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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2010, or tax year beginning 2010, and ending

	chair year 2010, or tax year beginning		and enamy	<u>'</u>	
G Che		al Return of a former p	· —	∐ Fına	al return
	Amended return	Address o	change Name o	change	
			A	Employer identification nun	nber
	Electric Care, Inc.			56-1938901	
	East Wait Street		В	Telephone number (see the	instructions)
wake	Forest, NC 27588-1229			919-863-6402	
			C	If exemption application is	pending, check here 🕨 🔲
				1 Foreign organizations, chec	
н б		(c)(3) exempt private for		2 Foreign organizations meet	ing the 85% test, check
	Section 4947(a)(1) nonexempt charitable t		private foundation	here and attach computation If private foundation status	
I Fa		ounting method X Ca	ash Accrual E	under section 507(b)(1)(A)	, check here
-	· · · · · · · · · · · · · · · · · · ·	Other (specify)	F	If the foundation is in a 60-	-month termination
Po-d I		column (d) must be on	cash basis)	under section 507(b)(1)(B)	, check here
Part I	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	columns (b), (c), and (d) may not neces-	expenses per books	income	ıncome	for charitable purposes
	sarily equal the amounts in column (a)				(cash basis only)
	(see the instructions)) 1 Contributions, gifts, grants, etc, received (att sch)	147,372.			
	2 Ck X if the foundn is not req to att Sch B	141,312.		 	
	3 Interest on savings and temporary				
	cash investments				
	4 Dividends and interest from securities				
	5a Gross rents. b Net rental income				
_	or (loss)				
R E V	5a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all				
Σ	assets on line 6a 7 Capital gain net income (from Part IV, line 2)		-		
E N	8 Net short-term capital gain				
U	9 Income modifications				
Ε	10 a Gross sales less returns and				
	allowances h Less Cost of				
	goods sold				
	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	147,372.	0.	0.	
	13 Compensation of officers, directors, trustees, etc	0.			
	14 Other employee salaries and wages.				
-	15 Pension plans, employee benefits	-	-		
Ś	16a Legal fees (attach schedule)				
S M	b Accounting fees (attach sch)				
i N	c Other prof fees (attach sch) RECEIV				
PS	17 interest				
写 T	18 Taxes (attach schedule)(see inst.)! 19 Depreciation (attach NOV 14	2011 101			
A A	19 Depreciation (attach) NOV 4	RS I			
N-STRAT-VE EXPEN	20 Occupancy				
ĞĞ E	21 Travel, conferences, and meetings 1	, 27			
A E	22 Printing and publications———				
D P	23 Other expenses (attach schedule) See Statement 1	72.			
EXPENS			-		
Ĕ	24 Total operating and administrative expenses. Add lines 13 through 23	72.			
	25 Contributions, gifts, grants paid Stmt 2	160,480.			160,480.
	26 Total expenses and disbursements.				-
	Add lines 24 and 25	160,552.	0.	0.	160,480.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses				
	and disbursements	-13,180.			
	b Net investment income (if negative, enter -0-)		0.		
	C Adjusted net income (if negative, enter -0-)			0.	

