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

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

2010

For calendar year 2010, or tax year beginning

, 2010, and ending

, 20

G Check all that apply:

Initial return

Initial return of a former public charity

Final return

Amended return

Address change

Name change

Name of foundation

A Employer identification number

VA/CLARK MEMORIAL FOUNDATION TUW

54-6035933

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

1525 W W.T. HARRIS BLVD. D1114-044

(336) 747-8176

City or town, state, and ZIP code

CHARLOTTE, NC 28288

H Check type of organization:  Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 1,105,606.

J Accounting method:  Cash  Accrual  
 Other (specify) \_\_\_\_\_

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)					
2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities		38,080.	36,887.		STMT 1
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		47,367.			
b Gross sales price for all assets on line 6a	272,869.				
7 Capital gain net income (from Part IV, line 2)			47,367.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less: Cost of goods sold					
11 Gross profit or (loss) (attach schedule)		4,926.			STMT 2
12 Total: Add lines 1 through 11		90,373.	84,254.		
13 Compensation of officers, directors, trustees, etc.		14,268.	10,701.		3,567.
14 Other employee salaries and wages			NONE		NONE
15 Pension plans, employee benefits			NONE		NONE
16a Legal fees (attach schedule)					
b Accounting fees (attach schedule)	STMT 3.	2,057.	NONE		2,057.
c Other professional fees (attach schedule)					
17 Interest					
18 Taxes (attach schedule) (see page 14 of the instructions)		464.	404.		
19 Depreciation (attach schedule) and depletion					
20 Occupancy					
21 Travel, conferences, and meetings			NONE		NONE
22 Printing and publications			NONE		NONE
23 Other expenses (attach schedule)	STMT 5.	983.			983.
24 Total operating and administrative expenses.					
Add lines 13 through 23		17,772.	11,105.	NONE	6,607.
25 Contributions, gifts, grants paid		50,348.			50,348.
26 Total expenses and disbursements Add lines 24 and 25		68,120.	11,105.	NONE	56,955.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		22,253.			
b Net investment income (if negative, enter -0-)			73,149.		
c Adjusted net income (if negative, enter -0-)					

POSTMARK DATE

MAY 12 2011

SCANNED MAY 20 2011

Operating and Administrative Expenses

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing	NONE		
	2	Savings and temporary cash investments	41,807.	41,780.	41,780.
	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 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule) ►			
		Less: allowance for doubtful accounts ►	NONE	NONE	
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10 a	Investments - U S and state government obligations (attach schedule)	NONE		
	b	Investments - corporate stock (attach schedule)	STMT 6.	NONE	1,167,568.
	c	Investments - corporate bonds (attach schedule)		NONE	
Liabilities	11	Investments - land, buildings, and equipment basis ►			
		Less accumulated depreciation (attach schedule) ►			
	12	Investments - mortgage loans		NONE	
	13	Investments - other (attach schedule)	1,086,788.		
	14	Land, buildings, and equipment basis ►			
Net Assets or Fund Balances		Less accumulated depreciation (attach schedule) ►			
	15	Other assets (describe ►)		NONE	
	16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) .	1,128,595.	1,209,348.	1,105,606.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Net Assets or Fund Balances	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22) .			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ► <input checked="" type="checkbox"/>				
	27	Capital stock, trust principal, or current funds	1,128,595.	1,209,348.	
	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds	NONE		
	30	Total net assets or fund balances (see page 17 of the instructions)	1,128,595.	1,209,348.	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	1,128,595.	1,209,348.	

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,128,595.
2	Enter amount from Part I, line 27a	2	22,253.
3	Other increases not included in line 2 (itemize) ► SEE STATEMENT 7	3	58,500.
4	Add lines 1, 2, and 3	4	1,209,348.
5	Decreases not included in line 2 (itemize) ►	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,209,348.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a SEE PART IV DETAIL</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>(e) Gross sales price</b>	<b>(f) Depreciation allowed (or allowable)</b>	<b>(g) Cost or other basis plus expense of sale</b>	<b>(h) Gain or (loss) (e) plus (f) minus (g)</b>		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))</b>		
<b>(i) F.M.V. as of 12/31/69</b>	<b>(j) Adjusted basis as of 12/31/69</b>	<b>(k) Excess of col. (i) over col. (j), if any</b>			
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>2 Capital gain net income or (net capital loss)</b>	<b>If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7</b>		<b>2</b>	<b>47,367.</b>	
<b>3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8. . . . .</b>			<b>3</b>		

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.**1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries.**

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2009	63,294.	1,010,914.	0.06261066718
2008	78,007.	1,283,354.	0.06078369647
2007	65,074.	1,515,316.	0.04294417798
2006	67,082.	1,441,146.	0.04654767803
2005	63,745.	1,399,248.	0.04555661327

