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# Form **990-PF**

# **Return of Private Foundation**

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

Department of the Treasury Internal Revenue Service Treated as a Private Foundation

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

2010

OMB No 1545-0052

For c	alen	dar year 2010, or tax year beginning		, and ending		
$\overline{}$		all that apply: Initial return	Initial return of a fo		Final return	
		Amended return	Address chang	је <u></u>	Name change	
Nan	ne of	foundation	T1170 1/0171 TD	DDII	A Employer identification	unmper
		VICTOR E. BELL, JR. &	JANE MCNAIR	REPP	56-2019191	
<b>N</b>		FAMILY FOUNDATION  and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
Num	Der al	P. O. BOX 17274	audi 655)	, isomosano	(919)787-7	585
Cuty	or to	own, state, and ZIP code	-		C If exemption application is p	
City	01 10	RALEIGH, NC 27619-72	74		D 1. Foreign organizations	
H C	heck	type of organization: X Section 501(c)(3) ex		<del></del>	Foreign organizations me check here and attach co	
	_		Other taxable private founda	tion	E If private foundation state	
I Fa		rket value of all assets at end of year   J   Accounts		Accrual	under section 507(b)(1)	
		Part II, col. (c), line 16)	her (specify)		F If the foundation is in a (	60-month termination
	\$	4,921,227. (Part I, colu	mn (d) must be on cash b	pasis)	under section 507(b)(1)	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a) )	expenses per books	income	income	(cash basis only)
		Contributions, gifts, grants, etc., received				
	2	Check X if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	6,258.	6,258.		STATEMENT 1
	4	Dividends and interest from securities	17,357.	17,357.		STATEMENT 2
	5a	Gross rents				
	_	Net rental income or (loss)	2 056	<u></u>		
e	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line fa 3,056.	3,056.			
Revenue	D 7	assets on line 6a 3,030 •  Capital gain net income (from Part IV, line 2)		3,056.		
Re		Net short-term capital gain		3,030.		
	9	Income modifications				·
	10a	Gross sales less returns and allowances				
	_	Less Cost of goods sold				
	i	Gross profutor (loss)				
	11	Other income RECEIVED				
	12	Total. Add lines 1 through 11	26,671.	26,671.	0.	
	13	Compensation of officers directors trustees etc. Other employee salaries and wages	0.	0.	0.	0.
	14	132				
ဟ	15	Pension plans, employee. Denetits				
nses		Legal fees CGDEN, UI				
ĝ	b	Accounting tees				
e Ü	1 C	Other professional fees Interest				
≨د	10	Taxes				
	10	Depreciation and depletion				
Ćį <u>Ē</u>	20	Occupancy				
N d	21	Travel, conferences, and meetings				
~	22	Printing and publications				
\$€	23	Other expenses STMT 3	100.	0.	0.	0.
	24	Total operating and administrative				
		expenses. Add lines 13 through 23	100.	0.	0.	0.
SCANNED at MAY 2 3 2011, SCANNED STORE	25	Contributions, gifts, grants paid	242,050.			242,050.
F	26	Total expenses and disbursements.		_	_	
Ş	<u> </u>	Add lines 24 and 25	242,150.	0.	0.	242,050.
U)	l	Subtract line 26 from line 12:	.015 450		1	
	l	Excess of revenue over expenses and disbursements	<215,479.	> 26,671.	<del> </del>	
		Net investment income (if negative, enter -0-)		40,0/1.	0.	
0235		Adjusted net income (if negative, enter -0-)	Aba instructions	L		Form <b>990-PF</b> (2010)

