, 4c, and 4e Subtrac	r e	1,390,030			
b	Prior years' undistributed income Subtra	ct				
	line 4b from line 2b	· .				
С	Enter the amount of prior years' undistrib					
	income for which a notice of deficiency h					
	been issued, or on which the section 494	l2(a)				
	tax has been previously assessed					ļ
d	Subtract line 6c from line 6b Taxable					
	amount—see page 27 of the instructions	i				
е	Undistributed income for 2008. Subtract	line				
	4a from line 2a Taxable amount—see p	age				
	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 o	orpus				
	to satisfy requirements imposed by secti	on				
	170(b)(1)(F) or 4942(g)(3) (see page 27	of the				
	instructions)					
8	Excess distributions carryover from 2004	l not				
•	applied on line 5 or line 7 (see page 27 of					
	instructions)		438,236			
9	Excess distributions carryover to 2010	1.				
J	Subtract lines 7 and 8 from line 6a	··	952,422			
10	•	ł	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
10	Analysis of line 9.	220,943				
a	Excess from 2005			1		
b	Excess from 2006	388,076				
C	Excess from 2007	237,804				
d	Excess from 2008	86,073				
<u>e</u>	Excess from 2009	19,526		<u> </u>	1	<u> </u>

Pa	rt XIV Private Operating Fou	indations (see pa	age 27 of the inst	ructions and Part	VII-A, question 9	<u> </u>
1a	If the foundation has received a ruling or		•	ting		•
	foundation, and the ruling is effective for				240(1)(2)	2/)/5)
ь	Check box to indicate whether the founda		ating foundation descri		942(j)(3) or 494	2(1)(5)
2a	Enter the lesser of the adjusted net	Tax year	(h) 0000	Prior 3 years	(4) 2000	(e) Total
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	investment return from Part X for					
	each year listed					
þ	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed	_				
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities	 	<u> </u>			-
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
_	Subtract line 2d from line 2c		ļ	<u> </u>		-
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test—enter					
	(1) Value of all assets		<u> </u>			
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)	·			ļ	<u> </u>
Ь	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	secunties loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public		·	<u> </u>		
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
******	(4) Gross investment income					
Pa	Let XV Supplementary Inform	•	•		ad \$5,000 or more	e in assets at
	any time during the ye		of the instruction	ons.)		
1	Information Regarding Foundation Mai	-				
а	List any managers of the foundation who				•	
	before the close of any tax year (but only	if they have contribut	ed more than \$5,000)	(See section 507(d)(2	().)	
	N/A					
b	List any managers of the foundation who		· · · · · · · · · · · · · · · · · · ·		e portion of the	
	ownership of a partnership or other entity) of which the foundal	tion has a 10% or grea	ater interest.		
	N/A					
2	Information Regarding Contribution, G					
	Check here ► X if the foundation only		·	_		
	unsolicited requests for funds. If the foun		· · · ·	8 of the instructions) to	individuals or	
	organizations under other conditions, cor					
а	The name, address, and telephone numb	per of the person to wi	nom applications shou	lig be addressed		
	N/A					
	—					
b	The form in which applications should be	submitted and inform	nation and materials th	ney should include		
	N/A		·		*	
C	Any submission deadlines:					
	N/A			Calle I de de la company		
d	Any restrictions or limitations on awards,	such as by geograph	icat areas, charitable t	rieids, kinds of institutio	ons, or other factors.	
	N/A					Form 990-PF (2009)
						Form 330-FF (2009)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount contribution any foundation manager recipient or substantial contributor Name and address (home or business) a Paid during the year NC PSYCHOANALYTIC FOUND. 901 PAVERSON DRIVE #11 GENERAL GRANT 12,395 RALEIGH NC 27615 **EMORY UNIVERSITY** GENERAL GRANT 10,000 1762 CLIFTON RD, STE 1400 ATLANTA GA 30322 LUCY DANIELS CENTER ECE MATCHING GRANT 500 9003 WESTON PARKWAY **CARY NC 27513** 22,895 ▶ 3a Total b Approved for future payment N/A ▶ 3b Total

	AHVY LIE	Analysis of Income-Producing Acti	ivities				·
En	ter gross amo	ounts unless otherwise indicated.		(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See page 28 of
1	Program ser	rvice revenue:			- COUC		the instructions)
	a				<u> </u>		
	p						
							