- 2 Total of line 1, column (d) . . . . .**
- 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .**
- 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 . . . . .**
- 5 Multiply line 4 by line 3 . . . . .**
- 6 Enter 1% of net investment income (1% of Part I, line 27b) . . . . .**
- 7 Add lines 5 and 6 . . . . .**
- 8 Enter qualifying distributions from Part XII, line 4 . . . . .**  
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 . . .	{	1	1,463.
	Date of ruling or determination letter _____ (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> 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) . . .		2	
3	Add lines 1 and 2 . . .		3	1,463.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0) . . .		4	NONE
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0 . . .		5	1,463.
6	<b>Credits/Payments:</b>			
a	2010 estimated tax payments and 2009 overpayment credited to 2010 . . .	6a	79.	
b	Exempt foreign organizations-tax withheld at source . . .	6b	NONE	
c	Tax paid with application for extension of time to file (Form 8868) . . .	6c	NONE	
d	Backup withholding erroneously withheld . . .	6d		
7	Total credits and payments. Add lines 6a through 6d . . .		7	79.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached		8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . .		9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . .		10	
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax ►		11	Refunded ►

PAID VIA EFTPS

## Part 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 participate or intervene in any political campaign? . . .	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . .	X	
	<i>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.</i>		
1c	Did the foundation file Form 1120-POL for this year? . . .	X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ _____ (2) On foundation managers. ► \$ _____		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . .	X	
	<i>If "Yes," attach a detailed description of the activities</i>		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . .	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . .	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . .	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . .	X	
	<i>If "Yes," attach the statement required by General Instruction T.</i>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: ● By language in the governing instrument, or ● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . .	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV . . .	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ►		STMT 8
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 . . .	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV . . .	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . .	X	

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**Part VII-A Statements Regarding Activities (continued)**

11		X
12		X
13	X	
Website address ► <b>N/A</b>		
14	SEE STATEMENT 9	Telephone no. ►
Located at ► ZIP + 4 ►		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► <b>15</b> □	
16	Yes	No
At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►		

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
<b>1a</b>	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? . . . . .		
Organizations relying on a current notice regarding disaster assistance check here ► <b>1b</b> □			
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010? . . . . .		
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b>	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If "Yes," list the years ► . . . . .			
<b>b</b>	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 22 of the instructions) . . . . .		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► . . . . .		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.) . . . . .		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .		
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010? . . . . .		

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

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		14,268.	-0-	-0-
-----				
-----				
-----				
-----				

**2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE."**

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

Total number of other employees paid over \$50,000 . . . . . ► **NONE**

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

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
<b>Total number of others receiving over \$50,000 for professional services . . . . . ►</b>		<b>NONE</b>

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
<b>1</b>	<b>NONE</b>	
<b>2</b>		
<b>3</b>		
<b>4</b>		

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	<b>NONE</b>
<b>2</b>	
All other program-related investments. See page 24 of the instructions	
<b>3</b>	<b>NONE</b>
<b>Total. Add lines 1 through 3 . . . . . ►</b>	

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities . . . . .	1a	1,105,928.
b Average of monthly cash balances . . . . .	1b	40,406.
c Fair market value of all other assets (see page 25 of the instructions) . . . . .	1c	NONE
d <b>Total</b> (add lines 1a, b, and c) . . . . .	1d	1,146,334.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	1e	
2 Acquisition indebtedness applicable to line 1 assets . . . . .	2	NONE
3 Subtract line 2 from line 1d . . . . .	3	1,146,334.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions) . . . . .	4	17,195.
5 <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	5	1,129,139.
6 <b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	6	56,457.

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

1 Minimum investment return from Part X, line 6 . . . . .	1	56,457.
2a Tax on investment income for 2010 from Part VI, line 5 . . . . .	2a	1,463.
b Income tax for 2010. (This does not include the tax from Part VI.) . . . . .	2b	
c Add lines 2a and 2b . . . . .	2c	1,463.
3 Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	3	54,994.
4 Recoveries of amounts treated as qualifying distributions . . . . .	4	4,926.
5 Add lines 3 and 4 . . . . .	5	59,920.
6 Deduction from distributable amount (see page 25 of the instructions) . . . . .	6	NONE
7 <b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	7	59,920.

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

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	1a	56,955.
b Program-related investments - total from Part IX-B . . . . .	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	2	NONE
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required) . . . . .	3a	NONE
b Cash distribution test (attach the required schedule) . . . . .	3b	NONE
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	4	56,955.
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	N/A
6 <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	6	56,955.

