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Form **990-PF**

Return of Private Foundation

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

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

2010

OMB No 1545-0052

and ending For calendar year 2010, or tax year beginning Final return G Check all that apply: Initial return Initial return of a former public charity X Amended return Address change Name change Name of foundation A Employer identification number 27-0365906 MCLEOD FAMILY FOUNDATION, INC. Room/suite Number and street (or P O box number if mail is not delivered to street address) B Telephone number 418 FIRST STREET (540) 266-7814 City or town, state, and ZIP code C If exemption application is pending, check here 24011 1. Foreign organizations, check here ROANOKE, VA 2. Foreign organizations meeting the 85% test, check here and attach computation H 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 under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual Other (specify) (from Part II, col (c), line 16) If the foundation is in a 60-month termination, 2,653,983. (Part I, column (d) must be on cash basis) ▶\$ under section 507(b)(1)(B), check here Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome 53,386 N/A 1 Contributions, gifts, grants, etc., received 2 Check I If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 36,040 36,040. STATEMENT 4 Dividends and interest from securities 59,034 59,034 STATEMENT 5a Gross rents <26,530.> STATEMENT b Net rental income or (loss) 13,681 6a Net gain or (loss) from sale of assets not on line 10 **≅** 9 Gross sales price for all assets on line ga 12,047,622. Reven Capital gain net income (trom Part IV, line 2) 13,681 8 Net short-term capital gain 9 Income modifications b Less-Gosto goods sold c Gross profit or (loss) 11 Other income 108,755 162,141 12 Total. Add lines 1 through 11 0. 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 0. 22,930 STMT 4 0. **b** Accounting fees 0. STMT 5 24,999 24,999 c Other professional fees 0. <u>22,23</u>6. 22,236 17 Interest STMT 6 4,352. О. 18 Taxes 38,329 20,506. 19 Depreciation and depletion 20 Occupancy 2,103 0 0. 21 Travel, conferences, and meetings 22 Printing and publications 0 0. STMT 7 2,068 23 Other expenses 24 Total operating and administrative 67.741 expenses. Add lines 13 through 23 117,017 37,000 37,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 37,000. 154,017 67,741 Add lines 24 and 25 27 Subtract line 26 from line 12: 8,124 a Excess of revenue over expenses and disbursements 41,014 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) 023501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

| For | m 99 | 0-PF (2010) MCLEOD FAMILY FOUNDATIO | N, INC. | 27-0 | 0365906 Page 2 | | |
|-----------------------------|------------|--|--------------------|----------------|-----------------------|--|--|
| Г | art | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End of | End of year | | |
| 드 | arı | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value | | |
| | 1 | Cash - non-interest-bearing | 14,513. | 13,790. | 13,790. | | |
| | 2 | Savings and temporary cash investments | | | | | |
| | 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 | | | | | |
| | 7 | Other notes and foans receivable | | | | | |
| | ' | Less; allowance for doubtful accounts | | | | | |
| S | 8 | | | | | | |
| Assets | _ | Prepaid expenses and deferred charges | | | | | |
| As | | Investments - U.S. and state government obligations | | | | | |
| | | Investments - corporate stock STMT 8 | 701,201. | 172,188. | 119,755. | | |
| | | Investments - corporate bonds | 701,2011 | 1/2/1001 | | | |
| | | Investments - land, buildings, and equipment basis 2,558,767. | | | | | |
| | ' <i>'</i> | Less accumulated depreciation STMT 9 38,329. | 1 | 2,520,438. | 2,520,438. | | |
| | 40 | | | 2,320,430. | 2,320,430. | | |
| | | Investments - mortgage loans | | - | | | |
| | 13 | Investments - other | | | | | |
| | 14 | Land, buildings, and equipment: basis ► 1,068. Less accumulated depreciation STMT 10 ► 1,068. | | | | | |
| | | | | | | | |
| | 15 | Other assets (describe | | | | | |
| | | The state of the first and state of the stat | 715 714 | 2 706 416 | 2 652 002 | | |
| | | Total assets (to be completed by all filers) | 715,714. | 2,706,416. | 2,653,983. | | |
| | | Accounts payable and accrued expenses | <u>.</u> | | | | |
| | 18 | Grants payable | | | | | |
| ies | 19 | Deferred revenue | <u></u> | | | | |
| Liabilities | 20 | | | 1 062 204 | | | |
| ia | 21 | Mortgages and other notes payable | | 1,863,304. | | | |
| _ | 22 | Other liabilities (describe | 0. | 41,667. | | | |
| | | | | 1 004 071 | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | 1,904,971. | | | |
| | | Foundations that follow SFAS 117, check here | | | | | |
| Ø | | and complete lines 24 through 26 and lines 30 and 31. | | | | | |
| ည | 24 | Unrestricted | | | | | |
| agai | 25 | Temporarily restricted | | | | | |
| Net Assets or Fund Balances | 26 | Permanently restricted | | | | | |
| Ĕ | | Foundations that do not follow SFAS 117, check here | | | | | |
| F | | and complete lines 27 through 31. | _ | | | | |
| ts | 27 | Capital stock, trust principal, or current funds | 0. | 0. | | | |
| sse | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | | | |
| Ę | 29 | Retained earnings, accumulated income, endowment, or other funds | 715,714. | 801,445. | | | |
| Ž | 30 | Total net assets or fund balances | 715,714. | 801,445. | | | |
| | | | | | | | |
| _ | 31 | Total liabilities and net assets/fund balances | 715,714. | 2,706,416. | | | |
| P | art | III Analysis of Changes in Net Assets or Fund B | Balances | | | | |
| | | | | | | | |
| 1 | | l net assets or fund balances at beginning of year - Part II, column (a), line | : 30 | | | | |
| | • | st agree with end-of-year figure reported on prior year's return) | | 1 | 715,714. | | |
| | | r amount from Part I, line 27a | | 2 | 8,124. | | |
| | | r increases not included in line 2 (itemize) PRIOR PERIO | D CONTRIBUTION | 3 | 77,607. | | |
| | | lines 1, 2, and 3 | | 4 | 801,445. | | |
| | | eases not included in line 2 (itemize) | | 5 | 0. | | |
| 6 | Tota | net assets or fund balances at end of year (line 4 minus line 5) - Part II, c | olumn (b), line 30 | 6 | 801,445. | | |

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Form **990-PF** (2010)

| | 990-PF (2010) MCLEOD FAMILY FOUNDATION, INC. | • | | | | | <u> 27 -</u> | 0365 | 906 | | age 4 |
|----|---|--------------|-----------|-----------|-------------|--------------|--------------|------------|---------------|----------|-------------|
| | rt VI. Excise Tax Based on Investment Income (Section 494 | | | | 1940(e |), or 4 | 948 | - see i | instru | ctio | <u>15)</u> |
| ₹a | Exempt operating foundations described in section 4940(d)(2), check here and e | enter "N/ | 'A" on li | ine 1. | ` |) | , | | | | |
| | Date of ruling or determination letter: (attach copy of letter if need | | | | | | Í | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here | ► LX. | and er | nter 19 | 6 | } | 1_ | ļ <u>.</u> | | 4 | <u> 10.</u> |
| | of Part I, line 27b | | | | | | | | | | |
| | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% | | | | ol. (b). |) | | | | | _ |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O | thers er | nter -0- | -) | | | 2 | ļ | | | 0. |
| | Add lines 1 and 2 | | | | | | 3 | ļ <u>.</u> | | 4 | 10. |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C | Others e | nter -0 |)-) | | | 4 | ļ | | | 0. |
| | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | | | | | 5 | ļ | | 4 | 10. |
| | Credits/Payments: | ı | 1 | | | | |] | | | |
| | 2010 estimated tax payments and 2009 overpayment credited to 2010 | 6a | | | | <u> 380.</u> | | | | | |
| | Exempt foreign organizations - tax withheld at source | 6b | | | | | | | | | |
| | Tax paid with application for extension of time to file (Form 8868) | 6c | + | | | | 1 | | | | |
| | Backup withholding erroneously withheld | 6d | | | | | _ | | | _ | ^^ |
| | Total credits and payments. Add lines 6a through 6d | | | | | | 7 | ļ | | 3 | <u>80.</u> |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta | ached | | | | | 8 | | | | |
| | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | | | | | | 9 | - | | | <u>30.</u> |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | | 1 | | 10 | ļ | | | |
| | Enter the amount of line 10 to be: Credited to 2011 estimated tax | | | | Refund | ed 🚩 | 11 | | | | |
| | rt VII-A Statements Regarding Activities | -1-4 | | | | | | | 1 | Yes | No |
| 12 | During the tax year, did the foundation attempt to influence any national, state, or local legis | siation o | or ala it | t partic | ipate or ii | ntervene | in | | <u> </u> | 162 | |
| | any political campaign? | | - | 4 | | | | | 1a | | X |
| | Did it spend more than \$100 during the year (either directly or indirectly) for political purpo | | | | | | | | 1b | | <u> </u> |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and | а соріє | es or a | any ma | itenais p | ubiisne | a or | | | <u> </u> | |
| | distributed by the foundation in connection with the activities | | | | | | | | ١. | | v |
| | Did the foundation file Form 1120-POL for this year? | | | | | | | | 1c | <u></u> | <u>X</u> |
| a | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the | | | | | ^ | | | | | |
| _ | (1) On the foundation. > \$ 0. (2) On foundation managers Enter the reimbursement (if any) paid by the foundation during the year for political expend | | | | 4 | 0. | | | | | |
| е | | illure lax | х широ: | isea on | ioundati | OH | | | | | |
| • | managers. > \$ \$ \$ \$ Has the foundation engaged in any activities that have not previously been reported to the I | נפט | | | | | | | 2 | | х |
| 2 | If "Yes," attach a detailed description of the activities | inor | | | | | | | - | | |
| 2 | Has the foundation made any changes, not previously reported to the IRS, in its governing | inetrum | ont ar | rticlae (| of incorne | vration (| \r | | | | |
| J | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change | | iciii, ai | เเบเธอ | n incorpe | nation, t | ,, | | 3 | | y |
| 12 | Did the foundation have unrelated business gross income of \$1,000 or more during the year | | | | | | | | 4a | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | αι · | | | | | N | I/A | 4b | <u> </u> | |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year's | ? | | | | | | ., | 5 | | X |
| ٠ | 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 e | either: | | | | | | | | | İ |
| • | By language in the governing instrument, or | , | | | | | | | | } | |
| | By state legislation that effectively amends the governing instrument so that no mandator | rv direct | tions th | hat cor | flict with | the state | alaw | | | | |
| | remain in the governing instrument? | ., | | | | 0.2 | | | 6 | х | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | | | | | | | 7 | X | |
| - | If "Yes," complete Part II, col (c), and Part XV | | | | | | | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instruction | ons) 🕨 | | | | | | | | | |
| | VA | • | | | | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A | Attornev | Gener | ral (or | designate |) | - | | | [| |
| | of each state as required by General Instruction G? If "No," attach explanation | • | | • | - | • | | | 8b | _x_ | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of se | ection 4 | 942(յ)(| (3) or 4 | 1942(j)(5 |) for cale | endar | | | | |
| | year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," of | | | | *** * ' | | | | 9 | <u>L</u> | <u>X</u> |
| 10 | Did any persons become substantial contributors during the tax year? if "Yes," attach a sched | lule listing | their na | ames ar | nd address | es S | TMT | 12 | 10 | Х | |
| | | | | | | | | Fo | rm 990 | PF | 2010) |

