

### 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



Form 990-PF
Department of the Treasury

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state rep

OMB No 1545-0052 2011

	Jenue Service   Note. The Toundation may be	s able to use a copy of the				
	endar year 2011 or tax year beginning		, 2011,	and ending		, 20
Name	e of foundation				A Employer identific	
	RENT RAGLAND JR					6035980
Numl	per and street (or P O box number if mail is not deliver	ed to street address)		Room/suite	B Telephone number	r (see instructions)
	5 W W.T. HARRIS BLVD. D1114-or town, state, and ZIP code	044			(33	6) 747-8190
					C If exemption applicate pending, check here	ion is
	RLOTTE, NC 28288				-	<u>,                                    </u>
	ck all that apply: Initial return Final return Address change	Initial return of Amended ret	urn e	ublic charity	D 1 Foreign organization 2 Foreign organization 85% test, check he computation	ons meeting the
$\overline{}$	ck type of organization: $X$ Section 501(officient section 4947(a)(1) nonexempt charitable trust	c)(3) exempt private for Other taxable pri		on	E If private foundation under section 507(b)	- I I
		unting method: X Ca			F If the foundation is in	
	1 -	ther (specify)		<del></del> .		(1)(B), check here .
	▶ \$ 4,858,998. (Part I,	column (d) must be on	cash basis.)		1	
	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 instructions)	(a) Revenue and expenses per books	(b) Net inve	1	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 2	Contributions, gifts, grants, etc., received (attach schedule) .  If the foundation is <b>not</b> required to	400,000.				
1	attacii scii b					······································
3	Interest on savings and temporary cash investments  Dividends and interest from securities	131,023.	13	0,917.		STMT 1
52	Gross rents			- / / :		
	Net rental income or (loss)					····
6.	Net gain or (loss) from sale of assets not on line 10	272,153.				
7	Gross sales price for all 1 330 476					
7	Gross sales price for all 330, 476. assets on the 6a Capital gain net income (from Part IV, line 2).		27	2,153.		
≧  ′ <sub>8</sub>	Net short-term capital gain					
9	1					
10 a	Income modifications 2012					
Ь	1. ****					
	Gross profit or (loss) (attach schedule)					
11	Other income (attach schedule)		1	2,653.		STMT_2
12	Total, Add lines 1 through 11	803,176.		5,723.		
13	Compensation of officers, directors, trustees, etc	29,279.		1,959.		7,320
14	Other employee salaries and wages			NONE	NONE	
	Pension plans, employee benefits			NONE	NONE	
16a	' ' ' '					
15 16a b 17 18 19 20 21 22		750.		NONE	NONE	750
, c						
17	Interest					
18	Taxes (attach schedule) (see instructions) STMT. 4.	22,008.		2,674.		
19	Depreciation (attach schedule) and depletion.					
20	Occupancy					
21	Travel, conferences, and meetings			NONE	NONE	
	Printing and publications			NONE	NONE	
	Other expenses (attach schedule) STMT. 5.	4,700.				4,700
24	Total operating and administrative expenses.	ļ				
23	Add lines 13 through 23	56,737.	2	4,633.	NONE	
25	Contributions, gifts, grants paid	277,450.			<del></del>	277,450
26	Total expenses and disbursements Add lines 24 and 25	334,187.	2	4,633.	NONE	290,220
27	Subtract line 26 from line 12 <sup>-</sup>					
	Excess of revenue over expenses and disbursements	468,989.				
t	Net investment income (If negative, enter -0-)		39	1,090.	·····	
օ	Adjusted net income (if negative, enter -0-)					<u></u>