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

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

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7 . . . . .				59,920.
2 Undistributed income, if any, as of the end of 2010			52,063.	
a Enter amount for 2009 only . . . . .				
b Total for prior years 20 08, 20 20 . . . . .		NONE		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 . . . . .	NONE			
b From 2006 . . . . .	NONE			
c From 2007 . . . . .	NONE			
d From 2008 . . . . .	NONE			
e From 2009 . . . . .	NONE			
f Total of lines 3a through e . . . . .	NONE			
4 Qualifying distributions for 2010 from Part XII, line 4: ► \$ 56,955.			52,063.	
a Applied to 2009, but not more than line 2a . . . . .				
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions) . . . . .		NONE		
c Treated as distributions out of corpus (Election required - see page 26 of the instructions) . . . . .	NONE			
d Applied to 2010 distributable amount . . . . .				4,892.
e Remaining amount distributed out of corpus . . . . .	NONE			
5 Excess distributions carryover applied to 2010 . . . . . (If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	NONE			
b Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		NONE		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .		NONE		
d Subtract line 6c from line 6b. Taxable amount - see page 27 of the instructions . . . . .		NONE		
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount - see page 27 of the instructions . . . . .				
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 . . . . .				55,028.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) . . . . .	NONE			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) . . . . .	NONE			
9 Excess distributions carryover to 2011.	NONE			
Subtract lines 7 and 8 from line 6a . . . . .				
10 Analysis of line 9:				
a Excess from 2006 . . . . .	NONE			
b Excess from 2007 . . . . .	NONE			
c Excess from 2008 . . . . .	NONE			
d Excess from 2009 . . . . .	NONE			
e Excess from 2010 . . . . .	NONE			

**Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9) NOT APPLICABLE**

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling				►
b	Check box to indicate whether the foundation is a private operating foundation described in section				4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed				(e) Total
	Tax year	Prior 3 years			
	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
b	85% of line 2a				
c	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				
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 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see page 28 of the instructions.)**

**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a** The name, address, and telephone number of the person to whom applications should be addressed:
- b** The form in which applications should be submitted and information and materials they should include:
- c** Any submission deadlines:
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>Name and address (home or business)</b>				
<b>a Paid during the year</b>				
SEE STATEMENT 21				
<b>Total</b> .....			► 3a	50,348.
<b>b Approved for future payment</b>				
<b>Total</b> .....			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514	(e) Related or exempt function income (See page 28 of the instructions.)	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1 Program service revenue:</b>						
a						
b						
c						
d						
e						
f						
g Fees and contracts from government agencies						
<b>2 Membership dues and assessments</b>	.....					
<b>3 Interest on savings and temporary cash investments</b>						
<b>4 Dividends and interest from securities</b>	.....			14	38,080.	
<b>5 Net rental income or (loss) from real estate</b>						
a Debt-financed property	.....					
b Not debt-financed property	.....					
<b>6 Net rental income or (loss) from personal property</b>						
<b>7 Other investment income</b>	.....			1	4,926.	
<b>8 Gain or (loss) from sales of assets other than inventory</b>				18	47,367.	
<b>9 Net income or (loss) from special events</b>	.....					
<b>10 Gross profit or (loss) from sales of inventory</b>	.....					
<b>11 Other revenue: a</b>						
b						
c						
d						
e						
<b>12 Subtotal. Add columns (b), (d), and (e)</b>	.....				90,373.	
<b>13 Total. Add line 12, columns (b), (d), and (e)</b>	.....			13		90,373.

**12 Subtotal. Add columns (b), (d), and (e) . . .**

(See worksheet in line 13 instructions on page 29 to verify calculations )

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

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

1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?	Yes	No
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
(1)	Cash . . . . .	1a(1)	X
(2)	Other assets . . . . .	1a(2)	X
b	Other transactions:		
(1)	Sales of assets to a noncharitable exempt organization . . . . .	1b(1)	X
(2)	Purchases of assets from a noncharitable exempt organization . . . . .	1b(2)	X
(3)	Rental of facilities, equipment, or other assets . . . . .	1b(3)	X
(4)	Reimbursement arrangements . . . . .	1b(4)	X
(5)	Loans or loan guarantees . . . . .	1b(5)	X
(6)	Performance of services or membership or fundraising solicitations . . . . .	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .	1c	X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . .  Yes  No

