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Form **990-PF**

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

OMB No 1545-0052

2010Department of the Treasury
Internal Revenue Service

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

For calendar year 2010, or tax year beginning **07/01/10**, and ending **06/30/11**

G Check all that apply. ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Name of foundation

**VIRGINIA C. WARRINGTON MEMORIAL
TRUST FUND**

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

511 PALADIN DRIVE

Room/suite

City or town, state, and ZIP code

GREENVILLE**NC 27834**H Check type of organization ☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at

end of year (from Part II, col. (c),

line 16) **\$ 79,368** (Part I, column (d) must be on cash basis.)J Accounting method. ☒ Cash ☐ Accrual☐ Other (specify)

A Employer identification number

56-1586624

B Telephone number (see page 10 of the instructions)

252-752-8880C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the
85% test, check here and attach computation ☐E If private foundation status was terminated under
section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination
under section 507(b)(1)(B), check here ☐

Part I Analysis of Revenue and Expenses (The total of
amounts in columns (b), (c), and (d) may not necessarily equal
the amounts in column (a) (see page 11 of the instructions))

(a) Revenue and
expenses per
books(b) Net investment
income(c) Adjusted net
income(d) Disbursements
for charitable
purposes
(cash basis only)

Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)	5,625			
	2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments	599	599		
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10				
	b	Gross sales price for all assets on line 6a				
	7	Capital gain net income (from Part IV, line 2)		0		
	8	Net short-term capital gain			0	
	9	Income modifications				
	10a	Gross sales less returns & allowances				
Operating and Administrative Expenses	b	Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	6,224	599	0	
	13	Compensation of officers, directors, trustees, etc.	0			
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule) Stmt 1	475		475	
	c	Other professional fees (attach schedule)				
	17	Interest				
	18	Taxes (attach schedule) (see page 14 of the instructions) Stmt 2	9	9	9	
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications Oct 24 2011	123	123	123	
	23	Other expenses (att sch) Stmt 3	75	75	75	
	24	Total operating and administrative expenses. Add lines 13 through 23	682	207	682	0
	25	Contributions, gifts, grants paid	9,834			9,834
	26	Total expenses and disbursements. Add lines 24 and 25	10,516	207	682	9,834
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	-4,292			
	b	Net investment income (if negative, enter -0-)		392		
	c	Adjusted net income (if negative, enter -0-)			0	

For Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2010)

SCANNED NOV 01 2011

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing		8,701	3,810	3,810
	2	Savings and temporary cash investments		74,959	75,558	75,558
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)				
	7	Other notes and loans receivable (att schedule) ▶				
		Less allowance for doubtful accounts ▶	0			
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶				
	Less accumulated depreciation (attach sch) ▶					
12	Investments—mortgage loans					
13	Investments—other (attach schedule)					
14	Land, buildings, and equipment basis ▶					
	Less accumulated depreciation (attach sch) ▶					
15	Other assets (describe ▶))				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		83,660	79,368	79,368	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶))			
	23	Total liabilities (add lines 17 through 22)		0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds		52,670	52,670	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds		30,990	26,698	
	30	Total net assets or fund balances (see page 17 of the instructions)		83,660	79,368	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)		83,660	79,368	

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	83,660
2	Enter amount from Part I, line 27a	2	-4,292
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	79,368
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	79,368

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	N/A			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="border-left: 1px solid black; border-right: 1px solid black; padding: 5px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8		3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2009	5,489	72,720	0.075481
2008	2,449	60,276	0.040630
2007	3,425	45,310	0.075590
2006	1,661	45,310	0.036659
2005	1,199	45,310	0.026462

2 Total of line 1, column (d)	2	0.254822
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.050964
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	73,824
5 Multiply line 4 by line 3	5	3,762
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	4
7 Add lines 5 and 6	7	3,766
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.	8	9,834

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	4
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b).		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	4
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	4
6	Credits/Payments		
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	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	4
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2011 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

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

N/A

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► NONE	13	X	
14	The books are in care of ► CATHY ELLINGTON 511 PALADIN DRIVE Located at ► GREENVILLE NC ZIP+4 ► 27834 Telephone no ► 252-752-8880			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	15		
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 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 ►	16	Yes	No X

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	
c	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?	N/A	
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))		
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? If "Yes," list the years ► 20 , 20 , 20 , 20	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 22 of the instructions)	N/A	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20 , 20 , 20 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	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	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?		X

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:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?