Dart	11	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	of year
art	•••	Daianice Jileels	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	1	Cash - non-interest	-bearing	200,513.	187,333	
	2	Savings and tempor	ary 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 official disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see the instructions)			
	7	Other notes and loans rec	eivable (attach sch)			
Ą		Less allowance for				
A S S E T	8	Inventories for sale	or use.			
Ē	9	Prepaid expenses a	nd deferred charges		" ,	
Ś		•	and state government			
	E	Investments - corporate	stock (attach schedule).			
	c	: Investments - corporate	bonds (attach schedule)			
		Investments – land, equipment basis	,			
		Less accumulated depred (attach schedule).	vation $lacksquare$			
	12	Investments - mort	gage loans			
	13	Investments - other	(attach schedule)			
ŀ	14	Land, buildings, and e	equipment basis			
		Less accumulated deprec (attach schedule)				
		Other assets (descri	completed by all filers -	000 510	105.000	
-+			o, see page 1, item l)	200,513.	187,333	. 0
រៃ	17		nd accrued expenses			
A B	18	Grants payable		-		
₽	19	Deferred revenue				_
ĻΙ	20	•	tors, trustees, & other disqualified persons			
╁│	21	· -	s payable (attach schedule)			
1	22	Other liabilities (desci	ribe			
E	23	Total liabilities (add	lines 17 through 22)	0.	0	
J		Foundations that fo	llow SFAS 117, check here 24 through 26 and lines 30 and 31.			
FU	24	Unrestricted				
N	25	Temporarily restricted	ed			
D	26	Permanently restrict				
B A L A		Foundations that do and complete lines	o not follow SFAS 117, check here $ ightharpoons$ X 27 through 31.			
Ļ	27	Capital stock, trust i	principal, or current funds.	200,513.	187,333	
A	28		, or land, building, and equipment fund		201,000	-
C	29	•	ulated income, endowment, or other funds			
ES	30	- -	fund balances (see the instructions)	200,513.	187,333	-
	31	Total liabilities and (see the instructions	net assets/fund balances	200,513.	187,333	7
art		Analysis of Chan	ges in Net Assets or Fund Balanc			
1 7	Total	net assets or fund b of-year figure reporte	alances at beginning of year — Part II, coli d on prior year's return)	umn (a), line 30 (must ag	ree with	200,513
		r amount from Part I,			2	
		increases not included in li			3	
		lines 1, 2, and 3				
		ases not included in line 2	(itemize)		5	
			alances at end of year (line 4 minus line 5) – Part II. column (b) Ju		

(a) List and describ	pe the kind(s) of property sold (e.g., rouse, or common stock, 200 shares ML	eal estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year
1a N/A			U — Donation	 	
b				 	
c					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa		(h) Gain or (e) plus (f) m	
a		<u> </u>			
b		<u> </u>		 .	
С					
<u>d</u>					
Complete only for accets sho	wing gain in column (h) and owned by	the foundation on 12/31/69			
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	1 (1)	(i) Gains (Coli gain minus column (l nan -0-) or Losses (fi	(), but not less
a	-				
b			-		
C					
d					
e	<u> </u>				_
2 Capital gain net income or (n	et capital loss). — If gain, also If (loss), ent	enter in Part I, line 7 ler -0- in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6)			
If gain, also enter in Part I, Iii	ne 8, column (c) (see the instructions)	If (loss), enter -0-	- 1		
ın Part I, line 8			3		
	er Section 4940(e) for Reduced to the section 4			N/A	
f 'Yes,' the foundation does not qu	ection 4942 tax on the distributable am alify under section 4940(e) Do not co	mplete this part	<u> </u>	Yes	☐ No
	in each column for each year, see th		ig any entries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets (co	(d) Distribution lumn (b) divided	
2009					
2008					
2007					
2006					
2005					
2 Total of line 1, column (d)					
, , , ,			2	+	
	the 5-year base period — divide the to on has been in existence if less than 5		3	<u> </u>	
4 Enter the net value of noncha	aritable-use assets for 2010 from Part	X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6.			7		
8 Enter qualifying distributions	from Part XII, line 4		8		
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI,	line 1b, and complete that	part using a 1	% tax rate See t	he

			9389		F	age 4
L	t VI . Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see	the inst	ructions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary — see instr.)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	-	1			0.
	check here. ▶ ☐ and enter 1% of Part I, line 27b	1				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	1				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		_			
_	foundations only Others enter -0-)		2			0.
3	Add lines 1 and 2	,	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0)-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	}-	5			0.
6	Credits/Payments]				}
	2010 estimated tax pmts and 2009 overpayment credited to 2010 Frompt foreign organizations — tax withhold at source					
	Exempt foreign organizations — tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c 6b	-				
	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6d	-				
7	Total credits and payments Add lines 6a through 6d		7	 -		0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	-	8			<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			- 0 .
11	Enter the amount of line 10 to be Credited to 2011 estimated tax	▶	11			
	t VII-A Statements Regarding Activities					
					Yes	No
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	Iţ		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			_1 b		x
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any material or distributed by the foundation in connection with the activities	als pul	blished			
	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation (2) On foundation (3)			0.		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impr	osed o		- -		
_	foundation managers \blacktriangleright \$ 0.		-			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
	If 'Yes,' attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a	rticles	3			
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	95.		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			_ 5	<u> </u>	X
_	If 'Yes,' attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions to	hat co	onflict	<u> </u>		-
-	with the state law remain in the governing instrument?			6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	•		7	X	
oa	Enter the states to which the foundation reports or with which it is registered (see the instructions) NC					
ь	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			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' col	(3) or	4942()	(5)		
10				îV 9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing to and addresses.	neir n	ames	10		X
BAA				Form 99	₩-PF	(2010)

