

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

2011

Fo	r caler	ndar year 2011 or tax year beginning	, 201	1, and	ending		, 20
Na	me of fo	oundation	-		A Employer	identification number	г
		Algernon Dunn Jr. & Pattie McCay Dunn Family Foundati	on			56-1711109	
Nu	mber an	d street (or P O. box number if mail is not delivered to street address)	Roor	n/surte	B Telephone	number (see instruction	ns)
	Box 7	<u> </u>				252-443-410	<u> </u>
Crt	y or tow	n, state, and ZIP code			C If exemp	tion application is pend	ling, check here ▶
Ro	cky Mo	ount, NC 27804					
G	Check		n of a former public	charity.	D 1. Foreig	n organizations, check	here ▶ _
		☐ Final return ☐ Amended			2. Foreig	n organizations meetin	a the 85% test.
		Address change Name cha				here and attach comp	
		type of organization: 🔽 Section 501(c)(3) exempt p			E If private	foundation status was	terminated under
		on 4947(a)(1) nonexempt charitable trust Other tax			section 5	i07(b)(1)(A), check here	. ▶□
ı		narket value of all assets at J Accounting method	í: 🗹 Cash 📙 A	ccrual		ndation is in a 60-mon	
		f year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), chec	k here
	line 16		e on cash basis.)	, <u></u>		<u>,</u>	
Ľ	art I		(a) Revenue and	(b) Net	investment	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books		come	income	purposes
				X2005	M. T. C. 3		(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	40922			, , , , , , , , , , , , , , , , , , ,	· · ·
	2	Check ► ☐ if the foundation is not required to attach Sch. B	,	1			
	3	Interest on savings and temporary cash investments		ļ			* *.
	4	Dividends and interest from securities					
	5a	Gross rents	· · · · · · · · · · · · · · · · · · ·		lasai. Ryj	,	ψ ×
ø.	b	Net rental income or (loss)	3	<u> </u>	7,777,700,7	<u>.</u>	~
ž	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a		<u> </u>	 	<i>§</i>	
Revenue	b 7	Capital gain net income (from Part IV, line 2)	* 5 T.	-		*,	
	8	Net short-term capital gain	, ,				
_	9	Income modifications		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			7,4 , 3,
	10a				54 996 05		* * *
	ь	Gross sales less returns and allowances Less: Cost of goods sold			· marie	·	· · · · · · · · · · · · · · · · · · ·
	c	Gross profittor (loss) (attach schedule)			-		. 45 3 Gas
	11	Other income (attach schedule)) 12		38838			
	12	Total. Addines 1 through 11	40922		0	0	
	13	Compensation of periods directors trustees, etc.					
Šė	14	Other employee salaties and wages					
Ë	15	Pension plans, employee benefits					
Ă	16a	Legal fees (attach schedule)					
_	b	Accounting fees (attach schedule)		<u> </u>			
Ĕ	С	Other professional fees (attach schedule)					
dministrative Expenses	17	Interest					
ist	18	Taxes (attach schedule) (see instructions)					
Ē	19	Depreciation (attach schedule) and depletion					
Þ	20	Occupancy					
Administrative	21	Travel, conferences, and meetings				·	
an	22	Printing and publications	121	ļ	0	0	121
Ē	23	Other expenses (attach schedule)				 	
atiı	24	Total operating and administrative expenses.					
ē		Add lines 13 through 23	121	<u> </u>	0	0	121
Ö	25	Contributions, gifts, grants paid	40051	ļ			40051
_	26	Total expenses and disbursements. Add lines 24 and 25	40172	ļ	0	. 0	40172
	27	Subtract line 26 from line 12:		1			
	а	Excess of revenue over expenses and disbursements	750	ļ			
	b	Net investment income (if negative, enter -0-) .			0		
	С	Adjusted net income (if negative, enter -0-)	L	I		0	

SCANNED WAR 1 3 2017.