VICTOR E. BELL, JR. & JANE MCNAIR BELL

FAMILY FOUNDATION

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56-2019191

Beginning of year End of year Rart II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (c) Fair Market Value (a) Book Value (b) Book Value 1 Cash - non-interest-bearing 10,046. 4,693 4,693. 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use Prepaid expenses and deferred charges 2,609,502. 2,609,502. 10a Investments - U.S. and state government obligations STMT 4 2,814,650. 2,213,259. 2,307,032. 2,307,032. STMT 5 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ▶ 5,037,955. 4,921,227. 4,921,227. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here **▶** X and complete lines 24 through 26 and lines 30 and 31 **Assets or Fund Balances** 5,037,955. 4,921,227 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 5,037,955. 4,921,227 30 Total net assets or fund balances 5,037,955. 4,921,227 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 <u>5,037,955.</u> (must agree with end-of-year figure reported on prior year's return) <215,479.> 2 Enter amount from Part I, line 27a 98,751. Other increases not included in line 2 (itemize) 
UNREALIZED GAIN ON INVESTMENTS 4,921,227. Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) 4,921,227. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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F	Part IV Capital Gains a	and Losses for Tax on Ir	nvestment	Income						
		ibe the kind(s) of property sold (e.grehouse; or common stock, 200 sh			( <b>b</b> )	How ac - Purc - Don	cquired hase ation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
18	CAPITAL GAINS I	DIVIDENDS								
_t	)									
_	;				<u> </u>					
_				<del></del>						
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	, , , ,	st or other basis expense of sale					Gain or (loss) s (f) minus (	
- 2	3,056.	<del></del>				_	<del></del>		<del></del>	3,056.
_	;									
			ļ							
_€		g gain in column (h) and owned by	the foundation	on 12/31/60				\ Coupe (/	Cal (b) asia	
		(j) Adjusted basis	T	cess of col. (i)				. (k), but	Col. (h) gain not less thai	n -0-) <b>or</b>
_	(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any				Losses	(from col. (	h))
									.=	3,056.
		<del></del>	<del>                                     </del>							
-										
2	Capital gain net income or (net cap	oital loss) If gain, also enter			}	2				3,056.
3	Net short-term capital gain or (loss	• • •								
•	If gain, also enter in Part I, line 8, o		(0).		]				_	
	If (loss), enter -0- in Part I, line 8  Part V   Qualification Ur	nder Section 4040(a) for	Doduood	Toy on Not	J	3	oont Inc		N/A	
_	<del></del>						Tent in	Julie		
(F	or optional use by domestic private	ioundations subject to the section	4940(a) tax on	Het mvestment ii	ICOIII	e.)				
If :	section 4940(d)(2) applies, leave the	ıs part blank.								
W	as the foundation liable for the secti	on 4942 tax on the distributable an	nount of any ye	ear in the base per	rod?					Yes X No
	Yes, the foundation does not quali									
1	Enter the appropriate amount in e		uctions before	making any entri						(4)
	Base period years	(b) Adjusted qualifying dis	stributions	Net value of no	(c) Incha		use assets	İ	Distrib	(d) pution ratio ided by col. (c))
_	Calendar year (or tax year beginnin 2009	' <del>8</del> '''/ _ L	3,517.				9,195		(COL (D) GIV	.056405
_	2008		1,614.				7,685			.059883
_	2007		5,856.				4,828			.048819
	2006		5,900.				8,371			.017329
_	2005	4	0,150.		2	<u>,29</u>	2,400	).		.017514
2	Total of line 1, column (d)							2		.199950
	Average distribution ratio for the 5	-vear base period - divide the total	on line 2 by 5.	or by the number	of ve	ears		<u> </u>	_	
	the foundation has been in existen		ono 2 by 0,	o. 2,	0. ,	, u. u		3_		.039990
4	Enter the net value of noncharitable	e-use assets for 2010 from Part X,	line 5					4		5,177,493.
5	Multiply line 4 by line 3							5		207,048.
6	Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		267.
7	Add lines 5 and 6							7		207,315.
8	Enter qualifying distributions from	Part XII, line 4						8		242,050.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	ga 1	% tax	rate.			

VICTOR E. BELL, JR. & JANE MCNAIR BELL Form 990-PF (2010) 56-2019191 FAMILY FOUNDATION Page 4 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1% 267. 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-) 3 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-5 267. 6 Credits/Payments: 631. a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c 6d d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 631. 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ 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 9 364. 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 364 . Refunded ▶ 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax F

Pa	art VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c_	ļ	X
d	f Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$ O .			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ▶ \$ 0 .	1		}
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3_		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	b If "Yes," has it filed a tax return on Form 990-T for this year?	A 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>	X
	If "Yes," attach the statement required by General Instruction T.	İ		[
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV			
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions)		1	ļ
	NC			
b	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)			1
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	<u> </u>
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)? If "Yes," complete Part XIV	9		X
ın	Old any persons become substantial contributors during the tay year? If the substant to be the tay agree and addresses	10	1	l x

Form 990-PF (2010)

Carm	VICTOR E. BELL, JR. & JANE MCNAIR BELL	0101		Page 5
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<u> </u>				т
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	١.,		x
12	section 512(b)(13)? If "Yes," attach schedule (see instructions)  Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	11		<u> </u>
12	August 17, 2008?	12		х
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	_
10	Website address ► N/A			Ь
14	The books are in care of ► VICTOR E. BELL, III Telephone no. ► 919-7	87-7	585	
• •	Located at ▶ P.O. BOX 17274, RALEIGH, NC ZIP+4 ▶2			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
	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,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	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	<u> </u>		L
Pa	rt 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
1a	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them 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	1 .		}
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
U	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			<del> </del>
С	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?	10		х
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)):	İ		
а	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	ļ		
	before 2010? Yes X No			l
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 instructions.)  N/A	2b	-	├
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	<u> </u>			
3 <b>a</b>	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			
	· ·			ĺ
D	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)  N/A	3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1-70	-	<del>  ^</del>
•	had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		x
		orm <b>990</b>	-PF	

Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required (continued)	VICTOR E. BELL, JR. & JA Form 990-PF (2010) FAMILY FOUNDATION			<u>56-20191</u>	.91 Page 6
(1) Carry on propagation, or otherwise altering to influence legislation (section 495(s))?  (2) Influence the outcome of any sponch public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (5) Provide a grant to an individual for travel, study, or other similar purposes?  (6) Provide a grant to an individual for travel, study, or other similar purposes?  (7) Provide a grant to an individual for travel, study, or other similar purposes, or for the prevention of cruelty to children or animals?  (8) Provide a grant to an individual for travel, study, or other similar purposes, or for the prevention of cruelty to children or animals?  (8) If any similar is refer to 35,00 data yor the transactions fall to quality under the exceptions described in Regulations section 53,494.5 or in a current notice regarding diseaster assistance fore instructions?  (9) Cignalizations refrequency described assistance (see instructions)?  (9) Cignalizations refrequency described assistance (see instructions)?  (1) Provide a grant or an individual for the statement required by Regulations section 53,4945-5(d)  (8) Dut the foundation, during the year, secret any funds, directly or indirectly, or pay premiums on a personal benefit containe?  (9) If "res," of the foundation, during the year, secret any funds, directly or indirectly, or pay premiums on a personal benefit containe?  (a) Name and address (bit of the foundation aparty to a prohibited tax shelfer transaction?  (b) If "res," of the foundation aparty of a prohibited tax shelfer transaction?  (a) Name and address (bit of the foundation aparty to a prohibited tax shelfer transaction?  (b) Title, and average for the foundation aparty of the pay premium on the foundation aparty of the foundation aparty of the pay premium on the foundation aparty of the foundation aparty	Part VIJ-B   Statements Regarding Activities for Which F	orm 4720 May Be	Required (contin	nued)	<del></del>
(a) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any your registration drive?  (3) Provide a grant to an individual for travet, study, or other similar purposes?  (4) Provide a grant to an individual for travet, study, or other similar purposes?  (5) Provide for any purpose other than a charitable, etc., organization described in section 596(9)(1); (2), or (3), or section 494(9)(2)?  (5) Provide for any purpose other than a charitable, etc., organization described in section 596(9)(1); (2), or (3), or section 494(9)(2)?  (6) Provide for any purpose other than a charitable, etc., organization described in Regulations 596(9)(1); (3), of any grantion of 494(9)(2)?  (7) Provide for any purpose other than a charitable, etc., organization described in Regulations 596(9)(1); (3) of any grantion of the transactions of the purpose of the transaction of the purpose of the transaction of the purpose of the transaction of the purpose of the transaction of the purpose of the transaction of the purpose of the transaction of the purpose of the purpose of the transaction of the purpose of th	1	ı 4945(e))?	Y	es X No	
any voter registation dries?	•••		ectly,		
(4) Provide a grant In an organization other than a charitable, etc., organization described in section	• • • • • • • • • • • • • • • • • • • •			es X No	1 1
Solicy   Compensation of Order   Park   The Note	(3) Provide a grant to an individual for travel, study, or other similar purposes?	>	Y	es X No	
(a) Name and address of each employees (other than those included on line 1). If none, enter "NONE."  (b) Provide for any purpose other than religious, charable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  b) If any narwer is "Yes" to Su(1)-(1)-(3), and any of the transactions fail to quality under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  If "Yes is of question 54,4) does the foundation character in the grant?  If "Yes is of the form 85% of the form 85% of the grant?  If "Yes is of the form 85% of the form 8	(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
b If any answer is "Yes" to \$1.945 (ind any of the transactions fail to quality under the exceptions described in Regulations section \$3.4945 or in a current notice regarding desister assistance (see instructions)?  Organizations relying on a current notice regarding desister assistance check here  If the answer is "Yes" to question \$1.945 (in the fact that the statement required by Regulations section \$3.4945-5(d)  6a bid the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," attach the statement required by Regulations section \$3.4945-5(d)  6a bid the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes," to \$6, the Form \$870.  If It'ses," did the toundation receive any proceeds or have any net income attributable to the transaction?  If It'ses, did the toundation receive any proceeds or have any net income attributable to the transaction?  It is all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted to position  (a) Name and address  1. List all officers, directors, trustees, foundation managers and their compensation.  (b) Title, and average hours per week devoted to position  (c) Compensation (five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee pad more than \$50,000  1. Diffice and average hours per week devoted to position  (b) Title, and average hours per week devoted to position  (c) Compensation (c) Com	509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No	
b II any answer is "Yes" to Sa(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section S3.445 in a Current indice regarding disaster assistance (see instructions)?  Organizations relying on a current indice regarding disaster assistance check here  c II the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(d)  8a Did the foundation, during the year, receives any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" Cost, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter 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.  (a) Name and address  (b) Title, and average hours great week devoted for position  (b) Title, and average hours great week devoted for position  (c) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compensation (d) Compensation (e) Compensation (d) C	• • • • • • • • • • • • • • • • • • • •	or educational purposes, or		es X No	
section S3.495 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance tock here  c if the answer is Yes' to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grain?  N/A	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described	in Regulations		
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?  N/A				N/A	5b