ı aı	VII-A Statements Regarding Activities (Continued)	· ·		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		<u>x</u> _
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	Χ	
14	The books are in care of ► Steve Hamlin, CFO Wake EMC Telephone no ► 919-8	63-6	402	
				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A	•	Ц
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	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?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of the foreign country.			
Par	t 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
1 a	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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)? Yes X 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) Yes X No			
t	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 the instructions)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here			
(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?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
ā	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?			
	If 'Yes,' list the years ▶ 20, 20, 20			
ŧ	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 the instructions)	2 b	M	/A
_		20	14	12
(the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ≥ 20 20 20 20 20			
	► 20 , 20 , 20 , 20]		
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
t	of 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)	3ь	N	/A
4 8	2 Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
		1		
ŧ	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?	AL		Х
BA 4		4b	0.55	
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Form 990-PF (2010) Wake Electric Care				938901 Page	6
Part VII-B Statements Regarding Activiti	ies for Which Form	1 4720 May Be Req	uired (continued))	
5a During the year did the foundation pay or incu	-			-	
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	in (section 4945(e))?	∐ Yes [X] No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?	•	Yes	X No	
(3) Provide a grant to an individual for travel,	3,	• •	∐ Yes ∑	X] No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, o 4940(d)(2)? (see instri	rganization described uctions)	Yes	X No	
(5) Provide for any purpose other than religioneducational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes	X No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the exceptions disaster assistance	tions	5b N/A	
Organizations relying on a current notice rega	rding disaster assistani	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respons	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	— □ No	
If 'Yes,' attach the statement required by Regu	ulations section 53 494	5-5(d)			
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premiums	Yes	XNo	
b Did the foundation, during the year, pay premi	iums, directly or indirec	tly, on a personal bene	fit contract?	6b X	
If 'Yes' to 6b, file Form 8870					
7a At any time during the tax year, was the found				X No	
b If yes, did the foundation receive any proceed Part VIII Information About Officers, D				N/A 7b	_
and Contractors	irectors, rrustees,	i oanaadon manag	jers, riigiliy r ald	Employees,	
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		_
(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	other allowances	t,
See Statement 3					_
		0.	0	0. 0	١.
			· · · · · · · · · · · · · · · · · · ·		
2 Compensation of five highest-paid employee	· · · · · · · · · · · · · · · · · · ·	r ·			
(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	other allowances	t,
None			compensation		
Total number of other employees paid over \$50,000) TEE 403061 (27/23/10		Form 990-PF (201	0

Form 990-PF (2010) Wake Electric Care, Inc. 56-19: Part VIII- Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	
Fotal number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 Charitable Contribution to North Carolina Department of Social Services.	12,000.
2 Charitable Contribution to North Carolina Department of Social Services	
3 Charitable Contribution to West Johnston High School.	9,000.
	2,600.
4 Charitable Contribution to Bunn Rural Fire Department.	
	2,500.
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>N/A</u>	
2	
All other program-related investments. See instructions	

BAA

Total. Add lines 1 through 3

Form **990-PF** (2010)

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Form 990-PF (2010) Wake Electric Care, Inc.	56-1938901	. Page 8
Minimum Investment Return (All domestic foundations must complete this part. see instructions.)	Foreign foun	
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	
b Average of monthly cash balances	1b	
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	_
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Par XIII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► □ and do not complete this j		dations
1 Minimum investment return from Part X, line 6	1 ব্যক্তর	
2a Tax on investment income for 2010 from Part VI, line 5 2a		
b Income tax for 2010 (This does not include the tax from Part VI) c Add lines 2a and 2b		
3 Distributable amount before adjustments Subtract line 2c from line 1	2c 3	
Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions).	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see instructions)		
 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26 	1 a	160,481.
b Program-related investments — total from Part IX-B	1Ь	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	

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

Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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 instructions)

BAA

b Cash distribution test (attach the required schedule)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

Form **990-PF** (2010)

160,481.

160,481.

