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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

| Interr | al Revenue Service Note. The foundation may t | be able to use a copy of this | return to satisfy state repo | irting requirements. | |
|------------------------------|--|---|------------------------------|---|---|
| For | alendar year 2010, or tax year beginning | | , and ending | | |
| G | heck all that apply Initial return Amended return | Initial return of a fo | ormer public charity de | Final return | 1 |
| Nar | ne of foundation | — | <u> </u> | A Employer identification | n number |
| 1 | THE EDWARD M. ARMFIEL | D SR. FOUNDA | TION, | | |
| | INC. | | · · | 56-2156876 |) |
| Nun | ber and street (or P O box number if mail is not delivered to street | address) | Room/suite | B Telephone number | |
| | P. O. BOX 9436 | | | (336) 273- | -7519 |
| City | or town, state, and ZIP code | | | C If exemption application is p | pending, check here |
| | GREENSBORO, NC 27429 | | | D 1. Foreign organization | |
| H C | heck type of organization: X Section 501(c)(3) ex | empt private foundation | | Foreign organizations me check here and attach co | eeting the 85% test, pmputation |
| | Section 4947(a)(1) nonexempt charitable trust | Other taxable private founda | ation | E If private foundation sta | itus was terminated |
| 1 Fa | ir market value of all assets at end of year J Accountii | ng method: 🔲 Cash | Accrual | under section 507(b)(1 | |
| (fr | om Part II, col. (c), line 16) | her (specify) <u>CASH </u> | REV/EXP | F If the foundation is in a | 60-month termination |
| | | mn (d) must be on cash i | basis) | under section 507(b)(1 |)(B), check here 🕒 🔲 |
| Pa | Tti Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 Contributions, gifts, grants, etc., received | | | N/A | |
| | 2 Check X of the foundation is not required to attach Sch B | | | | |
| | 3 Interest on savings and temporary cash investments | 5,752. | 5,752. | | STATEMENT 1 |
| | Dividends and interest from securities | 1,192,156. | 1,189,402. | | STATEMENT 2 |
| | 5a Gross rents | | | | |
| | Net rental income or (loss) | | | | |
| 4. | 6a Net gain or (loss) from sale of assets not on line 10 | 2,239,678. | | | |
| ğ | 6 Gross sales price for all 2, 239, 678. | | | | |
| Revenue | 7 Capital gain net income (from Part IV, line 2) | | 2,239,678. | | |
| Œ | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | | | | |
| | Gross sales less returns and allowances | | | | |
| | b Less Cost of goods sold | | <u> </u> | ļ | <u></u> |
| | c Gross profit or (loss) | | | | |
| | 11 Other income | 2 427 526 | 2 424 222 | | |
| | 12 Total. Add lines 1 through 11 | 3,437,586. | 3,434,832. | | 111 100 |
| | 13 Compensation of officers, directors, trustees, etc | 143,000. | 28,600. | | 114,400. |
| | 14 Other employee salaries and wages | 69,287. | 7,857. | | 61,430. |
| S | 15 Pension plans, employee benefits | 17,087. | 3,417. 5,991. | | 13,670. |
| nse | 16a Legal fees STMT 3 | 29,957. | | | 23,966. |
| Expenses | b Accounting fees STMT 4 | 41,720. | 8,344. | | 33,376. |
| E E | c Other professional fees 17 Interest | | | | |
| aţ. | | 70,552. | 12,118. | <u> </u> | 0. |
| str | | 406. | 406. | | |
| ii. | 20 Cecupancy | 20,716. | 4,143. | | 16,573. |
| Å | 20 Secupancy 21 Travel, conferences, and meetings 22 Printing and publications | 20,720. | | <u> </u> | 10,5,5 |
| 5 | 22 Printing and publications | | | | |
| a D | 23 Other expenses 1 5 STMT 6 | 1,297,179. | 1,284,977 | | 12,144. |
| ati | 24—Total-operating-and-administrative | | | | , |
| Operating and Administrative | expenses. Add lines 13 through 23 | 1,689,904. | 1,355,853. | , | 275,559. |
| 0 | 25 Contributions, gifts, grants paid | 2,112,779. | | | 2,112,779. |
| | 26 Total expenses and disbursements. | | | | |
| | Add lines 24 and 25 | 3,802,683. | 1,355,853 | | 2,388,338. |
| | 27 Subtract line 26 from line 12: | | - | | |
| | a Excess of revenue over expenses and disbursements | <365,097. | | | 1 |
| | b Net investment income (if negative, enter -0-) | | 2,078,979. | | ` |
| | c Adjusted net income (if penative enter -0-) | | l | N/A | · |

LHA For Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2010)

1

THE EDWARD M. ARMFIELD SR. FOUNDATION, Form 990-PF (2010) 56-2156876 INC. Page 2 Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 3,010,196. 5,032,088. 5,032,088. 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 4,993,261. 5,202,322. 5,202,322. Inventories for sale or use 208,042. 208,042. 217,107. 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 32,538,494. 34,606,331. 32,538,494. STMT 10 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 16,974,198. 19,581,649. 19,581,649. 13 Investments - other STMT 11 6,883. 14 Land, buildings, and equipment: basis > 6,380. 909. 503. 503. Less accumulated depreciation STMT 12> 270,855. $\overline{2}70,855.$ STATEMENT 13) 244,828. 15 Other assets (describe ► 62,833,953. 60,046,830. 62,833,953. 16 Total assets (to be completed by all filers) 43,532. 48,141. 17 Accounts payable and accrued expenses 1,855,062. 2,875,526. 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable <2,153.> <2,153. 22 Other liabilities (describe > STATEMENT 14) 1,896,441. 2.921.514. 23 Total liabilities (add lines 17 through 22) $\triangleright x$ Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Fund Balances 59,912,439. 24 Unrestricted 58,150,389. 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here

31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 | | | | |
|---|--|--------------|-------------|---|--------------------|
| | (must agree with end-of-year figure reported on prior year's return) | | | 1 | 58,150,389. |
| 2 | Enter amount from Part I, line 27a | | | 2 | <365,097.> |
| 3 | Other increases not included in line 2 (itemize) | SEE | STATEMENT 8 | 3 | 3,220,383. |
| 4 | Add lines 1, 2, and 3 | | | 4 | 61,005,675. |
| 5 | Decreases not included in line 2 (itemize) | SEE | STATEMENT 9 | 5 | 1,093,236. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column | (b), line 30 | | 6 | 59,912,439. |
| | | | | | Form 900-PE (2010) |

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Net Assets or

58,150,389.