023531 12-07-10

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| orm 990-PF (2010) MCLEOD FAMILY FOUNDATION Part VII-B Statements Regarding Activities for Which | N, INC. Form 4720 May Be I | Required (contin | 27-03659 | 06 Page <u>6</u> |
|--|---|---|---|---|
| 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section) (see section 4955); any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53.4945 or in a current notice regarding disaster assistance (see instruction) Granizations relying on a current notice regarding disaster assistance check in the answer is "Yes" to question 5a(4), does the foundation claim exemption expenditure responsibility for the grant? 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 a personal benefit contract? | on 4945(e))? or to carry on, directly or indirectly or described in section or educational purposes, or inder the exceptions described uctions)? there from the tax because it maintains. | Ye Ye Ye | S X NO S X NO S X NO S X NO | 5 b |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a | personal benefit contract? | | | 6b 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 b If "Yes," did the foundation receive any proceeds or have any net income attrib Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors | utable to the transaction? | | | 7b |
| List all officers, directors, trustees, foundation managers and their | compensation. | | | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| JOHN G. MCLEOD | DIRECTOR | | | |
| 410 FIRST STREET ROANOKE, VA 24011 | 1.00 | 0. | 0. | 0. |
| KATHERINE L. MCLEOD | DIRECTOR | · · | - 0. | |
| 410 FIRST STREET | | | | 1 |
| ROANOKE, VA 24011 | 1.00 | 0. | 0. | 0. |
| 2 Compensation of five highest-paid employees (other than those in | cluded on line 1). If none | , enter "NONE." | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE | | | - | |
| | | | | |
| | | | | |
| Total number of other employees paid over \$50,000 | | | Form S | 990-PF (2010) |

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| Form 990-PF (2010) MCLEOD FAMILY FOUNDATION, INC | 27-(| 36590 | 6 Page 7 |
|---|---|-------|--------------|
| Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued) | | | |
| 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 | (2) 1) 10 10 10 10 10 10 10 10 10 10 10 10 10 | | |
| | | - 1 | |
| | | - | |
| | | 1 | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total number of others receiving over \$50,000 for professional services | | ▶ | 0 |
| Part IX-A Summary of Direct Charitable Activities | | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant number of organizations and other beneficiaries served, conferences convened, research papers | | Ехр | enses |
| 1 N/A | 7,000,000,000 | | |
| | | | |
| | | | |
| 2 | | | |
| | | | |
| | | | |
| 3 | | - | |
| | | | |
| | | | |
| 4 | | | |
| | | | |
| | | | |
| Part IX-B Summary of Program-Related Investments | | | |
| Describe the two largest program-related investments made by the foundation during the tax ye | ar on lines 1 and 2. | Am | ount |
| 1 N/A | | | |
| | | | |
| | | | |
| 2 | | | |
| | | | |
| | | | |
| All other program-related investments. See instructions. | | | |
| 3 | | | |
| | | | |

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Total. Add lines 1 through 3

| P | art X Minimum Investment Return (All domestic foundations in | nust complete this pai | t. Foreign four | ndations, s | ee instructions) |
|----|---|-------------------------|------------------|---------------|-------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable | e. etc purnoses: | | | |
| a | Average monthly fair market value of securities | o, o.o., pa. poodo. | | 1a | 441,256. |
| b | Average of monthly cash balances | | | 1b | 160,927. |
| | Fair market value of all other assets | | | 1c | 621,617. |
| | Total (add lines 1a, b, and c) | | | 1d | 1,223,800. |
| | 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 | 468,995. |
| 3 | Subtract line 2 from line 1d | | | 3 | 754,805. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, | , see instructions) | | 4 | 11,322. |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and or | Part V, line 4 | | 5 | 743,483. |
| 6 | Minimum investment return Enter 5% of line 5 | | | 6 | 37,174. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) are foreign organizations check here and do not complete this part. | | foundations an | d certain | |
| 1 | Minimum investment return from Part X, line 6 | | | 1 | 37,174. |
| 2a | Tax on investment income for 2010 from Part VI, line 5 | 2a | 410. | | |
| b | Income tax for 2010. (This does not include the tax from Part VI.) | 2b | | | |
| C | Add lines 2a and 2b | | | 2c | 410. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | | | 3 | 36,764. |
| 4 | Recoveries of amounts treated as qualifying distributions | | | 4 | 0. |
| 5 | Add lines 3 and 4 | | | 5 | 36,764. |
| 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 | 36,764. |
| P | art XII Qualifying Distributions (see instructions) | | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., pur | poses: | | | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | | | 1a | 37,000. |
| b | Program-related investments - total from Part IX-B | | | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitat | ole, etc., purposes | | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | | | |
| a | Suitability test (prior IRS approval required) | | | 3a | |
| b | Cash distribution test (attach the required schedule) | | | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, at | nd Part XIII, line 4 | | 4 | 37,000. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net inve | stment | | | |
| | income. Enter 1% of Part I, line 27b | | | 5 | 410. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | | | 6 | 36,590. |
| | Note The amount on line 6 will be used in Part V, column (b), in subsequent years w | hen calculating whether | the foundation (| qualifies for | the section |

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| (a) (b) (c) (d) (2019) 2019 2010 | · · · · · · · · · · · · · · · · · · · | | | | |
|--|--|-----|-------|---------------------------------------|--------------|
| Distributable amount for 2010 from Part XI, Inter 7 36, 764. | | | | | |
| 2 Undestrobled records of any set of the end of above 20,626. | 1 Distributable amount for 2010 from Part XI, | | | | |
| Enter amount for 2009 only | line 7 | | | | 36,764. |
| 3 Excess distributions carryover, if any, to 2010: a From 2006 b From 2006 c From 2006 c From 2009 f Total of lines 33 through e 4. Qualifying distributions for 2010 from part XII, line 4; b ≤ 37,000, A popile to 2016 b troot or 2010 from part XII, line 4; b ≤ 37,000, A popile to 2016 b troot error or than hise 2a Applied to 2016 b troot or to copus (Election required - see instructions) 4. Applied to 2016 distributions or of copus (Election required - see instructions) 5. Excess distributions carryow applied to 2010 from the manufact of the copus of the c | | | | | |
| 3 Excess distributions carryover, if any, to 2010: a From 2005 b From 2006 c From 2007 d From 2008 c From 2008 c From 2009 1 Total of lines Sa through e 0 . 4 Outlinying distributions for 2010 from Part XII, tine 4: ▶ \$ 37,000. a Applied to 2009, but not more than line 2a b Applied to Understributed mome of prior years (Election required - see instructions) 1 readed as distributions out of corpus (Election required - see instructions) 1 readed as distributions out of corpus (Election required - see instructions) 2 created as distributions out of corpus (Election required - see instructions) 3 corpus Adal fives 31, 44, and 45 Settings files 2019 gir an amount appears in electric 2019 gir an amount appear | · · · · · · · · · · · · · · · · · · · | | | 20,626. | |
| 3 Excess distributions carryover, if any, to 2010: a from 2006 b From 2006 c From 2009 f Total of lines 3s through e 40 cleativing distributions to 2010 from Part XII, line 41: Ps 37, 000. Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2009, but not more than hine 2a b Applied to 2010 distributed becomes c Freated as distributions out of corpus (Election required - see instructions) c Remaining amount distributed out of corpus becased anotherous conyone applied to 2010 0. 5 Excess distributions conyone applied to 2010 0. 6 Excess distribution and standard to 2010 0. 6 Excess first total of each coloring as indicated below. 6 Extert the another 49, but has a notice of undistributed income for yours' under thouse for Applied to another for yours' under thouse for Applied to another for yours' assessed 0. 8 Understributed income for 2009, Subtract line 4 from line 6c from line 6b. Tavable amount - see instructions 0. 9 Understributed income for 2009, Subtract line 4 from line 2a. Tavable amount rise enstri- 1 Understributed income for 2009, Subtract line 4 from line 6c. Trom line 1, line amount must be distributed income for 2009, Subtract lines 4d and 5 from line 1. line amount must be distributed income for 2009, Subtract lines 4d and 5 from line 1. line amount must be distributed income for 2009, Subtract lines 4d and 5 from line 1. line amount must be distributed income for 2000, Subtract lines 4d and 5 from line 1. line amount must be distributed income for 2000, Subtract lines 4d and 5 from line 1. line amount must be distributed income for 2009, Subtract lines 4d and 5 from line 1. line amount | b Total for prior years: | | | | |
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| 10 Analysis of line 9: a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009 e Excess from 2010 | | 0. | | i | |
| a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2010 | | | | | |
| b Excess from 2007 c Excess from 2008 d Excess from 2009 e Excess from 2010 | · · · · · · · · · · · · · · · · · · · | | | | |
| c Excess from 2008 d Excess from 2009 e Excess from 2010 | · · · · · · · · · · · · · · · · · · · | | | | |
| d Excess from 2009 e Excess from 2010 | | | | | |
| e Excess from 2010 | | | | | |
| | | | · | | |