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

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

05/03/2011

Trustee

**Title**

**Paid  
Preparer  
Use Only**

Signature of officer or trustee **WELLS FARGO BANK, N.A.**

Date

PTIN

Check  if  
self-employed

**FIRM'S EIN**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ►		Firm's EIN ►		
	Firm's address ►		Phone no.		

**FORM 990-PF - PART IV**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis			
			TOTAL SHORT-TERM CAPITAL GAIN DIVIDENDS				4,817.	
			TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS				4,042.	
2,410.00			156.715 ROWE T PRICE REAL ESTATE FD COM PROPERTY TYPE: SECURITIES 2,940.00			12/20/2007	03/22/2010	
2,909.00			210.153 ARTIO TOTAL RETURN BD FD CL I #1 PROPERTY TYPE: SECURITIES 2,801.00			09/21/2009	07/23/2010	
8,842.00			638.847 ARTIO TOTAL RETURN BD FD CL I #1 PROPERTY TYPE: SECURITIES 8,164.00			06/22/2009	07/23/2010	
2,830.00			213.115 DODGE & COX INCOME FD COM PROPERTY TYPE: SECURITIES 2,764.00			09/21/2009	07/23/2010	
7,409.00			557.885 DODGE & COX INCOME FD COM PROPERTY TYPE: SECURITIES 6,940.00			06/22/2009	07/23/2010	
295.00			35. GOLDEN SMALL CAP CORE FUND PROPERTY TYPE: SECURITIES 398.00			08/28/2008	07/23/2010	
3,879.00			342.68 PIMCO FDS PAC INV T MGMT SER TOTAL PROPERTY TYPE: SECURITIES 3,722.00			09/21/2009	07/23/2010	
9,569.00			845.32 PIMCO FDS PAC INV T MGMT SER TOTAL PROPERTY TYPE: SECURITIES 8,783.00			06/22/2009	07/23/2010	
699.00			66. PIMCO FOREIGN BOND FUND-INST PROPERTY TYPE: SECURITIES 671.00			03/30/2007	07/23/2010	
1,927.00			176. PIMCO EMERG MKTS BD-INST #137 PROPERTY TYPE: SECURITIES 1,959.00			03/30/2007	07/23/2010	

**FORM 990-PF - PART IV**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
996.00			64. ROWE T PRICE REAL ESTATE FD COM PROPERTY TYPE: SECURITIES 542.00			12/20/2007	07/23/2010	454.00
267.00			27. WELLS FARGO ADV INTR VA FD-IST #517 PROPERTY TYPE: SECURITIES 212.00			10/31/2008	07/23/2010	55.00
34,384.00			3390.884 GOLDEN SMALL CAP CORE FUND PROPERTY TYPE: SECURITIES 38,554.00			08/28/2008	12/17/2010	-4,170.00
965.00			43. PERKINS MID CAP VALUE F/C I #1167 PROPERTY TYPE: SECURITIES 861.00			07/23/2010	12/17/2010	104.00
49,676.00			2213.73 PERKINS MID CAP VALUE F/C I #116 PROPERTY TYPE: SECURITIES 35,102.00			10/31/2008	12/17/2010	14,574.00
27,718.00			2513. PIMCO EMERG MKTS BD-INST #137 PROPERTY TYPE: SECURITIES 27,967.00			03/30/2007	12/17/2010	-249.00
50,018.00			2973.74 ROWE T PRICE REAL ESTATE FD COM PROPERTY TYPE: SECURITIES 34,633.00			02/09/2009	12/17/2010	15,385.00
511.00			38. ROYCE VALUE PLUS FUND-INV #271 PROPERTY TYPE: SECURITIES 434.00			07/23/2010	12/17/2010	77.00
33,284.00			2476.855 ROYCE VALUE PLUS FUND-INV #271 PROPERTY TYPE: SECURITIES 21,390.00			12/22/2008	12/17/2010	11,894.00
25,422.00			1155. SSGA EMERGING MARKETS FD S #1510 PROPERTY TYPE: SECURITIES 26,665.00			09/22/2008	12/17/2010	-1,243.00

**FORM 990-PF - PART IV**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description			P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis	Gain or (loss)	
TOTAL GAIN (LOSS) .....						47,367.	=====

## FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
ARTIO TOTAL RETURN BD FD CL I #1524	3,699.	3,699.
ARTIO INTERNATIONAL EQ FD 3# 1529	840.	840.
DODGE & COX INT'L STOCK FD # 1048	616.	616.
DODGE & COX INCOME FD COM	4,513.	4,513.
DREYFUS EMG MKT DEBT LOC C-I #6083	157.	157.
EVERGREEN INTL BOND FUND CL I (FD #460)	548.	548.
EVERGREEN SELECT MONEY MKT TR PRIME CASH	5.	5.
FLEMING CAP MUTUAL FUND GROUP J P MORGAN	599.	599.
GOLDEN LARGE CAP CORE FUND-I	1,092.	1,092.
GOLDMAN SACHS LARGE CAP VALUE FUND INST	310.	310.
ING INTERNATIONAL REAL EST-I #2664	1,321.	1,321.
JPMORGAN HIGH YIELD FUND SS #3580	7,275.	7,275.
PIMCO FDS PAC INV'T MGMT SER TOTAL RETURN	2,953.	2,953.
PIMCO FOREIGN BOND FUND- INST	712.	712.
PIMCO EMERG MKTS BD- INST #137	2,735.	2,735.
PIMCO COMMODITY REAL RET STRAT-I#45	4,575.	4,575.
ROWE T PRICE REAL ESTATE FD COM	1,262.	622.
ROYCE VALUE PLUS FUND-INV'T #271	198.	198.
SSGA EMERGING MARKETS FD S #1510	1,182.	1,182.
VANGUARD INFLAT PROTECT SEC FD #119	1,346.	1,346.
VANGUARD MSCI EMERGING MARKETS EFT	491.	491.
VANGUARD REIT VIPER	558.	558.
WELLS FARGO ADV INTR VA FD-1ST #517	322.	322.
WELLS FARGO ADV INT'L BOND-IS #4705	734.	734.
EVERGREEN PRIME CASH MGMT I CL #494	7.	7.
WF ADV HERITAGE MM FD-INSTL #3106	30.	30.
TOTAL	38,080.	36,887.

## FORM 990PF, PART I - OTHER INCOME

=====

REVENUE  
AND  
EXPENSES  
PER BOOKS

=====

TOTALS  
=====4,926.  
=====

STATEMENT 2

## FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
TAX PREPARATION FEE (NON-ALLOC	2,057.			2,057.
TOTALS	2,057.	NONE	NONE	2,057.

## FORM 990PF, PART I - TAXES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
FEDERAL ESTIMATES - PRINCIPAL		
FOREIGN TAXES ON QUALIFIED FOR	60.	288.
FOREIGN TAXES ON NONQUALIFIED	288.	116.
TOTALS	116.	116.
	464.	404.

## FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	CHARITABLE PURPOSES
OTHER ALLOCABLE EXPENSE- INCOME	983.	983.
TOTALS	983.	983.

## FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
04315J209 ARTIO TOTL RTN #1524	85,047.	77,755.
256210105 DODGE & COX INC FD	87,511.	80,731.
261980494 DREYFUS EMERG #6083	28,775.	28,576.
4812C0803 JPMORGAN HI YL #3580	91,073.	79,138.
693390700 PIMCO TOTAL RTN #35	83,960.	78,588.
922031869 VANGUARD SEC FD #119	55,365.	51,077.
94985D582 WELLS FARGO FD #4705	28,254.	26,034.
693391559 PIMCO EMRG MKTS #137	27,897.	25,513.
693390882 PIMCO FOREIGN #103	26,973.	26,213.
34984T881 GOLDEN LRG CAP FD	89,182.	81,779.
38142Y401 GOLDMAN SACHS #1132	52,927.	32,308.
38142Y773 GOLDMAN SACHS #1216	31,793.	25,073.
339128100 JPMORGAN MIDCAP #758	49,569.	49,653.
487300808 KEELEY SML CAP #2251	33,346.	33,094.
784924425 SSGA EMERG MKT #1510	26,176.	14,427.
87234N849 TCW SMALL CAP #4724	34,281.	33,989.
949915565 WELLS FARGO FD #3124	68,224.	68,945.
94984B181 WELLS FARGO FD #517	31,775.	22,611.
04315J837 ARTIO INTL FD #1529	38,206.	42,278.
256206103 DODGE&COX INTL STK	39,242.	33,788.
922042858 VANGUARD EMERG MKTS	26,191.	25,631.
44980Q518 ING INTL RE FD #2664	25,641.	27,649.
722005667 PIMCO COMMOD FD #45	54,223.	48,881.
922908553 VANGUARD REIT VIPER	51,937.	50,095.
<b>TOTALS</b>	<b>1,167,568.</b>	<b>1,063,826.</b>

## FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION	AMOUNT
ADJUST FOR CHANGE OF RECORD KEEPING FROM BOOK TO COST	58,500.
TOTAL	58,500.

-----  
STATE(S) WHERE THE FOUNDATION IS REGISTERED  
=====

VA

STATEMENT 8

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF  
=====

NAME: WELLS FARGO BANK

ADDRESS: 1 WEST 4TH STREET, 6TH FLOOR  
WINSTON-SALEM, NC 27101

TELEPHONE NUMBER: (336) 747-8176

STATEMENT 9

## FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

OFFICER NAME:

WELLS FARGO BANK

ADDRESS:

1525 WEST WT HARRIS BLVD. D1114-044

CHARLOTTE, NC 28288

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40

COMPENSATION ..... 14,268.

TOTAL COMPENSATION:

14,268.

