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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

2011

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2011, or tax year beginning , 2011, and ending ,								
	oundation LD P AND MEILIA S COX FAMILY	Α	Employer identification nur 26-3898268	mber				
POE	nd street (or P O box number if mail is not delivered to street BOX 7728	et address)	Room/suite	В	Telephone number (see the (252) 443-68			
City or tow ROCKY	Y MOUNT	ZIP code 27804 - 0728	С	If exemption application is	pending, check here			
G Che	eck all that apply Initial return	Initial Return of a form	mer public charity	D	1 Foreign organizations, chec	ck here		
	Address change	Name change			2 Foreign organizations meet here and attach computation			
	Section 4947(a)(1) nonexempt charitable tru		rivate foundation	E	If private foundation status			
	non Boot H. column (c) Luc 1()	ounting method X Canal	ash	F	under section 507(b)(1)(A) If the foundation is in a 60	_		
► s		column (d) must be on	cash basıs)	Щ,	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)	(a) Revenue and expenses per books	(b) Net investme income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	(see instructions))	100 000				,,		
	1 Contributions, gifts, grants, etc. received (att sch)	100,000.			·			
	2 Ck Lifthe foundnis not req to att Sch B 3 Interest on savings and temporary	<u>.</u>	<u> </u>					
	cash investments	22.	2	22.		}		
	4 Dividends and interest from securities	26,567.	26,56	57.				
	5a Gross rents							
٠_ ا	b Net rental income or (loss)		L-6a Stmt					
R E	6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all	-5.						
V ·	assets on line 6a			 _				
E	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain			0.		ļ		
≌ü ∣	9 Income modifications					<u> </u>		
U SOE	10 a Gross sales less returns and allowances					,		
						,		
#	b Less Cost of goods sold				=			
S	c Gross profit/(loss) (att sch)							
	11 Other income (attach schedule)							
5	KINDER MORGAN PTRS.	-1,337.						
SCANNED MAY 3 U	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	125,247.	26,58	39.				
2	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages							
2	15 Pension plans, employee benefits	·		_	· · · · · · · · · · · · · · · · · · ·			
83.	16a Legal fees (attach schedule)				*			
Ø 6	b Accounting fees (attach sch)	2,522.						
ï	c Other prof fees (attach sch)		•	- "		CIVED		
0 1	17 Interest				RE	EIVED		
ΕŤΙ	18 Taxes (attach schedule)(see instrs) U.S.& FOREIGN TAX	238.	23	38.		Š		
R R A A T T	19 Depreciation (attach				VAW 403	7 7 2012 9		
	sch) and depletion 20 Occupancy	· · · · · · · · · · · · · · · · · · ·			4	8		
N V	21 Travel, conferences, and meetings	·						
A E	22 Printing and publications				00	DEN, UT		
N X	23 Other expenses (attach schedule)							
E N								
S E	24 Total operating and administrative expenses. Add lines 13 through 23	2,760.		38.				
s	25 Contributions, gifts, grants paid	30,000.		90.				
	26 Total expenses and disbursements. Add lines 24 and 25	32,760.	23	38.				
	27 Subtract line 26 from line 12:	32,700.						
	a Excess of revenue over expenses and disbursements	92,487.						
	b Net investment income (if negative, enter -0-)		26,35	51.				
	C Adjusted net income (if negative, enter 0)							
						E 000 DE (0011)		