P:	art II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year		f year
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	178	928	928
	2	Savings and temporary cash investments			-
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4				
		Pledges receivable ►			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
ম	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Si	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 ▶			
	''	Least controlleted depresention (attach cohodule)			***
	12	Less: accumulated depreciation (attach schedule)			
	13	Investments - mortgage loans			
		investments – other (attach schedule)			
	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 l)	178	928	928
	17	Accounts payable and accrued expenses			» }
တ္တ	18	Grants payable			
Liabilities	19	Deferred revenue			
ρi	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)			
	23		0	0	
S		Foundations that follow SFAS 117, check here ▶ □			
ë		and complete lines 24 through 26 and lines 30 and 31.			,
ă	24	Unrestricted			
Balances	25	Temporarily restricted			4 :
B	26	Permanently restricted			* 1
Fü		Foundations that do not follow SFAS 117, check here ▶ ☑			
ᄄ		and complete lines 27 through 31.		1	
Net Assets or	27	Capital stock, trust principal, or current funds		ļ	
ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	178	928	
۲	30	Total net assets or fund balances (see instructions)	178	928	
<u>e</u>	31	Total liabilities and net assets/fund balances (see			
~		instructions)	178	928	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
	_	net assets or fund balances at beginning of year-Part II, colur	nn (a), line 30 (must	agree with	
		of-year figure reported on prior year's return)			178
2		r amount from Part I, line 27a			750
3	Othe	er increases not included in line 2 (itemize)		3	
	Add	lines 1, 2, and 3		4	928
_	_				
6	Total	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b). lin	e 30 6	928

Part	(a) List and describe the	Losses for Tax on Investme kind(s) of property sold (e.g., real estate, e; or common stock, 200 shs MLC Co)	ant income	(b) How acquired P—Purchase D—Donation	(c) Date ad (mo., da		(d) Date sold (mo., day, yr)
1a						. –	
b							
c				ļ			
<u>d</u>				l			
<u>е</u>							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale			n or (loss) n minus (g)
<u>a</u> b	-						
				-			
d							
	Complete only for assets show	ring gain in column (h) and owned b	the foundation	n on 12/31/69	W.C	Saine (Col	(b) goin minus
	(i) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ss of col (i)	col (k), but not	(h) gain minus less than -0-) or om col (h))
a							
b							
d					-		-
е							
2	Capital gain net income or (Inet capital local ("	lso enter in Pa enter -0- in Pa	5 1	2		
3		or (loss) as defined in sections in line 8, column (c) (see instruct					
	Part I, line 8	· · · · · · · · · · · ·			3		0
Part	V Qualification Unde	r Section 4940(e) for Reduc	ed Tax on I	Net Investment	Income		-
Was t		this part blank. ection 4942 tax on the distributa jualify under section 4940(e). Do			ase period	1?	☐ Yes ☐ No
1	Enter the appropriate amou	int in each column for each year	; see the instr	uctions before ma	king any e	entries.	
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions		(c) of noncharitable-use as	Ţ	Disti	(d) nbution ratio ivided by col (c))
	2010	37	845		812	1	3.45839
	2009	26	289		424	6	2.00236
	2008	18	655	•	1024	1	8.21777
	2007	43	394	4	149	1	0.45891
	2006	5	987		482	1	2.42116
 2 3	Total of line 1, column (d) Average distribution ratio for	or the 5-year base period—divid			. 2		116.55859
		ation has been in existence if les					23.31172
4	Enter the net value of nonch	haritable-use assets for 2011 fro	m Part X, line	5	. 4	-	2738
5	Multiply line 4 by line 3 .				. 5		638
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6		0
7	Add lines 5 and 6				. 7		638
8	Enter qualifying distribution	s from Part XII, line 4			. 8		40172

Part		กรน	uctio	ns			
1a	a Exempt operating foundations described in section 4940(d)(2), check here ► □ and enter "N/A" on line 1. Date of ruling or determination letter: {attach copy of letter if necessary—see instructions}						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0	,			
-	here ► ✓ and enter 1% of Part I, line 27b			1			
С	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-)		0	4			
3	Add lines 1 and 2		0	+ -			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	+			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	+			
6 a	Credits/Payments: 2011 estimated tax payments and 2010 overpayment credited to 2011 6a	.′					
b	Exempt foreign organizations—tax withheld at source 6b	,					
C	Tax paid with application for extension of time to file (Form 8868) . 6c			l			
d	Backup withholding erroneously withheld 6d						
7	Total credits and payments. Add lines 6a through 6d		0				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		0	+			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0	+			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10 Enter the amount of line 10 to be: Credited to 2012 estimated tax > Refunded > 11			 			
	VII-A Statements Regarding Activities						
1a			Yes	No			
	participate or intervene in any political campaign?	1a		1			
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)?	1b		1			
	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.			ž :			
С	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	1			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		1			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3	<u></u>	1			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓			
•	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
6	 By language in the governing instrument, or 						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			A.			
	conflict with the state law remain in the governing instrument?	6	1				
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	7	1				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶						
L	North Carolina If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			123			
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	0-	-				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	8b	-	-			
9	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"		 	\vdash			
	complete Part XIV	9		1			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses	10	1				