=====

STATEMENT 10

=====

RECIPIENT NAME:

DUKE MEDICINE

ADDRESS:

P O BOX 90065  
DURHAM, NC 27710

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 558.

RECIPIENT NAME:

VOLENS FAMILY PRACTICE

ADDRESS:

15210 LP BAILEY MEMORIAL HWY  
NATHALIE, VA 24577

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 1,136.

RECIPIENT NAME:

DANVILLE EYE CENTER

ADDRESS:

734 DANVILLE  
DANVILLE, VA 24541

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 381.

=====

RECIPIENT NAME:  
HALIFAX REGIONAL HOSPITAL  
ADDRESS:  
2204 WILBORN AVENUE  
SOUTH BOSTON, VA 24592  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 25,399.

RECIPIENT NAME:  
SOUTHERN MEDICAL ASSOCIATES  
ADDRESS:  
POST OFFICE BOX 1115  
SOUTH BOSTON, VA 24592  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 1,009.

RECIPIENT NAME:  
HALIFAX CLINIC INC  
ADDRESS:  
235 NORTH MAIN STREET  
HALIFAX, VA 24558  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 198.

=====

RECIPIENT NAME:  
CENTRA HEALTH EMERGENCY  
SERVICES

ADDRESS:  
POST OFFICE BOX 2496  
LYNCHBURG, VA 24505

RELATIONSHIP:

NONE

PURPOSE OF GRANT:  
GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 3,223.

RECIPIENT NAME:  
HALIFAX RADIOLOGICAL ASSOCIATES

ADDRESS:  
POST OFFICE BOX 340  
HALIFAX, VA 24558-0340

RELATIONSHIP:

NONE

PURPOSE OF GRANT:  
GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 538.

RECIPIENT NAME:  
SOUTHSIDE EMERGENCY PHYSICIANS

ADDRESS:  
P O BOX 1115  
SOUTH BOSTON, VA 24592

RELATIONSHIP:

NONE

PURPOSE OF GRANT:  
GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 725.

=====

RECIPIENT NAME:  
DR JAMES H PRIEST DDS, LTD

ADDRESS:  
420 HAMILTON BLVD  
SOUTH BOSTON, VA 24592

RELATIONSHIP:  
NONE

PURPOSE OF GRANT:  
GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 547.

RECIPIENT NAME:  
BROOKNEAL DRUG COMPANY, INC

ADDRESS:  
120 RUSH STREET  
BROOKNEAL, VA 24528

RELATIONSHIP:  
NONE

PURPOSE OF GRANT:  
GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 4,883.

RECIPIENT NAME:  
HALIFAX HEART CENTER

ADDRESS:  
POST OFFICE BOX 1115  
SOUTH BOSTON, VA 24595

RELATIONSHIP:  
NONE

PURPOSE OF GRANT:  
GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 211.

=====

RECIPIENT NAME:

CAROLINA RADIOLOGY ASSOCIATES

ADDRESS:

200 HAWTHORNE LANE  
CHARLOTTE, NC 28204

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 166.

RECIPIENT NAME:

GRAND STAND REGIONAL MEDICAL  
CENTER

ADDRESS:

809 82 PARKWAY  
MYRTLE BEACH, SC 29572

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 1,269.

RECIPIENT NAME:

CARILION CLINIC RAD

ADDRESS:

P O BOX 40032  
ROANOKE, VA

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 75.

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RECIPIENT NAME:  
DIAGNOSTIC PATHOLOGY PARTNERSHIP  
ADDRESS:  
809 82 PARKWAY  
MYRTLE BEACH, SC 29572  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID .....

90.

RECIPIENT NAME:  
CARILION EMERGENCY PHYSICIANS  
ADDRESS:  
P O BOX 40032  
ROANOKE, VA  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID .....

180.

RECIPIENT NAME:  
CARILION NEW RIVER VALLEY  
ADDRESS:  
2900 LAMB CIRCLE  
CHRISTIANBURG, VA 24073  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID .....

2,016.

=====

RECIPIENT NAME:  
DUKE UNIVERSITY HEALTH SYSTEMS  
ADDRESS:  
POST OFFICE BOX 91040  
DURHAM, NC 27708  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 518.

RECIPIENT NAME:  
COMMUNITY PHARMACY OF  
SOUTH BOSTON  
ADDRESS:  
POST OFFICE BOX 506  
SOUTH BOSTON, VA  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 1,770.

RECIPIENT NAME:  
HALIFAX ANESTHESIOLOGY ASSOCIATES  
ADDRESS:  
POST OFFICE BOX 1115  
SOUTH BOSTON, VA 24592  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 500.