| Form 990-PF (2010) MCLEOD | FAMILY FOUN | DATION, INC | | | 65906 Page 10 |
|--|----------------------------|------------------------------|---------------------------|-------------------------------------|-----------------------------|
| Part XIV Private Operating F | | | -A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | | | | | |
| foundation, and the ruling is effective for | | = | _ | | |
| b Check box to indicate whether the found | | ig foundation described i | | 4942(j)(3) or49 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year (a) 2010 | (b) 2009 | Prior 3 years (c) 2008 | (d) 2007 | (a) Tatal |
| income from Part I or the minimum | (a) 2010 | (1) 2003 | (6) 2000 | (0) 2007 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | <u></u> | - | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | 1 | |
| line 4 for each year listed | | | | | |
| 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 3 Complete 3a, b, or c for the | | | | | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt | | | | | |
| organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | | - |
| Part XV Supplementary Info | rmation (Comple | te this part only | if the foundatio | n had \$5,000 or m | ore in assets |
| at any time during | the year-see the i | nstructions.) | | · | |
| 1 Information Regarding Foundation | on Managers: | | | | |
| a List any managers of the foundation wh | | | ributions received by th | e foundation before the clo | se of any tax |
| year (but only if they have contributed i | more than \$5,000). (See s | ection 507(d)(2).) | | | |
| SEE STATEMENT 13 | | | | | |
| b List any managers of the foundation when other entity) of which the foundation has | | | (or an equally large port | tion of the ownership of a p | artnership or |
| NONE | | | | | |
| 2 Information Regarding Contribut | ion, Grant, Gift, Loan, | Scholarship, etc., Pr | ograms: | | |
| Check here ► X if the foundation of the foundation makes gifts, grants, etc. | only makes contributions | to preselected charitable | organizations and does | not accept unsolicited requirements | uests for funds. If d d. |
| a The name, address, and telephone num | | | | | |
| | o. a.o poroon to milo | approadono onodia De | 220,00000. | | |
| | | | | | |
| b The form in which applications should | be submitted and informa | tion and materials they sh | nould include: | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on award | s, such as by geographic | al areas, charitable fields, | kınds of institutions, or | other factors: | |
| | | | | | |
| 023601 12-07-10 | | | | | Form 990-PF (2010) |

| 3 Grants and Contributions Paid During the Yea | r or Approved for Future F | Payment | | |
|--|---|------------------------|----------------------------------|---------|
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purnose of grant or | |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | Purpose of grant or contribution | Amount |
| a Paid during the year BIG BROTHERS BIG SISTERS OF SOUTHWEST VIRGINIA 124 WELLS AVENUE, NW ROANOKE, VA 24016 | | | CHARITABLE CONTRIBUTION | 20,000. |
| CHILDREN'S TRUST FOUNDATION OF THE ROANOKE VALLEY - 360 CAMPBELL AVENUE, SW ROANOKE, VA | | | CHARITABLE CONTRIBUTION | 17,000. |
| | | | | |
| Total | | | ▶ 3a | 37,000. |
| b Approved for future payment | | | | |
| NONE | | | | |
| Tota! | | 1 | ▶ 3b | |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | Unrelated b | ousiness income | | ded by section 512, 513, or 514 | (e) | |
|---|------------------|-----------------|---------------|---------------------------------|---------------------------------------|--|
| | (a) | (b) | (C) Exclu- | (d) | Related or exempt | |
| 1 Program service revenue: | Business code | Amount | sion | Amount | function income | |
| a | | | Ì | | · · · · · · · · · · · · · · · · · · · | |
| b | _ | | ĺ | | | |
| G | | | | | | |
| d | | | | | - | |
| e | | •• | | | | |
| 1 | | | | | | |
| g Fees and contracts from government agencies | | | | | | |
| 2 Membership dues and assessments | | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | | |
| 4 Dividends and interest from securities | | | | | 36,040. | |
| 5 Net rental income or (loss) from real estate: | | | T | | | |
| a Debt-financed property | 452000 | <26,530 | . > | | | |
| b Not debt-financed property | | • • | | | | |
| 6 Net rental income or (loss) from personal | | | | | | |
| property | | | | | | |
| 7 Other investment income | | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | 13,681. | |
| 9 Net income or (loss) from special events | | | 1 | | 13,001. | |
| 10 Gross profit or (loss) from sales of inventory | | - | † | | | |
| 11 Other revenue: | | | + | | | |
| | | | | | | |
| | _ | | | | ···· | |
| b | 1 1 | | | | | |
| d | 1 1 | | | | | |
| | - | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | _ | <26,530 | | 0. | 49,721. | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | 120,000 | | 13 | | |
| (See worksheet in line 13 instructions to verify calculations | ١ | | | 10 _ | 20,101 | |

Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of | | | | | | | | | | | | |
|--------------------|---|---|---------------|-------|----------|-------|-------|-------|-------|-------|-------|-----------------|-------------------|
| | the | the foundation's exempt purposes (other than by providing funds for such purposes). | | | | | | | | | | | |
| | THE | MCLEOI | FAMILY | FOU | NDATION | RECE | IVES | CONTI | RIBUT | CIONS | FROM | MEMBERS | OF |
| | THE | MCLEOI | FAMILY | AND | DISTRI | BUTES | THEM | AND | ANY | DERIV | ED II | NCOME TO | |
| | SELI | ECTED (| HARITAB | LE, I | RELIGIO | US, A | ND ED | UCAT | IONAI | ORGA | NIZA | TIONS. | |
| | | | | | | | | | | | | | |
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| - | | | | | <u> </u> | | | , | | | | | |
| 023621 12-07-10 | | | | | | | | -" | | | | Form 990 | -PF (2010) |

| , art Avii | Exempt Organ | | siers io a | inu mansaciions a | illa Nelatio | miships with Noncha | ILADIE | • | |
|--|-------------------------------|-----------------------------|--------------------|----------------------------------|--------------------|---|----------------|-----------|-------------|
| 1 Did the or | | | of the followin | g with any other organization | n described in | section 501(c) of | Ţ | Yes | No |
| | | | | 7, relating to political organ | | 30011011 30 1(0) 01 | | | |
| | from the reporting founda | | | | izations. | | | | Í |
| (1) Cash | nom the reporting learner | ation to a nononariae | no overribt or i | gamzation of. | | | 1a(1) | | х |
| | 25225 | | | | | | 1a(2) | | X |
| (2) Other assets b Other transactions: | | | | | | | | | |
| | | | | | | | | | X |
| • • | | - | | | | | 1b(1) 1b(2) | | X |
| · · · · · · · · · · · · · · · · · · · | | | | | | | | | X |
| | bursement arrangements | | | | | | 1b(3) 1b(4) | | X |
| | s or loan guarantees | | | | | | 1b(5) | | X |
| | rmance of services or me | imbarchia ar fundraic | ina calicitatio | ne | | | 1b(6) | | X |
| | f facilities, equipment, ma | | | | | • | 10(0) | | X |
| - | | - | | | vave chow the | fair market value of the goods, (| | L | |
| | • | | | • • | | ction or sharing arrangement, s | | , , | |
| |) the value of the goods, | | | ou 1000 than lan market valu | o in any transa | onon or onaring arrangement, o | | | |
| | (b) Amount involved | | | exempt organization | (d) Descr | iption of transfers, transactions, and | sharing ar | ranceme | ents |
| (-, | (-) | (6) | N/A | | (-, | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
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| | | | | | | | | | |
| 2a Is the four | ndation directly or indirec | tly affiliated with or re | elated to one | or more tax-exempt organi | zations describ | ed . | | | |
| | 501(c) of the Code (other | • | - | | 24110110 4030110 | Γ | Yes | X | No |
| | omplete the following sch | | (0)) 01 111 3001 | 1011 JE1 - | | _ | | | _ 110 |
| b 11 103, 01 | (a) Name of org | | | (b) Type of organization | | (c) Description of relations | hip | | |
| | N/A | | | (-, -, -, | | (-) (-) | | | |
| | 21/22 | | | | | | | | |
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| | | | | | | | | | |
| | | | | | | I to the best of my knowledge and be | lief, it is tr | ue, corre | ect, |
| Sign and | complete Declaration of prepa | arer (other than taxpayer o | or fiduciary) is b | ased on all information of which | preparer has any l | <u> </u> | | | |
| Here | Hollictal | , | | 17/23 | //>- | Taister | | | |
| | Signature of officer of tru | ustee | | Date | <u> </u> | Title | | | |
| | Print/Type preparer's na | | Preparer's s | | Date | Check If PTIN | | | |
| | , F = F | | , | - | | self- employed | | | |
| Paid | | | | | | | | | |
| Preparer Firm's name ► Firm's EIN ► | | | | | | | | | |
| Use Only | | | | | | 1 | | | |
| · y | Firm's address | | | | | | | | |
| | | | | | | Phone no. | | | |
| | · | | | | | | rm 99 0 |)-PF | (2010) |

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.