60,046,830.

and complete lines 27 through 31.

30 Total net assets or fund balances

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

59,912,439.

62,833,953.

THE EDWARD M. ARMFIELD SR. FOUNDATION, Form 990-PF (2010) 56-2156876 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 \(\bigcup \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 41,580. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 580. 3 0. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 41,580. 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: 34,408 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) 6¢ d Backup withholding erroneously withheld 6d 7,273 7 Total credits and payments. Add lines 6a through 6d PAID ON 12-23-1141,681. 101. 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 0. 9 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Refunded > 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Part VII-A | Statements Regarding Activities No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yesl Х 1a any political campaign? X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b 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. 1c Х c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. (2) On foundation managers. > \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities. 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 Х 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A 4b b If "Yes," has it filed a tax return on Form 990-T for this year? X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law Х remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) NC

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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)

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

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

of each state as required by General Instruction G? If "No," attach explanation

8b

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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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

N/A

3b

4a

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THE EDWARD M. ARMFIELD SR. FOUNDATION, Form 990-PF (2010) 56-2156876 INC. Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained N/A __ Yes ___ No expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b N/Ab If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (e) Expense account, other (b) Title, and average hours per week devoted to position (If not paid, enter -0-) (a) Name and address allowances 125. SEE STATEMENT 16 143,000. 1,184 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deterred compensation (b) Title, and average (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation hours per week devoted to position allowances SUE SILVERS -324 W WENDOVER ST., OFFICE MGR 2,169 0. GREENSBORO, NC 27408 40.00 69,287

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

Total. Add lines 1 through 3

All other program-related investments. See instructions.

| | 1NC. | | | 0-21300/0 Fage 0 |
|----|---|-------------------------------------|-----------|-----------------------|
| P | art X Minimum Investment Return (All domestic foundations must c | omplete this part. Foreign fou | ndation | is, see instructions) |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | purposes: | \prod | |
| а | Average monthly fair market value of securities | | 1a | 16,885,073. |
| b | Average of monthly cash balances | | 1b | 1,450,715. |
| C | Fair market value of all other assets | | 1c | 41,505,767. |
| d | Total (add lines 1a, b, and c) | | 1d | 59,841,555. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | | |
| | 1c (attach detailed explanation) 1e | 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | 2 | 0. |
| 3 | Subtract line 2 from line 1d | | 3 | 59,841,555. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see in | structions) | 4 | 897,623 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part | V, line 4 | 5 | 58,943,932 |
| 6 | Minimum investment return Enter 5% of line 5 | | 6_ | 2,947,197 |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) foreign organizations check here and do not complete this part.) | 5) private operating foundations ai | nd certai | n |
| 1 | Minimum investment return from Part X, line 6 | | 1 | 2,947,197. |
| 2a | Tax on investment income for 2010 from Part VI, line 5 | 41,580. | | |
| b | Income tax for 2010. (This does not include the tax from Part VI.) | | 1 | |
| С | Add lines 2a and 2b | | 2c | 41,580. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | | 3 | 2,905,617. |
| 4 | Recoveries of amounts treated as qualifying distributions | | 4 | 0. |
| 5 | Add lines 3 and 4 | | 5 | 2,905,617. |
| 6 | Deduction from distributable amount (see instructions) | | 6 | 0. |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, In | ne 1 | 7 | 2,905,617 |
| P | art XII Qualifying Distributions (see instructions) | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | | 1a | 2,388,338. |
| b | Program-related investments - total from Part IX-B | | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc | ., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | | |
| а | Suitability test (prior IRS approval required) | | 3a | |
| b | Cash distribution test (attach the required schedule) | | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part | t XIII, line 4 | 4 | 2,388,338. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | t | | |
| | income. Enter 1% of Part I, line 27b | | 5 | 0, |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | | 6 | 2,388,338 |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when co | alculating whether the foundation | qualifies | for the section |

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) | (b) | (c) | (d) |
|--|-------------|---|---|-----------------|
| | Corpus | Years prior to 2009 | 2009 | 2010 |
| 1 Distributable amount for 2010 from Part XI, | | | | |
| line 7 | | | | 2,905,617. |
| 2 Undistributed income, if any, as of the end of 2010 | | | 2 670 002 | |
| a Enter amount for 2009 only | | | 2,678,893. | |
| h Total for prior years: | | 1,666,676. | | |
| 2008, 2007, Excess distributions carryover, if any, to 2010: | | 1,000,070. | | |
| a From 2005 | | | | |
| b From 2006 | | | | |
| c From 2007 | | | | |
| d From 2008 | | | | |
| e From 2009 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2010 from | | | | |
| Part XII, line 4: ►\$ 2,388,338. | | | | |
| a Applied to 2009, but not more than line 2a | | | 2,388,338. | |
| 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. | | | |
| d Applied to 2010 distributable amount | | | | 0. |
| e Remaining amount distributed out of corpus | 0. | | | |
| 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 | | 1,666,676. | | |
| 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 | | 1 666 676 | | |
| amount - see instructions | | 1,666,676. | | |
| e Undistributed income for 2009. Subtract line | | | 290,555. | |
| 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2010. Subtract | | | 250,555. | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2011 | | | | 2,905,617. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | - | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | <u>, , , , , , , , , , , , , , , , , , , </u> | |
| 8 Excess distributions carryover from 2005 | | | | - |
| not applied on line 5 or line 7 | 0. | , | 1 | |
| 9 Excess distributions carryover to 2011. | | • | - | - |
| Subtract lines 7 and 8 from line 6a | 0. | | | <u> </u> |
| 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 | | <u> </u> | <u> </u> | r 000 DE (0040) |