3b

4

5

6

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2010:				
a Enter amount for 2009 only			0.	j
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2010				
a From 2005 101, 111.				
b From 2006 127, 137.				
c From 2007 129, 593.				
d From 2008 146, 796.				
e From 2009 139,118.	C42 755			
f Total of lines 3a through e	643,755.			
4 Qualifying distributions for 2010 from Part XII, line 4 ► \$ 160,481.				
a Applied to 2009, but not more than line 2a		,	0.	
••				
 Applied to undistributed income of prior years (Election required — see instructions). 		0.		
 Treated as distributions out of corpus (Election required — see instructions). 	0.			
d Applied to 2010 distributable amount				0.
e Remaining amount distributed out of corpus	160,481.	-		
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	,			
.,,				
6 Enter the net total of each column as				
indicated below:	004 226			
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	804,236.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed	-,- ,	0.		
d Subtract line 6c from line 6b Taxable				
amount — see instructions		0.		
e Undistributed income for 2009. Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2010 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2011.				0.
7 Amounts treated as distributions out of				<u> </u>
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2005 not				
applied on line 5 or line 7 (see instructions)	101,111.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	703,125.			
10 Analysis of line 9				
a Excess from 2006 127, 137.				
b Excess from 2007 129, 593.				
c Excess from 2008 146, 796.				
d Excess from 2009 139, 118.				
e Excess from 2010 160, 481.		<u></u>	<u> </u>	

Form 990-PF (2010) Wake Electric Car	re Inc			56-193890	l Page 10
Part XIV Private Operating Foundation		tions and Part	VII-A, question 9		N/A
1a If the foundation has received a ruling or course effective for 2010, enter the date of the	determination letter				
b Check box to indicate whether the foundat	-	erating foundation of	described in section	4942(J)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
b 85% of line 2a					
 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	<u> </u>				
Part XV Supplementary Information assets at any time during the			organization ha	ad \$5,000 or mo	re in
Information Regarding Foundation Managers of the foundation who is close of any tax year (but only if they have None	gers: have contributed m	ore than 2% of the	total contributions is section 507(d)(2).)	received by the foun	dation before the
h List on a managers of the foundation who	our 109/ or more	of the steel, of a se		ally large portion of	the ownership of
b List any managers of the foundation who ca partnership or other entity) of which the None	foundation has a 1	10% or greater inte	rporation (or an equ rest	any large portion of	the ownership of
2 Information Regarding Contribution, Gran	at Gift Loan Sch	Marchin etc Dec	······································		
Check here \(\sum_{\text{off}} \) if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d	nakes contributions	s to preselected cha	arıtable organization		
a The name, address, and telephone number	er of the person to	whom applications	should be addresse	-d	
	,				
See Statement 4					
b The form in which applications should be	submitted and info	rmation and materi	als they should inclu	ude	
See Statement for Line 2a					
c Any submission deadlines					
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geograp	ohical areas, charita	able fields, kinds of	institutions, or other	factors
See Statement for Line 2a					
BAA	π	EEA0310L 02/16/11			orm 990-PF (2010)

Page 11

Recipient I recipient as undividuals Surface Purpose of grant or contribution Purpose of grant or contribution	3 Grants and Contributions Paid During the Ye	ear or Approved for Fut	ure Paymen	t	
Total Approved for future payment Total	•	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or	Amount
Total Approved for future payment Total	Name and address (home or business)	substantial contributor	recipient	Contribution	
b Approved for future payment		substantial contributor	recipient		
	Total			► 3a	
Ulai				► 3b	

Enter gross amounts unless otherwise indicated	Unrelated I	business income	Excluded by	section 512, 513, or 514	(e)
1. December on the second	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (see the instructions)
1 Program service revenue			code	-	
a b					
	+				
C	-				
d	+	· · ·			
e	 				
	 				
g Fees and contracts from government agencies		. <u>.</u>			
2 Membership dues and assessments			 .		
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate		<u>_</u>			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c	l i			_	
d				-	
e					
12 Subtotal Add columns (b), (d), and (e)					
13 Total. Add line 12, columns (b), (d), and (e)		-	-1 -	13	0
(See worksheet in line 13 instructions to verify calculat	ions)				
	<u>-</u>				
Part XVI-B Relationship of Activities to th	e Accomplish	iment of Exem	pt Purpos	es	

Part XVI-B 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 foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
N/A	
-	
	<u> </u>