N/A

5b

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 expenditure responsibility for the grant?N/A ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If Yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

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

(a) Name and address		(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
GRAHAM BYRUM	GREENVILLE	PRESIDENT			
511 PALADIN DRIVE	NC 27834	2.00	0	0	0
THOMAS BURKART	GREENVILLE	SECRETARY			
511 PALADIN DRIVE	NC 27834	2.00	0	0	0
WALTER J. NEWMAN	GREENVILLE	TREASURER			
511 PALADIN DRIVE	NC 27834	2.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1 — see page 23 of the instructions).

If none, enter "NONE."

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

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

▶ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 See Statement 4	
2	9,834
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
All other program-related investments See page 24 of the instructions	
3	
Total. Add lines 1 through 3	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
a	Average monthly fair market value of securities	1a	74,948
b	Average of monthly cash balances	1b	0
c	Fair market value of all other assets (see page 25 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	74,948
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	74,948
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions)	4	1,124
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	73,824
6	Minimum investment return. Enter 5% of line 5	6	3,691

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

1	Minimum investment return from Part X, line 6	1	3,691
2a	Tax on investment income for 2010 from Part VI, line 5	2a	4
b	Income tax for 2010 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	4
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,687
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	3,687
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,687

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	9,834
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	9,834
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	4
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,830

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

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

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				3,687
2 Undistributed income, if any, as of the end of 2010:				
a Enter amount for 2009 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				1,182
d From 2008				
e From 2009				1,871
f Total of lines 3a through e		3,053		
4 Qualifying distributions for 2010 from Part XII, line 4 ▶ \$ 9,834				
a Applied to 2009, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)				
d Applied to 2010 distributable amount				3,687
e Remaining amount distributed out of corpus	6,147			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	9,200			
b Prior years' undistributed income Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions				
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount—see page 27 of the instructions				
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions)				
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	9,200			
10 Analysis of line 9				
a Excess from 2006				
b Excess from 2007				1,182
c Excess from 2008				
d Excess from 2009				1,871
e Excess from 2010				6,147

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

Grants and Contributions Paid During the Year		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Recipient					
Name and address (home or business)					
a Paid during the year SCHEDULE ATTACHED VARIOUS PATIENTS		ASSIST	RENAL DISEASE	PATIENTS	9,834
Total		▶ 3a			9,834
b Approved for future payment N/A					
Total		▶ 3b			

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue:					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					599
4	Dividends and interest from securities					
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					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e)		0		0	599
13	Total. Add line 12, columns (b), (d), and (e)					599

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

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

[illegible]

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting foundation to a noncharitable exempt organization of

(1) Cash

(2) Other assets

b Other transactions

(1) Sales of assets to a noncharitable exempt organization

(2) Purchases of assets from a noncharitable exempt organization

(3) Rental of facilities, equipment, or other assets

(4) Reimbursement arrangements

(5) Loans or loan guarantees

(6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)		X
1b(4)		X
1b(5)		X
1b(6)		X
1c		X

[illegible]

☐ Yes ☒ No

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

N/A		

Signature of officer or trustee

10-18-11
Date

Partner/manager
Title

Print/Type preparer's name

Preparer's signature

Date _____

Check ☐ if self-employed

Brenda R. Spence, CPA

Brenda R. Spence, USA

10/03/11

Firm's name ► **Mag Mutual HealthCare Solutions, Inc.**

PTIN P00963107

Firm's address ► 2511 N. Queen St.

Firm's EIN ► 58-2244533

Kinston, NC 28501

Phone no **252-522-1220**

Federal Statements**Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees**

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INDIRECT ACCOUNTING FEES	\$ 475	\$	475	\$
Total	\$ 475	\$ 0	475	\$ 0

Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INDIRECT TAXES AND LICENSES	\$ 9	\$ 9	9	\$
Total	\$ 9	\$ 9	9	\$ 0

Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses	\$	\$	\$	\$
OFFICE SUPPLIES	75	75	75	
Total	\$ 75	\$ 75	75	\$ 0

Federal Statements**Statement 4 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities**Description

MEDICAL EXPENSES OF VARIOUS INDIVIDUALS WITH END-STAGE RENAL DISEASE WERE PAID BY THE FOUNDATION. SEE PART XV FOR A LIST OF RECIPIENTS AND THE SPECIFIC AMOUNTS PAID ON THEIR BEHALF.