	d						
	f				1		
		d contracts from government agencies					
		dues and assessments					
3	Interest on s	savings and temporary cash investments			ļ		3,918
4		nd interest from securities			14	54,085	
5	Net rental in	come or (loss) from real estate [.]				<i>'</i>	·
	a Debt-fina	anced property			1		
	b Not debt	t-financed property					
6	Net rental in	come or (loss) from personal property					
7	Other invest	ment income					
8	Gain or (loss	s) from sales of assets other than inventory					3,381
9	Net income	or (loss) from special events					·
10	Gross profit	or (loss) from sales of inventory					
11	Other revenu						
		R RELATED INCOME					9,349
	c CONF	ERENCE REGISTRATIONS					2,700
	d						
	е						
12	Subtotal Ad	ld columns (b), (d), and (e)		(54,085	
13	Total. Add li	ne 12, columns (b), (d), and (e)				13	73,433
		in line 13 instructions on page 28 to verify calculation					
	art XVI-B	Relationship of Activities to the Ac	complishm	ent of Exempt P	urpose	s	
	Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo		• •			
		instructions.)					
	1A	REGISTRATION INCOME IS G					
_		ARE HELD TO PROVIDE A ME					
		SUPPORT FOR THE ISSUES T	HAT ARE	THE FOCAL	POIN'	r of the	
_		FOUNDATION'S CHARITABLE	PURPOSE	<u> </u>			
	i						
_		<u> </u>					
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Pa	rt XVII	Information Reg Exempt Organiz	-	insfers To and	Transaction	ns an	d Relationsh	ips With N	ioncha	ritable		
1	Did the o	rganization directly or in		e in any of the follow	ung with any of	ther or	ganization descri	bed			Yes	No
•	ın sectior	n 501(c) of the Code (oth										
-	Organiza		ndation to a no	ncharitable evernt (organization of	-						
а	(1) Cash	s from the reporting foun	idation to a no	nchantable exempt t	organization of	•				1a(1)		x
	(1) Casi (2) Othe									1a(2)		<u>x</u>
h		nsactions.								14(2)		
b		s of assets to a nonchar	stable evemnt	organization						1b(1)	•	Х
		hases of assets from a r	•	-						1b(2)		X
	• •	al of facilities, equipmen						•		1b(3)		X
	• •	nbursement arrangemen						•		1b(4)		X
	• •	is or loan guarantees								1b(5)		X
	. ,	ormance of services or n	nembership oi	fundraising solicitat	ions			•		1b(6)		X
С	• •	of facilities, equipment, i	•	-						1c		X
	_	swer to any of the above	=			nn (b)	should always sh	now the fair m	arket			
_		the goods, other assets,										
		any transaction or sharir										
(a) Line no	(b) Amount involved		of nonchantable exempt			(d) Description of tr			shanng arrang	ements	
N/Z	A											
			1									
								- <u>-</u>				
2a		undation directly or indirectly or indirectly of the	•				•			Пү	es X	No
b		complete the following s								_		
		(a) Name of organization		(b) Type of org	anızatıon			(c) Description o	of relations	hip		
	N/A											
						<u></u>						
	Under pe	nalties of perjury, I declare the	nat I have exami	ned this return, including	accompanying	schedu	les and statements.	and to the best	of my kno	wledge and		
	belief, it is	s true, correct, and complete	Declaration of	preparer (other than tax)	_/.) is bas	ed on all informatio		arer nas ar	ny knowleage		
		Trucy C, L	Kniela		8/11	111		PRES				
9	Sign	ature of dificer or trustee	····	- · · · - · ·	Date			Title				
울ㅣ							Date	Check if		Preparer's ident number (see St		on
Sign Here	ري. احري-	Preparer's	<u> </u>	20			01.1	self-employed	d ▶ 🔲 l	page 30 of the i	nstruction	ıs)
:పॅ∖	Paid Preparer's Use Only	signature	1/1/1				8/8/11			P0029	090.	7
	Pa rep; lse	Firm's name (or yours if	RIVÉS	& ASSOCIAT		P		٠				_
	ᅙ	self-employed), address,		BERLIN RD					EIN ►	20-042		
		and ZIP code	RALE	IGH, NC 27	7605				Phone no	919-83		
										Form 9 9	90-PF	(2009)

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number Name of the organization 58-1854794 LUCY DANIELS FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, chantable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

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

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ,

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

or 990-PF)

LUCY DANIELS FOUNDATION

Employer identification number 58-1854794

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1.	LOUISE BOURGEOIS T THE EASTON FOUNDATION 347 WEST 20TH STREET NEW YORK NY 10011	\$ 5 <u>,</u> 000	Person X 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
	Name, address, and ZIF + 4	\$	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)
(a) <u>N</u> o.	(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.)

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Identifying number

See separate instructions.

► Attach to your tax return.

Attachment Sequence No.

LUCY DANIELS FOUNDATION 58-1854794 Business or activity to which this form relates INDIRECT DEPRECIATION Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 Maximum amount. See the instructions for a higher limit for certain businesses 2 Total cost of section 179 property placed in service (see instructions) 2 800,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0-. If marned filing separately, see instructions (b) Cost (business use only) (c) Elected cost (a) Description of property 6 7 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction, Add lines 9 and 10, but do not enter more than line 11 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 14 during the tax year (see instructions) 15 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 57,733 17 MACRS deductions for assets placed in service in tax years beginning before 2009 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (e) Convention (f) Method (a) Depreciation deduction (a) Classification of property placed in period service only-see instructions) 3-year property 19a b 5-year property 7-year property C 10-year property e 15-year property 20-year property S/L 25-year property 25 vrs S/L Residential rental 27 5 yrs MM 27.5 yrs property MM S/L MM S/L 39 yrs Nonresidential real property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L 12-year 12 yrs. h ММ S/L 40 yrs 40-year **Summary** (See instructions.) Part IV 21 Listed property. Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 57,733 22 and on the appropriate lines of your return Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