Down II	Balanca Charta	Attached schedules and amounts in the	Beginning of year	End o	of year
Part II	■ Balance Sheets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
17	Cash - non-interest-bearing	ng		24,462.	
2		cash investments	263,909.	116,499.	116,499
3					
		otful accounts			
4					
	Less: allowance for doub	otful accounts >			
5					
6		officers, directors, trustees, and other			
		ach schedule) (see instructions)			
7		eceivable (attach schedule)			
1		otful accounts  NONE			
8		se			
ets 6		eferred charges	-		
<u> </u>	•	government obligations (attach schedule).			
-		stock (attach schedule) . STMT .6.		2,353,038.	3,106,493
		bonds (attach schedule). STMT .7.	3,229,073.	1,094,785.	
11	Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)	Js, •			
12	•	loans			
13	Investments - other (atta	ch schedule) STMT .8	500,795.		
14	Land, buildings, and equipment basis	<b>&gt;</b>			
	Less' accumulated deprecia (attach schedule)	_			
15	Other assets (describe	STMT 9 )		500 <u>,760</u>	481,782
16	Total assets (to be	completed by all filers - see the			
$\perp$	instructions Also, see p	age 1, item l)	3,993,777.	4,089,544.	4,858,998
17	Accounts payable and a	ccrued expenses			
18	Grants payable				
န္မ 19	Deferred revenue				_
Liabilities 12 02 14	Loans from officers, directo	rs, trustees, and other disqualified persons			_
<u>용</u> 21		otes payable (attach schedule)		<u> </u>	
그 22	Other liabilities (describe	e <b>-</b> )			
23		es 17 through 22)			
		low SFAS 117, check here ▶☐ 24 through 26 and lines 30 and 31.			
မ္မ 24	Unrestricted				-
alances 25 25	Temporarily restricted				-
26	Permanently restricted				
Fund	Foundations that do	not follow SFAS 117,			
교	check here and com	plete lines 27 through 31. $\blacktriangleright X$			
<b>5</b> 27		cipal, or current funds	3,993,777.	4,089,544	<u>.</u>
န္မ 28	Paid-in or capital surplus, o	r land, bldg , and equipment fund			
S 29	Retained earnings, accumu	lated income, endowment, or other funds			<del> </del>
Net Assets 30 30 36 38		d balances (see instructions)	3,993,777.	4,089,544	
ž 31	Total liabilities and	net assets/fund balances (see	2 222 555	4 000 544	
			3,993,777.	4,089,544	<u>, </u>
		anges in Net Assets or Fund			<del></del>
		palances at beginning of year - Part			2 002 777
		on prior year's return)			3,993,777.
2 Ente	er amount from Part I, I	line 27a led in line 2 (itemize) ▶SEE_STA	TEMENT 10	2	468,989.
					16,589.
4 Add	lines 1, 2, and 3	line 2 (itemize) ▶ SEE STA		4	4,479,355. 389,811.
5 Dec	reases not included in	line 2 (itemize) SEE STA	(DO E) Part II solume /h	), line 30 6	4,089,544.
<b>6</b> 10ta	ii net assets or fund ba	alances at end of year (line 4 minus l	nie 3) - Fait II, COIUI <u>III (D</u>	<u>,, inite 30   0</u>	Form <b>990-PF</b> (2011)

Pa	(a) List and	s and Losses for Tax on Inve d describe the kind(s) of property sold ( rick warehouse; or common stock, 200	eg, real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr )
1a	PUBLICLY TRADED	SECURITIES				_
b						
С		·				
d						
e						
	(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis	İ	(h) Gain or (le	
		(or allowable)	plus expense of sale		(e) plus (f) min	
а	1,291,850.		1,058,323.		2	33,527.
b						
С						
d						
е						
	Complete only for assets	showing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col. (h) g	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col.	(k), but not less Losses (from co	
а	<u> </u>				2	33,527
b						
С						
d						
е						
_	Carital care not income as	(not constal loca)	gaın, also enter in Part I, line 7			
	Capital gain net income or	· · · · · · · · · · · · · · · · · · ·	(loss), enter -0- in Part I, line 7	2		272,153.
		n or (loss) as defined in sections 12:				
	If gain, also enter in Pa	rt I, line 8, column (c) (see inst	ructions). If (loss), enter -0- in			
				3		
Pa	art V Qualification U	Jnder Section 4940(e) for Red	uced Tax on Net Investment I	ncome		
Wa		the section 4942 tax on the distribution to the distribution of qualify under section 4940(e)		ase perio	d <sup>7</sup>	Yes X No
		ount in each column for each year;		any entr	ies	
<u></u>	(a)	(b)	(c)	arry criti	(d)	
^	Base period years alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution r (col (b) divided by	
	2010	264,537.	4,365,269.	<u> </u>	100.	0.060600
	2009	298,353.	3,580,440.	<u> </u>		0.083329
_	2008	311,158.	4,414,540.	1		0.070485
	2007	245,694.	4,937,461.			0.049761
	2006	263,161.	4,351,914.	<u> </u>		0.060470
				1		
2	Total of line 1, column (d	0		2		0.324645
3	Average distribution ratio	o for the 5-year base period - divide	the total on line 2 by 5, or by the			
-	•	ndation has been in existence if less		3		0.064929
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
4	Enter the net value of no	ncharitable-use assets for 2011 from	m Part X, line 5	4		4,806,730
•						
5	Multiply line 4 by line 3			5		312,096
•						
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		3,911
5	EIROI 170 OF HEL HIVESTING			-	<del> </del>	
7	Add lines 5 and 6			7		316,007
•	Add inics o and o					323,001
8	Enter qualifying distributi	ions from Part XII, line 4		8		290,220
_	If line 8 is equal to or g	reater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	