MCLEOD FAMILY FOUNDATION, INC.

OMB No 1545-0047

Employer identification number

27-0365906

| 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 charitable 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 Rule See instructions |
| General Rule | |
| - | on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one plete 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 regulations under sections (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% (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 contributor, during the year, outions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or cruelty to children or animals Complete Parts I, II, and III |
| contributions for If this box is chec purpose. Do not o | (c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 ked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively le, etc., contributions of \$5,000 or more during the year |
| but it must answer "No" o | that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), in Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify ling requirements of Schedule B (Form 990, 990-EZ, or 990-PF) |
| LHA For Paperwork Red | uction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010) |

Name of organization

Employer identification number

MCLEOD FAMILY FOUNDATION, INC.

27-0365906

| Part I | Contributors (see instructions) | | - |
|---------------|---|--------------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 1 | JOHN G. MCLEOD 410 FIRST STREET ROANOKE, VA 24011 | \$ <u>53,386.</u> | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| - | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll 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 of there is a noncash contribution) |

Name of organization

Employer identification number

MCLEOD FAMILY FOUNDATION, INC.

27-0365906

| Part II | Noncash Property (see instructions) | | |
|------------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | <u> </u> | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| | | | |

| Schedule B (For | rm 990, 990-EZ, or 990-PF) (2010) | | | Page of of Pa | art III |
|---------------------------|--|--|------------------------------|---|-------------|
| Name of orga | anization | | | Employer identification number | |
| MOT BOD | A HANTIN HOIDWARTON | ~ | | 27 0265006 | |
| Part III | Exclusively religious, charitable, etc., in more than \$1,000 for the year. Complete Part III, enter the total of exclusively religions \$1,000 or less for the year. (Enter this info | dividual contributions to section e columns (a) through (e) and the ous, chantable, etc, contributions | following line entry. For of | 27-0365906 organizations aggregating organizations completing | |
| (a) No. | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held | <u> </u> |
| | | | _ | | <u> </u> |
| | | (e) Transfer of gift | | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relationship of tr | ansferor to transferee | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held | <u> </u> |
| Part I | (b) i di pose di giit | (c) ose of gift | (4) 003 | oripuon or now girt is neid | |
| | | | | | |
| | | (e) Transfer of gift | | | |
| <u>-</u> | Transferee's name, address, ar | nd ZIP + 4 | Relationship of tr | ansferor to transferee | |
| | | | | | <u>-</u> |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held | |
| | | | | | _ _ _ |
| - | | (e) Transfer of gift | l | | |
| - | Transferee's name, address, an | nd ZIP + 4 | Relationship of tr | ansferor to transferee | |
| | | | | - | _ |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | scription of how gift is held | |
| | | | | | _ |
| | | (e) Transfer of gift | | | |
| - | Transferee's name, address, a | nd ZIP + 4 | Relationship of tr | ansferor to transferee | |
| | | | _ | | _ |
| | · · · · · · · · · · · · · · · · · · · | | - | | _ |

| | ses for Tax on Investment Income | 27.030 | 3300 1 | 101 2 |
|--|--|---|--|---|
| · (a) List and | describe the kind(s) of property solo ck warehouse; or common stock, 20 | d, e.g., real estate, 00 shs. MLC Co. | (b) How acquired P - Purchase D - Donation | (c) Date acquired (d) Date sold (mo., day, yr.) |
| 1a BERKSHIRE BRKB | | | P | VARIOUS VARIOUS |
| b CHIMERA CIM | | | | VARIOUS VARIOUS |
| c ISHARES FXI | | | | VARIOUS VARIOUS |
| d ISHARES IWM | | | | VARIOUS VARIOUS |
| e POWERSHARES DBC | | | | VARIOUS VARIOUS |
| f S&P 500 SPY | | | | VARIOUS VARIOUS |
| g VANGUARD VBK | | | | VARIOUS VARIOUS |
| h VANGUARD VBR | | | | VARIOUS VARIOUS |
| VANGUARD VEU | | | _ | VARIOUS VARIOUS |
| VANGUARD VGTSX | | • | | VARIOUS VARIOUS |
| k VANGUARD VNQ | | | | VARIOUS VARIOUS |
| VANGUARD VSS | | - · · | | VARIOUS VARIOUS |
| m VANGUARD VTV | | | | VARIOUS VARIOUS |
| n VANGUARD VUG | | • | | VARIOUS VARIOUS |
| • VANGUARD VWO | | | | VARIOUS VARIOUS |
| 0 VANGUARD VWO | (6) Decrease transfer allowed | (-) Cook on other boom | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | |) Gain or (loss) plus (f) minus (g) |
| a 62,034. | | 53,028. | | 9,006. |
| b 734,704. | | 697,443. | | 37,261. |
| <u>c</u> 52,555. | | 49,972. | | 2,583. |
| d 71,295. | | 64,927. | | 6,368. |
| e 30,403. | | 32,430. | | <2,027.> |
| f 48,830. | | 45,808. | | 3,022. |
| g 63,175. | | 57,231. | | 5,944. |
| h 3,237. | | 2,408. | | 829. |
| 75,955. | | 73,077. | | 2,878. |
| 78,195. | | 43,585. | | 34,610. |
| k34,790. | | 32,350. | | 2,440. |
| 94,389. | | 93,056. | | 1,333. |
| m 69,961. | | 67,282. | | 2,679. |
| n 34,545. | | 33,282. | | 1,263. |
| 0 92,522. | | 84,914. | | 7,608. |
| | g gain in column (h) and owned by t | | (I) Lo | 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 col. (k), not less than "-0-") |
| a | | | | 9,006. |
| b | | | | 37,261. |
| С | | | | 2,583. |
| d | | | | 6,368. |
| e | | | | <2,027.> |
| f | | | | 3,022. |
| n | | | | 5,944. |
| h | | | | 829. |
| " | | | . | 2,878. |
| : | | | | 34,610. |
| <u></u> | | | | |
| <u>N</u> | | | | 2,440. |
| | | | _ | 1,333. |
| m | | | · - | <u>2,679.</u> |
| n | | | | 1,263. |
| 0 | | <u> </u> | | 7,608. |
| 2 Capital gain net income or (net cap | oital loss) { If gain, also enter If (loss), enter -0 | in Part I, line 7 -* in Part I, line 7 | 2 | |
| 3 Net short-term capital gain or (loss | s) as defined in sections 1222(5) an | , I | | |
| If gain, also enter in Part I, line 8, of If (loss), enter "-0-" in Part I, line 8 | column (c). | } | 3 | |
| | | | <u> </u> | |

| | sses for Tax on Investment Income | 27 030 | <u> </u> | AGE Z OF | <u>~</u> |
|--|--|--|--|---|--|
| ' (a) List and | describe the kind(s) of property sol rick warehouse; or common stock, 2 | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (d) Date sold (mo., day, yr.) |) |
| 1a BERKSHIRE BRKB | | | | VARIOUS VARIOUS | |
| b ISHARES EEM | | | | VARIOUS VARIOUS | |
| c ISHARES EFA | | | | VARIOUS VARIOUS | |
| d ISHARES FXI | | | | VARIOUS VARIOUS | <u>; </u> |
| e ISHARES IWM | | | | VARIOUS VARIOUS | <u>; </u> |
| f VANGUARD VBK | = | | _ | VARIOUS VARIOUS | |
| g VANGUARD VBR | | - <u></u> . | | VARIOUS VARIOUS | |
| h VANGUARD VEU | | | | VARIOUS VARIOUS | _ |
| · VANGUARD VGTSX | | | | VARIOUS VARIOUS | _ |
| J VANGUARD VTV | | | | VARIOUS VARIOUS | _ |
| k VANGUARD VUG | | | P | VARIOUS VARIOUS | _ |
| VANGUARD VWO | | | P | VARIOUS VARIOUS | |
| m WISDOMTREE DLS | | | P | VARIOUS VARIOUS | <u></u> |
| <u>n</u> o | <u>-</u> | | | | _ |
| (e) Gross sales price | (f) Depreciation allowed | (g) Cost or other basis | | Gain or (loss) | _ |
| 2 200 | (or allowable) | plus expense of sale | (e) t | olus (f) minus (g) | _ _ |
| a 3,308. b 34. | | 3,908. 56. | | <600 <22 | |
| c 48. | | 94. | | <46 | |
| d 24,462. | · | 22,168. | | 2,294 | |
| e 55. | | 70. | | <15 | |
| f 43,955. | | 50,878. | | <6,923 | |
| g 93,496. | | 114,608. | | <21,112 | |
| h 68,172. | | 76,219. | | <8,047 | |
| 13,880. | | 7,908. | <u>-</u> | 5,972 | |
| 84,957. | | 115,799. | • | <30,842 | |
| k 62,570. | | 68,857. | | <6,287 | |
| 1 56,755. | | 73,142. | | <16,387 | |
| m 49,340. | | 69,441. | | <20,101 | |
| n | | | | | |
| 0 | | | | | |
| (i) F.M.V. as of 12/31/69 | g gain in column (h) and owned by (j) Adjusted basis as of 12/31/69 | the foundation on 12/31/69 (k) Excess of col. (i) over col. (j), if any | Gains (excess | ses (from col. (h)) of col. (h) gain over col. (k), ot less than "-0-") | |
| <u>a</u> | · · · · · · · · · · · · · · · · · · · | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | · | <600 | |
| b | | | | <22 | |
| C | | | - · · | <46 | |
| d | , | | | 2,294 | |
| e | | | | <15 | |
| f | | | = =1 - 1 - 1 - 1 | <6,923 | |
| g | | | _ | <21,112 | |
| h | | | | <8,047 | |
| 1 | | | | 5,972 | |
| 1. | | | | <30,842 | > |
| k | | | | <6,287 | <u> </u> |
| <u> </u> | | | | <16,387 | |
| m | | | | <20,101 | <u>. •</u> > |
| <u>n</u> | | | | | _ |
| 0 | | | | | _ |
| 2 Capital gain net income or (net ca | pital loss) { If gain, also enter -0 | ın Part I, line 7 -• ın Part I, line 7 | 2 | 13,681 | , • |
| 3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, | column (c). | d (6): | | | |
| If (loss), enter "-0-" in Part I, line 8 | 3 | | 3 | N/A | _ |