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Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

Desci	Description		How				
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss
BLACKSTONE GROUP LP		6/21/10 \$	PURCHASE 41,615 \$	53,293 \$		₩	\$ -11,678
CHESAPEAKE ENERGY OKLA	8/30/05	6/16/10	FURCHASE 49,599 DIRCHASE	64,135			-14,536
CREE INC. DEVON ENERGY CORP NEW	9/16/09	2/17/10	124,453 PURCHASE	74,825			49,628
9 STEEPST-MCMRAN CPR & GI.I.	9/03/04 T.D	9/13/10	61,693 PURCHASE	33,962			27,731
HATTERAS FINI, CORP	1/13/09	9/02/10	37,846 PURCHASE	12,892			24,954
TING CLOBAL FOILTY VIVID	5/28/09	2/19/10	49,696 PIIRCHASE	48,853			843
S NOSNHOT UNA NOSNHOT	3/29/05	6/16/10	76,121 PIRCHASE	141,467			-65,346
L'INN ENERGY	2/09/06	8/04/10	59,233 PURCHASE	59,835			-602
CNT THAT THOMOGRAM	1/16/09	9/16/10	122,038 ptrechase	67,991			54,047
	1/13/09	9/02/10	43,578 PURCHASE	21,928			21,650
IS TR	8/04/10	9/02/10	22,451 PURCHASE	22,698			-247
	2/22/08	6/16/10	26,617 PURCHASE	52,379			-25,762
TRANSOCEAN	8/16/06	9/02/10	52,317 PURCHASE	48,446			3,871
UNITEDHEALTH GROUP INC	2/13/09	4/30/10	36,253 PURCHASE	30,892			5,361
	12/15/05	6/16/10	77,575	144,108			-
TOTAL		₩ 	881,085 \$	877,704 \$	0	\$	\$ 3,381

Description	Rev	enue per Books	Net Investment Income	Ad	justed Net Income	
OTHER RELATED INCOME CONFERENCE REGISTRATIONS	w	9,349	₩.	ഗ	9,349	
TOTAL	₩	12,049	8	₩.	12,049	

Statement 3 - Form 990-PF, Part I, Line 16a - Legal Fees

Charitable Purpose	\$ 24,664	\$ 24,664
Adjusted Net	₩.	w
Net Investment	w	\$
Total	\$ 28,952	\$ 28,952
Description	LEGAL FEES	TOTAL

Statement 4 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description		Total	Net Investment	Adjusted Net	Charitable Purpose	able ose
ACCOUNTING FEES	₩	8,713	₩	\$	\$1	10,463
TOTAL	₩.	8,713	\$	\$	\$	10,463

10,463 10,463

Statement 5 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Charitable Purpose		0
'	∙თ-	ω"
djusted Net	9,472	9,472
Ă	ψ	w
Net Investment	9,472	9,472
In	\$	₩
Total	9,472	9,472
	₩	₩
Description	INVESTMENT MANAGEMENT FEES	TOTAL

	Adjusted Net Income																								
	Net Investment Income	ጭ																							
	Current Year Depreciation	••																							
	Life	10 \$	10	i	10	10	10		10		2		S		S		ស		വ		വ		Ŋ	L	ω
	Method																								
		S/L	7/2) }	$^{ m S/I}$	s/L	$\mathrm{S/L}$		$_{ m S/\Gamma}$		$_{ m S/\Gamma}$		$ m S/\Gamma$		$ m S/\Gamma$		$_{ m S/\Gamma}$		$_{ m S/I}$		$^{ m S/I}$		S/L	,	S/L
	Prior Year Depreciation	156	1 404	1 0 1 1 1 1	163	35	742		450		762		400		210		105		4,614		1,874		2,045	1	265
Description		156 \$	404	F 0 F 1 T	163	35	742		450		762		400		210		105		4,614		1,874	(PANASONIC)	2,045		265
	Date Cost Acquired Basis	SURGE PROTECTOR 2/28/90 \$		2 SURGE PROTECTORS	5/15/90	COMPUTER ACCESSORIES 3/07/90	IBM TYPEWRITER 8/18/92	WHEELCHAIR	9/18/92	COMPUTER TERMINAL	9/20/92	CPU & KEYBOARD	9/20/92	GE MICROWAVE	10/26/92	CPU STAND	10/26/92	4 HP LASER PRINTERS	1/05/93	10 CASSETTE RECORDERS	1/07/93	VHS CAMCORDER W/ MIC	2/09/93	TRIPOD	2/09/93

Statement 7 - Form 990-PF, Part I, Line 19 - Depreciation (continued)