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) Beginning of year End of year Part II | Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 2 Savings and temporary cash investments 328,947 233,503 233,503. 3 Accounts receivable Less allowance for doubtful accounts 4 Pledges receivable Less allowance for doubtful accounts ! 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach sch) ASSET Less allowance for doubtful accounts 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) L-10b Stmt 189,611 197,840. c Investments — corporate bonds (attach schedule) L-10c Stmt 377,953. 367,948 387,570 11 Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 12 Investments – mortgage loans 13 Investments — other (attach schedule) L-13 Stmt 8,325 11,128 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe ► 16 Total assets (to be completed by all filers — see the instructions Also, see page 1, item I) 706,900. 799,387 830,041 Accounts payable and accrued expenses 18 Grants payable AB 19 Deferred revenue 20 Loans from officers, directors, trustees, & other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ► 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. N F E U T N 24 Unrestricted UND 25 Temporarily restricted 26 Permanently restricted ASSETS **►** X Foundations that do not follow SFAS 117, check here В and complete lines 27 through 31. Ā 27 Capital stock, trust principal, or current funds 706,900. 799,387 A 28 Paid-in or capital surplus, or land, building, and equipment fund E 29 Retained earnings, accumulated income, endowment, or other funds 0 R S 30 Total net assets or fund balances (see instructions) 799,387 706,900. Total liabilities and net assets/fund balances (see instructions) 799,387 706,900 Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 706,900. Enter amount from Part I, line 27a 2 92,487. 3 Other increases not included in line 2 (itemize) 3 Add lines 1, 2, and 3 4 799,387. Decreases not included in line 2 (itemize) 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 799,387. 6 6

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32,760.

Part VI instructions

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

		(2011) GERALD P AND MEILIA S COX FAMILY FOUNDATION INC.		389826			age 4
Pàr	rt VI	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see	instructio	ns)		
1 a	Exempt o	perating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1					
	Date of ru	iling or determination letter (attach copy of letter if necessary — see instrs)					
t		ic foundations that meet the section 4940(e) requirements in Part V,	-	1			264.
		ere ► X 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, column (b)					
2	Tax uno	ler section 511 (domestic section 4947(a)(1) trusts and taxable					
_		ions only Other's enter -0-)		2			0.
3		es 1 and 2		3			264.
-		A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
6		sed on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Payments		5			264.
٥		nated tax pmts and 2010 overpayment credited to 2011					
		foreign organizations — tax withheld at source 6b		1			
	•	d with application for extension of time to file (Form 8868)		1			}
	-	withholding erroneously withheld 6d		1			
		edits and payments Add lines 6a through 6d		7			
8		ny penalty for underpayment of estimated tax. Check here		8			
9		If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9			264.
10	Overpayr	nent. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	>	10			0.
11	Enter the	amount of line 10 to be: Credited to 2012 estimated tax		11			
Par	t VII-A	Statements Regarding Activities					
1 a	During t	he tax year, did the foundation attempt to influence any national, state, or local legislation or did i	t			Yes	No
	particip	ate or intervene in any political campaign?			1 a		X
t	Did it sp (see the	pend more than \$100 during the year (either directly or indirectly) for political purposes einstructions for definition)?			1 b		x
	If the ai	nswer is 'Yes' to <i>1a</i> or <i>1b,</i> attach a detailed description of the activities and copies of any materials	s publ	ished			
		buted by the foundation in connection with the activities	•				
		foundation file Form 1120-POL for this year?			1c		X
C		e amount (if any) of tax on political expenditures (section 4955) imposed during the year the foundation \$\Bigsis \\$\$ (2) On foundation managers					
e		ie reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ed on)	1		
		on managers • \$					
2		foundation engaged in any activities that have not previously been reported to the IRS?			2		х
	If 'Yes,'	attach a detailed description of the activities					
3	Has the	foundation made any changes, not previously reported to the IRS, in its governing instrument, art	ıcles				
		poration, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	ï		3		X
		foundation have unrelated business gross income of \$1,000 or more during the year?			4 a		X
		has it filed a tax return on Form 990-T for this year? a liquidation, termination, dissolution, or substantial contraction during the year?			4b		
,		attach the statement required by General Instruction T			-		X
6		requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			İ		
•		nguage in the governing instrument, or					
	● Bv sta	ate legislation that effectively amends the governing instrument so that no mandatory directions the	at con	flict			
	with the	ne state law remain in the governing instrument?	20011	iii C	6	х	<u></u>
		undation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	X	<u> </u>
8 a		e states to which the foundation reports or with which it is registered (see instructions)	- _				
		North Carolina					
b	If the ans or design	wer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General ate) of each state as required by <i>General Instruction G² If 'No,' attach explanation</i>			8ь	х	
9	Is the fo	oundation claiming status as a private operating foundation within the meaning of section 4942(j)(3 onder year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' com) or 4	942(j)(5)			<u> </u>
					9_		X
10	Did any and add	persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the fresses	er nai		10	х	<u> </u>
BAA					orm 9 9	0-PF	(2011)