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

and addresses

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . 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 2011? .

Form 990-PF (2011)

X

3Ь

Form 990-PF (2011)

▶ NONE

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

_				
Ρ	я	n	А	

Form 990-PF (2011)	A Uinkla Daid France	Page 7
Part VIII. Information About Officers, Directors, Trustees, Foundation Nand Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see ins	structions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE
Total number of others receiving over \$50,000 for professional services	<u> </u>	NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ical information such as the number of	Expenses
1NONE		-
2		
3		
<b></b>		
4		
De a IV De Common of December Deleted Investments (see instruction)		<u> </u>
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
1NONE		
2		
All other program-related investments See instructions		
3NONE		
•1011111111111111111111111111111111111		
Total. Add lines 1 through 3	<u> </u>	

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	4,772,898.
	Average of monthly cash balances	1b	107,031.
С	Fair market value of all other assets (see instructions)	1c	NONE
d		1d	4,879,929.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	4,879,929.
4	Subtract line 2 from line 1d		1
		4	73,199.
5	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,806,730.
6	Minimum investment return. Enter 5% of line 5	6	240,337.
Pa	To the property of the proper	nart.)	
1	Minimum investment return from Part X, line 6	1	240,337.
20	Tax on investment income for 2011 from Part VI, line 5 2a 7,822.		240,337.
<b>Z</b> a			
b		2c	7,822.
с 3	Add lines 2a and 2b	3	232,515.
_	Recoveries of amounts treated as qualifying distributions	4	NONE
4		5	232,515.
5 6	Add lines 3 and 4  Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		NONE
,		7	232,515.
_	line 1		
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	290,220.
þ		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	290,220.
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	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	290,220.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years.	culating w	hether the foundation

Form **990-PF** (2011)

Page 9

		(a)	(b)	(c)	(d)
	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7				232,515
	Undistributed income, if any, as of the end of 2011			270277	
	Enter amount for 2010 only		NONE	NONE	
b	Total for prior years 20 <u>09</u> , 20, 20		NONE		
	Excess distributions carryover, if any, to 2011.				
а	From 2006				
b	From 2007				
С	From 2008 93,679.				
	From 2009 120, 825.				
	From 2010	242 066			
f	Total of lines 3a through e	342,066.			
	Qualifying distributions for 2011 from Part XII,				
	line 4. ▶ \$290,220.			MONTE	
а	Applied to 2010, but not more than line 2a	<u> </u>		NONE	
b	Applied to undistributed income of prior years		MONE		
	(Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election	NONE			
	required - see instructions)	NONB NONB			232,515
	Applied to 2011 distributable amount				232,515
-	Remaining amount distributed out of corpus	57,705.			NON
	Excess distributions carryover applied to 2011 . (If an amount appears in column (d), the same	NONB			INOI
	amount must be shown in column (a) )				
5	Enter the net total of each column as				
	indicated below:	399,771.			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	333,111.			
b	Prior years' undistributed income. Subtract		NONE		
	Enter the amount of prior years' undistributed		NONE		
٠	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has		NONE		
	been previously assessed		NONE		
đ	Subtract line 6c from line 6b Taxable		NONE		
e	amount - see instructions		110111		
-	4a from line 2a Taxable amount - see		}	NONE	
	instructions			HONE	
f	Undistributed income for 2011 Subtract lines	j			
	4d and 5 from line 1. This amount must be				NON
	distributed in 2012			-	
,	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)	NONE	<u> </u>		
		1101112			···
3	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	57,811.			
	Excess distributions carryover to 2012.	<u> </u>			# <del>************************************</del>
)	Subtract lines 7 and 8 from line 6a	341,960.			
^	Analysis of line 9	212,200.			
	Excess from 2007				
a b	02 670				
c	Excess from 2008				
	EA 742				
	Excess from 2010				