## Y'es, "attach the statement required by Regulations section 53.4945-5(d)  ## A Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  ## Yes' to 6b, the Form 8870.  ## Ye	Organizations relying on a current notice regarding disaster assistance check hi	ere			
## Y'es, "attach the statement required by Regulations section 53.4945-5(d)  ## A Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  ## Yes' to 6b, the Form 8870.  ## Ye	c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	iined		
Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8870.  7a At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Founda				es 🔲 No	1
Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 6b, file Form 8870.  7a At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Foundation Managers, Highly  Information About Officers, Directors, Trustees, Founda	• • • • •				
a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, the Form 8870.  7a At any time during the tax year, was the foundation a parity to a prohibited tax shelter transaction?  b If "Yes," did the toundation receive any proceeds or have any net income attributable to the transaction?  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Tills, and average hours per week devoted for position of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Tills, and average hours per week devoted for position of five highest paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation of five highest paid employees (other than those included on line 1). If none, enter "NONE."  (d) Castellines to employee paid more than \$50,000  NONE  (e) Expense account, other employees (other than those included on line 1). If none, enter "NONE."  (d) Compensation of five highest paid employees (other than those included on line 1). If none, enter "NONE."  (e) Expense account, other employees and other short paid and average hours per week devoted to position devoted to position employee paid more than \$50,000  D (c) Tills, and average hours per week devoted to position enter "NONE."  (d) Castellines to depend on the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid to the short paid	, , ,	• *			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If 'Yes' to 6b, life Form 8870.  7 At a lany time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If I stand form the foundation receive any proceeds or have any net income attributable to the transaction?  I List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address  (b) Title, and average hours per week devoted to position  2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted devoted for position  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (e) Expense account, other employees and other employees paid over \$\$0,000		• ,		es X No	
### 178' to 66, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  **Pes** X** No ***	•	ersonal benefit contract?			6b X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b     Tyes; did the foundation receive any proceeds or have any net income attributable to the transaction?    Part VIII   Part VIII   Paid Employees, and Contractors   1 List all officers, directors, trustees, foundation managers and their compensation.  (a) Name and address   (b) Title, and average hours per week devoted to position   (in tot paid, enter -0-)      SEE STATEMENT 6   0 . 0 . 0 . 0 .					
Description   Information   About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors    List all officers, directors, trustees, foundation managers and their compensation.	•	helter transaction?	□ Y	es X No	
Part VIII					7b
(a) Name and address  (b) Title, and average hours per week devoked for position  (c) Compensation (If not paid, enter -0.)  (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoked to position  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (b) Title, and average hours per week devoked to position  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (b) Title, and average hours per week devoked to position  (c) Compensation of five highest-paid employees paid over \$50,000	Port VIII Information About Officers, Directors, Truste		anagers, Highl		
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation of live highest-paid employees (other than those included on line 1). If none, enter "NONE."  (d) cantributes to include the light enter faus and deferred compensation of live highest enter faus and deferred compensation.  (e) Expense and deferred compensation.  (c) Compensation of live highest paid enter faus and deferred compensation.  (e) Expense enter "NONE."  (f) Total number of other employees paid over \$50,000	1 List all officers, directors, trustees, foundation managers and their	compensation.			
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation  (d) Combensation  (e) Expense account, other allowances  (e) Expense account, other allowances  (f) Compensation  (h) Title, and average hours per week devoted to position  (c) Compensation  (e) Expense account, other allowances  (f) Compensation  (h) Title, and average hours per week devoted to position  (h) Title,	(a) Name and address	hours per week devoted	(If not paid,	and deterred	(e) Expense account, other allowances
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation  (d) Combensation  (e) Expense account, other allowances  (e) Expense account, other allowances  (f) Compensation  (h) Title, and average hours per week devoted to position  (c) Compensation  (e) Expense account, other allowances  (f) Compensation  (h) Title, and average hours per week devoted to position  (h) Title,					
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  (c) Compensation  (d) Combensation  (e) Expense account, other allowances  (e) Expense account, other allowances  (f) Compensation  (h) Title, and average hours per week devoted to position  (c) Compensation  (e) Expense account, other allowances  (f) Compensation  (h) Title, and average hours per week devoted to position  (h) Title,					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000	SEE STATEMENT 6		0.	0.	0.
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000			Ì		1
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000			ļ		<u> </u>
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000					•
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000			<u> </u>		<del> </del>
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000					
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000					1
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Controlupons to account, other allowances  (e) Expense account, other allowances  Total number of other employees paid over \$50,000		14.4		L	L——
NONE  NONE  Total number of other employees paid over \$50,000	2 Compensation of five nighest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Evanges
Total number of other employees paid over \$50,000	(a) Name and address of each employee paid more than \$50,000	` 'hour's per week '	(c) Compensation	employee benefit plans and deferred compensation	account, other
	NONE			1	
				<u></u> -	
					1
			<u> </u>		
				ļ <u>.</u>	
			]		]
				<u> </u>	<u></u>
	Total number of other employees paid over \$50,000			Form	<del></del> _