56-1586624

Federal Statements

FYE: 6/30/2011

Statement 5 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

<u>Name of Manager</u>	<u>Amount</u>
MEMBERS OF EASTERN NEPHROLOGY ASSOCIATES, PLLC CONTRIBUTE THE MAJORITY OF CONTRIBUTIONS TO THE FOUNDATION	\$
Total	\$ <u>0</u>

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

<u>Description</u>
DEPARTMENT OF SOCIAL SERVICES CERTIFICATE OF NEED

Form 990-PF, Part XV, Line 2c - Submission Deadlines

<u>Description</u>
NONE

Statement 6 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

<u>Description</u>
REGION IV OF THE NC HEALTH SYSTEMS AGENCY DOMICILE END-STAGE RENAL DISEASE PATIENTS

**Virginia C. Warrington Memorial Trust Fd
General Ledger**

Date	Reference T	Description	Beginning Balance	Current Amount	Period End Amount	YTD Balance
		610 Charitable Payments	0 00			
09/03/10	99 B	CK#3018 MARTIN CO TRANSIT- HUBERT HARRISON		40 00		
06/30/11	99 B	Check #3264-CLEARED DIFF		0 06		
07/26/10	3135	REALO DRUGS-DARRYL WHITFIELD		40 69		
07/26/10	3136	LORI HERNANDEZ-MEDICATIONS		50 00		
07/26/10	3137	WALGREENS-JAMES DALY		50 00		
07/26/10	3138	CITY TREASURER-LEON MASON		50 00		
08/16/10	3139	BCDC TRANSPORT-PRIMOUS COBB		50 00		
08/16/10	3140	BCDC-AUDREY WILLIAMS		50 00		
08/16/10	3141	SONNIE MOORE-MARY MOORE		45 00		
08/16/10	3142	CVS-HENRY GRAHAM		50 00		
08/16/10	3143	VALERIE TUTEN-GARRETT TUTEN		50 00		
08/16/10	3144	HERBERT LUTON-CARRIE LUTON		45 00		
09/14/10	3145	TOWN OF LAGRANGE-SANDRA POLLOCK		50 00		
09/14/10	3146	REALO DISCOUNT-GLENDA DUDLEY		11 09		
09/14/10	3147	LORI HENANDEZ-MEDICATION		50.00		
09/14/10	3148	JOE BOND-LINDA WHITE		50 00		
09/14/10	3149	EDGECOMBE/MARTIN EMC-BETTY SAUNDERS		50 00		
09/14/10	3150	HENRY STREET-MEDICATION		50 00		
09/14/10	3151	SONNIE MOORE-MARY MOORE		50 00		
10/07/10	3153	SYNERGY GAS OF PRINCE GEORGE- JANET ABRAHAM		50 00		
10/07/10	3154	DOMINION VA POWER, ROBERTA FELDER		50 00		
10/07/10	3155	CHARLES ROBINSON-MEDICATIONS		50 00		
10/07/10	3156	TOWN OF LAGRANGE-SANDRA POLLOCK		50 00		
10/07/10	3157	PATRICK EURE-TRANSPORTATION		30 00		
10/07/10	3158	JUDY MEBANE-TRANSPORTATION		40 00		
10/07/10	3159	CARTERET CRAVEN EMC-SAM MILLETTE		50 00		
10/07/10	3161	NORA GATLING-TRANSPORTATION		20 00		
11/04/10	3163	PITT AREA TRANSPORT-FRED GRAY		50 00		
11/04/10	3164	NOVELLA BATTLE-NOVELLA BATTLE MEDS		50 00		
11/04/10	3165	TOWN OF LAGRANGE-SANDRA POLLOCK		50 00		
11/04/10	3167	LORI HERNANDEZ-MEDICATIONS		50 00		
11/04/10	3168	CITY OF KINSTON-LILA WITHERSPOON		50 00		
11/04/10	3169	SOUTHSIDE ELECTRIC-WILLIAM HARRELL		50 00		
11/04/10	3170	AMERIGAS-EMPORIA VA-ERNESTINE WATTS		50 00		
11/04/10	3171	PRINCE GEORGE ELEC COOP-ARROW THWEATT		50 00		
11/04/10	3172	AMY ALLIGOOD-KIM JACKSON		50 00		
11/18/10	3174	DELORES HARRISON-HUBERT HARRISON		50 00		
12/13/10	3175	PATS-FRED GRAY		40 00		
12/13/10	3176	CHARLES ROBINSON-MEDICATIONS		50 00		
12/13/10	3177	REALO-GLENDA DUDLEY		22 17		
12/13/10	3178	HENRY STREET-MEDICATIONS		50 00		
12/13/10	3179	ERNEST FAISON-MEDICATIONS		50 00		
12/13/10	3180	NOVELLA BATTLE-MEDICATIONS		50 00		
12/13/10	3181	CITY OF KINSTON-LILA WITHERSPOON		50 00		