Forn	n 990-PF (2011)			56-	6035980			Page <b>10</b>
Pa	rt XIV Private Opera	ating Foundations (	see instructions an	d Part VII-A, questio	n 9)		NOT A	PPLICABLE
1 a	If the foundation has i	received a ruling or d	etermination letter th	at it is a private oper	rating			
	foundation, and the ruling							
b	Check box to indicate whe					4942(j)	(3) or	4942(j)(5)
_	Ç	Tax year	, , , , , , , , , , , , , , , , , , , ,	Prior 3 years				
2 a	_	(a) 2011	(b) 2010	(c) 2009	(d) 200	18	(e	) Total
	justed net income from Part  I or the minimum investment	(4) 2011	(8) 2010	(0) 2000	1- (4, 20)	<del>~ -  </del>		
	return from Part X for each							
	year listed			<del> </del>	<del> </del>		_	
ь	85% of line 2a							
C	Qualifying distributions from Part							
d	XII, line 4 for each year listed .  Amounts included in line 2c not				·-		_	
	used directly for active conduct of exempt activities							
e	Qualifying distributions made							
	directly for active conduct of exempt activities Subtract line							
	2d from line 2c			<u> </u>				
3	Complete 3a, b, or c for the							
а	alternative test relied upon "Assets" alternative test - enter				1			
-								
	(1) Value of all assets (2) Value of assets qualifying							
	under section							
b	4942(j)(3)(B)(i) "Endowment" alternative test-				_			
_	enter 2/3 of minimum invest-							
	ment return shown in Part X,							
	line 6 for each year listed						<del></del>	<del></del>
С	"Support" alternative test - enter	l						
	(1) Total support other than gross investment income							
	(interest, dividends, rents,							
	payments on securities loans (section 512(a)(5)),							
	or royalties)						<del></del>	
	(2) Support from general public and 5 or more						l	
	exempt organizations as						ĺ	
	provided in section 4942 (j)(3)(8)(iii)							
	(3) Largest amount of sup-							
	port from an exempt organization							
	(4) Gross investment income.							
Pa		ary Information (C during the year - se		only if the found	lation had	\$5,000	or more	e in assets
_	Information Regarding		<del> </del>					<del></del>
١.	List any managers of	-		re than 2% of the tot	al contribution	ns receive	ad by the	foundation
a	before the close of any	tax vear (but only if the	nev have contributed	more than \$5,000). (\$	See section 50	)7(d)(2).)	,a by inc	- Touridation
		,,,,						
_	N/A List any managers of	d - C - d d - d - d - d - d	100/	-6 the steel of a sec-	aration lar a		lorgo po	etion of the
b	ownership of a partner	the foundation who	own 10% or more of which the foundation	on the stock of a corp on has a 10% or greate	rinterest	ii equally	large po	ation of the
	Ownership of a partitle	sinp of other entity, o	Willest the loandation	ni nas a 1070 or greate				
	- 1-							
_	N/A Information Regarding	. Canadhadian Cara	City Loop Coholens	hin ata Dramama:				<del></del>
2								
	Check here ► X if t							
	unsolicited requests f			rants, etc. (see instruc	tions) to indi	viduals or	organiza	itions under
_	other conditions, comp				<del> </del>			
а	The name, address, an	id telephone number o	of the person to whor	n applications should	be addressed:			
_	The form in which app	lications should be su	bmitted and informat	tion and materials they	should includ	le:		
J	, no to m in which app							
C	Any submission deadl	ines:						
				<u></u>				
d		imitations on awards	, such as by geog	raphical areas, charit	able fields, k	inds of i	nstitution	is, or other
	factors:							

Part XV Supplementary Information (c	continued)			
3 Grants and Contributions Paid During Recipient Name and address (home or business)	g the Year or Appro	ved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year	O. Oddorania dominado.			
a raid damig mo you.				
OHE CHAMEMENT 42		1		
SEE STATEMENT 42				
		'		
		1		
		ł		
		1		
Total			▶ 3a	277,450.
b Approved for future payment				
b Approved for ratare paymont				
		İ		
		ł		
				1
		ŀ		
	1			
				1
	<u> </u>	<u></u>	<u> </u>	
Total			<b>&gt;</b> 3b	1