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b The form in which applications should be submitted and information and materials they should include:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

c Any submission deadlines:

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| Part XV Supplementary Information | (continued) | | | |
|--|--|-------------------------|----------------------------------|--------------------------|
| 3 Grants and Contributions Paid During the Ye | ear or Approved for Future | Payment | | |
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
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| SEE STATEMENT 17 | <u> </u> | <u> </u> | <u> </u> | |
| <u>Total</u> | | 1 | <u>▶ 3a</u> | 2,112,779 |
| b Approved for future payment | | | | |
| | | | | |
| | 1 | | | |
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| | | 1 | | |
| Total SEE STATEMENT 18 | <u> </u> | <u> </u> | - or | 3,025,000 |
| 023611 12-07-10 | <u></u> | | <u> </u> | orm 990-PF (2010) |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | Unrelated 1 | business income | | by section 512, 513, or 514 | (e) |
|--|------------------|-----------------|------------------------|-----------------------------|-----------------------------------|
| 1 Program service revenue: | Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| • | code | | | | |
| ab | - | | - - | | |
| | | | | - | |
| | | | - - - | | |
| | ſ | | + | | |
| e | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | 1 | | 14 | 5,752. | |
| 4 Dividends and interest from securities | | | 14 | 5,752. 1,192,156. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| 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 | | | 18 | 2,239,678. | |
| 9 Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| 8 | _ | | | | |
| b | _ | | | | |
| C | | | \rightarrow | | |
| d | | | | | |
| e | | | . - | 2 427 506 | |
| 12 Subtotal. Add columns (b), (d), and (e) | L | | 0. | 3,437,586. | <u>0.</u> 3,437,586. |
| 13 Total Add line 12, columns (b), (d), and (e) | ` | | | 13 | 3,43/,300. |
| (See worksheet in line 13 instructions to verify calculations. | .1 | | | | |

| Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purpos | 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). |
|---------------|---|
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023621 12-07-10 Form **990-PF** (2010)

| Form 990-PF (| | | | 56-215 | 56876 Page 13 |
|-------------------|----------------------------------|--|--|---|-----------------------------|
| Part XVII | | | and Transactions a | nd Relationships With Nonch | aritable |
| | Exempt Organ | nizations | | | |
| 1 Did the o | rganization directly or ind | rectly engage in any of the followi | ng with any other organization | n described in section 501(c) of | Yes No |
| | | c)(3) organizations) or in section 5 | | • • | |
| | • | lation to a noncharitable exempt of | · • • • | | |
| (1) Cast | . • | , | · 5 | | 1a(1) X |
| (2) Othe | | | | | 1 1 |
| | | | | | 1a(2) X |
| b Other tra | | | | | J. (1) |
| | s of assets to a noncharita | · • | | | 1b(1) X |
| · · | | oncharitable exempt organization | | | 1b(2) X |
| (3) Rent | al of facilities, equipment, | or other assets | | | 1b(3) X |
| (4) Rein | nbursement arrangements | 3 | | | 1b(4) X |
| (5) Loar | ns or loan guarantees | | | | 1b(5) X |
| (6) Perf | ormance of services or mi | embership or fundraising solicitati | ons | | 1b(6) X |
| c Sharing | of facilities, equipment, ma | ailing lists, other assets, or paid en | nployees | | 1c X |
| d If the ans | wer to any of the above is | "Yes," complete the following sch | edule. Column (b) should alw | ays show the fair market value of the goods, | , other assets, |
| or service | es given by the reporting t | foundation. If the foundation receive | ved less than fair market value | e in any transaction or sharing arrangement, | show in |
| column (| d) the value of the goods, | other assets, or services received | • | | |
| (a) Line no | (b) Amount involved | (c) Name of noncharitable | | (d) Description of transfers, transactions, and | d sharing arrangements |
| · | | N/A | | | |
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| | | | | <u> </u> | |
| 2a Is the fou | indation directly or indirec | ctly affiliated with, or related to, one | e or more tax-exempt organız | rations described | |
| ın sectioi | n 501(c) of the Code (othe | er than section 501(c)(3)) or in sec | ction 527? | [| Yes X No |
| b If "Yes," o | complete the following sch | nedule. | | | _ |
| | (a) Name of or | ganization | (b) Type of organization | (c) Description of relation | ship |
| | N/A | | | | |
| | | | | | |
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| | | | | | |
| Unc | ler penalties of perfury, declar | re that I have examined this return, include | ding accompanying schedules and | statements, and to the best of my knowledge and b | elief, it is true, correct, |
| Sign and | complete Declaration of prep | arer (other then taxpayer or fiduciary) is t | oased on all information of which p | oreparer has any knowledge | |
| Here | 18/10 | 8 Nouses - | 11222 | EXECUTIVE DIR | RECTOR |
| | Signature of officer or tr | ustee | Date | Title | <u> </u> |
| | Print/Type preparer's n | | | Date Check If PTIN | |
| | Transcripto proparor o n | 1 10 10 10 10 10 10 10 10 10 10 10 10 10 | A A | , self- employed | |
| Paid | DANA B BE | FECON Da | 12 Lepu | 12/22/11 | |
| Preparer | DANA R. BE | | TOYOF C CO | TTD Francisco | |
| Use Only | Firm's name DAV | ENPORT, MARVIN, | , JOYCE & CO. | , LLP Firm's EIN ► | |
| OSE OIRY | |) 2 (DEE) 17: | DOND GUTTER | 201 | ——— — —— |
| | | 3 GREEN VALLEY | | | 275 0006 |
| | GF | <u>REENSBORO, NC 27</u> | / 4 U B | <u>Phone no. 336 -</u> | <u>-275-9886</u> |