RECIPIENT NAME:

SPARKS & MACCARTY ORTHOPEDIC  
SURGEONS

ADDRESS:

422 HAMILTON BLVD  
SOUTH BOSTON, VA 24592

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 380.

RECIPIENT NAME:

MAYO CLINIC ARIZONA

ADDRESS:

P O BOX 790125  
ST LOUIS, MO 63179

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 250.

RECIPIENT NAME:

DUKE UNIVERSITY HOSPITAL

ADDRESS:

POST OFFICE BOX 70841  
CHARLOTTE, NC 28272

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 564.

=====

RECIPIENT NAME:

NEIL SCHACHT MD HEMATOLOGY

ADDRESS:

2232 WILBORN AVENUE, SUITE D  
SOUTH BOSTON, VA 24592

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 100.

RECIPIENT NAME:

UNIVERSITY OF VA MEDICAL CENTER

ADDRESS:

P O BOX 530272  
ATLANTA, GA 30353

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 1,178.

RECIPIENT NAME:

DURHAM REGIONAL HOSPITAL

ADDRESS:

3643 NORTH ROXBORO ROAD  
DURHAM, NC 27704

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PUBLIC CHARITY

AMOUNT OF GRANT PAID ..... 344.

=====

RECIPIENT NAME:  
REHAB ASSOCIATION OF CENTRAL  
VA  
ADDRESS:  
44 CLIFTON STREET  
LYNCHBURG, NC 24501  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 364.

RECIPIENT NAME:  
NEUROLOGY ASSOCIATION OF LYNCHBURG  
ADDRESS:  
1933 THOMSON DRIVE  
LYNCHBURG, VA 24501  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 300.

RECIPIENT NAME:  
ANESTHESIA SERVICES OF LYNCHBURG  
ADDRESS:  
1922 THOMSON DRIVE  
LYNCHBURG, VA 24501  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 569.

=====

RECIPIENT NAME:  
PHYSICIANS TREATMENT CENTER  
ADDRESS:  
2832 CANDLERS MOUNTAIN ROAD  
LYNCHBURG, VA 24502  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 307.

RECIPIENT NAME:  
DANVILLE REGIONAL MEDICAL CENTER  
ADDRESS:  
142 SOUTH MAIN STREET  
DANVILLE, VA 24541  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 200.

RECIPIENT NAME:  
PRIVATE DIAGNOSTIC CLINIC, PLLC  
ADDRESS:  
POST OFFICE BOX 900002  
RALEIGH, NC 27675  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL SUPPORT  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT OF GRANT PAID ..... 400.

TOTAL GRANTS PAID: 50,348.

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**SCHEDULE D**  
**(Form 1041)**Department of the Treasury  
Internal Revenue Service**Capital Gains and Losses**

OMB No. 1545-0092

**2010**

Name of estate or trust

VA/CLARK MEMORIAL FOUNDATION TUW

Employer identification number

54-6035933

Note: Form 5227 filers need to complete only Parts I and II.

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>1a</b> SHORT-TERM CAPITAL GAIN DIVIDENDS		STMT 1			4,817.

b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b . . . . .	1b	512.
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . .	2	
3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .	3	
4 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2009 Capital Loss Carryover Worksheet . . . . .	4	( )
5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back . . . . . ► 5	5	5,329.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr.)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>6a</b> LONG-TERM CAPITAL GAIN DIVIDENDS		STMT 1			4,042.

b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b . . . . .	6b	37,996.
7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . .	7	
8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .	8	
9 Capital gain distributions . . . . .	9	
10 Gain from Form 4797, Part I . . . . .	10	
11 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Carryover Worksheet . . . . .	11	( )
12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, column (3) on the back . . . . . ► 12	12	42,038.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2010

<b>Part III Summary of Parts I and II</b>		<b>(1) Beneficiaries' (see instr.)</b>	<b>(2) Estate's or trust's</b>	<b>(3) Total</b>
<b>13</b>	<b>Net short-term gain or (loss)</b>	<b>13</b>		<b>5,329.</b>
<b>14</b>	<b>Net long-term gain or (loss):</b>			
a	Total for year	<b>14a</b>		<b>42,038.</b>
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	<b>14b</b>		
c	28% rate gain	<b>14c</b>		
<b>15</b>	<b>Total net gain or (loss). Combine lines 13 and 14a ►</b>	<b>15</b>		<b>47,367.</b>

**Note:** If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

#### Part IV Capital Loss Limitation

<b>16</b>	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of:	<b>16</b>	( )
a	The loss on line 15, column (3) or b \$3,000		

**Note:** If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the Capital Loss Carryover Worksheet on page 7 of the instructions to figure your capital loss carryover.