Part XVI-A	Analysis of Income-Produ	cing Activ	rities			
Enter gross am	nounts unless otherwise indicated	Unrela	ted business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
		(a)	(b)	(c)	(d) Amount	function income
1 Program se	ervice revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a						<del></del>
ь				<del> </del>		
				<u> </u>		<del></del>
e			<u> </u>	+		
T	d contracts from government property			+		
	d contracts from government agencies  ip dues and assessments					·
	savings and temporary cash investments					
	and interest from securities			14	131,023.	
	income or (loss) from real estate:					
a Debt-fir	nanced property					
	bt-financed property					
	scome or (loss) from personal property					
7 Other inve	stment income					
8 Gain or (loss	s) from sales of assets other than inventory			18	272,153.	
9 Net income	e or (loss) from special events					
10 Gross prof	it or (loss) from sales of inventory			1		
11 Other reve	nue: a					
b						·
				<del></del>		
				<del> </del>		<u></u>
e	Add a live a like the day	-			403,176.	
	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e)					403,176.
	et in line 13 instructions to verify calcu					103/1/01
Part XVI-B			complishment of Ex	empt Purp	oses	
<b>V</b>	Explain below how each activit accomplishment of the foundation					
		_				
		-				
			NOT APPLICABL	Æ		
T						

Form 990	PF (20					56-603598	30			ge <b>13</b>
Part X		Exempt Orgai	nizations	nsfers To and Trans				chari	table	•
, in	secti			ngage in any of the foll ection 501(c)(3) organiz					Yes_	No
	_		g foundation to a	noncharitable exempt of	rganization of:					
(1	) Cas	h	- 					1a(1)		_ X
(2	) Oth	er assets						1a(2)		X
_		ransactions:								
			-	t organization				1b(1)	<u> </u>	X
				e exempt organization .				16(2)	<b>-</b>	X
				ssets				1b(3)		X
								1b(4) 1b(5)		X
				or fundraising solicitation				1b(6)	_	X
				, other assets, or paid er				1c	_	X
				" complete the following				v the	fair m	arket
				es given by the reporting						
v	alue ii		sharing arrange	ment, show in column						
(a) Line	no	(b) Amount involved	(c) Name of nor	ncharitable exempt organization	n (d) Desc	cription of transfe	rs, transactions, and sha	ring arra	ngeme	nts
		<del></del>					<del></del>			
		<del></del>								
	+						·······			
	_			<del></del>			·· <del>·</del>			
		* <u></u>								
				<u> </u>						
							··· <u>-</u>			
							<del></del>			
		<u> </u>								
		·								
				· · <del>-</del> · · · · · · · · · · · · · · · · · · ·						
				iated with, or related to						<del>-</del> 1
				er than section 501(c)(3	)) or in section	527?		] Y	es 🔼	∐ No
<u>b</u> If	"Yes,	" complete the follow					c) Description of relation	<u></u>		
		(a) Name of organizatio	<u> </u>	(b) Type of organization	ion	<u>'</u>	c) Description of relation	sinh		
٥.	Under	penalties of perjury, I decided	are that I have examine	d this return, including accompar payer) is based on all information of	ying schedules and which preparer has a	statements, and t	o the best of my knowled	ge and t	oelief, it	ıs true,
Sign		. 14.0					May the IR	S discus	s this	return
Here	' <del></del>	ells Fa <u>rgo</u> Bank	, N A.	09/12/2012	Title	tee		reparer	П Г	below
	Sign	eature of officer or trustee		Date	Title		(see instructio	ns)? [	Yes	No
	L	Print/Type preparer's	name	Preparer's signature		Date	Check If	PTIN		
Paid							self-employed			
Prepa		Firm's name					Firm's EIN			
Use C	nly	Firm's address								
							Phone no			
							-	~-~ QQ	IN-PF	120111

#### 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

**Employer identification number** Name of the organization W TRENT RAGLAND JR 56-6035980 Organization type (check one): Section: Filers of: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 X 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 33 1/3 % 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, charitable, 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 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).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Employer identification number Name of organization 56-6035980 W TRENT RAGLAND JR