Virginia C. Warrington Memorial Trust Fd
General Ledger

Date	Reference T	Description	Beginning Balance	Current Amount	Period End Amount	YTD Balance
610 Charitable Payments (cont.)						
12/13/10	3182	DARRELL COREY-VALERIE BROWN		50 00		
01/11/11	3184	REALO-GLENDA DUDLEY		11 40		
01/11/11	3185	PATS-FRED GRAY		44 00		
01/11/11	3186	ARTHUR RITCHIE-TRANSPORTATION		50 00		
01/19/11	3187	KINSTON HOUSING AUTHORITY- CLARENCE RUFUS		50 00		
01/19/11	3188	NOVELLA BATTLE-MEDICATIONS		50 00		
01/19/11	3189	VERIZON		50 00		
01/19/11	3190	TOWN OF ROBERSONVILLE-DIANE BARNHILL		50 00		
01/19/11	3191	VERIZON-BRENDA WELCH		50 00		
01/19/11	3192	DOUGLAS LYONS-MEDICATION		50 00		
01/19/11	3193	WILLIAM TAYLOR-MEDICATIONS		50 00		
01/19/11	3194	DANNY DARDEN-TRANSPORTATION		50 00		
02/10/11	3195	PHILISTINE BISHOP-LAQUITA BRYANT		50 00		
02/10/11	3196	ARTHUS RITCHIE-TRANSPORTATION		50 00		
02/10/11	3197	PATS-FRED GRAY		28 00		
02/14/11	3199	DOUGLAS LYONS-TRANSPORTATION		50 00		
02/14/11	3200	DANNY DARDEN-TRANSPORTATION		50 00		
02/14/11	3201	EDGECOMBE MARTIN EMC-BETTY SAUNDERS		50 00		
02/14/11	3202	DEPT OF VA-KEITH KNIGHT		50 00		
02/14/11	3203	JEFFREY DANCY-TRANSPORTATION		50 00		
02/14/11	3204	DORIS MORNING-MEDST TRANSP		50 00		
02/14/11	3205	WILLIAM TAYLOR-MEDS & TRANSP		50 00		
02/14/11	3206	JAMES STANLEY-MEDS		35 00		
02/14/11	3207	ROBERT ANDERSON- TRANSPORTATION		50 00		
02/14/11	3208	DAVITA RX-WILLIAM HUSTON		50 00		
02/15/11	3209	VERIZON-ELEANOR KEYS		50 00		
02/15/11	3210	VERIZON-BRENDA WELCH		50 00		
02/15/11	3211	SOUTHSIDE ELCT COOP-WILLIAM HARRELL		50 00		
02/15/11	3212	AMERIGAS-EMPORIA VA-ERNESTINE WATTS		50 00		
02/15/11	3213	PRINCE GEORGE ELEC CO-ARROW THWEATT		50 00		
02/15/11	3214	AMER GEN LIFE INS-LEONA HINES		50 00		
02/15/11	3215	JOE GARRIS-MEDICATIONS		50 00		
03/15/11	3216	ERNEST FAISON-MEDICATION COPAY		50 00		
03/15/11	3217	CITY OF KINSTON-LILA WITHERSPOON		50 00		
03/15/11	3218	REALO DRUG-DONALD GASTON		27 82		
03/15/11	3219	TOWN OF LAGRANGE-SANDRA POLLOCK		50 00		
03/15/11	3220	TIDEWATER ENERGY-MESLIN BLOUNT		50 00		
03/15/11	3221	PATS-JOHN MONTGOMERY		50 00		
03/15/11	3222	JOE BOND-LINDA WHITE TRANSPORT		50 00		
03/15/11	3223	ARTHUR RITCHIE-TRANSPORT		50 00		
03/15/11	3224	RX OUTREACH-CARL MOODY		30.00		
03/15/11	3225	JESSE HARPER-TRANSPORT		50 00		
03/15/11	3226	DANNY DARDEN-TRANSPORT		50 00		
03/15/11	3227	SHIRLEY HEATH-MED PRODUCTS		41 97		
03/15/11	3228	MARY CHANCE-MEDICATION		19 97		
03/15/11	3229	DOUGLAS LYONS-MEDICATION		50 00		
03/15/11	3230	JEFFREY DANCY-MEDICATIONS		50 00		
03/15/11	3231	WILLIAM TAYLOR-TRANSPORT		50.00		