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		1				
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)							
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► NA	13	1					
14		2-443	4101					
		7804-7	7397					
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		•	▶ [
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority	<u>'</u> .	Yes	No				
	over a bank, securities, or other financial account in a foreign country?	16	<u> </u>	✓				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			1				
	the foreign country ▶							
Par	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.	<u> </u>	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? Yes Vo. (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	w.						
	disqualified person?							
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No							
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No (5) Transfer any income or assets to a disqualified person (or make any of either available for	[1	1.22				
	the benefit or use of a disqualified person)?		`	١,				
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			.23				
	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.)	*		.i. 🋊				
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 instructions)?	1b						
	Organizations relying on a current notice regarding disaster assistance check here ▶□			1				
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	<i>></i>	,					
	were not corrected before the first day of the tax year beginning in 2011?	1c		1				
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)):	*						
а	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?		٧					
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		4	> 1				
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		٧.					
	all years listed, answer "No" and attach statement—see instructions.)	2b						
С	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			-				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise							
	at any time during the year?			£2%				
b	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 determine if the foundation had excess business holdings in 2011.)	3b		, ,				
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1				
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70						
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b						

D	1
rage	٠

Part	VII-B Statements Regarding Activities	s for V	Vhich Form	4720	May Be F	lequire	ed (contii	nued)		
5a	During the year did the foundation pay or incur a	-								
	(1) Carry on propaganda, or otherwise attempt t(2) Influence the outcome of any specific public						∐ Yes	✓ No		
	directly or indirectly, any voter registration dr					-	, ☐ Yes	 ✓ No		i
	(3) Provide a grant to an individual for travel, stu						☐ Yes	✓ No		
	(4) Provide a grant to an organization other than section 509(a)(1), (2), or (3), or section 4940(d				ation desc		ı □Yes	✓ No	:	ļ
	(5) Provide for any purpose other than religious,							V NO		
	purposes, or for the prevention of cruelty to o							✓ No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the Regulations section 53.4945 or in a current notice							ibed in		
	Organizations relying on a current notice regardi	_	-		-	uctions			5b	
С	If the answer is "Yes" to question 5a(4), does t	he fou	ndation claim	n exem	ption from	the tax		_		
	because it maintained expenditure responsibility						☐ Yes	☐ No		
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any					emiums	1			
				-			_ ☐ Yes	☑ No		
b	Did the foundation, during the year, pay premiun	ns, dıre	ctly or indire	ctly, on	a personal	benefi	t contract	?.	6b	✓
7a	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a	a nartv	to a prohibite	d tav ch	elter transa	rtion?	□Yes	☑ No		
b	If "Yes," did the foundation receive any proceeds								7b	
Part	VIII Information About Officers, Direct	tors, 1	rustees, F	ounda	tion Man	agers,	Highly F	Paid E	mploye	es,
1	and Contractors List all officers, directors, trustees, foundation	n mana	agers and th	eir con	npensation	ı (see i	nstruction	ns)		
<u> </u>	· · · · · · · · · · · · · · · · · · ·	(b) Title	e, and average	(c) Co	mpensation	(d)	Contributions	s to	(e) Expen	se account,
	(a) Name and address	devot	rs per week ed to position	(IT not	paid, enter -0-)		oyee benefit erred compe			lowances
Stater	nent 2									
										