Part I	Contributors (see instructions). Use duplicate copies of Part	I if additional space is need	led.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	W. TRENT RAGLAND, JR	15.020	Person X Payroll
	RALEIGH, NC 27609	\$15,838	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_	W. TRENT RAGLAND, JR		Person
	3420 WILLIMSBOROUGH CT	\$ <u>384,162.</u> _	Payroll X
	RALEIGH, NC 27609		(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 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 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 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 Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization
W TRENT RAGLAND JR

Employer identification number

56-6035980

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	510 SHS OF COCA COLA - 2955 OF GE - 200 OF 3087 SHS OF JOHNSON & JOHNSON - 1500 OF KRA 500 ON MONSANTO CO COM	\$384,162.	09/23/2012
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

### SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

### **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2011

Employer Identification number

	TRENT RAGLAND JR				56-603	598	0
Note	Form 5227 filers need to complete only Part						
Part	Short-Term Capital Gains and Los	ses - Assets	Held One Ye	ar or Less			
-	(a) Description of property (Example 100 shares 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other b		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
S	HORT-TERM CAPITAL GAIN DIVIDE	NDS			_		9,949
					<del> </del>		
				II			
							:
b	Enter the short-term gain or (loss), if any, from	m Schedule D-	1, line 1b			1b	-2,635
_	Charles and the last and the last forms.	4004 6050 6	704 4 000	4		_	
2	Short-term capital gain or (loss) from Forms	4684, 6252, 6	781, and 8824	*		2	
3	Net short-term gain or (loss) from partnership	ns. S corporatio	ons and other	estates or trusts	1	3	
4	Short-term capital loss carryover. Enter t						
	Carryover Worksheet		•			4	( )
5	Net short-term gain or (loss). Combine li	ines 1a throug	h 4 in colum	n (f). Enter here and	d on line 13,		
	column (3) on the back	<u></u>		<del> </del>	<u></u>	5	7,314
Part	Long-Term Capital Gains and Loss	ses - Assets I	leld More Th	nan One Year	<del></del>		/// Com on /local form
	(a) Description of property (Example: 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other b		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a_							
	ONG-TERM CAPITAL GAIN DIVIDEN	IDS					28,677
							<u></u>
					<del></del>		
h	Enter the long-term gain or (loss), if any, from	n Schedule D-1	line 6h		ĺ	6b	236,162
	cine the long term gain or (1035), it arry, nor	ii ociicaaic b-i	,				230,102
7	Long-term capital gain or (loss) from Forms	2439, 4684, 6	252, 6781, an	d 8824		7	
8	Net long-term gain or (loss) from partnership	os, S corporatio	ns, and other o	estates or trusts		8	
9	Capital gain distributions					9	
10	Gain from Form 4797, Part I				1	10	
11	Long-term capital loss carryover. Enter the	ne amount if	any, from lin	e 14 of the 2010	Capital Loss		
	Carryover Worksheet					11	( )
12	Net long-term gain or (loss). Combine lin	es 6a through	11 in columi	n (f). Enter here and	on line 14a,		
	column (3) on the back	<u> </u>		<u></u>		12	264,839
For P	aperwork Reduction Act Notice, see the Instructi	ons for Form 10	<b>41</b>			edule	D (Form 1041) 2011