# VICTOR E. BELL, JR. & JANE MCNAIR BELL FAMILY FOUNDATION

Form 990-PF (2010) FAMILY FOUNDATION	56-20	19191 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the	Expenses
1N/A		
2		
3		
4		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on li	unes 1 and 2	Amount
1 N/A	iles I aliu Z.	Amount
2		
All other program-related investments. See instructions.		

0.

Form **990-PF** (2010)

Total. Add lines 1 through 3

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Rart X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 5,215,909. Average monthly fair market value of securities 1a 40,429. 1b Average of monthly cash balances c Fair market value of all other assets 1c 5,256,338. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 5,256,338. 3 Subtract line 2 from line 1d 3 78,845. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 5,177,493. 5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 258,875. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI and do not complete this part.) foreign organizations check here 258,875. Minimum investment return from Part X, line 6 267. Tax on investment income for 2010 from Part VI, line 5 Income tax for 2010. (This does not include the tax from Part VI.) 267. 2c Add lines 2a and 2b 258,608. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 4 Recoveries of amounts treated as qualifying distributions 258,608. 5 Add lines 3 and 4 5 6 0. Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 258 608. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 242,050. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b Program-related investments - total from Part IX-B b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: 3 3a Suitability test (prior IRS approval required) 3Ь Cash distribution test (attach the required schedule) 242,050. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 267. income. Enter 1% of Part I, line 27b Adjusted qualifying distributions Subtract line 5 from line 4 6

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

Form **990-PF** (2010)

4940(e) reduction of tax in those years.

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,				<del></del>
line 7	1			258,608.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only	}	}	241,874.	
b Total for prior years:		<del></del>		
		0.		
3 Excess distributions carryover, if any, to 2010:			<del></del>	······································
a From 2005				
b From 2006	j			
c From 2007				
d From 2008			j	
e From 2009				
f Total of lines 3a through e	0.			
		<del></del>		
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 242,050.			241 074	
a Applied to 2009, but not more than line 2a			241,874.	·
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		· <del>-</del>	456
d Applied to 2010 distributable amount				176.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	}			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract		· · · · ·		
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				258,432.
7 Amounts treated as distributions out of	<del></del>			200 / 1021
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.	Ì		
9 Excess distributions carryover to 2011.				
	0.			
Subtract lines 7 and 8 from line 6a	U.			<del></del>
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

VICTOR E. BELL, JR. & JANE MCNAIR BELL 56-2019191 Page 10 Form 990-PF (2010) FAMILY FOUNDATION Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a 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 4942(1)(3) or 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (c) 2008 (a) 2010 (b) 2009 (d) 2007(e) Total income from Part I or the minimum investment return from Part X for each year listed **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 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 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)

Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)

### Information Regarding Foundation Managers:

(3) Largest amount of support from an exempt organization (4) Gross investment income

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).)

### SEE STATEMENT

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.

#### NONE

listed

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 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:

FAMILY FOUNDATION

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution **Amount** Name and address (home or business) a Paid during the year SEE STATEMENT 8 242,050. → 3a Total b Approved for future payment NONE Total

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FAMILY FOUNDATION

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Rart XVI-A **Analysis of Income-Producing Activities** 

Form 990-PF (2010)

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		y section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	_ []				
b	_				<del></del>
c	_				
d	_		$\bot$		
e	_		<u> </u>		
f	_				
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments	ļ				· · · · · · · · · · · · · · · · · · ·
3 Interest on savings and temporary cash	}				
investments			14	6,258. 17,357.	
4 Dividends and interest from securities			14	17,357.	<u></u> ,
5 Net rental income or (loss) from real estate:					<u> </u>
a Debt-financed property			<u> </u>		
b Not debt-financed property					
6 Net rental income or (loss) from personal			1	}	
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	- } - }		1 1		
than inventory			14	3,056.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	_ [	·			
b			1		
c	_	<u> </u>			
d			<del>                                     </del>		<u></u>
e	_				
2 Subtotal. Add columns (b), (d), and (e)		0	<u> </u>	26,671.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	26,671
See worksheet in line 13 instructions to verify calculations.  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in	s to the Acco			<del></del>	olishment of
▼ the foundation's exempt purposes (other th	an by providing fu	nds for such purposes).			
					<del></del>
023621					Form <b>990-PF</b> (2010