_	1999-FF (2011) GERALD P AND MEILIA'S COX FAMILY FOUNDATION INC.	26-	389826	<u> </u>	<u> </u>	age 5
Par	t VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified advisory privileges? If 'Yes,' attach statement (see instructions)	d person	had	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption website address N/A	applicatio	n?	13	Х	
14	The books are in care of ► Gerald P Cox Telephone	e no ►	(252)	443	-626	55
	Located at > 451 N. Winstead Ave. Rocky Mount NC ZIP + 4 >		04-072			
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 2011, did the foundation have an interest in or a signature or other aut bank, securities, or other financial account in a foreign country?	hority ove	er a	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the nar foreign country. ▶	ne of the				
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly)				,	ļ
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			}
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the				•	
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes	X No	, «*	ì	
t	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		_	1 b		
	Organizations relying on a current notice regarding disaster assistance check here	•		,		'
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?			1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$)					
ā	a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?	Yes	X No			
	If 'Yes,' list the years ▶ 20, 20, 20, 20	_				
Ł	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 all years listed, answer 'No' and attach statement — see instructions.)			2b		ļJ
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	ere		20		
•	20, 20, 20, 20					
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
t	of if 'Yes,' did it have excess business holdings in 2011 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					
4:	determine if the foundation had excess business holdings in 2011) Did the foundation invest during the year any amount in a manner that would jeopardize its			3b		
••	charitable purposes?			4a		х
t	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 2011?			4b		x
						(2011)