Form 990-PF (2010) Wake Electric Care, Inc. 56-1938901 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

•	·-	<u> </u>	-						Vaa	-Na
describe	ed in section 501(d	c) of the Code (o	engage in any of th other than section 5	ne following wit 501(c)(3) organ	h any otl izations)	her organizati or in section	on 527,		Yes	No
relating	to political organi	ızatıons?					·			İ
a Franstei (1) Cas		ing foundation to	a noncharitable e	xempt organiza	ation of			1a (1)		
(2) Other assets										$-\frac{X}{X}$
b Other transactions										
(1) Sales of assets to a noncharitable exempt organization										X
(2) Purchases of assets from a noncharitable exempt organization										X
(3) Ren	ntal of facilities, eq	quipment, or othe	r assets					1 b (2) 1 b (3)		Х
• •	mbursement arran	•						1 b (4)		_X_
• •	ns or loan guaran							1 b (5)		X
			nip or fundraising s					1b (6)	-	<u>X</u>
c Snaring	or racilities, equip	oment, mailing lis	sts, other assets, o	or paid employ	ees			1c		<u>X</u>
d If the ar the good any tran	nswer to any of the ds, other assets, on asaction or sharing	e above is 'Yes,' or services given g arrangement, s	complete the follo by the reporting fo how in column (d)	owing schedule oundation If the the value of the	Column e founda	(b) should all ation received other assets	ways show the less than fair n	fair market val narket value in ceived	ue of	
(a) Line no	(b) Amount involved		of noncharitable exempt				nsfers, transactions			
N/A						"		,	J	
								_		
				_	<u> </u>		 			
			,				<u>_</u>			
										
				-			-			
							-			
								·		
			 .							
										
				- ,						
			_	<u> </u>						
describe	ed in section 501 (d	c) of the Code (o	ated with, or relate ther than section 5	ed to, one or m 501(c)(3)) or in	ore tax- section	exempt organ 527?	ızatıons	Yes	X	No
	complete the follo	<u>-</u>								
(a N/A) Name of organiz	ation	(b) Type o	of organization		(c) Description of	of relationship		
IV/ A			-		-		<u>-</u>			
						-		· · · · · ·		
		· · · · ·				171				
Under p	penalties of perjury, I de	clare that I have exam	ined this return, including	g accompanying sch	edules and	statements, and t	o the best of my kno	wledge and belief, i	t is true,	
Sign Here	, and complete Declarat	tion of preparer (other	than taxpayer or fiduciar	ry) is based on all in	formation of	of which preparer h	ias any knowledge	aal March	157)
	gnature of officer or trust	tee	X	/	Date	 " " -	Title	CHI MUY 1	<u> </u>	<u></u>
	Print/Type preparer's	name	Preparer's sig	nature		Date	Check if	T _{If} PTIN		
Paid	BRYAN A IS	GETT	- +}=#	+		NOV 0 7	self-employed	_" P01441	928	
Preparer	Firm's name	McNair, Mc	Lemore Mi	dlebrooks				8-1094351		
Use Only	Firm's address	Post Offic								
	i iiii s audiess	MACON, GA	31202-0001				Phone no (478) 746-	6277	
BAA								Form 99	0-PF (2010)

2010 ·	Federal Statements	Page 1
Client 6718428T	Wake Electric Care, Inc.	56-1938901
11/06/11		08 54PM
Statement 1 Form 990-PF, Part I, Line 23 Other Expenses		
Administrative Expenses	(a) (b) Net (c) Expenses Investment Adjus per Books Income Net Income \$ 72. \$ 0. \$	
Statement 2 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants		
Cash Grants and Allocations		
Class of Activity: Donee's Name: Donee's Address:	Various Various-See Attachment Various Various, NC	
Relationship of Donee: Organizational Status of Do Amount Given:	None onee: Various	\$ 160,480.
	Т	otal \$ 160,480.
Statement 3 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustee	Title and Co Average Hours Compen- but	ontri- Expense tion to Account/
Name and Address		P & DC Other
Hubert L. Gooch, Jr. 414 Wait Avenue Wake Forest, NC 27587	Director \$ 0.\$ 1.00	0. \$ 0.
Jan Hopkins 414 Wait Avenue Wake Forest, NC 27587	Director 0. 1.00	0. 0.
Cedric Jones 414 Wait Avenue Wake Forest, NC 27587	Director 0.	0. 0.
Robert Lanier 414 Wait Avenue Wake Forest, NC 27587	Director 0.	0. 0.
Michelle McGhee 414 Wait Avenue Wake Forest, NC 27587	Director 0.	0. 0.