	PF (2010) <b>FAMIL</b>	Y FOUNDATION			113131	Pa	ge 13
Part X	<u>[VII]</u> Information Re Exempt Organ		and Transactions a	nd Relationships With Nonc	haritable	9	
1 Did	the organization directly or indi	irectly engage in any of the followin	g with any other organizatio	n described in section 501(c) of		Yes	No
	•	e)(3) organizations) or in section 52					
		ation to a noncharitable exempt or					
	Cash	·	-		1a(1)		Х
	Other assets				1a(2)		Х
	er transactions:						
	Sales of assets to a noncharita	able exempt organization			1b(1)	]	Х
(2)	Purchases of assets from a no	encharitable exempt organization			1b(2)		X
(3)	Rental of facilities, equipment,	or other assets			1b(3)		X
(4)	Reimbursement arrangements	}			1b(4)		Х
(5)	Loans or loan guarantees				1b(5)		X
(6)	Performance of services or me	embership or fundraising solicitatio	ons		15(6)		Х
c Sha	ring of facilities, equipment, ma	ailing lists, other assets, or paid em	ployees		1c		X
d If th	e answer to any of the above is	"Yes," complete the following sche	dule. Column (b) should alv	vays show the fair market value of the goo	ds, other ass	ets,	
or s	ervices given by the reporting t	foundation. If the foundation receive	ed less than fair market valu	e in any transaction or sharing arrangeme	nt, show in		
colu	mn (d) the value of the goods,	other assets, or services received.					
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions,	and sharing an	rangeme	nts
		N/A					
						_	
							_
	<u></u>						
		<del></del>	<del></del>	-			
			<del></del>				
-	<u> </u>	<b> </b>					
	<del></del>				·		-
		Alternative description and a second a second and cond and cond and a second and a second and a		- topo described			
	•	ctly affiliated with, or related to, one	· -	zations described	Yes	T	] No
	es," complete the following sch	er than section 501(c)(3)) or in section	11011 327		163	د ما	J 110
1 11 1	(a) Name of or		(b) Type of organization	(c) Description of relati	onship		
	N/A	gumzaton	(b) type of organization	(0)			
	N/A						
					• • •		
				d statements, and to the best of my knowledge an	d belief, it is tr	ue, corre	ect,
Sign	and complete Declaration of prep	arer (other than taxpayer or fiduciary) is b	ased on all information of which p	oreparer has any knowledge			
Here	IN VICTORE	Soll THE CHAIRMA	-41-14-	-11 L CHAIRMAN			
	Signature of officer or tr		Date	Title			
	Print/Type preparer's n				ΓIN		
Paid	J. GRAHAM	1 1011	Climate	3/17/1, self- employed			
Prepa							

Form **990-PF** (2010)

919-782-9265

Firm's EIN

Phone no.

Use Only

Firm's name ► KOONCE, WOOTEN & HAYWOOD, L. L. P.

RALEIGH, NC 27619-7806

Firm's address ▶ P. O. BOX 17806

FORM 990-PF INTEREST ON SAVI	INGS A	ND TEM	PORARY CA	SH II	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
U.S. TREASURY BILLS						6,2	58.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A			6,2	58.
FORM 990-PF DIVIDENT	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	)
WELLS FARGO SECURITIES	-		20,413.		3,056.	17,3	57.
TOTAL TO FM 990-PF, PART I, I	LN 4		20,413.		3,056.	17,3	57.
FORM 990-PF	0	THER E	XPENSES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
BANK FEES		100.		0.		0.	0.
TO FORM 990-PF, PG 1, LN 23		100.		0.		0.	0.
FORM 990-PF U.S. AND	STATE/	CITY G	OVERNMENT	OBL	IGATIONS	STATEMENT	4
DESCRIPTION		U.S GOV'		ВО	OK VALUE	FAIR MARKE VALUE	т
U.S. TREASURY BILLS		x		-	2,609,502.	2,609,5	02.
TOTAL U.S. GOVERNMENT OBLIGA	TIONS				2,609,502.	2,609,5	02.
TOTAL STATE AND MUNICIPAL GO	VERNME	NT OBL	IGATIONS				
TOTAL TO FORM 990-PF, PART I	I, LIN	E 10A			2,609,502.	2,609,5	02.