| | ation and A | | | | Description o | | | 90-PF |
|----------------|-------------------------|---------------------|-----------------|--|---------------------------------------|---|---------------------------------------|---------------------------------------|
| Asset umber | Date | T | 1 | Τ. | | | | |
| unioer | placed in service | Method/ IRC sec. | Life or rate | Line No. | Cost or other basis | Basis reduction | Accumulated depreciation/amortization | Current year deduction |
| 1 | TELEPHON | IE SYS | TEM | ــــــــــــــــــــــــــــــــــــــ | <u> </u> | | | |
| | 020105 | 200DF | 7.00 | 17 | 2,907. | · | 2,379. | 254 |
| 2 | DELL COM | IPUTER | ξ. | | | | | |
| | 061102 | 200DF | 5.00 | 17 | 1,555. | | 1,555. | (|
| 3 | DELL DES | KTOP | COMP | JTER | | | | |
| | 012204 | | | 17 | 1,100. | | 1,100. | |
| 4 | COMPUTER 0 8,1 4,0 7 | O O DE | SESOI | 17 | 1,321. | | 940. | 152 |
| | * TOTAL | | | | | | 240.1 | 154 |
| | | | 1 | T | 6,883. | 0. | 5,974. | 406 |
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| ORM 990-PF INTEREST ON SAVI | INGS A | ND TEM | PORARY C | ASH IN | VESTMENTS | STATEMENT | 1 |
|--|--------|-----------------------|--------------------------------|--------|------------------------------|-----------------------|------------|
| 3OURCE | | | | | | AMOUNT | |
| BANK CHECKING AND MM ACCOUNT | | | | | • | 5,7 | 52. |
| COTAL TO FORM 990-PF, PART I, | , LINE | 3, CO | LUMN A | | : | 5,7 | 52. |
| FORM 990-PF DIVIDENT | DS AND | INTER | EST FROM | SECUE | RITIES | STATEMENT | 2 |
| 3OURCE | | GROSS | AMOUNT | | TAL GAINS | COLUMN (A AMOUNT | .) |
| ACME-MCCRARY BARCLAYS CAPITAL GUARDIAN | | | 2,209. 37,916. 36,903. | | 0. 0. 0. | 2,2 37,9 36,9 | |
| DIVIDENDS FROM VARIOUS K-1S FERRIE, FRANZMANN & CARTER, LI | rc. | : | 5,786. 280,000. | | 0. 0. | • | 86. |
| FOLDMAN SACHS HOLDERNESS INVESTMENTS INTEREST FROM VARIOIUS K-1S | | | 36. 26,109. 51,920. | | 0. 0. 0. | 26,1 51,9 | |
| KEANE CAPITAL MGT MERLIN/MEYERS MORGAN STANLEY | | | 13,636. 25,091. 173,545. | | 0. 0. 0. | 13,6 25,0 173,5 | 91. |
| PRIMCO SAPONA JBS | | | 317,099. 6,458. 215,448. | | 0. 0. 0. | 317,0 | 99. 58. |
| TOTAL TO FM 990-PF, PART I, I | LN 4 | 1, | 192,156. | : | 0. | 1,192,1 | 56. |
| FORM 990-PF | | LEGAL | FEES | | | STATEMENT | 3 |
| DESCRIPTION | EXPE | (A) ENSES BOOKS | (B) NET INV MENT IN | EST- | (C) ADJUSTED NET INCOM | | |
| LEGAL FEES | | 29,957. | | ,991. | | 23,9 | |
| TO FM 990-PF, PG 1, LN 16A | 2 | 29,957. | 5 | ,991. | | 23,9 | 66. |

| ORM 990-PF | ACCOUNTI | NG FEES | STATEMENT 4 | | |
|--|--|-----------------------------------|-------------------------------|--|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| ACCOUNTING FEES | 41,720. | 8,344. | | 33,376. | |
| TO FORM 990-PF, PG 1, LN 16B | 41,720. | 8,344. | | 33,376. | |
| ₹ORM 990-PF | TAX | ES | STATEMENT | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| FOREIGN TAXES WITHHELD ON DIVIDENDS FEDERAL TAX DEPOSITS | 12,118. 58,434. | | | 0. 0. | |
| FO FORM 990-PF, PG 1, LN 18 = | 70,552. | 12,118. | | 0. | |
| FORM 990-PF | OTHER E | XPENSES | S' | TATEMENT 6 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | |
| OFFICE SUPPLIES FIDUCIARY FEES INSURANCE POSTAGE & DELIVERY BANK FEES TELEPHONE SCHOLARSHIP SUPPLIES & | 3,585. 358,934. 2,738. 2,483. 359. 5,040. | 358,934. 548. 497. 72. | | 2,868. 0. 2,190. 1,986. 287. 4,032. | |
| MATERIALS SANTA BARBARA ENVIRONMENTAL EXPENSE | 781. 108,416. | | | 781. 0. | |
| NET OPERATING LOSS FROM PARTNERSHIP K-1S OTHER INVESTMENT EXPENSES | 810,902. 3,941. | | | 0. | |
| TO FORM 990-PF, PG 1, LN 23 | 1,297,179. | 1,284,977. | | 12,144. | |

SECTION 4942(H)(2) ELECTION
AS TO THE TREATMENT OF QUALIFYING DISTRIBUTIONS

THE EDWARD M ARMFIELD SR FOUNDATION, INC 56-2156876

324 W WENDOVER AVE - STE 130

GREENSBORO, NC 27408

PURSUANT TO IRC SEC. 4942(H)(2) AND REG. 53.4942(A)-3(D)(2), THE ABOVE REFERENCED FOUNDATION HEREBY ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE OUT OF UNDISTRIBUTED INCOME FROM THE TAX YEARS ENDING:

2009 209,555 2008 1,243,507 2007 \$ 423,507

STEVE JOYCE, EXECUTIVE DIR.