2	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	se incl	uded on li	ne 1—	see instr	uction	s). If no	ne, enter
	NORE.		(h) Title and a		Γ		(d) Contribu	itions to		
	(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation	employee plans and c	leferred		se account, lowances
None							compens	ation		
None										
Total	number of other employees paid over \$50,000 .		<u> </u>		<u> </u>		<u> </u>	. ▶	No	one
					-				orm 990	- PF (2011)

Part	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ıployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(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
		Notice
Part	IX-A Summary of Direct Charitable Activities	
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations 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)	
Des	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		1
_		
_		
2 .		
-		
	ther program-related investments. See instructions	
3 _		
-		
Total	Add lines 1 through 3	
		000 DE (0044

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign founda	itions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	T.Z.	
а	Average monthly fair market value of securities	1a	O
b	Average of monthly cash balances	1b	2780
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	2780
е	Reduction claimed for blockage or other factors reported on lines 1a and	1467E	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2780
4	Cash deemed held for charitable activities. Enter 1 $\frac{1}{2}$ % of line 3 (for greater amount, see		
	instructions)	4	42
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2738
6	Minimum investment return. Enter 5% of line 5	6	137
Part	XI Distributable Amount (see 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	137
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	137
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	137
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,		
	line 1	7	137
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	COE:	-
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	40172
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	0
3	Amounts set aside for specific charitable projects that satisfy the:	1	-
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	40172
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 instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	40172
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.		he foundation

² art	VIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years pnor to 2010	(c) 2010	(d) 2011
_	line 7				137
2	Undistributed income, if any, as of the end of 2011:				
a	Enter amount for 2010 only		0		
b	Total for prior years: 20,20,20		U		
3	Excess distributions carryover, if any, to 2011:				
a	From 2006				
b					
C			•		
d	116111 2000				
e	From 2010	131726			
f 4	Qualifying distributions for 2011 from Part XII, line 4: ► \$ 40172	131726			
а	Applied to 2010, but not more than line 2a .			0	
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 2011 distributable amount				137
e	Remaining amount distributed out of corpus	40035		4	¥
5	Excess distributions carryover applied to 2011	0			0
	(If an amount appears in column (d), the same				4
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:	, , · · · · §	*	** \ \	•
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	171761	,		
b	Prior years' undistributed income. Subtract line 4b from line 2b	***	0	,	X
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	, ,			wj.
	amount—see instructions		0		
е	Undistributed income for 2010. Subtract line				*.
	4a from line 2a. Taxable amount-see				**
	instructions			0	<u></u>
f	Undistributed income for 2011. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2012				_
_					0
7	Amounts treated as distributions out of corpus		}		
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) .				
8	Excess distributions carryover from 2006 not	0			
0	applied on line 5 or line 7 (see instructions).	5003			
9	Excess distributions carryover to 2012.	5963			
3	Subtract lines 7 and 8 from line 6a	165798			
40	Analysis of line 9:	165/98			
10	,				
a	Excess from 2007		1		
b	Excess from 2009 26268		1		
4	Excess from 2010				
d	Excess from 2010		1		
e	<u>40033</u>	l i			

See Attachment 2

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective fo	r 2011, enter the da	te of the ruling .	•	N/	A
b	Check box to indicate whether the four	ndation is a private	operating foundat	tion described in se	ection 4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) 10tai
	each year listed					
b	85% of line 2a				<u>-</u>	
С	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					
е	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:					
а	"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					
С	"Support" alternative test-enter:				1	
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)			_		
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part				he foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-		<u>is.)</u>			
1	Information Regarding Foundation	_	4 d	/ -646- 4-4-14-		h 41
а	List any managers of the foundation of before the close of any tax year (but of					by the foundation
	before the close of any tax year tout o	illy il triey have co	intributed friore tri	an \$5,000). (See Se	sction 507 (a)(2).)	
None b	List any managers of the foundation	who own 1004 or	more of the star	k of a corporation	/or on oqually lar	an portion of the
U	ownership of a partnership or other er			·		ge portion or the
None	ownership or a parmerorup or owner or	,		. c / c c / g / c a · c · m · c		
2	Information Regarding Contribution	Grant Gift Loa	n Scholarshin e	to Programs		· - · · - · · · · · · · · · · · · · · ·
_	Check here ▶ ☐ if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the f	•	•		•	•
	other conditions, complete items 2a, l		,	,	`	
а	The name, address, and telephone nu	mber of the perso	n to whom applic	ations should be a	ddressed:	
Board	of Directors, The Leon Algernon Dunn, J					27804
b	The form in which applications should	be submitted and	I information and	materials they sho	uld include:	
See A	ttachment 1			-		
c	Any submission deadlines:					
	eations may be submitted anytime prior to	o April 15 of each ye	ear. Determination	of recipients will be	e made prior to Jun	e 1 annually.
	Any restrictions or limitations on av					
	factors:	•	· = •			