			COX FAMILY FOUN		26-38	98268		Page 6
Part VII-B Statements R				1 4/20 May Be Req	uired (continued)			
5a During the year did the for				(aastan 4045(-))2	□ v _{aa} ਓ	1		
(1) Carry on propaganda,		•	-		∐ Yes X	No		
(2) Influence the outcome on, directly or indirect	Yes X] No						
(3) Provide a grant to an	Yes X	No						
(4) Provide a grant to an in section 509(a)(1), (organıza 2), or (3	ation other th 3), or section	nan a charitable, etc, orç 4940(d)(2)? (see instru	ganization described ctions)	Yes X] No		
(5) Provide for any purpose educational purposes,	se other or for tl	than religiou he prevention	us, charitable, scientific, n of cruelty to children o	literary, or or animals?	Yes X] No		
b If any answer is 'Yes' to 5 described in Regulations s (see instructions)?	a(1)-(5), ection 5	, did any of t 53 4945 or in	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	-	5b	_
Organizations relying on a	current	t notice regai	rding disaster assistance	e check here	▶ [] [
c If the answer is 'Yes' to que tax because it maintained				mption from the	Yes] No		
If 'Yes,' attach the stateme	ent requ	ured by Regu	lations section 53 4945	-5(d)				
6a Did the foundation, during on a personal benefit cont	the yea ract?	r, receive an	y funds, directly or indir	ectly, to pay premiums	Yes X] No _		
b Did the foundation, during	•	r, pay premi	ums, directly or indirectl	y, on a personal benefit	t contract?		6Ь	Х
If 'Yes' to 6b, file Form 88						٦		
7a At any time during the tax b if 'Yes,' did the foundation] No	7 b	_
			irectors, Trustees,			Employ		
and Contracto	ors	J.1110013, D	mootors, mastees,	Touridation manag	gers, riigiliy r ala	Linploy	CC3,	
1 List all officers, directors,	trustee	s, foundatio	n managers and their c	ompensation (see instr	uctions).			
(a) Name and ad			(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		ense a r allowa	iccount, ances
Gerald P Cox								
144 Steeplechase Rd	•		President					
Rocky Mount	NC	27804	1.00	0.	0.			0.
Meilia S Cox 144 Steeplechase Rd	<u>-</u>		Vice President					
Rocky Mount	NC	27804	1.00	0.	0.	<u> </u>		0.
Kevin G Cox		. – – – – -						
109 Whitby Ct.			Director					
Rocky Mount	NC	27804	1.00	0.	0.			0.
See Information about Officers, Di	rectors,	Trustees, Etc	-					
				0.	٥.			0.
2 Compensation of five hig	hest-pa	id employee	s (other than those incl	uded on line 1— see ins	structions). If none, ent	er 'NONE	<u>:.'</u>	
(a) Name and address of e paid more than \$5	each em 50,000	nployee	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred		ense a r allowa	ances
NONE					compensation			
0								
0								
0								
0								
Total number of other employee	s paid c	over \$50 000	<u> </u>	L				None
DAA	- 55.00							F (0011)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pai and Contractors (continued)	d Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	▶ None
	NOME
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	_
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	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
	_]
2	
All other program-related investments. See instructions	
3	
Total Add lines 1 through 2	>
Total. Add lines 1 through 3 BAA	Form 990-PF (2011)
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form 990-PF (2011) GERALD P AND MEILIA S COX FAMILY FOUNDATION INC. 26	-38982	60 Dago 0
Part X Minimum Investment Return (All domestic foundations must complete this part. For		
see instructions.)	,, o.g., 10.	aridations,
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	1 a	498,040.
b Average of monthly cash balances	1b	224,252.
c Fair market value of all other assets (see instructions)	1 c	5,936.
d Total (add lines 1a, b, and c)	1 d	728,228.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	1 1	_
(attach detailed explanation)]	
2 Acquisition indebtedness applicable to line 1 assets	2	<u></u>
3 Subtract line 2 from line 1d	3	728,228.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3	l i	
(for greater amount, see instructions)	4	10,923.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	717,305.
6 Minimum investment return. Enter 5% of line 5	6	35,865.
Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	ating fou	indations
and certain foreign organizations check here ► and do not complete this part.)	· · · · · · · · · · · · · · · · · · ·	
1 Minimum investment return from Part X, line 6	1	35,865.
2a Tax on investment income for 2011 from Part VI, line 52a264.		
b Income tax for 2011 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	264.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	35,601.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	35,601.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	35,601.
Patt-XII Qualifying Distributions (see instructions)		
 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc – total from Part I, column (d), line 26 		
	1 a	32,760.
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	
 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 	3 a	
a Suitability test (bilot Ins approval required)		

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

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)

BAA

b Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

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32,760.

32,496.

264.

3 b

4

5

6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				35,601.
2 Undistributed income, if any, as of the end of 2011				35,601.
a Enter amount for 2010 only			28,849.	
b Total for prior years 20, 20, 20				
3 Excess distributions carryover, if any, to 2011				
a From 2006 0 .				
b From 2007 0 .	ļ			
c From 2008 0.				
d From 2009 0.				
e From 2010 0.				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from Part XII, line 4 ► \$32,760.				
a Applied to 2010, but not more than line 2a			28,849.	
			20,043.	
b Applied to undistributed income of prior years (Election required – see instructions)				
 Treated as distributions out of corpus (Election required — see instructions) 				
d Applied to 2011 distributable amount				3,911.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011 (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	0.			
	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.	1	
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 instructions		0.		
e Undistributed income for 2010 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undertributed income for 2011. Subtract lines				
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012.				31,690.
7 Amounts treated as distributions out of				31,090.
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2007 0.				
b Excess from 2008 0.				
c Excess from 2009 0.				İ
d Excess from 2010 0.				
e Excess from 2011 0.				