٠	Adjusted Net Income																							
	Net Investment Income	₩.																						
	Current Year Depreciation	₩																						
	Life	Ŋ	10	5	10	5	15	10	5	Ŋ	-	H	Ŋ	ស	I	D.	വ	L	v	5	5	•	7	Ŋ
	Method	S/L	S/L	S/L	$\mathrm{S/L}$	S/L	s/L	S/L	S/L	$_{ m S/L}$	1/ 5	מים	$_{ m S/L}$	S/L		$^{ m S/\Gamma}$	s/r	R) 2 /2	S/L	S/L	s/L	,	$\mathrm{S/L}$	$\mathrm{S/L}$
	Prior Year Depreciation	355	195	1,345	764	1,103	5,962	220	4,035	212	7		518	1,973		465	1,382 S/L	(DEV DIRECTO	2,618	1,313	965		4,317 (F ASSITANT)	
Description	Cost Basis	(MITSU) 355 \$	195	LIES 1,345	:NT 764	1,103	5,962	220	4,035)R 212	()	4. 0.0	518	P75-630NB 1,973	MOM	465		32 MB COMPUTER	2,618	1,313	965	SCHOO	4,317	
	Date Acquired	- TER 3 \$	TUFFY CART 42" 2/09/93	COMPUTER ACCESSORIES 3/04/93	⊣	KODAK PROJECTOR 8/23/93		4/19/94 4/19/94		OVERHEAD PROJECTOR 1/31/95	WHEELED CART (OAK)	4/04/95 COMPUTER MONITOR	6/04/96	HP DESK TOP HP P7 6/13/96	NEC 15 INCH COMPUTER	1/28/97	10/20/97	X	10/31/97 COMPLITER UPGRADE			WATER HEATER FOR	4/30/98 renther off /350 M/901	_

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•	Adjusted Net Income																								
	Net Investment Income	w																							
	Current Year Depreciation	₩																							
	Life	ιυ	S	0) 1	10	10	10	10	10	10	6	O T	15	10	7	O T	10	1	10	10	10	10	,	0 T
	Method																			_	_				
		$_{ m S/L}$	$_{ m S/L}$	ن \ ب	2/c	S/L	$\mathrm{S/L}$	S/L	S/L	S/L	$_{ m S/L}$,	2/r	$\rm S/L$	S/L	,	S/L	$_{ m S/\Gamma}$	•	$_{ m S/I}$	S/L	S/L	$_{ m S/\Gamma}$,	$\mathrm{S/L}$
	Prior Year Depreciation	569	211	0	000 'ST	16,000	816	16,296	8,248	4,309	1,557	r L	21/	1,173	5,205	t L	2,511	1,703		1,470	2,416	4,026	345	(318
Description	Cost Basis	569 \$	211	0 0	19,000	16,000	816	16,296	8,248	4,309	1,557	t t	217	1,173	5,205	, , ,	2,511	1,703	E	1,470	2,416	4,026	345	1	318
	Date Acquired	FAX MACHINE 9/01/98 \$		OFFICE FURNISHINGS	9/15/92 OFFICE FURNISHINGS	U,	OFFICE MAIS 10/07/92 OFFICE FIRNISHINGS		11/10/92	12/17/92	CONFERENCE TABLE 1/11/93	MINIBLINDS	2/09/93 OTT-000 STGN (BI:DG)		CABINETS-KITCHEN 2/23/93	3 LOUNGE CHAIRS	2/23/93 OFFICE FURNISHINGS	1/27/93	COFFEE TABLE (GLASS/	3/04/93 TNTERNAI, I,ETTERING	3/11/93 SOEN (TMMM)		LAMP (INMAN) 6/24/93	SERVING CART	6/24/93

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٠	Adjusted Net Income	₩																				
	Net Investment Income	v.																				
	Current Year Depreciation	₩																				
	Life	10	10	10	10	10	10	10	10	10	C) I	10	10	-	1	10	10	10	10	10	10
	Method																					
		S/L	S/L	S/L	$\rm S/L$	$\mathrm{S/L}$	S/L	S/L	$\rm S/L$	$\mathrm{S/L}$	۵ /T))	$\mathrm{S/L}$	$_{ m S/L}$	۵ / ۲	i }	$\mathrm{S/\Gamma}$	S/L	S/L	$\mathrm{S/L}$	$\mathrm{S/I}$	$\mathrm{S/L}$
	Prior Year Depreciation	18,038	4,000	324	172	19,421	1,705	7,200	1,226	169	д	1	4,522	400	0.7.4	P	3,300	610	3,446	750	375	1,525
Description	Cost Prid Basis Depi	14	E ROOM) 4,000	324	172	19,421	1,705	C)	1,226	169	г о	1	4,522	400	(RETROFIT)	AL CASE	3,300	610	3,446	750	375	1,525
	Date Acquired		SUNSHADE (CONFERENCE 6/24/93	EASEL 9/30/93		2/08/93	1/26/94	_	COMPUTER/WORK DESK 3/31/94	METAL SHELVING 11/11/94	PROJECTOR TABLE	FILE CABINETS (OAK)	3/14/95 CAR CLOSET INSERT	3/14/95	OFFICE CABINET (RET	٠.,		(1)	5 [ALL	2 OAK PLATFORMS 1/15/97