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Amount Purpose of grant or contribution Purpose of grant or contribution Amount Purpose of grant or contribution Purpose of grant	3 Grants and Contributions Paid During t	he Year or Approv	ed for Futu	ure Payment		
a Paid during the year See Statement 3 Total	Recipient	If recipient is an individual,	Foundation			
a Paid during the year See Statement 3 Total	Name and address (home or husiness)	any foundation manager	status of recipient			Amount
See Statement 3	a Paid during the year	or substantial contributor	1		+	
Total						
Total						
Total					İ	
Total						
Total						
Total					İ	
Total					ĺ	
Total						
Total					ļ	
Total						
Total						
Total						
Total					}	
Total						
Total						
Total					İ	
Total						
Total						
Total						
Total						
Total						
Total						
Total						
Total						
Total > 3a b Approved for future payment						
b Approved for future payment						
b Approved for future payment	Total			<u> </u>	3a	
	b Approved for future payment					
					ĺ	
					1	
					Ì	
Total	Total				3b	No

Fa	runv	Analysis of income-Producing Ac					
Ente	er gros	ss amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exemp function income (See instructions.)
1	Prog	ram service revenue:					(Occ mandenons.)
	а						
	b]						
	C						
	d _				<u> </u>		
	е						
	f _						
	g F	Fees and contracts from government agencies					
2	Men	nbership dues and assessments					
3	Inter	est on savings and temporary cash investments					
4		dends and interest from securities					
5		rental income or (loss) from real estate:					
		Debt-financed property					
		Not debt-financed property					ļ
6		rental income or (loss) from personal property					
7		er investment income					ļ
8		or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					
10	Gros	ss profit or (loss) from sales of inventory					
11	Othe	er revenue: a					
	b _						
	C _						
	d _						
	е				Carrier + 1800 No. Carrier		
		total. Add columns (b), (d), and (e)			13.5		
		al. Add line 12, columns (b), (d), and (e)				13	
		sheet in line 13 instructions to verify calculation		ant of Evenn	t Dumasas		
	rt XV e No.						
	▼	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is repo poses (other thai	rtea in column 1 by providing fun	(e) of Part XVI ds for such purp	oses). (See instru	mportantly to the ctions.)
		<u> </u>	· · ·				
					.		
						· · ·	
				-			
						<u>.</u>	
							
		 				•	
					<u> </u>		
		 					
				•			
				-			
	-						

Part	XVII		n Regarding Tra	nsfers To and T	ransactio	ns and F	Relationsh	ips With	Noncha	aritable		90 10
1	in se orga	he organization oction 501(c) of the nizations?	directly or indirectly ne Code (other than	section 501(c)(3) c	organizatior	ns) or in se	ection 527,				Yes	No
а			porting foundation t		-					1a(1)		√
b		other assets . r transactions:								1a(2)		✓
_	(1) S	ales of assets to	a noncharitable ex	-						1b(1)		√
			ets from a nonchari , equipment, or oth							1b(2) 1b(3)		<u>√</u>
			rrangements							1b(4)	- †	`
	(5) L	oans or Ioan gua	rantees							1b(5)		✓
			ervices or members							1b(6)		✓
C		-	quipment, mailing I			-				1c		<u> </u>
d	value	of the goods, o	of the above is "Ye ther assets, or serv on or sharing arrang	rices given by the r	reporting fo	undation.	If the found	dation rece	ived les	s than f	air ma	arket
(a) Line		(b) Amount involved		chantable exempt organi			ption of transfe					
	_											
			-									
	$-\dagger$										_	
									-			
	-					-		<u> </u>				
	-					.						
	-+										_	—
							•					
										_		
								_				
	desc	ribed in section 5	ectly or indirectly a 501(c) of the Code (other than section						Yes	V	10
b	If "Ye		following schedule		 :							
		(a) Name of organ	ization	(b) Type of	organization			(c) Description	n of relatio	nship		
					-	-						—
												_
Sign			declare that I have examin aration of preparer (other the						<u> </u>			
Here		(),,,,,,)	1 212 21			•	-		RS discus: preparer si		
nere		nature of officer or trus	stee	Date	Title	ui ei				ictions)?		
Paid	1	Print/Type preparer		Preparer's signature			Date	Chec	k 🗌 if	PTIN		=
Prep	arer								mployed	_		
Use (Firm's name						Firm's EIN	<u> </u>			
		Firm's address >						Phone no				