**Virginia C. Warrington-Memorial Trust Fd
General Ledger**

Date	Reference T	Description	Beginning Balance	Current Amount	Period End Amount	YTD Balance
610 Charitable Payments (cont.)						
03/15/11	3232	ROANOKE ELECT-GLORIA HALL		50 00		
03/15/11	3233	EDGE/MARTIN EMC-BETTY SAUNDERS		50 00		
03/15/11	3234	ANNIE HILL-TRANSPORT		50 00		
03/15/11	3235	DEPT OF VA-ISAAC LONG		50 00		
03/15/11	3236	PITT/GREENE EMC-AUDREY MOORE		50 00		
03/15/11	3237	RICHARD FAIN-TRANSPORT		50 00		
03/15/11	3238	JOE GARRIS-TRANSPORT		50 00		
03/15/11	3239	DAVITA RX-PECOLIA JOHNSON		40.26		
03/15/11	3240	RONNIE DEMARY-TRANSPORT		50.00		
03/15/11	3241	DANA CAPPS-REGINALD HODGES		50.00		
03/15/11	3242	TOWN OF ROBERSONVILLE-DIANE BARNHILL		50 00		
03/15/11	3243	PITT/GREENE EMC-ELVIS GRAY		50 00		
03/23/11	3244	BEAUFORT CO DEV-AUDREY WILLIAMS		15 00		
03/23/11	3245	BEAUFORT CO DEV-ANNIE SPRUILL		15 00		
03/23/11	3246	AUDREY WALLS-PREMIUM		40 00		
03/23/11	3247	CAROLYN SQUIRES-SHIRLEY WIEST		35 00		
03/23/11	3248	BEAUFORT CO DEV-SHIRLEY WIEST		15 00		
03/28/11	3249	JUDY MEBANE-TRANSPORTATION		50 00		
04/11/11	3250	BERNSTEIN CENTER-LEVI SUGGS		50 00		
04/11/11	3251	BERNSTEIN CENTER-LEVI SUGGS		50 00		
04/11/11	3252	BEAUFORT CO DEV CTR-DANIELS, COBB, SPRUILL, WEIST, WILLIAMS		250 00		
04/11/11	3253	VERIZON-ELEANORA KEYS		50 00		
04/11/11	3254	AGLA-LEONA HINES		50 00		
04/11/11	3255	VERIZON-BRENDA WELCH		50 00		
04/11/11	3256	SOUTHSIDE ELC COOP-WILLIAM HARRELL		50 00		
04/11/11	3258	AMERIGAS EMPORIA-ERNESTINE WATTS		50 00		
04/11/11	3259	PRINCE GEORGE ELCT COOP-ARROW THWEATT		50 00		
04/11/11	3260	ARTHUR RITCHIE-TRANSPORT		50 00		
04/28/11	3262	DEBORAH HINES-TRANSPORTATION		50 00		
05/06/11	3263	TOWN OF HAMILTON-MARY BENNETT		50 00		
05/06/11	3264	LINDA JONES-MACKIE BLACKSON		21 01		
05/06/11	3265	ERNESTINE BRYANT-TRANSPORT		50 00		
05/06/11	3267	PRESCRIPTION SOLUTIONS-GLADYS BROWN		50 00		
05/06/11	3268	DELORES HARRISON-HUBERT HARRISON		50 00		
05/06/11	3269	K&L TRANSPORT SERV-WILLIAM TELFAIR		50 00		
05/06/11	3270	K&L TRANSPORT SERV-MINNIE KNIGHT		50 00		
05/06/11	3271	JOHN BEAL-TRANSPORT		50 00		
05/06/11	3272	VERNON WEBB-TRANSPORT		50 00		
05/06/11	3273	CALDWELL BANKS-TRANSPORT		50 00		
05/06/11	3274	DIANE BODDIE-TRANSPORT		45 00		
05/06/11	3275	ROBERT MORRIS-TRANSPORT		44 88		
05/06/11	3276	JEFFREY DANCY-TRANSPORT		50 00		
05/06/11	3277	BOBBY TAYLOR-TRANSPORT		50 00		
05/06/11	3279	DAVID MITCHELL-TRANSPORT		50 00		
05/06/11	3280	DANNY DARDEN-TRANSPORT		50 00		
05/06/11	3281	JULIAN CARTER-TRANSPORT		49 01		
05/06/11	3282	STEPHEN PARKER-MEDICATIONS		50 00		