#### Part V Tax Computation Using Maximum Capital Gains Rates

**Form 1041 filers.** Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

**Caution:** Skip this part and complete the worksheet on page 8 of the instructions if:

- Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

**Form 990-T trusts.** Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.

<b>17</b>	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) . . .	<b>17</b>	
<b>18</b>	Enter the smaller of line 14a or 15 in column (2) but not less than zero . . .	<b>18</b>	
<b>19</b>	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . .	<b>19</b>	
<b>20</b>	Add lines 18 and 19 . . .	<b>20</b>	
<b>21</b>	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- ►	<b>21</b>	
<b>22</b>	Subtract line 21 from line 20. If zero or less, enter -0- . . .	<b>22</b>	
<b>23</b>	Subtract line 22 from line 17. If zero or less, enter -0- . . .	<b>23</b>	
<b>24</b>	Enter the smaller of the amount on line 17 or \$2,300 . . .	<b>24</b>	
<b>25</b>	Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. <input type="checkbox"/> No. Enter the amount from line 23 . . .	<b>25</b>	
<b>26</b>	Subtract line 25 from line 24 . . .	<b>26</b>	
<b>27</b>	Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> No. Enter the smaller of line 17 or line 22	<b>27</b>	
<b>28</b>	Enter the amount from line 26 (If line 26 is blank, enter -0-) . . .	<b>28</b>	
<b>29</b>	Subtract line 28 from line 27 . . .	<b>29</b>	
<b>30</b>	Multiply line 29 by 15% (.15) . . .	<b>30</b>	
<b>31</b>	Figure the tax on the amount on line 23. Use the 2010 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . .	<b>31</b>	
<b>32</b>	Add lines 30 and 31 . . .	<b>32</b>	
<b>33</b>	Figure the tax on the amount on line 17. Use the 2010 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . .	<b>33</b>	
<b>34</b>	<b>Tax on all taxable income.</b> Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) . . .	<b>34</b>	

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

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**Name of estate or trust**

VA/CLARK MEMORIAL FOUNDATION TUW

**Employer identification number**

## Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1a 210.153 ARTIO TOTAL RETURN	09/21/2009	07/23/2010	2,909.00	2,801.00	108.00
BD FD CL I #1524					
213.115 DODGE & COX INCOME	09/21/2009	07/23/2010	2,830.00	2,764.00	66.00
FD COM					
342.68 PIMCO FDS PAC INV	09/21/2009	07/23/2010	3,879.00	3,722.00	157.00
MGMT SER TOTAL RETURN FD IN					
43. PERKINS MID CAP VALUE	07/23/2010	12/17/2010	965.00	861.00	104.00
F/C I #1167					
38. ROYCE VALUE PLUS	07/23/2010	12/17/2010	511.00	434.00	77.00
FUND-INV #271					

**1b Total.** Combine the amounts in column (f). Enter here and on Schedule D, line 1b . . . . .

512.00

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**For Paperwork Reduction Act Notice, see the Instructions for Form 1041.**

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**Schedule D-1 (Form 1041) 2010**

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JSA

**Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side**

**Employer identification number**

54-6035933

## Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

**6b Total.** Combine the amounts in column (f). Enter here and on Schedule D, line 6b . . . . .

37,996.00

**Schedule D-1 (Form 1941) 2010**

## FEDERAL CAPITAL GAIN DIVIDENDS

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## SHORT-TERM CAPITAL GAIN DIVIDENDS

ARTIO TOTAL RETURN BD FD CL I #1524	1,174.00
DREYFUS EMG MKT DEBT LOC C-I #6083	99.00
JPMORGAN HIGH YIELD FUND SS #3580	160.00
PIMCO FDS PAC INVT MGMT SER TOTAL RETURN FD I	2,863.00
PIMCO FOREIGN BOND FUND-INST	363.00
WELLS FARGO ADV INTL BOND-IS #4705	159.00
	-----
TOTAL SHORT-TERM CAPITAL GAIN DIVIDENDS	4,817.00
	=====

## LONG-TERM CAPITAL GAIN DIVIDENDS

=====

## 15% RATE CAPITAL GAIN DIVIDENDS

ARTIO TOTAL RETURN BD FD CL I #1524	12.00
DREYFUS EMG MKT DEBT LOC C-I #6083	1,856.00
GOLDMAN SACHS GROWTH OPPORTUNITIES INSTITUTI	32.00
JPMORGAN HIGH YIELD FUND SS #3580	473.00
PIMCO FDS PAC INVT MGMT SER TOTAL RETURN FD I	150.00
PIMCO FOREIGN BOND FUND-INST	1,309.00
WELLS FARGO ADV INTL BOND-IS #4705	180.00
	-----
TOTAL 15% RATE CAPITAL GAIN DIVIDENDS	30.00
	-----
TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS	4,042.00
	=====