DATE

| FORM 990-PF OTHER INCREASES IN NET ASSETS | OR FUND BALANCES | STATEMENT | 8 |
|--|--------------------------|----------------------|----|
| DESCRIPTION | | AMOUNT | |
| JNREALIZED GAIN ON INVESTMENTS TO BALANCE BEG FUND BALANCE FOR 2009 TAX ADJ | USTMENT | 3,194,41 25,96 | |
| TOTAL TO FORM 990-PF, PART III, LINE 3 | | 3,220,38 | 3. |
| FORM 990-PF OTHER DECREASES IN NET ASSETS | OR FUND BALANCES | STATEMENT | 9 |
| DESCRIPTION | | AMOUNT | |
| REVENUE / DISBURSEMENTS ACCRUAL TO CASH ADJU JAAP TO TAX BASIS ADJUSTMENTS | STMENT | 1,025,07 68,16 | |
| TOTAL TO FORM 990-PF, PART III, LINE 5 | | 1,093,23 | 6. |
| FORM 990-PF CORPORATE ST | OCK | STATEMENT | 10 |
| DESCRIPTION | BOOK VALUE | FAIR MARKET VALUE | |
| HOLDERNESS INVESTMENTS | 0. | | 0. |
| PRIVATE ADVISORS, LLC | 5,862,866. | 5,862,86 | |
| AQUEDUCT CAPITAL GROUP | 2,323,319. | 2,323,31 | |
| HARBINGER DISTRESSED DEBT FUNDS | 2,801,928. | 2,801,92 | |
| ING CLARION GLOBAL SECURITES | 2,066,383. 360,142. | 2,066,38 360,14 | |
| JSB SECURITIES MORGAN-STANLEY | 2,557,080. | 2,557,08 | |
| PIMCO FUNDS | 2,470,928. | | |
| AXIAL CAPITAL FUND | 869,269. | | |
| INDUS ASIA PACIFIC FUND | 1,082,605. | | |
| RANDOLPH BANK | 4,675. | | |
| CAPITAL GUARDIAN FUND | 1,072,300. | | |
| VANGUARD DIVIDEND FUND HOLOWESKO GROBAL FUND | 7,994,441. 2,072,558. | | |
| NEWPORT ASIA INSTITUTIONAL FUND | 1,000,000. | | |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 32,538,494. | 32,538,49 | 4. |

| OTH | ER INVESTMENTS | | STATEMENT 11 |
|------------------------------------|-------------------------------|-----------------------------|----------------------|
|)ESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| 1ERLIN LIMITED PARTNERSHIP | FMV | 3,806,635. | 3,806,635. |
| FOLDMAN-SACHS | FMV | 2,257,475. | 2,257,475 |
| CEEN VISION FUND II LP | FMV | 1,160,611. | 1,160,611 |
| JEON LIBERTY EMERGING MKTS | FMV | 5,535,134. | 5,535,134 |
| JEW CITY ASIA PARTNERS | FMV | 1,696,021. | 1,696,021 |
| 3ARCLAYS | FMV | 462,095. | 462,095 |
| 1AVERICK STABLE | FMV | 4,663,678. | 4,663,678 |
| COTAL TO FORM 990-PF, PART II, LIN | E 13 | 19,581,649. | 19,581,649 |
| ORM 990-PF DEPRECIATION OF ASSE | TS NOT HELD FOR | INVESTMENT | STATEMENT 1 |
| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE |
| TELEPHONE SYSTEM | 2,907. | 2,633. | 274 |
| DELL COMPUTER | 1,555. | 1,555. | 0 |
| DELL DESKTOP COMPUTER | 1,100. | 1,100. | 0 |
| COMPUTER & ASSESORIES | 1,321. | 1,092. | 229 |
| COTAL TO FM 990-PF, PART II, LN 14 | 6,883. | 6,380. | 503 |
| FORM 990-PF | OTHER ASSETS | | STATEMENT 1 |
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET VALUE |
| ACME MCCRARY | 124,214. | 136,947. | 136,947 |
| SAPONA MFG CO | 119,916. | 133,908. | 133,908 |
| DYNEGY | 698. | 0. | 0 |
| ro form 990-pf, part II, LINE 15 | 244,828. | 270,855. | 270,855 |
| | | | |

STATEMENT

16

| FORM 990-PF OTHER LIABILITIES | | STATEMENT 14 |
|---|------------|--------------|
| DESCRIPTION | BOY AMOUNT | EOY AMOUNT |
| OVERPAID PAYROLL W/H | <2,153.> | <2,153.> |
| TOTAL TO FORM 990-PF, PART II, LINE 22 | <2,153.> | <2,153.> |
| FORM 990-PF STATEMENT REGARDING PART VII-B, | LINE 2B | STATEMENT 15 |

STATEMENT

FORM 990-PF

SET-ASIDE PLEDGES CLAIMED AS QUALIFYING DISTRIBUTIONS IN PART XII FOR 2007 THROUGH 2010 WERE DETERMINED IN 2011 TO NOT HAVE MET THE CASH DISTRIBUTION TEST. AS A RESULT, AMENDED 2007 THROUGH 2010 RETURNS ARE BEING FILED IN 2011. ADDITIONAL NET INVESTMENT EXCISE TAXES DUE AND UNDISTRIBUTED INCOME FROM PRIOR YEARS WAS PAID IN FULL IN DECEMBER 2011.

PART VIII - LIST OF OFFICERS, DIRECTORS

TRUSTEES AND FOUNDATION MANAGERS

| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
|--|--------------------------|-------------------|---------------------------------|--------------------|
| ADAIR P. ARMFIELD 1504 EDGEDALE ROAD GREENSBORO, NC 27408 | DIRECTOR 2.00 | 4,500. | 0. | 0. |
| W.J. ARMFIELD 300 N GREEN ST #2190 GREENSBORO, NC 27408 | DIRECTOR 2.00 | 4,500. | 0. | 0. |
| BEDFORD CANNON 140 EAST WATER STREET STATESVILLE, NC 28677 | DIRECTOR 2.00 | 4,500. | 0. | 0. |
| STEVE JOYCE 324 WEST WENDOVER AVENUE GREENSBORO, NC 27408 | EXECUTIVE DIRE | • | 1,184. | 125. |
| PHIFER CRUTE 1327 TORREY PINE ROAD LAJOLLA, CA 92037 | DIRECTOR 2.00 | 4,500. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE | 6, PART VIII | 143,000. | 1,184. | 125. |