Virginia C. Warrington Memorial Trust Fd
General Ledger

Date	Reference T	Description	Beginning Balance	Current Amount	Period End Amount	YTD Balance
610 Charitable Payments (cont.)						
05/06/11	3283	FREDDIE DAVIS-TRNASPORT		50 00		
05/06/11	3284	JOSE NASARIO-TRANSPORT		50 00		
05/06/11	3285	ETHELENE STALLINGS-TRANSPORT		50.00		
05/06/11	3286	PITT & GREENE EMC-AUDREY MOORE		50 00		
05/06/11	3287	WILLIAM DICKENS-TRANSPORT		50 00		
05/06/11	3288	ROBERT ANDERSON-TRANSPORT		50 00		
05/06/11	3289	DAWN BURTON-VELMA ROUSE, VANNER SUGG BLANKETS		45 00		
05/06/11	3290	LIFE STATION-ALEXANDER JOYNER		50 00		
05/06/11	3291	CENTURYLINK-GLORIA HALL		50.00		
05/17/11	3292	KINSTON HOUSING AUTH-CLARENCE RUFUS		50 00		
05/17/11	3293	PITT AREA TRANSIT-JOHN MONTGOMERY		10.00		
05/17/11	3294	REALO-GLENDA DUDLEY		33 26		
05/17/11	3295	REALO DRUG-PETER DELOATCH		30 00		
05/17/11	3296	CHARLES ROBINSON-MEDICATION		50 00		
05/17/11	3297	TOWN OF LAGRANGE-SANDRA POLLOCK		50 00		
05/17/11	3298	REALO-NOVELLA BATTLE		45 00		
05/17/11	3299	HENRY STREET-MEDICATIONS		50 00		
05/17/11	3300	VERIZON-ELEANORA KEYS		50 00		
05/17/11	3301	AGLA-LEONA HINES		50 00		
05/17/11	3302	VERIZON-BRENDA WELCH		50 00		
05/17/11	3303	SOUTHSIDE ELEC COOP-WILLIAM HARRELL		50 00		
05/17/11	3304	AMERIGAS EUPORIA-ERNESTINE WATTS		50 00		
05/17/11	3305	PRINCE GEORGE ELEC COOP-ARROW THWEATT		50 00		
05/20/11	3306	DOMINION NC POWER-DEMETRIUS HYMAN		50 00		
05/23/11	3307	DANIEL DEMARY-RONNIE DEMARY TRANSPORT		50 00		
05/23/11	3308	DOMINION POWER-AL VESTER LEWTER		50 00		
05/25/11	3309	ROUNDTREE CAB CO-MARTHA MAY TRANSPORT		130 00		
06/10/11	3310	FOOD LION-ANTHONY LAUGHINGHOUSE		50 00		
06/10/11	3311	PITT GREENE/EMC-AUDREY MOORE		50 00		
06/10/11	3312	PITT GREENE EMC-ELVIS GRAY		50 00		
06/10/11	3313	NEVELLA SUGGS-TRANSPORT		46 99		
06/10/11	3314	ANGIE LOVE-TRANSPORT		45.00		
06/10/11	3315	ROSA JOHNSON-TRANSPORT		50 00		
06/10/11	3316	EDGEcombe MARTIN EMC-BETTY SAUNDERS		50 00		
06/10/11	3317	JAMES STANLEY-MEDICATION		49 00		
06/10/11	3318	JOE GARRIS-TRANSPORT		50 00		
06/10/11	3319	ADOLFO GARCIA-MEDICATIONS		50 00		
06/13/11	3320	BERNSTEIN CENTER-LEVI SUGGS		50 00		
06/13/11	3321	DIANE BODDIE-TRANSPORT		30 00		
06/13/11	3322	JOSE NASARIO-TRANSPORT		50 00		
06/13/11	3323	JULIAN CARTER-TRANSPORT		50 00		
06/13/11	3324	HELEN SHROCK-TRANSPORT		33 98		
06/13/11	3325	WALMART PHARM-CLARENCE BASINGER		50 00		
06/13/11	3326	DANA CAPPS-GAS CARD FOR				