FORM 990-PF	CORPORATE STOCK		STAT	EMENT	5
DESCRIPTION		BOOK VALUI		MARKE' ALUE	T
6,510 SHS 1ST CITIZENS BANCSH	ARES CL A	1,230,64	18. 1	,230,6	48.
6,939 SHS HIGHWOODS PROPERTIE		221,00	02.	221,0	02.
3,764 SHS WELLS FARGO	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	116,63		116,6	
4,925 SHS 1ST CITIZENS BANCSH	ARES CL B	738,75		738,7	50.
TOTAL TO FORM 990-PF, PART II	, LINE 10B	2,307,03	32. 2	,307,0	32.
	LIST OF OFFICERS, D		STAT	EMENT	6
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB		
VICTOR E. BELL, III P. O. BOX 17274 RALEIGH, NC 27619	CHAIRMAN 0.00	0.	0.		0.
FAIRLEY BELL COOK P. O. BOX 17274 RALEIGH, NC 27619	PRESIDENT/TREA	SURER 0.	0.		0.
JOHN MCNAIR BELL P. O. BOX 17274 RALEIGH, NC 27619	VICE PRESIDENT 0.00	/SECRETARY 0.	0.		0.
LAURA SCHAEFER BELL P. O. BOX 17274 RALEIGH, NC 27619	ASSISTANT SECR	ETARY	0.		0.
MARY GRADY KOONCE BELL P. O. BOX 17274 RALEIGH, NC 27619	ASSISTANT TREA	SURER 0.	0.		0.
DANIEL L. COOK P. O. BOX 17274 RALEIGH, NC 27619	ASSISTANT VICE	PRESIDENT 0.	0.		0.
TOTALS INCLUDED ON 990-PF, PA	GE 6, PART VIII	0.	0.		0.

FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT 7
NAME OF MANAGER		
VICTOR E. BELL, III FAIRLEY BELL COOK JOHN MCNAIR BELL LAURA SCHAEFER BELL MARY GRADY KOONCE BELL DANIEL L. COOK		
FORM 990-PF	GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	STATEMENT 8
RECIPIENT NAME AND ADDRE	RECIPIENT RELATIONSHIP RECIP SS AND PURPOSE OF GRANT STA	
ALDERT ROOT ELEMENTARY EDUCATIONAL FOUNDATION		150.
ALLIANCE MEDICAL MINISTR	Y	1,050.
AMERICAN CANCER SOCIETY		250.
AMERICAN FRIENDS OF STOW	E	100.
AMERICAN HEART ASSOCIATI	ON	50.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
AMERICAN RED CROSS	1,500.
AMERICAN SPCA	50.
ARTS NC STATE	250.
ARTSPACE	250.
ASU FOUNDATION	10,900.
AVERSBORO BAPTIST CHURCH	100.
BETA CHAPTER OF PDT	100.
BOYS & GIRLS CLUBS	1,400.
BRITISH SCHOOLS & UNIVERSITIES	200.
CAMPBELL UNIVERSITY	50.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
CAPITAL COMMUNITY FOUNDATION, INC.	100.
CARILION CLINIC HOSPICE	50.
CARING HOUSE, INC.	250.
CAROLINA BALLET	250.
CENTER FOR DEVELOPMENTAL SVCS	100.
CHRIST BAPTIST CHURCH	100.
CHRIST CHURCH	50.
CHURCH OF THE APOSTLES	100.
CLARENCE E LIGHTNER YMCA ACHIEVERS	50.
CLASSICAL AMERICAN HOMES PRES TR	250.

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VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
COLONIAL WILLIAMSBURG FOUNDATION	100.
COMMON HOPE	115.
COMMUNITY OF HOPE MINISTRIES	50.
CONSERVATION TRUST FOR NC	250.
CONTEMPORARY ART FOUNDATION	1,000.
CONVERSE COLLEGE	100.
CYSTIC FIBROSIS FOUNDATION	100.
DANIELS MIDDLE SCHOOL	1,250.
DRESS FOR SUCCESS	250.
DUKE RALEIGH HOSPITAL	350.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
EDUÇATIONAL FOUNDATION	250.
FIRST BAPTIST CHURCH	300.
FIRST PRESBYTERIAN CHURCH	50.
FOCUS/RALEIGH	100.
FOOD BANK OF CENTRAL & EASTERN NC	500.
FOOD BANK OF NC	50.
FOUNDATION FOR GOOD BUSINESS	50.
FREE TO BREATHE	50.
FRIENDS OF FORT MACON	50.
FRIENDS OF GUNSTON HALL	100.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
FRIENDS OF THE ARCHIVES	50.
FRIENDS OF THE LIBRARY UNC-CH	1,000.
FRIENDS OF THE NC MARITIME MUSEUM	250.
FRIENDS OF THE NC MUSEUM OF NAT SCI	1,000.
FRIENDS OF THE NCSU LIBRARY	1,000.
FRIENDS OF THE WAKE CO PUBLIC LIBRARY	1,000.
GARNER EDUCATIONAL FOUND	1,000.
GARNER FIRE/RESCUE	250.
GARNER ROTARY CLUB	100.
GREENVILLE PRES THEOLOGICAL SEMINARY	50.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
GREENWAY BAPTIST CHURCH	500.
GRIFTON UNITED METHODIST CHURCH	50.
HABITAT FOR HUMANITY	6,350.
HAYWOOD HALL INC	300.
HEIFER INTERNATIONAL	250.
HELPING PARTNERS, INC	100.
HOMES OF HOPE INC.	500.
HOPE FOR DEPRESSION RESEARCH FOUND.	100.
HOSPICE OF WAKE COUNTY	1,200.
INTER-FAITH FOOD SHUTTLE	1,200.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
INTERACT	350.
JC RAULSTON ARBORETUM	2,050.
JDRF	400.
JOEL LANE HOUSE, INC.	600.
JUNIOR LEAGUE OF RALEIGH	350.
JUVENILE DIABETES RESEARCH FOUND.	8,000.
KAPPA ALPHA ORDER EDUC. FOUND.	500.
LEESVILLE PRIDE ATHLETIC CLUB	475.
LEESVILLE ROAD HS	13,500.
LEESVILLE ROAD HS PTSA	300.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
LIFE EXPERIENCES, INC.	150.
LOAVES & FISHES	100.
MARBLES KIDS MUSEUM	100.
MEDICAL FOUNDATION OF NC	500.
MERRIE WOODE FOUNDATION	1,000.
MIRACLE LEAGUE OF THE TRIANGLE	250.
MONTREAT COLLEGE	500.
MONTREAT CONFERENCE CENTER	1,250.
MOREHEAD-CAIN SCHOLARSHIP FUND	3,250.
MOUNTAIN RETREAT ASSOC.	2,500.