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•	Adjusted Net Income	«																		
	Net Investment Income	w																		
	Current Year Depreciation																	50,435		3,218
	Life	10 \$	10	10	10	10	10	10	ω	Ŋ	ις	Ŋ	ហ	ហ	ហ	ហ	ιΩ	31.5	15	31.5
	Method																			
		$\mathrm{S/L}$	S/L	S/L	S/L	S/L	S/L	$\mathrm{S/L}$	S/L	$^{\mathrm{S/F}}$	S/L	S/L	S/L	S/L	S/L	S/L	$\mathrm{S/L}$	$\mathrm{S/L}$	$\mathrm{S/L}$	$\mathrm{S/L}$
	Prior Year Depreciation	0	564	486	2,562	1,102	2,562	422	866	1,342	1,066	1,215	2,122	1,945	1,865	2,206	3,247	859,492	16,835	53,232
Description	Cost Basis	\$ 089	564	486	2,562	1,102	2,562	422	866	1,342	1,066	1,215	2,122	1,945	1,865	2,206	3,247	2,017,389 svergw	16,835	128,723
	Date Acquired	OAK_FILE 12/02/	2 OAK FILE DRAWERS 4/28/97	CABINETS 3/03/98	CABINETS 3/03/98	CABINEIS 4/02/98 CABINEIS	2/06/98	12/04/97	LIBRARI ALDIIIONS 6/30/90 LIBBARY ANTITONS	_			LIBRARY ADDITIONS 3/31/94	LIBRARI ADDILLONS 3/01/95 TIBRARY ANDITIONS	_	_	~ C	01/92 c FIDE GV	31/92	3/29/93

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	Adjusted Net Income																							
	Net Investment Income	₩ ₩																						
	Current Year Depreciation	321		173	196	163	152	1,908			116	45	•	23	141							169	87	196
	Life	31.5 \$	15	31.5	31.5	39	39	20	C)	20	20		20	20	1	ഹ	വ	Ŋ	U	n	20	20	20
	Method	ت	د.	L	۔	د.	۔	۔			ت	ū		J	ū		L	L]	ū	Ļ	4	디	LI LI	ı,
		$\mathrm{S/L}$	$\rm S/L$	S/L	S/L	S/L	S/L	$\mathrm{S/L}$			$^{ m S/I}$	S/L		$_{ m S/I}$	$_{ m S/\Gamma}$		m S/L	S/L	$_{ m S/\Gamma}$		۲/ ک تا	$^{ m S/I}$	S/L	S/L
	Prior Year Depreciation	5,143	13,674	2,691	3,046	2,477	2,106	21,227		LIGHT POLES	1,576	613		310	1,907		190	464	1,167		T, 585	1,770		LIGHTS 2,062
Description	Cost Basis	12,825 \$	13,674	6,925	7,839	KOOM 6,550	6,071	BUILDING 38,160	578 772	LUMINARIES & 4	2,334	806		459	INSTALATION 36 2,825		190	464	1,167	! !	l,585 LUMINAIRES	3,371	1,743	IN-GROUND PATH 3,927
***	Date Acquired	O	SECURITY SYSTEM 11/10/92	BUILDING 3/31/94		BUILDING-STORAGE 8/31/94	[[RPROOFING OF 9/15/98	LAND 3/16/90			2 LIGHI POLES 11/28/95	PARKING LOT LIGHTS	2/27/9	POLE LIGHTS INSTA 3/01/96	AIS COMPUTER PART	3/05/99 SLIDE PROJECTOR		i (V	SECURITY CAMERA	7/08/99 NIGHT MAGIC 4 LUM	12/28/98	6/11/99	NIGHT MAGIC 14 IN 4/21/99

	Adjusted Net Income	w																		
	Net Investment Income	₩																		
	Current Year Depreciation	125																		
	Life	20 \$	Ŋ	Ŋ	Ŋ	7	Ŋ	ហ	Ŋ	ហ	ហ	Ŋ	Ŋ	ស	ហ	വ	7	7	7	വ
ı	Method																			
		s/r	200DB	11.T 200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB
	Prior Year Depreciation	. 1,313	:	ES W/ TRANSM 1,717	278 278		180	208	317	1,908 damidMon dom		ATHLON 750MHZ 2,767	371	2,699	2,031	1,167	3,975	988	17,214	TURES 3,981
Description	Cost Basis	ELECTRICAL INSTALL		SLD MIC PACKAGES 1,717	ROJECTOR FLATE 2/15/00 278		180		317 317	1,908	4340 LA 3,405	COMPUTER AMD K7 A	371	(BAUCUM) 2,699	2,031	(MVB) 1,167	3,975	988	17,214	STANDARDS W/FIXIORES 3,981
	Date Acquired	ATH LIGHTS 4/21/9		ELESS HANDH 12/07/99	OGEN F	3 - 14 DKAW LAIES 2/29/00 SUDEDDED	8/01/00 8/01/00	8/04/		8/8/	HIBA SATEL 8/04/00	WAREHOUSE 8/04/00	SMART UPS 8/04/00	8/10/00 8/10/00	9/14/00	₹ O	FURNITIONE (MVB) $9/30/00$	30/00	₹.	4 METAL HALLDE ST 7/02/01