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Employer identification number

56-1711109 The Leon Algernon Dunn, Jr. & Pattie McCay Dunn Family Foundation Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization Form 990-PF √ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific. literary. or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Name of organization

The Leon Algernon Dunn, Jr. & Pattie McCay Dunn Family Foundation

Employer identification number 56-1711109

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	Guardian Holdings, Inc. P O Box 7397 Rocky Mount, NC 27804	¢ 15901.00	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2	Pattie M. Dunn P O Box 7397 Rocky Mount, NC 27804		Person Payroll Noncash (Complete Part II if there is a noncash contribution.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		 \$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	Person				

The Leon Algernon Dunn, Jr. and Pattie McCay Dunn Family Foundation P O Box 7397 3801 Sunset Avenue Rocky Mount, NC 27804

Statement 1

Employer ID #: 56-1711109

Part VII-A-Statement Regarding Activities Line 10-Substantial Contributors

Contributor	Date	Amount
Guardian Holdings, Inc. P O Box 7397 Rocky Mount, NC 27804	Various	\$15,901.00
Pattie M. Dunn P O Box 7397 Rocky Mount, NC 27804	Various	\$23,521.10

The following officers and directors of the Foundation own approximately 97 % of the outstanding stock of Guardian Holdings Inc. (directly or indirectly).

Pattie McCay Dunn Eugenie D. Andracchio Vincent C. Andracchio, II The Leon Algernon Dunn, Jr. and Pattie McCay Dunn Family Foundation P O Box 7397 3801 Sunset Avenue Rocky Mount, NC 27804

Statement 2

Employer ID #: 56-1711109

Part VIII-Information about Officers, Directors, Trustees, Foundation Managers Highly Paid Employees, and Contractors

Director & Officers	Title & Average Hours	Contributions to Benefit Plans	& Other	Compensation
Pattie McCay Dunn P O Box 7397 Rocky Mount, NC 27804	Director	0	0	0
Jane D. Pittman P O Box 7397 Rocky Mount, NC 27804	Director	0	0	0
Eugenie D. Andracchio P O Box 7397 Rocky Mount, NC 27804	Director/Pres't	0	0	0
Vincent C. Andracchio, II P O Box 7397 Rocky Mount, NC 27804	Director	0	0	0
Debra W. Williams P O Box 7397 Rocky Mount, NC 27804	Sec'y/Treas. .1 hr/week	0	0	0