Part XIV Private Operating Foundat				9)	N/A
1a If the foundation has received a ruling or de is effective for 2011, enter the date of the r	etermination letter t				N/A
b Check box to indicate whether the foundation	on is a private oper	atıng foundatıon des	cribed in section	4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
b 85% of line 2a					
 Qualifying distributions from Part XII, line 4 for each year listed 					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter				;	
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			,		
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	·				
c 'Support' alternative test — enter:					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income		•			
Supplementary Information assets at any time during th	(Complete this e year — see in	part only if the ostructions.)	organization ha 	d \$5,000 or moi	re in
Information Regarding Foundation Manage a List any managers of the foundation who had close of any tax year (but only if they have Gerald P and Meilia S Cox	ave contributed mor	e than 2% of the tot nan \$5,000) (See se	al contributions reco ection 507(d)(2))	eived by the foundat	ion before the
b List any managers of the foundation who or a partnership or other entity) of which the fo	oundation has a 10	the stock of a corpo % or greater interest	ration (or an equally t	/ large portion of the	e ownership of
NONE 2 Information Regarding Contribution, Grant	Cit Loon Calcala	wahin sta Dirawii		·	
Check here ► 🗓 If the foundation only m requests for funds. If the foundation makes	akes contributions	to preselected charit	able organizations	and does not accept zations under other	unsolicited conditions,
a The name, address, and telephone number	of the person to wh	nom applications sho	ould be addressed		
b The form in which applications should be so	ubmitted and inform	nation and materials	they should include		
c Any submission deadlines					
d Any restrictions or limitations on awards, se	uch as by geograph	ical areas, charitable	e fields, kinds of ins	stitutions, or other fa	ctors

Part Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to any foundation manager or Purpose of grant or contribution status of Amount recipient Name and address (home or business) substantial contributor a Paid during the year Nash Community College Foundation, Inc. Rocky Mount NC 27804 501(c)(3) Educational Grant 18,000. Haywood Community College Foundation, Inc. Clyde NC 28721 501(c)(3) Educational Grant 4,000. Western Piedmont Foundation, Inc. Morganton NC 28655 501(c)(3) Educational Grant 4,000. McDowell Technical Community College Foundation, Inc. Marion NC 28752 501(c)(3) Educational Grant 4,000. **Total** 3 a 30,000. **b** Approved for future payment 3 b

Total

Part XVI-A A	nalysis of Income-P	Producing Activities
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Enter o	ross amounts unless otherwise indicated	Unrolate	ed business income	Fueludes	t by poston E12 E12 or E14	
Linter g	ross amounts unless otherwise indicated	(a)	(b)		1 by section 512, 513, or 514	(e)
		Business	Amount	(c) Exclu-	(d) Amount	Related or exempt function income
1 D	rogram can use saves	code		sion		(See instructions)
	rogram service revenue			code		
		 		 		
ь_				1		
_			· · · · · · · · · · · · · · · · · · ·	ļ		
d_	·			_		
e						· · · · · · · · · · · · · · · · · · ·
f _						
g Fe	ees and contracts from government agencies			_		
2 M	embership dues and assessments				•	
3 Int	erest on savings and temporary cash investments			14	22.	
	vidends and interest from securities			14	26,567.	
5 N	et rental income or (loss) from real estate		 	1		
	ebt-financed property			 		
	ot debt-financed property			 		
	et rental income or (loss) from personal property			+		
	ther investment income			+		
				+		·
	in or (loss) from sales of assets other than inventory	 				
	et income or (loss) from special events			┼		
	ross profit or (loss) from sales of inventory					·
11 0	ther revenue					
a						
b_						
e						
€						
	ubtotal Add columns (b), (d), and (e)	i			26,589.	
12 S	ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e)					
12 So 13 To (See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation		shmout of Evenue	at Burn	13	
12 So 13 To (See wo	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the	Accompli			oses	26,589.
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Form 990-PF (2011) GERALD P AND MEILIA S COX FAMILY FOUNDATION INC. 26-3898268 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