•	Adjusted Net Income	ن																			
	Net Investment Income	w																			
	Current Year Depreciation	126																			
	Life	20 \$	7	7	Ŋ	7	7	2	7	Ŋ	7		7	Ŋ	Ŋ	ហ	5	Ŋ	ιC	Ŋ	Ŋ
	Method	m	a	а	æ	а	а	В	Ф	В	ш	•	В								
		150DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	200DB	20008		200DB	$^{ m S/\Gamma}$	$\mathrm{S/I}$	S/L	$_{ m S/\Gamma}$	S/L	$^{ m S/I}$	$\rm S/L$	$\mathrm{S/L}$
	Prior Year Depreciation	1,332	1,813	320	5,971	850	583	986	206	688	261	1	380	332	201	261	492	160	1,937	516	759
L	Prior Depre	w.		i i	SYSTEM					ORT SYS						1	(VERIZON) 92				
Description	Cost Basis	,831	1,813	$^{\circ}$	TELEPHONE S 5,971	TABLES AND LAMP 10 850	BACK CHAIK 583	986 - MVR	206		261	i) 1	380 7B	332	201	7	7135	STATION 1,100	2,806	748	1,100
	Date Acquired	POLE LIGHT INSTALLATION 9/30/01 \$ 2	KEFKIGEKATOK 2/27/01	5/04/01) 10 10 10 10 10 10 10 10 10 10 10 10 10	FURNITURE - TABLES 10/30/00	EXECUTIVE HIGH BACK 11/07/00 TIME INDEE WER	12/21/00 7F FIRMTTIPE	1/05/01	COMPUTER KEYBOARD/MOUSE 3/09/01	FURNITURE 8/29/01	3 5-SHELF UNITS	2/27/01 CANON COLOR PRINTER	5/31/0 F FIXTE	4	12/03/02	KYOCERA SMART PHONE 4/29/03	OM SOUND 1/12/04	പ	⊣	SLIDE SCANNER 8/30/04

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Statement 7 - Form 990-PF, Part I, Line 19 - Depreciation (continued)

•	Adjusted Net	Income	,	S.															ν ₂	
	Net Investment	Income		·V>															٠ 0	
	Current Year	Depreciation												24		21		94	57,733	
	:	: 		J S		Ŋ		2		വ		ហ		7		7		7	∾"	
		Method																		
				$_{ m S/\Gamma}$		$_{ m S/\Gamma}$		$_{ m S/I}$		$_{ m S/I}$		$_{ m S/I}$		$_{ m S/\Gamma}$		$_{ m S/\Gamma}$		$_{ m S/\Gamma}$		
	Prior Year	Depreciation		2,347		1,224		3,294	ER	096		369		181		161		106	1,299,833	
Description	Cost	Basis		3,399 \$	(LDCEC)	1,772	SOFTWARE	4,771	ON COLOR PRINT	1,390		534		337		300		1,314	3,119,130 \$	
	Date	Acquired	TOSHIBA COMPUTER	12/23/03 \$	SECURITY BUNDLE (LDCEC)	4/01/04	SERVER HARDWARE/SOFTWARE	4/01/04	XEROX PHASER 8400N COLOR PRINTER	5/06/04	COMPUTER MONITOR	8/23/04	PRINTER TROLLEY	12/03/03	EASEL	1/06/04	CHAIR & TABLE	3/16/04	TOTAL \$	

Statement 8 - Form 990-PF, Part I, Line 23 - Other Expenses

Charitable Purpose	₩	1	8,524	31,094	84,972	2,399	2,603	3,960	1,755	29,111	3,319	10,023	14,475	6,963
Adjusted Net	₩													
Net Investment	₩													
Total	₩		8,524	32,467	82,065	2,417	2,603		1,755		3,319	8,143		10,787
Description		EXPENSES	EDUCATION AND OUTREACH	ADVERTISING AND PUBLIC RELATI	TREATMENT AND RESEARCH	OFFICE EXPENSE	COMPUTER CONSULTING	SECTIBLES	TRASH	FACILITY MANAGEMENT	DIJES	TNGTIRANCE		LANDSCAPING

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Statement

Charitable Purpose	5,343 15,836 279 15,000	238,656
	₩	₩
Adjusted Net		0
∢	w	w
Net Investment		0
Ē	₩.	₩
Total	4,743 12,582 249 15,000	232,200
	w-	₩.
Description	TELEPHONE REPAIRS AND MAINTENANCE MISCELLANEOUS ARTIST TESTIMONIALS	TOTAL