Recipient Name & Address	Relationship	Status	Purpose of Contribution	Amount
The Wnght's Center 501 Raleigh Rd Rocky Mount, NC 27803	None	Public	Operating Expenses	100 00
The Down East Partnership for Children P.O Box 1245 Rocky Mount, NC 27802	None	Private	Operating Expenses	100 00
Boy Scouts of America-East Carolina Council P O Box 1698 Kınston, NC	None	Public	Operating Expenses	550.00
Carolina Donor Services 3621 Lyckan Parkway Durham, NC 27707	None	Public	Operating Expenses	500.00
American Cancer Society 250 Williams Street Atlanta, GA 30303-1002	None	Public	Operating Expenses	100 00
Nash Community College Foundation P O Box 7488 Rocky Mount, NC 27804-0488	None	Public	Scholarship	100 00
Henderson Shrine Club 401 Brodie Rd Henderson, NC 27536	None	Pnvate	Operating Expenses	100.00
NC Community Foundation 4601 Six Forks Road, Suite 524 Raleigh, NC 27609	None	Public	Operating Expenses	5,000 00
The University of North Carolina at Chapel Hill P.O Box 309 Chapel Hill, NC 27514-0309	None	Public	Operating Expenses	500 00
The YMCA of the Triangle Area, Inc 801 Corporate Center Drive, Suite 200 Raleigh, NC 27607	None	Public	Scholarships	500 00
East Carolina Medical Foundation East Carolina University 535 Moye Boulevard Greenville, NC 27834	None	Public	Operating Expenses	100.00
Rocky Mount Academy 1313 Avondale Avenue Rocky Mount, NC 27803	None	Private	Operating Expenses	24,101 00
Boys & Girls Clubs of Nash/Edcombe Counties P O Box 1622 Rocky Mount, NC 27802	None	Public	Operating Expenses	500 00
Wake Forest University P O Box 7227 Winston-Salem, NC 27109	None	Public	Scholarships/Operating Expense	1,000 00
The Junior Guild P O Box 4043 Rocky Mount, NC 27803-0043	None	Public	Scholarship	100 00
Rocky Mount Chamber of Commerce P O Box 392 Rocky Mount, NC 27802-0392	None	Public	Operating Expenses	350 00
My Sister's House P O Box 7665 Rocky Mount, NC 27804-0665	None	Public	Operating Expenses	100 00
NC Wesleyan College 3400 N Wesleyan Blvd	Yes	Public Page 1	Opearting Expenses	5,000 00

Rocky Mount, NC 27804				
Fnends of the Arts Center P O. Box 4031 Rocky Mount, NC 27803	None	Public	Operating Expenses	100 00
NC Hospital Foundation 2416 Professional Drive Rocky Mount, NC 27804	None	Public	Operating Expenses	1,000 00
Tar River Mission Clinic 1041 Noell Lane, Plaza B Rocky Mount, NC 27804	None	Public	Operating Expenses	150 00
Total				40,051.00

003837-00002/HWD00101.MIS

THE LEON ALGERNON DUNN, JR. AND PATTIE MCCAY DUNN FAMILY FOUNDATION SCHOLARSHIP PROGRAM INITIAL APPLICATION FOR SCHOLARSHIP AWARD

						Date:		
Name:		···			Soc.	Sec.	No	
Residen	ce Address:							
Date of	Birth:		Place	of Bi	irth:			
Present	Grade:		Date	of Gra	duat	ion:_		**
College courses	or other of study:	institution	you	plan	to	enter,	and	expected
Father's	Name:	······································					···········	
								
					 			
Father's	Employer & P	osition:	 	<i></i>				
Mother's	Name:							
Mother's	Address (i	different):						
Mother's E	Employer & P	osition:					-	
		······································						

STUDENT INFORMATION

Please provide detailed information relating to your activities below, and indicate dates where appropriate.

1. Scholastic Honors:

2. Extra-curricular school activities, organizations, and honors:

3. Athletics:

Student Information, continued

4.	Student Government:
5.	Community organizations and activities:
6.	Employment, last three years:
7 .	The names and addresses of at least three references who may be contacted by the Foundation (do not include your Principal, Guidance Counselor, or any relative):

Student Information, continued

In addition to the above, please list below scholarships, etc. awarded and other known funds available for your education (including your annual income, if any). Please submit with this application a completed Financial Aid Form (FAF--College Scholarship Service) or Family Financial Statement (FFS--American College Testing) and a statement from your parents and/or guardians stating to what extent funds will be available for your education.

The undersigned Student and his/her Parent (or Guardian, if applicable) certify that the information in this application is correct and complete to the best of their knowledge, and if the Student shall receive a Scholarship Award, said Student and his/her Parent (or Guardian) do authorize and direct the institution attended by the Student to furnish grade transcripts on a regular basis to the Leon Algernon Dunn, Jr. and Pattie McCay Dunn Family Foundation, and such other information from the Student's records as may be reasonably requested by the Foundation.