| FORM 990-PF DIVIDENDS AND INTE | REST FROM | SECURITIES | STATEMENT | _1 |
|--|--------------------|--|-----------------------------|----------------------|
| SOURCE GROS | SS AMOUNT | CAPITAL GAINS DIVIDENDS | COLUMN (A) |) |
| CHARLES SCHWAB | 36,040. | 0. | 36,04 | 40. |
| TOTAL TO FM 990-PF, PART I, LN 4 | 36,040. | 0. | 36,04 | 40. |
| FORM 990-PF RENTAL 1 | INCOME | | STATEMENT | 2 |
| KIND AND LOCATION OF PROPERTY | | ACTIVITY NUMBER | GROSS RENTAL INCO | OME |
| DOLLAR GENERAL - CLIFTON FORGE, VA FAMILY DOLLAR - ELIZABETH CITY, NC FAMILY DOLLAR - WINTON, NC | | 1 2 3 | 21,73 22,02 15,28 | 21. |
| · | | _ | • | J I . |
| TOTAL TO FORM 990-PF, PART I, LINE 5A | | | 59,03 | |
| | (PENSES | | | |
| TOTAL TO FORM 990-PF, PART I, LINE 5A | ACTIVITY NUMBER | AMOUNT | 59,03 | 34. |
| TOTAL TO FORM 990-PF, PART I, LINE 5A FORM 990-PF DESCRIPTION DEPRECIATION INTEREST EXPENSE - CLIFTON FORGE, VA PROFESSIONAL FEES - CLIFTON FORGE, VA - SUBTOTAL - DEPRECIATION INTEREST EXPENSE - ELIZABETH CITY, NC PROFESSIONAL FEES - ELIZABETH CITY, NC - SUBTOTAL - DEPRECIATION INTEREST EXPENSE - ELIZABETH CITY, NC PROFESSIONAL FEES - WINTON, NC PROFESSIONAL FEES - WINTON, NC | ACTIVITY NUMBER 1 | | 59,03 STATEMENT TOTAL 28,93 | 34. |
| TOTAL TO FORM 990-PF, PART I, LINE 5A FORM 990-PF DESCRIPTION DEPRECIATION INTEREST EXPENSE - CLIFTON FORGE, VA PROFESSIONAL FEES - CLIFTON FORGE, VA - SUBTOTAL - DEPRECIATION INTEREST EXPENSE - ELIZABETH CITY, NC PROFESSIONAL FEES - ELIZABETH CITY, NC - SUBTOTAL - DEPRECIATION INTEREST EXPENSE - WINTON, NC | ACTIVITY NUMBER | AMOUNT 13,030. 7,560. 8,333. 13,658. 8,672. 8,333. 11,641. 6,004. | 59,03 STATEMENT TOTAL | 34. 3 3 63. |

| FORM 990-PF | ACCOUNTI | NG FEES | STATEMENT 4 | | |
|---|------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| | 22,930. | 0. | | 0. | |
| TO FORM 990-PF, PG 1, LN 16B | 22,930. | 0. | | 0. | |
| FORM 990-PF C | OTHER PROFES | SIONAL FEES | S | PATEMENT 5 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITABLE PURPOSES | |
| PROFESSIONAL FEES - CLIFTON FORGE, VA PROFESSIONAL FEES - ELIZABETH CITY, NC | 8,333. 8,333. | • | | 0. | |
| PROFESSIONAL FEES - WINTON, NC | 8,333. | 8,333. | | 0. | |
| TO FORM 990-PF, PG 1, LN 16C | 24,999. | 24,999. | | 0. | |
| FORM 990-PF | ES | S' | FATEMENT 6 | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| PROPERTY TAXES | 4,352. | 0. | | 0. | |
| TO FORM 990-PF, PG 1, LN 18 | 4,352. | 0. | | 0. | |

| | OTHER EXPENSES | | | | STATEMENT | |
|---|------------------------------|--|-------|--|---|-------------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | KPENSES NET INVE | | (C) ADJUSTED NET INCOM | | |
| INSURANCE | 2,068. | | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 2,068. | | 0. | | | 0. |
| FORM 990-PF | CORPORAT | E STOCK | | | STATEMENT | 8 |
| DESCRIPTION | | | вос | OK VALUE | FAIR MARKE | т |
| CHARLES SCHWAB #0222 | | _ | | 172,188. | 119,7 | 55. |
| TOTAL TO FORM 990-PF, PART II | , LINE 10B | = | - | 172,188. | 119,7 | 55. |
| | | | | | | |
| FORM 990-PF DEPRECIATION O | F ASSETS HE | LD FOR IN | VESTM | 1ENT | STATEMENT | 9 |
| FORM 990-PF DEPRECIATION O | СО | LD FOR INV ST OR R BASIS | ACC | EUMULATED PRECIATION | STATEMENT BOOK VAL | |
| | СО | ST OR | ACC | CUMULATED | | UE 00. |
| DESCRIPTION LAND-CLIFTON FORGE LAND - ELIZABETH CITY LAND - WINTON LAND IMPROVEMENTS - CLIFTON FORGE BUILDING - CLIFTON FORGE PERSONAL PROPERTY - CLIFTON | СО | ST OR R BASIS 150,000. 179,100. 148,698. 136,152. 582,091. | ACC | CUMULATED ORECIATION 0. 0. 0. 4,353. | 150,0 179,1 148,6 129,3 577,7 | UE 00. 00. 98. 44. |
| DESCRIPTION LAND-CLIFTON FORGE LAND - ELIZABETH CITY LAND - WINTON LAND IMPROVEMENTS - CLIFTON FORGE BUILDING - CLIFTON FORGE PERSONAL PROPERTY - CLIFTON FORGE LAND IMPROVEMENTS - ELIZABETH CITY BUILDING - ELIZABETH CITY | ОТНЕ | ST OR R BASIS 150,000. 179,100. 148,698. | ACC | CUMULATED PRECIATION 0. 0. 0. 6,808. | BOOK VAL 150,0 179,1 148,6 129,3 577,7 7,4 129,3 | UE 00. 98. 44. 38. |
| DESCRIPTION LAND-CLIFTON FORGE LAND - ELIZABETH CITY LAND - WINTON | ОТНЕ | ST OR R BASIS 150,000. 179,100. 148,698. 136,152. 582,091. 9,346. | ACC | 0. 0. 0. 0. 6,808. 4,353. 1,869. | BOOK VALUE 150,0 179,1 148,6 129,3 577,7 7,4 129,3 661,0 7,4 129,3 393,4 | UE 00.00.00.98.44.38.77.4477.44.29. |

| FORM 990-PF DEPRECIATION OF ASSE | TS NOT HELD FOR | INVESTMENT | STATEMENT | 10 |
|------------------------------------|--------------------------------|-----------------------------|------------|-----|
| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALU | E |
| ORGANIZATIONAL COSTS | 1,068. | 1,068. | | 0. |
| TOTAL TO FM 990-PF, PART II, LN 14 | 1,068. | 1,068. | | 0. |
| FORM 990-PF OTH | ER LIABILITIES | | STATEMENT | 11 |
| DESCRIPTION | | BOY AMOUNT | EOY AMOUNT | ı |
| DUE TO J&K PROPERTIES | | 0. | 41,6 | 67. |
| TOTAL TO FORM 990-PF, PART II, LIN | E 22 | 0. | 41,6 | 67. |
| | TANTIAL CONTRIB | UTORS | STATEMENT | 12 |
| NAME OF CONTRIBUTOR | ADDRESS | | | |
| JOHN & KATHERINE MCLEOD | 410 FIRST STR ROANOKE, VI G | | | |
| FORM 990-PF PART | XV - LINE 1A | | STATEMENT | 13 |

LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

JOHN G. MCLEOD KATHERINE L. MCLEOD

Department of the Treasury Internal Revenue Service Name(s) shown on return

Depreciation and Amortization RENT (Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172

1

Form 4562 (2010)

► See separate instructions.