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2010 -

Federal Statements

Page 2

Client 6718428T

Wake Electric Care, Inc.

56-1938901

11/06/11

08:54PM

Statement 3 (continued) Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Frances McIver 414 Wait Avenue Wake Forest, NC 27587	Director 1.00	\$ 0.	\$ 0.	\$ 0.
Winston Kerley 414 Wait Avenue Wake Forest, NC 27587	Director 1.00	0.	0.	0.
Frank Pearce 414 Wait Avenue Wake Forest, NC 27587	Director 1.00	0.	0.	0.
Carolyn Barnes 414 Wait Avenue Wake Forest, NC 27587	Director 1.00	0.	0.	0.
	Total	\$ 0.	\$ 0.	<u>\$</u> 0.

Statement 4 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

Name:

Fred Keller

Care Of:

Wake Electric Care, Inc.

Street Address:

P.O. Box 1229

City, State, Zip Code:

Wake Forest, NC 27588

Telephone:

Form and Content:

M/S Word or Adobe Format

An introductory description of the program and its impact

on the community.

The amount of funding requested and the amount of the

program budget.

The need which the program addresses.

Specific objectives of the program and how their

accomplishment will be measured.

Relationship of program to other services in the community which may be designed to meet the same or similar needs. Other sources of funding being approached.

Attach copy of IRS letter indicating tax-exempt status and/or Federal ID Number.(If Applicable).

Submission Deadlines:

Restrictions on Awards:

None Local non-profits organizations which provide necssary services in our communities are eligible to apply. North

Carolina counties considered local are: Durham, Franklin, Granville, Johnston, Nash, Wake and Vance. These organizations may apply for up to \$5,000 annually to implement programs or purchase needed equipment to

facilitate a program which will help in local communities.

Statement 2 Form 990-PF, Part 1, Line 25 Contributions, Gifts & Grants

Franklin High School	\$ 250 00
Wake Tech Community College	600 00
Bunn Middle School	650 00
Zebulon Middle School	1,500 00
Sanford Creek Elementary	816 00
Wake Tech Community College	1,433 00
Bunn Middle School	1,199 00
South Granville High School	495 00
Forrestville Rd Elementary	2,249 00
Johnston Comm College	450 00
Wake Tech Comm College	935 00
River Bend Elementary School	2,342 99
Franklinton High School	1,459 09
Stoval-Shaw Elementary	1,655 00
Voyager Acedemey	600 00
WG Pearson Middle School	1,899 00
Knightdale High School	700 00
Panther Creek High School	449 00
Bunn Rural Fire Department	2,500 00
Camp Kanata	1,000 00
Louisburg College	2,000 00
Franklin American Legion Post 52 Boys & Girls Club of Johnston County	1,500 00
Girl Scouts NC Costal Pines	1,000 00
Safe Space, Louisburg	1,000 00
Care and Share of Franklin County	1,000 00
Changing a Generation Ministry	1,000 00
Durham Rescue Mission	1,000 00
Granville County Historical	,
Harbor, Inc	1,000 00 1,000 00
Meals on Wheels Wake County	1,000 00
Wake Forest Police Department	1,500 00
Vance Granville Community College	2,000 00
Special Olympics	1,008 00
Assistance League	1,000 00
Hands of Hope	1,000 00
Boys & Girls Club	225 00
GC Hawley Middle School	1,425 00
Martin Middle School	1,500 00
Granville Central High School	995 00
Jones Dairy Elementary School	1,961 00
River Bend Elementary School	2,489 00
Green Hope High School	1,230 00
Stoval-Shaw Elementary	1,658 00
Franklin High School	1,425 00
Southern Nash High School	816 00
West Johnston High School	2,600 00
Riverwood Elementary School	1,250 00
Franklin High School	1,718 00
Aycock Elementary School	600 00
NC Department of Social Services	12,000 00
NC Department of Social Services	9,000 00
Northern Nash High School	1,500 00
Casa Esperanza Montesson	1,138 00
Wake Tech Comm College Bright Ideas	688 00
S .	800 00
UNC-Chapel Hill Bright Ideas	500 00
UNC-Wilmington	25 00 1,000 00
UNC-Chapel Hill	
Bright Ideas	1,000 00 1,025 00
Bright Ideas	25 00
N C State University	1,000 00
N C State University	1,250 00
N C State University	1,250 00
N C State University	1,250 00
N C State University	1,250 00
N C State University	2,000 00
N C State University	1,250 00
•	.,