· 58-1854794

Federal Statements

Statement 9 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description

	Beginning of Year	End of Year	Basis of Valuation	Fair MarketValue
STOCKS				
	\$ 1,561,157 \$	1,384,689	COST	\$ 1,970,793
TOTAL	\$ 1,561,157 \$	1,384,689		\$ 1,970,793

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Net FMV	\$ 3,120,568	\$ 3,120,568
End Accumulated Depreciation	\$ 1,365,115	\$ 1,365,115
End Cost / Basis	\$ 3,120,568	\$ 3,120,568
Beginning Net Book	\$ 1,813,188	\$ 1,813,188
Description	LAND BUILDINGS & EQUIPMENT	TOTAL

· 58-1854794

Federal Statements

Statement 11 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year	 End of Year	_	Fair Market Value
FILM IN PRODUCTION	\$ 513,019	\$ 585,037	\$_	585,037
TOTAL	\$ 513,019	\$ 585,037	\$_	585,037

Statement 12 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	Beginning of Year		End of Year		
ACCRUED PAYROLL TAXES	\$	1,744	\$	664	
TOTAL	\$	1,744	\$	664	

58-1854794	Federal S	Statements			•
Statement 13 - For	Statement 13 - Form 990-PF, Part VIII, Line 1	ine 1 - List of Offi Etc.	- List of Office s, Directors, Trustees,	ustees,	
Name and	Title	Average	Compensation	Benefits	Fxnenses
LUCY DANIELS, PH.D 2636 TATTON DR RALEIGH NC 27608	CHAIR		0	0	0
LANNY TUCKER, JR MD 2005 N LAKESHORE DR CHAPEL HILL NC 27514	VC SEC TREAS	0.00	0	0	0
ROBERT D DILL 12708 ALPERN CT RALEIGH NC 27614		0.00	0	0	0
SANDRA G HERSHBERG, MD 6317 KENHOWE DR BETHESDA MD 20817		0.00	0	0	0
MICHELE NATALE 809 SHADY LAWN RD CHAPEL HILL NC 27514		00.0	0	0	0
LUCY NOBLE INMAN 510 GLENWOOD AVE STE 301 RALEIGH NC 27603		0.00	0	0	0
KERRY SULKOWICZ, MD 151 EAST 80TH ST SUITE 1-B NEW YORK NY 10021		0.00	0	0	0
PAUL BRINICH 320 GLENDALE DRIVE CHAPEL HILL NC 27514		0.00	0	0	0
					13

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· 58-1854794	Federal State	ements
	Form 990-PF, Part XV, Line 1a - Managers \	Who Contributed Over 2% or \$5,000
·	Name of Manager	Amount
N/A		\$
TOTAL		\$0

•	58-1	854	794

Taxable Dividends from Securities

Description		Amount	Unrelated Business Code	Exclusion Code	Postal Code
MERRILL LYNCH-DIVIDENDS	\$	54,085		14	
TOTAL	Ś	54.085			

_	•
458-1	854794

Statement 1 - Form 8868, Part II, Line 7 - Explanation for Extension

Description

ADDITIONAL TIME IS REQUESTED TO GATHER INFORMATION TO PREPARE A COMPLETE AND ACCURATE RETURN DUE TO A COMPLETE CHANGE IN BOOKKEEPING AND ACCOUNTING STAFF.

(Rev. January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB	No	154	E 4	70