Student Signature:	
Parent or Guardian Signature:	

SUBMIT THIS APPLICATION TO YOUR SCHOOL PRINCIPAL OR GUIDANCE COUNSELOR, AND HAVE HIM OR HER COMPLETE THE NEXT PAGE AND RETURN THE COMPLETED APPLICATION TO:

The Leon Algernon Dunn, Jr. and Pattie McCay
Dunn Family Foundation
3801 Sunset Avenue West
Rocky Mount, North Carolina 27804

TO BE COMPLETED BY PRINCIPAL OR GUIDANCE COUNSELOR AND RETURNED DIRECTLY TO THE LEON ALGERNON DUNN, JR. AND PATTIE MCCAY DUNN FAMILY FOUNDATION

Student Records

School:				
Rank in Class: No. or t	op % C	lass Size:		Year:
Scholastic Aptitude Test	(SAT) Score:_		~ ~~~~	
National Merit Scholarsh	ip Qualifying	Test Score	e:	
List Honor Roll (HR) semester, last three so	or Principal hool years:	's List	(PL) by	lst & 2n
Grade Average, major sul	bjects for la	st two <u>fu</u>	<u>ll</u> school	years:
Specific Grades, major s current school year:	subjects (plea	ase name)	for firs	t semester
Confirmation of Student	-			
Signed: (Principal	or Counselor)		ace:	
Brief Evaluation by Prin	cipal:			
	Outstanding	<u>Above</u> <u>Average</u>	Average	<u>Below</u> Average
Academic Achievement: Activity Participation: Student Gov't.				
Participation: Attitude towards school: Character:				

003837-00002/HWD00101.MIS

	Outstanding	<u>Above</u> <u>Average</u>	Average	<u>Below</u> Average
<pre>Known outside activities Citizenship:</pre>				
Employment: General Recommendation by Principal that Student is:				
Principal's Signature:				
Date:				

The Leon Algernon Dunn Jr. & Pattie McCay Dunn Family Foundation ID #56-1711109

All scholarship recipients will be selected by the Board of Directors of the Foundation, or by a specially designated committee ("Scholarship Selection Committee") of the Board of Directors. Criteria for selection of the scholarship recipients will be as follows: (1) The student must be admitted to an accredited educational institution; and (2) the student must establish financial need. Scholarships will be awarded without regard to race, creed, sex or national origin.

The Foundation will give preference to applicants who are residents of Edgecombe and Nash Counties in North Carolina; after providing for qualified applicants from such counties, the Foundation will give preference to North Carolina residents from other counties. The Foundation's goal is to award scholarships to those students who have displayed particular promise as future contributors to the community. However, the primary and overriding concern is to provide an opportunity for economically disadvantaged students from Edgecombe and Nash counties to attend post-high-school educational institutions.

AFFIDAVIT OF PUBLICATION

STATE OF NORTH CAROLINA COUNTY OF WAKE

Ad Number 0000026071

DUNN FAMILY FOUNDATION PO BOX 7397

ROCKY MOUNT, NC 278047397

Before the undersigned, a Notary Public of Wake County North Carolina, duly commissioned and authorized to administer oaths, affirmations, etc., personally appeared Barbara Brown, who being duly sworn or affirmed, according to law, doth depose and say that he or she is Accounts Receivable Specialist of The News & Observer a corporation organized and doing business under the Laws of the State of North Carolina, and publishing a newspaper known as The News & Observer, in the City of Raleigh, Wake County and State aforesaid, the said newspaper in which such notice, paper, document, or legal advertisement was published was, at the time of each and every such publication, a newspaper meeting all of the requirements and qualifications of Section 1-597 of the General Statutes of North Carolina and was a qualified newspaper within the meaning of Section 1-597 of the General Statutes of North Carolina. and that as such he or she makes this affidavit; and is familiar with the books, files and business of said corporation and by reference to the files of said publication the attached advertisement for DUNN FAMILY FOUNDATION was inserted in the aforesaid newspaper on dates as follows:

PUBLIC NOTICE: The Annual Re the Leon Algernon Dunn, Jr., and McCay Dunn Family Foundati available at the address noted be avallability. Leon Algern and Pattl McCay I Foundation, 3801 Sunset Rocky Mount, NC 27804.

N&O: February 16, 2012

02/16/2012



Sworn to and subscribed before me This 17th day of February, 2012

My Commission Expires: OGOOD

Notary Signature

Barbara Brown, Accounts Receivable Specialist Wake County, North Carolina