Statement 2 Form 990-PF, Part 1, Line 25 Contributions, Gifts & Grants

Vance Granville Community College	899 50
Bright Ideas	750 00
N C State University	1,000 00
N C State University	1,250 00
N C State University	1,250 00
N C State University	1,250 00
Appalachian State University	1,250 00
UNC-Chapel Hill	1,250 00
Butner-Stem Elementary School	957 00
South Smithfield Elementary	702 01
J W Park Middle School	1,481 64
Connth Holder High School	1,144 84
William G Entoe High School	1,499 00
Selma Elementary	1,344 52
East Clayton Elementary	1,500 00
West Clayton Elementary	1,429 37
GC Hawley Middle School	1,500 00
Smithfield Middle School	1,466 62
Selma Elementary	1,183 20
Wilton Elementary	1,485 99
GC Hawley Middle School	1,425 87
Pleasant Union Elementary	399 00
Souther Nash Elementary	1,334 00
Franklin High School	1,456 48
Wendall Middle School	998 60
Timber Drive Elementary	1,500 00
Powhatan Elementary	1,377 00
Franklin High School	1,053 98
Smithfield Middle School	1,500 00
Youngsville Elementary	2,000 00
Neuse Charter School	1,487 29
Louisburg Elementary	600 00
Panther Creek High School	1,500 17
Pinkerston Street Elementary	1,489 60
CG Credal Elementary	1,334 96
Princeton High School	173 25
Wake Early College of Health & Science	1,481 37
Riverwood Middle School	1,500 00
Archer Lodge Middle School	1,499 68
Royal Elementary	600 00
Northern Vance High School	1,375 00
Clayton High School	1,438 00
Timber Drive Elementary	1,500 00
Bunn Middle School	1,399 93
UNC Wilmington	1,250 00
Riverwood Middle School	1,120 54
Royal Elementary	1,433 65
Bright Ideas	1,050 00
Vance Granville Community College	350 50
,3 -	

\$ 160,480 64

Form **8868** (Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

-	e filing for an Automatic 3-Month Extension, co				► X	
_	e filing for an Additional (Not Automatic) 3-Mor			·		
· ·	plete Part II unless you have already been gran		•			
corporation request an e	iling (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (nextension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which is ling of this form, visit www.irs.gov/efile and click	ot automatic] n Part I or P) 3-month extension of time. You can eli art II with the exception of Form 8870. It	ectronically file Form nformation Return for	8868 to	
Part I A	automatic 3-Month Extension of Time.	Only subn	nit original (no copies needed).			
A corporation	on required to file Form 990-T and requesting an	automatic 6	-month extension - check this box and	complete Part I only	▶ □	
All other coi	rporations (including 1120-C filers), partnerships returns	s, REMICS, a	nd trusts must use Form 7004 to reques	t an extension of tim	ne to file	
	Name of exempt organization			Employer identification r	number	
Type or						
print	Wake Electric Care, Inc.			56-1938901		
File by the due date for	Number, street, and room or suite number If a P O box, see	instructions				
filing your return See	414 East Wait Street					
instructions	City, town or post office, state, and ZIP code. For a foreign as	ddress, see instru	uctions			
	Wake Forest, NC 27588-1229					
Enter the Ro	eturn code for the return that this application is	for (file a se	parate application for each return)			
Application Is For		Return Code	Application Is For		Return Code	
Form 990		01	Form 990-T (corporation)		07	
Form 990-B	L	02	Form 1041-A		08	
Form 990-E	Z	03	Form 4720		09	
Form 990-P	F	04	Form 5227		10	
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11	
Form 990-T (trust other than above)		06	Form 8870		12	
Telephor	ne No ▶ 919-863-6402	FAX N	o -			
If the or	ganization does not have an office or place of b	usiness in th	e United States, check this box		▶	
	for a Group Return, enter the organization's for	-	<u> </u>	f this is for the whole	•	
check th	nis box 🏲 🔝 If it is for part of the group, che	ck this box	and attach a list with the names	and EINs of all mem	bers	
	nsion is for					
•	est an automatic 3-month (6 months for a corpo	•	•			
_	8/15 , 20 11 , to file the exempt o	rganization r	eturn for the organization named above			
	xtension is for the organization's return for					
	calendar year 20 10 or					
2 If the	tax year beginning, 20 tax year entered in line 1 is for less than 12 mo			nal return		
	nange in accounting period					
	application is for Form 990-BL, 990-PF, 990-T, fundable credits. See instructions	4720, or 606	9, enter the tentative tax, less any	3a \$	0.	
b If this payme	application is for Form 990-PF, 990-T, 4720, or ents made. Include any prior year overpayment	6069, enter allowed as a	any refundable credits and estimated ta credit	3ь\$	0.	
c Balan EFTPS	ce due. Subtract line 3b from line 3a Include yo S (Electronic Federal Tax Payment System) Se	our payment e instruction	with this form, if required, by using s	3c \$	0.	
Caution. If y	you are going to make an electronic fund withdr structions	awal with thi	s Form 8868, see Form 8453-EO and Fo	orm 8879-EO for		