Business or activity to which this form relates

Identifying number

| | | | | | | ERAL - | CL | IFT | |
|---|--|--------------------|--|----------|--------------------|----------------|----------|----------------|----------------------------|
| MCLEOD FAMILY FOUNDATI | | | FOR | | VA_ | | | | 27-0365906 |
| Part I Election To Expense Certain Propert | y Under Section 17 | 79 Note: If yo | ou have any lis | ted pr | operty, co | mplete Pai | rt V be | . 1 | |
| 1 Maximum amount (see instructions) | | | | | | | | 1 | 500,000. |
| 2 Total cost of section 179 property place | • | |) | | | | | 2 | 2 000 000 |
| 3 Threshold cost of section 179 property l | | | | | | | | 3 | 2,000,000. |
| 4 Reduction in limitation. Subtract line 3 fr | | · | | | | | | 4 | |
| 5 Dollar limitation for tax year Subtract line 4 from line | | -0- If married fil | | | | (-) Fl | | 5 | |
| 6 (a) Description of proj | Defty | | (b) Cost (busin | ess use | Only) | (0) Elec | ted cost | | |
| | | - | | | | | | | |
| | | | | | | | | | |
| ·. · · · | | | | | | | | | |
| ~ 1 | 00 | | L | | - | | | | |
| 7 Listed property Enter the amount from I | | | a\ | 7 | 7 | | | | |
| 8 Total elected cost of section 179 proper | - | in column (| c), lines 6 and | ′ | | | | 8 | |
| 9 Tentative deduction. Enter the smaller of | | 000 Farm 4E | 60 | | | | | 9 | |
| 10 Carryover of disallowed deduction from11 Business income limitation. Enter the sn | • | | | o) or l | no E | | | 10 | |
| 12 Section 179 expense deduction Add lin | | • | | • | ile J | | | 12 | |
| 13 Carryover of disallowed deduction to 20 | | | | • II | 13 | | | 12 | |
| Note: Do not use Part II or Part III below for | | • | | | 10 | | | | |
| Part II Special Depreciation Allowar | | | | de listi | ed proper | tv.) | | | |
| 14 Special depreciation allowance for quali | | • | • | | • | | | | |
| the tax year | ned property (ou | 101 111011111010 | a property, pr | u00u i | 11 307 1100 | ournig | | 14 | |
| 15 Property subject to section 168(f)(1) elec | ction | | | | | | | 15 | - - |
| 16 Other depreciation (including ACRS) | | | | | | | | 16 | |
| Part III MACRS Depreciation (Do not | include listed pr | operty.) (Se | e instructions |) | | | | | |
| <u> </u> | | Se | ection A | | | | | | |
| 17 MACRS deductions for assets placed in | service in tax ye | ars beginnir | ng before 2010 |) | | | | 17 | |
| 18 If you are electing to group any assets placed in servi | ce during the tax year | into one or more | general asset acc | ounts, c | heck here | ▶ [| | | |
| Section B - Assets I | Placed in Servic | e During 20 | 10 Tax Year I | Jsing | the Gene | eral Depred | ciation | ı Syste | em |
| (a) Classification of property | (b) Month and year placed in service | (business/ī | or depreciation investment use e instructions) | | Recovery period | (e) Convention | on (f) M | fethod | (g) Depreciation deduction |
| 19a 3-year property | | | | | | | | | |
| b 5-year property |] | | 9,346. | 5 | YRS. | HY | 20 | 0DB | 1,869. |
| c 7-year property | | | | | | | | | |
| d 10-year property |] | | | | | | | | |
| e 15-year property | | 1 | 36,152. | 15 | YRS | HY | 15 | 0DB | 6,808. |
| f 20-year property |] | | | | | | | | |
| g 25-year property | | | | 2 | 5 yrs | | | S/L | |
| h Residential rental property | / | | | 27 | 7 5 yrs. | ММ | : | S/L | |
| h Residential rental property | / | | | 27 | 5 yrs | MM | : | S/L | |
| i Nonresidential real property | 09/10 | 5 | 82,091. | 3 | 9 yrs. | MM | : | S/L | 4,353. |
| | / | | | | | MM | | S/L | |
| Section C - Assets Pl | aced in Service | During 201 | 0 Tax Year U | sing t | he Altern | ative Depr | eciati | on Sys | tem |
| 20a Class life | | | | | | ļ | | S/L | <u> </u> |
| b 12-year | | | | 1 | 2 yrs. | <u> </u> | | S/L | |
| c 40-year | / | | | 4 | 0 yrs | MM | | S/L | |
| Part IV Summary (See instructions.) | | | | | | | | , , | |
| 21 Listed property Enter amount from line | | | | | | | | 21 | |
| 22 Total. Add amounts from line 12, lines 1 | - | | _ | | | | | | |
| Enter here and on the appropriate lines | - | - | | tions - | see instr | | | 22 | 13,030. |
| 23 For assets shown above and placed in s | = | e current yea | ar, enter the | | 1 | | | | |
| portion of the basis attributable to section | on 263A costs | | | | 23 | | | | |

portion of the basis attributable to section 263A costs

Form 4562 (2010) MCLEOD FAMILY FOUNDATION. INC. 27-0365906 Page 2 Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? Yes Yes No (b) (c) (e) (i) (f) (d) Business/ Basis for depreciation Flected Type of property Recovery Depreciation Cost or Method/ section 179 placed in investment (list vehicles first) deduction Convention other basis period use only) service use percentage cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L % % S/L % S/L 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) **(f)** Vehicle 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No No No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use?

| Note: If your answer to 37, 38, 39, 40, or 41 is | <u>"Yes," do no</u> | <u>t complete Section B for t</u> | <u>he covered vehicles</u> | | | |
|--|------------------------------------|-----------------------------------|----------------------------|-----------------------------------|----|---|
| Part VI Amortization | | | | | | |
| (a) Description of costs | (b) Date amortization begins | (c) Amortizable amount | (d) Code section | (e) Amorbzat period or pero | | (f) Amortization for this year |
| 42 Amortization of costs that begins during your 2 | 2010 tax yea | r | | | | |
| | | | | | | |
| | | | | | | |
| 43 Amortization of costs that began before your 2 | 2010 tax yea | r | | | 43 | |
| 44 Total. Add amounts in column (f) See the instructions for where to report | | | | | | |

016252 12-21-10

Form 4562 (2010)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization RENT (Including Information on Listed Property)

► See separate instructions.

➤ Attach to your tax return.

OMB No 1545-0172

Sequence No 67

Business or activity to which this form relates

Identifying number

2

| | | FAI | ILY DO | LLAR - | | |
|--|---------------------------|--|------------------|----------------|---------------|----------------------------|
| MCLEOD FAMILY FOUNDATION | | | | CITY, 1 | | 27-0365906 |
| Part I Election To Expense Certain Property | Under Section 1 | 79 Note: If you have any li | sted property | , complete Par | t V before yo | ou complete Part I. |
| Maximum amount (see instructions) | | | | | 1 | 500,000. |
| 2 Total cost of section 179 property placed | d in service (see | instructions) | | ē | 2 | |
| 3 Threshold cost of section 179 property b | | | | | 3 | <u>2,000,000.</u> |
| 4 Reduction in limitation Subtract line 3 fro | om line 2. If zero | or less, enter -0- | | | 4 | |
| 5 Dollar limitation for tax year Subtract line 4 from line 1 | | | | | _ 5 | |
| 6 (a) Description of prop | erty | (b) Cost (busi | ness use only) | (c) Elect | ed cost | |
| | | | | | | |
| | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | |
| 7 Listed property Enter the amount from li | | | 7 | _ | | |
| 8 Total elected cost of section 179 propert | | un column (c) lines 6 and | | | 8 | |
| 9 Tentative deduction. Enter the smaller o | - | in column (c), inles o and | , | | 9 | |
| 10 Carryover of disallowed deduction from I | | 009 Form 4562 | | | 10 | |
| 11 Business income limitation. Enter the sm | = | | ro) or line 5 | | 11 | - |
| 12 Section 179 expense deduction. Add line | | • | , | | 12 | |
| 13 Carryover of disallowed deduction to 20° | | | ▶ 13 | | | |
| Note: Do not use Part II or Part III below for I | | | | | | |
| Part II Special Depreciation Allowand | ce and Other D | epreciation (Do not inclu | ide listed proj | perty) | | C |
| 14 Special depreciation allowance for qualifi | ed property (oth | ner than listed property) p | laced in servi | ce during | | |
| the tax year | | | | | 14 | |
| 15 Property subject to section 168(f)(1) elec | tion | | | | 15 | |
| 16 Other depreciation (including ACRS) | | | | | 16 | |
| Part III MACRS Depreciation (Do not | include listed pr | |) | | | |
| | <u> </u> | Section A | | | | |
| 17 MACRS deductions for assets placed in | | | | | _ 17 | |
| 18 If you are electing to group any assets placed in service | | into one or more general asset acc e During 2010 Tax Year | | | | |
| Section B - Assets P | (b) Month and | (c) Basis for depreciation | T | | lation Syste | :m |
| (a) Classification of property | year placed in service | (business/investment use only - see instructions) | (d) Recovery | (e) Convention | n (f) Method | (g) Depreciation deduction |
| 19a 3-year property | | | | | + + | |
| b 5-year property | | 9,346. | 5 YRS | . HY | 200DB | 1,869. |
| c 7-year property | | | 3 | | | 2,005. |
| d 10-year property | | | | | 1 - 1 | |
| e 15-year property | | 136,152. | 15 YR | S. HY | 150DB | 6,808. |
| f 20-year property | | | İ | | | |
| g 25-year property | | | 25 yrs. | | S/L | |
| h Boardontral contail accounts | / | | 27 5 yrs | ММ | S/L | |
| h Residential rental property | / | | 27.5 yrs | MM | S/L | |
| i Nonresidential real property | 09/10 | 665,991. | 39 yrs. | MM | S/L | 4,981. |
| | 1 | | | MM | S/L | |
| Section C - Assets Pla | ced in Service | During 2010 Tax Year U | sing the Alte | rnative Depre | ciation Sys | tem |
| 20a Class life | | | | | S/L | |
| b 12-year | | | 12 yrs. | | S/L | |
| c 40-year | / | | 40 yrs. | MM | S/L | |
| Part IV Summary (See Instructions) | | | | | 1 1 | <u> </u> |
| 21 Listed property. Enter amount from line 2 | | - | | | 21 | |
| 22 Total. Add amounts from line 12, lines 14 | = | | | | | 40 454 |
| Enter here and on the appropriate lines of | | | itions - see in: | str | 22 | <u>13,658.</u> |
| 23 For assets shown above and placed in se | • | e current year, enter the | | | | |
| portion of the basis attributable to sectio | | | | | <u>_</u> | Fa 4800 (00:10) |
| 016251 12-21-10 LHA For Paperwork Reduction A | act notice, see | separate instructions. | | | | Form 4562 (2010) |