**Virginia C. Warrington Memorial Trust Fd
General Ledger**

Date	Reference T	Description	Beginning Balance	Current Amount	Period End Amount	YTD Balance
610 Charitable Payments (cont.)						
		GLADYS BROWN		50.00		
06/13/11	3327	GLORIA HALL-TRANSPORT		43.60		
06/13/11	3328	DOUGLAS LYONS-TRANSPORT & MEDS		50.00		
06/13/11	3329	STEPHEN PARKER-MEDS		50.00		
06/13/11	3330	JESSE HARPER-TRANSPORT		50 00		
06/13/11	3331	VERNON WEBB-TRANSPORT		50 00		
06/13/11	3332	GERALDINE HARVEY-TRANSPORT		50 00		
06/13/11	3333	MICHAEL MCLAWHORN-TRANSPORT		50 00		
06/13/11	3334	BEAUFORT CO TRANSIT-COBB, WILLIAMS, WIEST, DANIELS, SPRUILL		250.00		
06/13/11	3335	PRESCRIPTION SOLUTIONS- ANTHONY LAUGHINGHOUSE		50.00		
06/13/11	3336	SOUTHSIDE ELECTRIC-FRANCIS ELLIOTT		50 00		
06/13/11	3337	SOUTHSIDE ELECTRIC-WILLIAM HARRELL		50.00		
06/13/11	3338	PRINCE GEORGE ELEC COOP-ARROW THWEATT		50.00		
06/13/11	3339	AMERIGAS-EMPORIA-ERNESTINE WATTS		50 00		
06/13/11	3340	GREENE CO DS-FELLOWS, STALLINGS, CARTER, FAIN, SUGGS, HILL		250 00		
			June	9,834.16	9,834 16	
				<u>9,834.16</u>		<u>9,834 16</u>

Range of Accounts Specified

YTD Profit/(Loss) (9,834 16)

Number of Transactions 197

The General Ledger is in balance

0 00

PUBLISHER'S AFFIDAVIT

NORTH CAROLINA
PITT COUNTY:

Bennette Rouse affirms that she is
~~Advertising Assistant~~ of The Daily Reflector, a newspaper
 published daily at Greenville, Pitt County, North Carolina, and that the
 advertisement, a true copy of which is hereto attached, entitled

Public Notice

was published in said The Daily Reflector on the following dates:

9-25-11

and that the said newspaper in which such notice, paper, document or
 legal advertisement was published, was, at the time of each and every
 publication, a newspaper meeting all of the requirements and
 qualifications of Chapter 1, Section 597 of the General Statutes of North
 Carolina and was a qualified newspaper within the meaning of Chapter
 1, Section 597 of the General Statutes of North Carolina.

Bennette Rouse

Affirmed and subscribed before me this 26th day

of September, 20 11

Anita C. House
 (Notary Public)

My commission expires 11/17/11