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a	ny tran	s, other assets, o saction or sharing	i services giv i arrangemen	t, show in	reporting t column (d) the value	of the go	undati oods,	other assets	iess t s, or se	nan tair ervices r	rnarket v <u>received</u>	aiue in		
(a) Line		(b) Amount involved		ame of nonch					Description of				sharing arrar	gement	s
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d ₁	escribe	undation directly of d in section 501 (complete the follo	;) of the Code	(other tha	th, or relation	ted to, one 501(c)(3))	or more or in sec	tax-e:	xempt orgar 527?	nizatioi	ns		Yes	x	No
	(a	Name of organiz	ation		(b) Typ	e of organi	ızatıon			(c) [Descripti	on of rela	ationship		
													·		
															
															
Sign Here	correct,	enalties of pertury de and complete declarat	tion of preparer (o	examined this other than taxi	return, inclu payer) is bas	ding accompa ed on all infor	anying sched rmation of w	thich pre	Sparer has any l	nd to the	e best of m	y knowledge	May the this retur preparer (see inst	RS disc n with the shown to ructions)	uss ne pelow
	Sana	ture of officer or trustee			T-2	Date		To	itle		r		X	Yes	No
		Print/Type preparer's	/		Preparer's	-			Date		Check	lf	PTIN	// ^	~// /
Paid		K. R. VANN				VANN			05/10/	$\overline{}$	self-em	-7	L	160	76 <u>Y</u>
Prepa		Firm's name				& CRA			P	Fii	m's EIN	56-	10260	37	
Use C	nly	Firm's address	PO BOX		20 N.	Winste						10==	\ 445		
		<u> </u>	Rocky M	ount			NC_	27	804	Pt	one no	(252			
BAA													Form 9 9	U-PF	(2011)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2011

Name of the organization		Employer identification number
GERALD P AND MEILIA S	COX FAMILY FOUNDATION INC.	26-3898268
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not tr 527 political organization	
Form 990-PF	x 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate 501(c)(3) taxable private foundation	ed as a private foundation
	by the General Rule or a Special Rule or (10) organization can check boxes for both the General Ru	ule and a Special Rule See instructions
General Rule		
For an organization filing Form 99 contributor (Complete Parts I and	90, 990-EZ, or 990-PF that received, during the year, \$5,000d II)	or more (in money or property) from any one
Special Rules		
\sim 509(a)(1) and 170(b)(1)(A)(v _i), ar	ion filing Form 990 or 990-EZ that met the 33-1/3% support ind received from any one contributor, during the year, a con 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete	stribution of the greater of (1) \$5,000 or
total contributions of more than \$	 organization filing Form 990 or 990-EZ that received from 1,000 for use exclusively for religious, charitable, scientific, en or animals Complete Parts I, II, and III 	n any one contributor, during the year, literary, or educational purposes, or
contributions for use exclusively f	0) organization filing Form 990 or 990-EZ that received from for religious, charitable, etc, purposes, but these contribution the total contributions that were received during the year for the parts unless the General Rule applies to this organization	ns did not total to more than \$1,000 r an <i>exclusively</i> religious, charitable, etc.
religious, charitable, etc, contribu	tions of \$5,000 or more during the year	► \$
990-PF) but it must answer 'No' on P	covered by the General Rule and/or the Special Rules does related IV, line 2, of its Form 990, or check the box on line H of ot meet the filing requirements of Schedule B (Form 990, 99).	its Form 990-EZ or on Part I, line 2, of its
BAA For Paperwork Reduction Act 990EZ, or 990-PF.	Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

		•	
Schedule	B (Form 990, 990-EZ, or 990-PF) (2011)	Page _	1 of 1 of Part 1
Name of org	anization	Employe	r identification number
GERALI	P AND MEILIA S COX FAMILY FOUNDATION INC.	26-38	898268
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional sp	ace is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Gerald_and_Meilia_Cox		Person X Payroll
	144 Steeplechase Road	\$100,000.	Noncash 📙
	Rocky Mount NC 27804		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

(b)

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

(a)