| Foi | rm 4562 (2010) | MCT. | EOD FAM | TT.V | E∩INI | דיחגרו | ONT. | TNC | | | | 27_ | 0365 | ۵۵6 ه | Page 2 |
|------|---|---------------------------|----------------------------------|----------------------|-----------------------|-----------------------|------------------|----------|---------------|------------|----------|-----------|-----------|----------------|--------|
| | art V Listed Property (| | | | | | | | | ertv use | d for en | | | | |
| • | amusement) | | | | | | | | | | | | | | |
| | Note: For any vehi through (c) of Sec | cle for wh tion A, all | hich you are us of Section B, | ing the s and Sec | standard tıon C ıf | d mileagi applical | e rate or ble | dedu | cting lease | expense | e, comp | lete only | 24a, 24 | tb, colum | ns (a) |
| | Section A - De | | | | | | | nstruc | tions for lii | nits for p | asseng | er autom | obiles) | | |
| 248 | a Do you have evidence to supp | ort the bu | siness/investme | nt use cla | ımed? | ☐ Ye | es 🗆 | No | 24b If "Y | es," is th | e evidei | nce writt | en? | Yes | No |
| | (a) | (b) | (c) | | (d) | | (e) | | (f) | | g) | | n) | (| |
| | Type of property | Date laced in | Business/ investment | | Cost or | | is for depre | | Recovery | Met | hod/ | Depre | ciation | Elec | |
| | INSEVERGRES HISE I F | service | use percentag | e otl | ner basis | (000 | use only | | period | Conv | ention | gegn | ction | section co: | |
| 25 | Special depreciation allowa | nce for q | ualified listed i | property | placed | ın servic | e dunno | the ta | ax year an | d | | | | | |
| | used more than 50% in a q | ualified b | usiness use | | • | | | | • | | 25 | | | | |
| 26 | Property used more than 50 | 0% in a q | ualified busine | ss use | | | | | | | | | | | |
| | | | 9 | 6 | | | | | | | | | | | |
| | | | 9 | 6 | | | | | | | | | | | - |
| | | , . | 9 | ó | | | | | | | | | | | |
| 27 | Property used 50% or less | ın a qualı | fied business | use: | | | | | | | | | | | |
| | | | 9 | ά l | | | _ | | | S/L - | | | | | |
| | | | 9 | <u>б</u> | | | | | | S/L - | | | | | |
| | | | 9 | 6 | | | | | | S/L - | | | | | |
| 28 | Add amounts in column (h) | lines 25 | through 27 E | nter here | and on | line 21, | page 1 | | | | 28 | _ | | | |
| 29 | Add amounts in column (i), | lıne 26. E | nter here and | on line 7 | , page | <u>i</u> | | | | | | | 29 | | |
| lf y | implete this section for vehic you provided vehicles to your ose vehicles | | | | - | | | | - | | • | | ng this s | ection fo | r |
| | Takalik a assağla saksısıdır. İs | | | | 1) | | b) | l . | (c) | (0 | | (€ | | (f) | |
| 30 | Total business/investment mile | | uring the | Veh | icie | ver | ncle | <u>'</u> | ehicle | Veh | icie | Veh | ICIE | Vehi | cie |
| 04 | year (do not include commuti | • , | theyear | | | | | | | | | | | | |
| | Total commuting miles drive Total other personal (nonco | _ | • | | | | | | | | | _ | | | |
| 32 | driven | minuting |) miles | | | | | | | | | | | | |
| 33 | Total miles driven during th | e vear | | | | | | | | | | | | | |
| 33 | Add lines 30 through 32 | e year. | | | | | | | | | | | | | |
| 34 | Was the vehicle available for | or nerson | aluse | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| • | during off-duty hours? | or person | ai asc | 163 | 140 | 163 | 140 | 163 | 140 | 163 | 140 | 163 | 140 | 163 | NO |
| 35 | Was the vehicle used prima | arıly by a | more | | | | | | | | | | | | |
| • | than 5% owner or related p | | | | | į | | | | | | | | | |
| 36 | Is another vehicle available | | onal | | | | | | | | | | | | |
| | use? | | | | | | į. | | | | | | | | |
| | | ection C | - Questions f | or Empl | overs W | /ho Pro | vide Vel | icles | for Use by | / Their E | mplove | es | | | |
| An | swer these questions to dete | | | - | - | | | | | | | | e not m | ore than | 5% |
| ow | ners or related persons | | | _ | | | | | | | | | | | |
| 37 | Do you maintain a written p | olicy stat | tement that pr | ohibits a | II persor | nal use d | of vehicle | es, inc | luding con | nmuting, | by you | - | | Yes | No |
| | employees? | | | | | | | | | | | | | | |
| 38 | Do you maintain a written p | olicy stat | tement that pr | ohibits p | ersonat | use of v | ehicles, | excep | t commut | ing, by y | our | | | | |
| | employees? See the instruc | ctions for | vehicles used | by corp | orate of | ficers, d | rectors | or 1% | or more | owners | | | | <u> </u> | |
| 39 | Do you treat all use of vehic | cles by er | nployees as p | ersonal (| use? | | | | | | | | | | |
| 40 | Do you provide more than t | ive vehic | les to your em | ployees, | obtain | ınformat | ion from | your | employees | about | | | | | |
| | the use of the vehicles, and | l retain th | e information | received | 13 | | | | | | | | | | ļ |
| 41 | Do you meet the requireme | nts conc | erning qualifie | d autom | obile de | monstra | ition use | ? | | | | | | | |
| | Note: If your answer to 37, | 38, 39, 4 | 0, or 41 is "Ye: | s," do no | t compi | ete Sec | tion B fo | r the c | covered ve | hicles. | | | | | L |

Part VI Amortization

(b) Date amortization begins (C) Amortizable amount (d) Code section (e) Amortization period or percentage (f) Amortization for this year 42 Amortization of costs that begins during your 2010 tax year. 43 43 Amortization of costs that began before your 2010 tax year 44 44 Total. Add amounts in column (f) See the instructions for where to report

016252 12-21-10

Form **4562** (2010)

Department of the Treasury Internal Revenue Service

Depreciation and Amortization RENT (Including Information on Listed Property)

Attach to your tax return.