FORM 990-PF

STATEMENT 17

| | DURING THE YEAR | | |
|---|--|-------------------|----------|
| RECIPIENT NAME AND ADDRESS | RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT | | AMOUNT |
| ASHEBORO SUNSET THEATRE 234 SUNSET AVE ASHEBORO, NC 27204 | NONE CAPITAL FUND | PUBLIC CHARITY | 125,000. |
| CANTERBURY SCHOOL 5400 LAKE JEANETTE ROAD GREENSBORO, NC 27455 | NONE ENDOWMENT FUND | PUBLIC CHARITY | 250,000. |
| DAVIDSON COLLEGE PO BOX 7159 DAVIDSON, NC 28035 | NONE CAPITAL FUND | PUBLIC CHARITY | 300,000. |
| ELKIN CITY SCHOOLS 202 WEST SPRING STREET ELKIN, NC 28621 | | PUBLIC CHARITY | 22,320. |
| GREENSBORO SPORTS COUNCIL 2200 PINECROFT ROAD - STE 200 GREENSBORO, NC 27401 | | PUBLIC CHARITY | 1,000. |
| | NONE CAPITAL FUND | PUBLIC CHARITY | 200,000. |
| INDIVIDUAL SCHOLARSHIPS FOR EDUCATION - SCHEDULE ATTACHED 324 W WENDOVER GREENSBORO, NC 27408 | NONE EDUCATIONAL SCHOLARSHIPS | N/A | 746,471. |
| MOUNT AIRY LITERACY PROGRAM PO DRAWER 710 MT AIRY, NC 27030 | NONE GENERAL OPERATING EXPENSES | PUBLIC CHARITY | 32,000. |

GRANTS AND CONTRIBUTIONS

| THE EDWARD M. ARMFIELD SR. FOUN | DATION, I | | 56-2156876 |
|--|--|-------------------|------------|
| RANDOLPH ASHEBORO YMCA 343 NORTH CAROLINA HWY 42 ASHEBORO, NC 27203 | NONE CAPITAL FUND | PUBLIC CHARITY | 200,000. |
| SALEM ACADEMY 500 EAST SALEM AVE VINSTON-SALEM, NC 27101 | NONE CAPITAL FUND | PUBLIC CHARITY | 100,000. |
| 5ALVATION ARMY OF SURRY COUNTY 541 W PINE ST #200 MT AIRY , NC 27030 | NONE GENERAL OPERATING EXPENSES | PUBLIC CHARITY | 10,000. |
| SUMMERFIELD PARK PO BOX 970 SUMMERFIELD, NC 27358 | NONE GENERAL OPERATING EXPENSES | PUBLIC CHARITY | 50,000. |
| JNC-CHAPEL HILL 103 SOUTH BUILDING CHAPEL HILL, VC 27599 | NONE ADVISORY PROGRAM FOR COLLEGE BOUND STUDENTS | PUBLIC CHARITY | 75,988. |
| TOTAL TO FORM 990-PF, PART XV, LI | NE 3A | | 2,112,779. |

| | AND CONTRIBUTIONS D FOR FUTURE PAYMENT | rate | EMENT 18 |
|---|--|---------------------|-----------|
| RECIPIENT NAME AND ADDRESS | RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT | RECIPIENT STATUS | AMOUNT |
| ASHEBORO SUNSET THEATRE 234 SUNSET AVE ASHEBORO, NC 27204 | NONE CAPITAL FUND | PUBLIC CHARITY | 375,000. |
| DAVIDSON COLLEGE PO BOX 7159 DAVIDSON, NC 28035 | NONE CAPITAL FUND | PUBLIC CHARITY | 1200000. |
| GUILFORD COLLEGE 5800 WEST FRIENDLY AVE GREENSBORO, NC 27410 | NONE CAPITAL FUND | PUBLIC CHARITY | 600,000 |
| RANDOLPH ASHEBORO YMCA 343 NORTH CAROLINA HWY 42 ASHEBORO, NC 27203 | NONE CAPITAL FUND | PUBLIC CHARITY | 800,000 |
| SUMMERFIELD PARK PO BOX 970 SUMMERFIELD, NC 27358 | NONE GENERAL OPERATING EXPENSES | PUBLIC CHARITY | 50,000. |
| FOTAL TO FORM 990-PF, PART XV, L | INE 3B | | 3,025,000 |