Form 8868	(Rev 1-2011)				Page 2	
	are filing for an Additional (Not Automatic) 3-Mont	h Extension	complete only Part II and check th	nis hov		
Note. Only	complete Part II if you have already been granted	an automai	tic 3-month extension on a previous			
	ire filing for an Automatic 3-Month Extension, con					
Part II	Additional (Not Automatic) 3-Month Exte	ension of	Time. Only file the original (n	o copies needed).		
	Name of exempt organization Employer identification					
Type or						
print	Wake Electric Care, Inc.	56-1938901				
E 1. b. th-	Number, street, and room or suite number. If a P O box, see insti	ructions				
File by the extended due date for filing the	McNair, McLemore, Middlebrooks Post Office Box One					
return See instructions	City, town or post office, state, and ZIP code For a foreign address	s, see instruction	ons			
	MACON, GA 31202-0001					
Enter the F	Return code for the return that this application is fo	r (file a sep	arate application for each return)		04	
Application Is For	n 	Return Code	Application Is For		Return Code	
Form 990		01				
Form 990-E	3L	02	Form 1041-A		08	
Form 990-8	Z	03	Form 4720		09	
Form 990-F	<u> </u>	04	Form 5227		10	
Form 990-	Γ (section 401(a) or 408(a) trust)	05	Form 6069	11		
Form 990-	「(trust other than above)	06	Form 8870	12		
	not complete Part II if you were not already grante			ously filed Form 8868.		
	oks are in care of $ ightharpoonup$ Steve Hamlin, CFO V	lake EMC				
Teleph	one No ► 919-863-6402	FAX No ►				
If the o	rganization does not have an office or place of bus	siness in the	e United States, check this box		▶	
If this is	s for a Group Return, enter the organization's four				is for the	
whole grou	p, check this box 🕒 📗 If it is for part of the gr	oup, check th	nis box 🕒 🔛 and attach a list wit	h the names and EINs o	of all	
	he extension is for					
	uest an additional 3-month extension of time until					
5 Forc	alendar year $\ \underline{2010}$, or other tax year beginnin	g	, 20 _ , and ending	, 20	_	
6 If the	tax year entered in line 5 is for less than 12 mont	hs, check re	eason Initial return	Final return		
	change in accounting period					
	in detail why you need the extensionAddi_	tional_	<u>time needed in order to</u>	file a complet	ce_and	
acc	urate return.					
	application is for Form 990-BL, 990-PF, 990-T, 47 application is for Form 990-BL, 990-PF, 990-T, 47 applications	720, or 6069	, enter the tentative tax, less any	8a \$	0.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.					0.	
c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 8c\$						
	Sign	ature and	l Verification			
Under penaltie correct, and co	s of perjury, I declare that I have examined this form, including accomplete, and that I am authorized to prepare this form	ompanying sche	dules and statements, and to the best of my known	owledge and belief, it is true,		
Signature -	Title ►	CPA		Date ►8/10/	1/1	
BAA		FIFZ0502L	11/15/10	Form 8868 (Rev 1-2011)	