Department of the Internal Revenue		▶ File a	separate ap	pplication for each return.			
		tomatic 3-Month Extension, complete	only Part I	and check this box			I
•	=	Iditional (Not Automatic) 3-Month Exte			m).		
-	=	ess you have already been granted an					
Electronic fil	ing (e-file). Yo	u can electronically file Form 8868 if you	u need a 3-n	nonth automatic extension of time to fil	e (6 month	s for	
a corporation	required to file	Form 990-T), or an additional (not auto	matic) 3-mo	nth extension of time. You can electron	nically file f	orm	
8868 to reque	est an extensio	n of time to file any of the forms listed in	Part I or Pa	art II with the exception of Form 8870, I	nformation		
Return for Tra	insfers Associ	ated With Certain Personal Benefit Conf	tracts, which	must be sent to the IRS in paper form	at (see		
instructions)	For more deta	ils on the electronic filing of this form, vi	sit www.irs.g	ov/efile and click on e-file for Charities	& Nonpro	fits	
Part I	Automat	ic 3-Month Extension of Time.	Only sub	mit original (no copies needed	1).		
A corporation	required to file	Form 990-T and requesting an automa	itic 6-month	extension-check this box and complete	9		_
Part I only							▶ 📙
All other corp	orations (inclu	ding 1120-C filers), partnerships, REMIC	Cs, and trust	s must use Form 7004 to request an e	xtension of	time	
to file income	tax returns.						
Type or	Name of ex	empt organization			Employe	r identification r	number
print	Ì						
File by the						····	
due date for	Number, st	reet, and room or suite no. If a P.O box	, see instruc	tions.			
filing your return See	 						
ınstructions	City, town o	or post office, state, and ZIP code. For a	foreign add	ress, see instructions.			
	<u> </u>						
Enter the Re	tum code for th	ne return that this application is for (file a	separate a	polication for each return)			
		io iotali di iot		· · · · · · · · · · · · · · · · · · ·			
Applicatio	n		Return	Application			Return
_ls For			Code	Is For			Code
Form 990			01	Form 990-T (corporation)			07
Form 990-	BL		02	Form 1041-A			08
_Form 990-			03	Form 4720			09
Form 990-			04	Form 5227			10
		or 408(a) trust)	05	Form 6069			11
Form 990-	T (trust other t	nan above)	06	Form 8870			12
Telephor If the org If this is for the whole a list with the reque	panization does for a Group Re group, check a names and E	s not have an office or place of business etum, enter the organization's four digit of this box In this box In this for part of this for a corporation of the corpo	Group Exem f the group, required to fi	ed States, check this box ption Number (GEN) the check this box			. ▶□
	Change in acc	ed in line 1 is for less than 12 months, clounting period			 -		
	* *	or Form 990-BL, 990-PF, 990-T, 4720, s See instructions	or 6069, ent	er the tentative tax, less any	3a	\$	
b If this	application is f	or Form 990-PF, 990-T, 4720, or 6069,	enter any re	fundable credits and			
estima	ated tax payme	ents made include any prior year overpa	ayment allov	ved as a credit	3b	\$	
c Balan	ce due . Subtra	act line 3b from line 3a. Include your pay	ment with th	nis form, or, if required, deposit			
with F	TD coupon or,	if required, by using EFTPS (Electronic	: Federal Ta	x Payment System) See		1	
ınstru	ctions				3c	\$	<u>. </u>
Caution. If	you are going t	o make an electronic fund withdrawal w	ith this Form	8868, see Form 8453-EO and Form 8	879-EO fo	г	

orm 8868 (R	ev 1-2011)					Page 2
If you are	filing for an Additional (Not Automatic) 3-N	Month Extension, con	nplete only Part il and check this b)X		▶ X
	mplete Part II if you have already been grar			•	• •	, ' 🗀
•	filing for an Automatic 3-Month Extension		· · · · · · · · · · · · · · · · · · ·	,		
Part II	Additional (Not Automatic) 3-M			l (no copie	s needed	1
	Name of exempt organization	Onth Extension	or rime. Only the the origina			ion number
Type or	Name of exempt organization			Employe	i iueniinicai	ion number
print	I HOW DANIER OF BOILDING	T CNT		E0 1	354794	
File by the extended	LUCY DANIELS FOUNDAT			1 20-1	33177	
due date for	Number, street, and room or suite no. If a	a P.O. box, see instruc	ctions.			
filing your	9001 WESTON PARKWAY		land the second second			
retum. See Instructions	City, town or post office, state, and ZIP of					
	CARY	NC 27513)			
Enter the Ret	um code for the return that this application i	is for (file a separate a	pplication for each return)			04
Application	<u> </u>	Return	Application			Return
Is For		Code	Is For			Code
Form 990		01				
Form 990-E	BL	02	Form 1041-A			08
Form 990-E		03	Form 4720			09
Form 990-F		04	Form 5227			10
	(sec 401(a) or 408(a) trust)	05	Form 6069			11
	(trust other than above)	Ūô	Form 8870			12
	ot complete Part II if you were not already	granted an automati		sly filed Form	8868.	
for the whole	for a Group Return, enter the organization's group, check this box If it is is a sand EINs of all members the extension of time is the additional 3-month extension of time.	it is for part of the grou on is for. until 08/15/11	up, check this box	this is and attach a	<u>-</u>	
5 For ca	lendar year , or other tax year	r beginning 10/	01/09 , and ending $09/30$	/10 .		
	ax year entered in line 5 is for less than 12 i	months, check reason	Initial return Final re	tum		
	Change in accounting period					
	n detail why you need the extension				•	
SEE	STATEMENT 1			,		
						
	application is for Form 990-BL, 990-PF, 990)-T, 4720, or 6069, en	ter the tentative tax, less any			•
	undable credits See instructions.			8a	\$	0
	application is for Form 990-PF, 990-T, 4720			Ì		
	ated tax payments made Include any prior y	year overpayment allo	wed as a credit and any		1	0
	nt paid previously with Form 8868			8b	\$	0
	ce Due. Subtract line 8b from line 8a Includ		•			0
FIDC	oupon or, if required, by using EFTPS (Elec			8c	\$	0
Under penaltie true, correct, a	es of perjury. I declare that I have examined this found complete, and that I am authorized to prepare	m, including accompanyi	and Verification ng schedules and statements, and to the	best of my know	ledge and beli	ef, it is
	-					-//
Signature >	Mhod 1		Title CPD		Date	13/11
	/				Form	8868 (Rev 1-2011)