Form 8868

(Rev. January 2011)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

| Internal Reve | nue Service | ► File a sepa | rate appl | ication for each return. | | | |
|----------------------------|-----------------------|---|-------------|---|----------------|----------------------|-------------------------|
| • If you a | re filing for an Aut | omatic 3-Month Extension, complet | e only Pa | art I and check this box | | > | |
| | | | | complete only Part II (on page 2 of this | form) | • | |
| | | | | tic 3-month extension on a previously fil | | m 8868 | |
| | | | | a 3-month automatic extension of time to | | | oration |
| | | · | | | | | |
| | • | , | | sion of time You can electronically file Fi Form 8870, Information Return for Tran | | • | |
| | | | | (see instructions) For more details on the | | | |
| | | ick on e-file for Chanties & Nonprofits. | | (coo mondonono) i or more detano en n | 10 0100 | aromo ming or ano r | J.111, |
| Part I | | 3-Month Extension of Time | | bmit original (no copies needed). | | | |
| A corpora | | | | onth extension - check this box and com | plete | | |
| Part I only | • | 3 | | | • | • | $\overline{\mathbf{x}}$ |
| • | | ding 1120-C filers), partnerships, REMi | Cs. and to | rusts must use Form 7004 to request an | exten | | |
| | ome tax returns. | g , , | | | • | | |
| Type or | Name of exemp | t organization | | | Empl | oyer identification | number |
| print | 1 | RD M. ARMFIELD SR. | FOUN | DATION, | · · | • | |
| | INC. | | | • • | 5 | 6-2156876 | |
| File by the due date for | | and room or suite no. If a P.O. box, se | e instruc | tions | - | | |
| filing your | C/O DMJ- | CPAS - 703 GREEN V | ALLE | Y ROAD -STE 201 | | | |
| return See instructions | City, town or po | st office, state, and ZIP code For a fo | | | | | |
| | | RO, NC 27408 | | | | | |
| | | | | | | | |
| Enter the | Return code for th | e return that this application is for (file | a separa | te application for each return) | | | 0 7 |
| Application | on | | Return | Application | | | Return |
| is For | | | Code | is For | | | Code |
| Form 990 | | | 01 | Form 990-T (corporation) | | | 07 |
| Form 990 | | | 02 | Form 1041-A | _ | | 08 |
| Form 990 | | | 03 | Form 4720 | | | 09 |
| Form 990 | | | 04 | Form 5227 | | | 10 |
| | ·T (sec 401(a) or 4 | 08(a) trust) | 05 | Form 6069 | | | 11 |
| | -T (trust other than | | 06 | Form 8870 | | | 12 |
| | | STEVE JOYCE | | | | | |
| • The bo | oks are in the care | of > 324 WEST WENDON | ER A | VENUE - GREENSBORO, | NC | 27408 | |
| Teleph | one No 🕨 <u>(33</u> | 6) 273-7519 | | FAX No. ► | | | |
| • If the o | organization does i | not have an office or place of business | in the Ur | nited States, check this box | | > | |
| • If this i | s for a Group Retu | rn, enter the organization's four digit (| Group Exe | emption Number (GEN) If the | is is fo | r the whole group, o | heck this |
| box ▶ [| If it is for par | t of the group, check this box 🕨 🔲 | and atta | ch a list with the names and EINs of all | memb | ers the extension is | for |
| 1 I red | quest an automati | 3-month (6 months for a corporation | required | to file Form 990-T) extension of time unt | ılı | | |
| | NOVEMBER | 15, 2011 , to file the exempt | t organiza | tion return for the organization named a | bove | The extension | |
| is fo | or the organization | 's return for | | | | | |
| ▶[| X calendar year | <u>2010</u> or | | | | | |
| ▶[| tax year begir | nning | , an | d ending | | | |
| | | | | | | | |
| 2 If th | e tax year entered | I in line 1 is for less than 12 months, c | heck reas | on Initial return Fina | al retur | n | |
| | Change in acco | unting period | | | | | |
| | | | | | | | |
| 3a if th | nis application is fo | r Form 990-BL, 990-PF, 990-T, 4720, o | or 6069, e | nter the tentative tax, less any | | | _ |
| | | See instructions. | | | 3a | \$ | <u> </u> |
| | | r Form 990-PF, 990-T, 4720, or 6069, | | | | | ^ |
| | | nts made. Include any prior year overp | | | 3b | \$ | 0. |
| | | ct line 3b from line 3a. Include your pa | | | _ | | • |
| | | tronic Federal Tax Payment System) | | | 3c | 50.4 | 0. |
| Caution. | if you are going to | make an electronic fund withdrawal v | vith this F | orm 8868, see Form 8453-EO and Form | 887 <u>9</u> - | Eom 8969 (D | |

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

| • If you | are filing for an Automatic 3-Month Extension, comple | te only Pa | art I and check this box | | | $\triangleright x$ |
|---------------------------|---|-------------|---|-----------|---------------------|--------------------|
| • If you | are filing for an Additional (Not Automatic) 3-Month Ex | tension, d | complete only Part II (on page 2 of this | form) | | |
| Do not | complete Part II unless you have already been granted a | an automa | tic 3-month extension on a previously fi | led Fo | rm 8868 | |
| Electro | nic filing (e-file). You can electronically file Form 8868 if | you need a | a 3-month automatic extension of time t | o file (6 | months for a co | rporation |
| required | to file Form 990-T), or an additional (not automatic) 3-mo | nth extens | sion of time. You can electronically file F | orm 8 | 368 to request ar | ı extension |
| of time | o file any of the forms listed in Part I or Part II with the ex | ception of | Form 8870, Information Return for Trans | sfers / | Associated With | Certain |
| Persona | al Benefit Contracts, which must be sent to the IRS in par | er format | (see instructions) For more details on the | he elec | tronic filing of th | ıs form, |
| | w irs gov/efile and click on e-file for Charities & Nonprofits | | | | | |
| Part | | | | | | |
| • | ration required to file Form 990-T and requesting an autor | matic 6-mo | onth extension - check this box and com | plete | | _ |
| Part I or | • | | | | | |
| | r corporations (including 1120-C filers), partnerships, REN come tax returns | iiCs, and t | rusts must use Form 7004 to request an | exten | sion of time | |
| Type or | Name of exempt organization | | | Emp | loyer identificati | on number |
| print | THE EDWARD M. ARMFIELD SR. | FOUN | DATION, | | | |
| | INC. | | | 5 | 6-215687 | 6 |
| File by the due date f | | ee instruc | tions | | | |
| filing your return Sec | C/O DMJ-CPAS - 703 GREEN | VALL | EY ROAD -STE 201 | | | |
| instruction | | oreign add | ress, see instructions | | | |
| | | •• | | | | |
| Enter th | e Return code for the return that this application is for (file | e a separa | te application for each return) | | | 0 4 |
| Applica | tion | Return | Application | | | Return |
| Is For | | Code | Is For | | | Code |
| Form 99 | 00 | 01 | Form 990-T (corporation) | | | 07 |
| Form 99 | | 02 | Form 1041-A | | | 08 |
| Form 99 | | 03 | Form 4720 | | | 09 |
| Form 99 | 90-PF | 04 | Form 5227 | | | 10 |
| Form 99 | 90-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 |
| Form 99 | 90-T (trust other than above) | 06 | Form 8870 | | | 12 |
| | STEVE JOYCE | | | | | |
| • The | books are in the care of > 324 WEST WENDO | VER A | VENUE - GREENSBORO, | NC | 27408 | |
| Telej | phone No ► <u>(336) 273-7519</u> | | FAX No 🕨 | | | |
| • If the | organization does not have an office or place of busines | s in the Ur | nited States, check this box | | | |
| If the | s is for a Group Return, enter the organization's four digit | _ | | | r the whole group | |
| box 🕨 | . If it is for part of the group, check this box | • | | | ers the extension | ı ıs for |
| 1 1 | equest an automatic 3-month (6 months for a corporation | required | to file Form 990-T) extension of time unt | d | | |
| _ | | t organiza | tion return for the organization named a | bove. | The extension | |
| | for the organization's return for | | | | | |
| P | · X calendar year 2010 or | | | | | |
| • | tax year beginning | , an | d ending | | <u> </u> | |
| 2 If | the tax year entered in line 1 is for less than 12 months, or | hack ress | on Initial return Fina | al retur | n | |
| ַר <u>"</u> | Change in accounting period | nicon icas | on | i ictai | •• | |
| | Change in accounting period | | | | | |
| 3a If | this application is for Form 990-BL, 990-PF, 990-T, 4720, | or 6069, e | nter the tentative tax, less any | | | |
| | onrefundable credits. See instructions. | ŕ | • | За | s ! | 58,434. |
| _ | this application is for Form 990-PF, 990-T, 4720, or 6069, | enter anv | refundable credits and | | | |
| | stimated tax payments made. Include any prior year over | | | 3b | \$ | 34,408. |
| _ | alance due. Subtract line 3b from line 3a Include your pa | | | | | |
| | y using EFTPS (Electronic Federal Tax Payment System) | | | 3с | \$ | 0. |
| Caution | n. If you are going to make an electronic fund withdrawal | with this F | orm 8868, see Form 8453-EO and Form | 8879- | EO for payment i | nstructions. |
| LHA | For Paperwork Reduction Act Notice, see Instructions | 5. | | | Form 8868 | (Rev. 1-2011) |