Number

(a) Number Person Payroll Noncash

Person Payroll Noncash

Person Payroll Noncash

(c) Total contributions

(c)

Total contributions

(Complete Part II if there is a noncash contribution)

(d) Type of contribution

(Complete Part II if there is a noncash contribution)

(d)

Type of contribution

(Complete Part II if there is a noncash contribution)

Form 990-PF Part I, Line 6a

Net Gain or Loss From Sale of Assets

2011

Name		Employer Identification Number
GERALD P AND MEILIA S	COX FAMILY FOUNDATION INC.	26-3898268
Asset Information:		
Description of Property	SEE PART IV	
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method.	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		·
Date Acquired:	How Acquired	
Date Sold	Name of Buyer:	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense:	Valuation Method	-
Total Gain (Loss)	Accumulation Depreciation	· · · · · · · · · · · · · · · · · · ·
Description of Property	/ Accountaidation Depreciation	
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	***************************************
Sales Expense	Valuation Method:	
Total Gain (Loss)	Accumulation Depreciation	****
Description of Property		· · · · · · · · · · · · · · · · · · ·
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired	How Acquired	
Date Sold	Name of Buyer	· · · · · · · · · · · · · · · · · · ·
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation	······································
Description of Property		
Date Acquired·	How Acquired	
Date Sold	Name of Buyer	****
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense.	Valuation Method:	
Total Gain (Loss)	Accumulation Depreciation	
Description of Property		
Date Acquired	How Acquired.	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gain (Loss)	Accumulation Depreciation.	
Description of Property	· ·	
Date Acquired	How Acquired	
Date Sold	Name of Buyer	
Sales Price	Cost or other basis (do not reduce by depreciation)	
Sales Expense	Valuation Method	
Total Gaın (Loss)	Accumulation Depreciation	

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(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
Person X Business Heather J. Cox-Nicholson 1007 Cantebury Road Raleigh NC 27607 Person X Business	Secretary 1.00	0.	0.	0.
Gina Cox Holland 1013 Royal Ridge Road Rocky Mount NC 27804 Person X Business Crystal Cox Peebles	Chairperson 1.00	0.	0.	0.
Wilmington NC 28409 Person X Business	Treasurer 1.00	0.	0.	0.

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Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of Year	
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value
UNIT TRUST-FT BLD AMER BDS #11	50,161.	52,584.
UNIT TRUST-FT BLD AMER BDS SER 34	49,996.	53,402.
ALTRIA CORP	9,939.	10,704.
AT&T	9,931.	9,344.
DUKE ENERGY	9,938.	11,308.
FIRST ENERGY CORP	9,899.	9,967.
HEALTH CARE REIT	9,924.	10,361.
REALTY INCOME CORP	9,938.	9,649.
ROYAL DUTCH SHELL	10,043.	9,845.
VERIZON	9,926.	10,431.
WESTAR ENERGY	9,916.	10,245.

Total <u>189,611.</u> <u>197,840.</u>

26-3898268

Form 990-PF, Page 2, Part II, Line 10c

L- 10c Stmt

	End of Year		
Line 10c - Investments - Corporate Bonds:	Book Value	Fair Market Value	
CHICAGO IL	49,383.	50,936.	
COMMERCE CHARTER	50,000.	53,477.	
CONNECTICUT STATE HEALTH & ED	49,930.	52,325.	
EL MONTE CA SCH DIST	19,980.	22,146.	
IRVING TX TAX & HOTEL	49,010.	53,591.	
NC MED CARE REV	30,000.	31,293.	
NC MED CARE REV	30,000.	31,027.	
NC MED CARE REV	50,000.	52,032.	
VIRGINIA ST HSG DEV	39,645.	40,743.	
Total	367,948.	387,570.	

Form 990-PF, Page 2, Part II, Line 13

L-13 Stmt

	End of Year		
Line 13 - Investments - Other:	Book Value	Fair Market Value	
KINDER MORGAN ENERGY PARTNERS	8,325.	11,128.	
Total	8,325.	11,128.	