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VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
MS SOCIETY	200.
NAMI WAKE COUNTY	250.
NATIONAL STUDENTS OF AMF	50.
NC 4-H DEVELOPMENT FUND	1,150.
NC AG FOUNDATION	550.
NC COMMUNITY FOUNDATION	1,500.
NC EXTENSION & COMM ASSOC FOUND	100.
NC LACROSSE ACADEMY	1,500.
NC MUSEUM OF ART FOUNDATION	1,000.
NC MUSEUM OF HISTORY ASSOC.	1,000.

56-2019191
250.
11,700.
1,000.
50.
100.
100.
100.
1,100.
100.
100.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
RALEIGH HALL OF FAME	500.
RALEIGH LITTLE THEATRE	550.
RALEIGH RESCUE MISSION	250.
RAVENSCROFT SCHOOL	78,100.
REX HOSPITAL FOUND	500.
ROANOKE ISLAND HISTORICAL ASSOC.	500.
SAFECHILD	800.
SAINT ANDREWS COLLEGE	50.
SAINT ANDREWS PRESBYTERIAN CHURCH	7,350.
SALVATION ARMY OF WAKE COUNTY	50.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	. ', . 56-2019191
SANDERSON ACADEMIC BOOSTER CLUB	2,600.
SANDERSON ATHLETIC CLUB	1,760.
	105
SANDERSON PTSA	125.
SHENANDOAH UNIVERSITY	50.
SPCA OF WAKE COUNTY	500.
SPECIAL OLYMPICS	350.
ST IGNATIUS CHURCH	50.
ST MARY'S SCHOOL	2,475.
STAFF OF HOPE	100.
CMAME CARIMOI COCIEMY	100.
STATE CAPITOL SOCIETY	100.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
STEP UP MINISTRY	600.
THE FLETCHER ACADEMY	50.
THE FOUNDATION OF HOPE	250.
THE LEUKEMIA & LYMPHOMA SOCIETY	100.
THE SALVATION ARMY	100.
TRIANGLE FAMILY SERVICES	50.
TRINITY UNITED METHODIST CHURCH	50.
TRYON PALACE COUNCIL OF FRIENDS	250.
UMSTEAD COALITION	500.
UNC CHAPEL HILL	8,500.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
UNC LINEBERGER COMP CANCER CTR	6,100.
UNC TV	475.
UNITED ARTS COUNCIL	300.
UNITED WAY OF THE GREATER	1,500.
TRIANGLE	
URBAN LIVABILITY FELLOWS PROGRAM	50.
URBAN MINISTRIES	50.
VISUAL ART EXCHANGE	1,000.
	2,000
WAKE COUNTY BASKETBALL ASSOC.	200.
WARE COUNTY DASKETDADD ASSOC.	2001
WAKE COUNTY COMMUNITY FOUNDAITON	150.
WAND COURT COMMONITY FOUNDATION	150.
WAVE EDUCATION DARRIEDCUID	1 000
WAKE EDUCATION PARTNERSHIP	1,000.

VICTOR E. BELL, JR. & JANE MCNAIR BELL F	56-2019191
WAKE MED FOUND.	1,500.
WE SHARE FOUNDATION	100.
WHITE MEMORIAL PRESBYTERIAN CHURCH	14,875.
WILLIAMS SUNDROME ASSOCIATION	1,000.
YATES MILL ASSOC	6,000.
YMCA OF THE TRIANGLE	3,500.
TOTAL TO FORM 990-PF, PART XV, LINE 3A	242,050.