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| Form 8 | 868 (Rev_1-2011) | | | | | | Page 2 |
|------------------------|--|--------------|---|----------|------------|--------------|--------------|
| | u are filing for an Additional (Not Automatic) 3-Month Ex | ctension, c | complete only Part II and check this be | ox | | | X |
| | Only complete Part II if you have already been granted an | | | | 8868. | | |
| | u are filing for an Automatic 3-Month Extension, comple | | | | | | |
| Part | | | | opies i | needed) | | |
| _ | Name of exempt organization | | | Emp | loyer ide | entification | number |
| Type o | THE EDWARD M. ARMFIELD SR. FOUNDATION. | | | | | | |
| print | INC. | | | 5 | 6-21 | 56876 | |
| File by the extended | | | | _ | | | |
| due date filing you | | | | | | | |
| return Se | City, town or post office, state, and ZIP code. For a fe | oreign add | lress, see instructions | | | | |
| instructio | ^{ns} GREENSBORO, NC 27429 | | | | | | |
| | | | | | | , | |
| Enter t | he Return code for the return that this application is for (file | e a separa | te application for each return) | | | | 0 4 |
| | | | | | | | |
| Applic | ation | Return | Application | | | | Return |
| is For | | Code | is For | _ | | | Code |
| Form 9 | 90 | 01 | | | | | |
| Form 9 | 90-BL | 02 | Form 1041-A | | | | 08 |
| Form 9 | 90-EZ | 03 | Form 4720 | | | | 09 |
| Form 9 | Form 990-PF 04 Form 5227 | | | | | 10 | |
| Form 9 | 90-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | | | | 11 |
| Form 9 | 90-T (trust other than above) | 06 Form 8870 | | | | | 12 |
| STOP! | Do not complete Part II if you were not already granted | d an auton | natic 3-month extension on a previou | sly file | d Form | 8868. | |
| | STEVE JOYCE | | | | | | |
| • The | books are in the care of ▶ 324 WEST WENDO | VER A | <u> VENUE - GREENSBORO, </u> | NC | 2740 | 8 | · |
| Tele | phone No. ► <u>(336) 273-7519</u> | | FAX No. > | | | _ | |
| • If th | e organization does not have an office or place of busines | s in the Ur | nited States, check this box | | | > | |
| • If th | is is for a Group Return, enter the organization's four digit | Group Exe | emption Number (GEN) If th | ıs ıs fo | r the who | ole group, c | heck this |
| box 🕨 | | | | memb | ers the e | extension is | for |
| 4 1 | request an additional 3-month extension of time until | NOVEM | BER 15, 2011 | | | | |
| 5 F | for calendar year 2010 , or other tax year beginning $_$ | | , and ending | | | | · |
| 6 1 | f the tax year entered in line 5 is for less than 12 months, o | check reas | on: Initial return | Final i | eturn | | |
| | Change in accounting period | | | | | | |
| | State in detail why you need the extension | | | | | | |
| 3 | SEVERAL INVESTMENT PARTNERSHI | | | | | SEPTE | |
| <u>-</u> | 2011. WITHOUT THIS INFORMATION | N AN A | ACCURATE 990-PF RETU | JRN | <u>CAN</u> | NOT E | BE |
|] | PREPARED. | | | · | | | |
| 8a I | f this application is for Form 990-BL, 990-PF, 990-T, 4720, | or 6069, e | nter the tentative tax, less any | 1 | Į. | | |
| - | nonrefundable credits. See instructions | | | 8a | \$ | 26 | <u>,000.</u> |
| b l | f this application is for Form 990-PF, 990-T, 4720, or 6069, | enter any | refundable credits and estimated | |] | | |
| t | ax payments made. Include any pnor year overpayment al | lowed as a | a credit and any amount paid | L | Į. | | |
| | previously with Form 8868 | | | 8b | \$ | 58 | <u>,434.</u> |
| c E | Balance due, Subtract line 8b from line 8a Include your pa | ayment wit | th this form, if required, by using | | [| | |
| | FTPS (Electronic Federal Tax Payment System) See instru | uctions. | | 8c | \$ | | 0. |

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title

Form 8868 (Rev. 1-2011)

Date >