3

Sequence No 67

OMB No 1545-0172

Name(s) shown on return

➤ See separate instructions. Business or activity to which this form relates

FAMILY DOLLAR - WINTON

Identifying number

| MCL Par | EOD FAMILY FOUNDATI | | NC NC | 1 | | 1// | 27-0365906 |
|-------------|---|--|--|------------------------|----------------|-------------|----------------------------|
| | | ty Under Section 1 | 19 Note: If you have any ils | tea property, | complete Part | | |
| | aximum amount (see instructions) | | | | | 1 | 500,000. |
| | otal cost of section 179 property place | , | • | | | 2 | 2 000 000 |
| | nreshold cost of section 179 property | | | | | 3 | 2,000,000. |
| _ | eduction in limitation. Subtract line 3 f | | , | | | 4 | |
| | Illar limitation for tax year Subtract line 4 from line | | | | (-) [| 5 | |
| 6 | (a) Description of pro | pperty | (b) Cost (busin | ess use only) | (c) Electe | d Cost | |
| | . | | | _ | | | |
| | - | | | - | | | |
| | . | | | - | | | |
| | - | | | - | | | |
| 7 Li | sted property Enter the amount from | line 29 | | 7 | | | |
| | otal elected cost of section 179 prope | - | in column (c), lines 6 and | 7 | | 8 | |
| _ | entative deduction Enter the smaller | | | | | 9 | |
| | arryover of disallowed deduction from | - | | | | 10 | |
| 11 B | usiness income limitation. Enter the sr | naller of business | s income (not less than zei | ro) or line 5 | | 11 | |
| 12 S | ection 179 expense deduction Add lir | nes 9 and 10, but | do not enter more than lir | | ··· | 12 | |
| | arryover of disallowed deduction to 20 | | | ▶ 13 | | | |
| | Do not use Part II or Part III below for | | · · · · · · · · · · · · · · · · · · · | | | | |
| Par | Special Depreciation Allowa | nce and Other D | epreciation (Do not inclu | de listed prop | perty) | | |
| 14 S | pecial depreciation allowance for qual | ified property (oth | ner than listed property) pl | aced in servi | ce during | | |
| th | e tax year | | | | | 14 | |
| 15 P | roperty subject to section 168(f)(1) ele | ction | | | | 15 | |
| | ther depreciation (including ACRS) | | | | | 16 | |
| Par | t III MACRS Depreciation (Do no | t include listed pr | operty) (See instructions |) | · | | |
| | | | Section A | | | | |
| 17 M | ACRS deductions for assets placed in | n service in tax ye | ears beginning before 2010 | 0 | | 17 | |
| 18 If | ou are electing to group any assets placed in serv | ice during the tax year | into one or more general asset acc | ounts, check here | <u>. ▶ L</u> | | |
| | Section B - Assets | | e During 2010 Tax Year | Using the Ge | neral Depreci | ation Syste | em |
| | (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only - see instructions) | (d) Recovery period | (e) Conventior | (f) Method | (g) Depreciation deduction |
| <u>19a</u> | 3-year property | | | | | | |
| b_ | 5-year property | | 9,346. | 5 YRS | . HY | 200DB | 1,869. |
| c | 7-year property | | | | | | |
| d | 10-year property | | | | | | |
| <u>e</u> | 15-year property | | 136,152. | 15 YR | S. HY | 150DB | 6,808. |
| f | 20-year property | | | | | | |
| <u>g</u> | 25-year property | | | 25 yrs. | | S/L | |
| | O and a half worked a second | / | | 27 5 yrs | MM | S/L | |
| h | Residential rental property | / | | 27.5 yrs. | ММ | S/L | |
| | No contract of the state of | 09/10 | 396,393. | 39 yrs. | ММ | S/L | 2,964. |
| i | Nonresidential real property | / | | | ММ | S/L | |
| | Section C - Assets P | laced in Service | During 2010 Tax Year U | sing the Alte | rnative Depre | ciation Sys | tem |
| 20a | Class life | | | | i | S/L | |
| b | 12-year | 7 | | 12 yrs | | S/L | |
| | 40-year | / | | 40 yrs | ММ | S/L | |
| Par | | | | • | - | | |
| 21 L | sted property Enter amount from line | 28 | | | | 21 | |
| | otal. Add amounts from line 12, lines | | es 19 and 20 in column (c |), and line 21 | | | |
| | nter here and on the appropriate lines | = | | | | 22 | 11,641. |
| | or assets shown above and placed in | - | | | | | |
| | ortion of the basis attributable to secti | - | = ===================================== | 23 | | | |
| 018251 | LUA E D | | separate instructions. | , =4 | | 1 | Form 4562 (2010) |

| Part V Listed Property (include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreativesement) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, through (c) of Section A, all of Section B, and Section C d applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 1 |
|--|
| Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, through (c) of Section A, all of Section B, and Section B, by Section B, and Section B, and Section B, by Section B, and Section B, and Section B, by Section B, by Section B, and Section B, by Section B, by Section B, and Section B, by Section B, by Section B, and Section B, by Section B, by Section B, by Section B, by Section B, by Section B, by Section B, by Section B, by Section B, by Section B, by Section B, by Section B, by Section B, by Secti |
| Section A - Depreciation and Other Information (Caution: See the mistructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? (a) Type of property placed in investment use property (list whelics first) Placed in investment use property placed in service during the tax year and use property placed in service during the tax year and used more than 50% in a qualified business use 25 Special depreciation allowance for qualified business use 26 Property used more than 50% in a qualified business use 27 Property used 50% or less in a qualified business use 28 Property used 50% or less in a qualified business use 29 Property used 50% or less in a qualified business use 29 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles 17 Vehicle vehicle sused by a sole propertor, partner, or other 'more than 5% owner,' or related person 18 you provided vehicles to your employees, first answer the questions in Section C to see if your employees this section for vehicles used by a sole propertor, partner, or other 'more than 5% owner,' or related person 18 You provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this sections of the vehicle and the personal (noncommuting miles) 30 Total business/investment miles driven during the year Add lines 30 through 32 34 Was the vehicle used primanity by a more than 5% owner or related personal 35 Was the vehicle used primanity by a more than 5% owner or related personal 36 Is another vehicle available for personal use 4 Vehicle Vehicle Vehicle sord Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more 36 Owner of the matrix of the matrix of the matrix of the matrix of the matrix of the matrix of |
| 249. Do you have evidence to support the business/investment use claimed? (a) (b) (c) (d) (d) (d) (e) (e) (f) (g) (h) (h) (g) (h) (h) (g) (h) (h) (g) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h |
| type of property (list vehicles first) Date placed in Business/ placed in Use vehicles first) Paced in Paced in Business/ investment (list vehicles first) Paced in Paced in Business/ investment (list vehicles first) Paced in Paced in Service Use only) Depreciation deduction deduction use only) Depreciation deduction use only) Depreciation deduction use only Depreciation deduction use only) Depreciation deduction use only) Depreciation deduction use only Depreciation deduction use only) Depreciation deduction use only Depreciation deduction use only Depreciation deduction use only Depreciation deduction use only Depreciation deduction use only Depreciation deduction use only Depreciation deduction use only Depreciation (list vehicle use of vehicles used by a sole proprietor, page 1 |
| Type of property placed in service Date Business/ (list vehicles first) placed in service Date Business/ (list vehicles first) placed in service Date | Discription |
| 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use: 16 |
| used more than 50% in a qualified business use: Property used more than 50% in a qualified business use: Websides |
| 9 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 9 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 9 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 Section B - Information on Use of Vehicles complete this section for vehicles used by a sole prophetor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this sections were vehicles. 1 Total commuting miles driven during the year (do not include commuting) miles driven during the year (do not include commuting) miles driven during the year Add lines 30 through 32 4 Was the vehicle available for personal use during off-duty hours? 5 Was the vehicle used primarily by a more than 5% owner or related person? 6 Is another vehicle available for personal use during off-duty hours? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees who are not more where or related persons. 7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? |
| % % % |
| % % |
| % % S/L |
| Property used 50% or less in a qualified business use % S.L . |
| 8 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 9 Add amounts in column (i), lines 25 through 27 Enter here and on line 21, page 1 Section B - Information on Use of Vehicles omplete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this sections vehicles. (a) (b) (c) (d) (e) Vehicle |
| 8 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 9 Add amounts in column (j), lines 25 through 27 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this sections expended vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this sections expended in the completing that is section to the completing that is section to the completing that is section to commuting miles of invention in the completing that is section to commuting miles of invention in the completing that is section to commuting miles of invention in the completing that is section to commuting miles of invention in the completing that is section to commuting miles of invention in the completing that is section to completing that is section to completing that is section to completing that is section to completing that is section to completing that is section to completing the vehicle vehic |
| 8 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 9 Add amounts in column (l), lines 26 Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles omplete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this sections evehicles. (a) (b) (c) (d) (e) Vehicle Ve |
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| Section B - Information on Use of Vehicles omplete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this sections to related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this sections to determine if you meet an exception to completing this section to the first answer the questions in Section C to see if you meet an exception to completing this sections to determine if you meet an exception to completing this section to see if you meet an exception to completing this section to give the provided vehicle in the provided vehicle in the provided vehicle in the provided vehicle in the provided vehicle in the provided vehicle in the provided vehicles for Use by Their Employees in the provided persons. Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees in the provided persons. Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? |
| Section B - Information on Use of Vehicles complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person copyou provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this sections evenicles. (a) (b) (c) (d) (e) Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle Orbital business/investment miles driven during the year (do not include commuting miles) Total commuting miles driven during the year Total other personal (noncommuting) miles driven Total miles driven during the year Add lines 30 through 32 4 Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Inswer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more winers or related persons. Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? |
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| you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this second ose vehicles. (a) (b) (c) (d) (e) Vehicle |
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| than 5% owner or related person? 6 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees who are not more with the provide vehicles used by employees who are not more without an exception to completing Section B for vehicles used by employees who are not more without an exception to provide vehicles, including commuting, by your employees? |
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| Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more winers or related persons. 7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? |
| nswer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more with more with the section of the secti |
| wners or related persons 7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? |
| 7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? |
| employees? |
| · • |
| |
| 8 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your |
| employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners |
| 9 Do you treat all use of vehicles by employees as personal use? |
| O Do you provide more than five vehicles to your employees, obtain information from your employees about |
| the use of the vehicles, and retain the information received? |
| 1 Do you meet the requirements concerning qualified automobile demonstration use? |
| Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles. |
| |
| |
| (a) (b) (c) (d) (e) |
| (a) (b) (c) (d) (e) Description of costs Date amortization begins amount Section period or percentage for the |
| (a) (b) (c) (d) (e) Description of costs Date amortization begins amount Section period or percentage for the |
| (a) (b) (c) (d) (e) Description of costs Date amortization begins Amortizable amount section period or percentage for the |
| Description of costs Date amortization Amortizable Code Amortization Amor |

Form **4562** (2010)

44 Total. Add amounts in column (f) See the instructions for where to report