ched	ule D (Form 1041) 2011				Page 2
Part	Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	s (3) Total
	Caution: Read the instructions before completing this	part	(see ınstr.)	or trust's	(3) 10(a)
3	Net short-term gain or (loss)	13		<u></u>	7,314.
4	Net long-term gain or (loss):				
а	Total for year	14a			264,839.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	14b			
C	28% rate gain	14c			
	Total net gain or (loss). Combine lines 13 and 14a ▶				272,153.
lote	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4	or For	m 990-T, Part I, line 4	a). If lines 14a a	and 15, column (2), are net
	, go to Part V, and <b>do not</b> complete Part IV. If line 15, column (3), is a net loss, co	omplet	e Part IV and the Capita	I Loss Carryover	Worksneet, as necessary
	IV Capital Loss Limitation				
	· · ·				
a Note <i>Carry</i>	The loss on line 15, column (3) or b \$3,000	 e 1, lir	e 22 (or Form 990-T, li	ne 34), is a loss,	;  ( ), complete the Capital Loss
Part	T 0 11 11 15 1 0 1 10 1 D 1	s			
	1041 filers. Complete this part only if both lines 14a and 15 in colu		) are gains, or an am	ount is entere	d in Part I or Part II and
	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor				
auti	ion: Skip this part and complete the Schedule D Tax Worksheet in the i	instruc	tions if:		
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
orm	990-T trusts. Complete this part only if both lines 14a and 15 ar	e gair	is, or qualified divide	ends are includ	ded in income in Part I
	rm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a ner line 14b, col. (2) or line 14c, col. (2) is more than zero.	ınu co	mpiete the <b>Schedule</b>	D ISK AAGLES	neet in the instructions
				· -	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	(4)	.   17		
18	Enter the smaller of line 14a or 15 in column (2)			İ	
	but not less than zero		<u> </u>		
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19		<b>⊣</b>		
20	Add lines 18 and 19	•	_		
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g; otherwise, enter -0 ▶ 21		<b>⊢</b>		
22	Subtract line 21 from line 20. If zero or less, enter -0		1		
23	Subtract line 22 from line 17. If zero or less, enter -0		23		
				<b>;</b>	
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	Is the amount on line 23 equal to or more than the amount on line 24				
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box	ζ.			
	No. Enter the amount from line 23		25		
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	10 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% (.15)				)
31	Figure the tax on the amount on line 23. Use the 2011 Tax Rat	e Sch	edule for Estates ar	nd Trusts	
	(see the Schedule G instructions in the instructions for Form 1041) .			<u>  31</u>	<u> </u>
32	Add lines 30 and 31			32	2
33	Figure the tax on the amount on line 17. Use the 2011 Tax Rat				
	(see the Schedule G instructions in the instructions for Form 1041) .				3
34	Tax on all taxable income. Enter the smaller of line 32 or line 33	here a	and on Form 1041,		
	G, line 1a (or Form 990-T, line 36)	<u> </u>	<u> </u>	34	<u> </u>

JSA 1F1220 2 000 Schedule D (Form 1041) 2011

#### SCHEDULE D-1 (Form 1041)

# Continuation Sheet for Schedule D (Form 1041)

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

▶ See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. 2011

**Employer identification number** Name of estate or trust W TRENT RAGLAND JR 56-6035980 Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (b) Date (f) Gain or (loss) Subtract (e) from (d) (e) Cost or other basis (a) Description of property (Example 100 sh 7% preferred of "Z" Co ) (c) Date sold (d) Sales price acquired (mo , day, yr ) (see instructions) (mo, day, yr) 1a 667.663 DODGE & COX INCOME 08/23/2010 01/10/2011 8,833.00 8,953.00 -120.00 6419.705 PIMCO FDS PAC INV 08/23/2010 01/10/2011 69,718.00 72,233.00 -2,515.00 TOTAL RETURN FD INSTL CL

1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b . . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2011

-2,635.00

Page 2

**Employer identification number** Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side 56-6035980 W TRENT RAGLAND JR Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date (f) Gain or (loss) (c) Date sold (e) Cost or other basis (a) Description of property (Example (d) Sales price acquired (mo , day, yr ) Subtract (e) from (d) 100 sh 7% preferred of "Z" Co) (mo, day, yr) 6a 3772.003 EDGEWOOD GROWTH I 05/28/2008 05/26/2011 45,000.00 48,433.00 -3,433.00 17123.288 EDGEWOOD GROWTH 03/13/2009 11/10/2011 200,000.00 172,096.00 27,904.00 7364.976 DODGE & COX INCOM 05/28/2008 01/10/2011 97,439.00 92,210.00 5,229.00 1497.305 DODGE & COX STK F 150,000.00 90,527.00 59,473.00 03/13/2009 11/10/2011 800. ISHARES MSCI EAFE IND 03/07/2011 44,728.00 4,393.00 12/29/2009 49,121.00 2245. ISHARES S & P SMALLO 41,006.00 11/09/2011 147,422.00 106,416.00 12/29/2009 FUND 6963.647 PIMCO FDS PAC INV 278.00 12/30/2009 01/10/2011 75,625.00 75,347.00 TOTAL RETURN FD INSTL CL 16069.789 PIMCO FDS PAC IN 12/30/2009 11/10/2011 175,000.00 171,739.00 3,261.00 TOTAL RETURN FD INSTL CL 1165. SPDR S&P MIDCAP 400 85,515.00 11/09/2011 183,880.00 98,365.00 09/25/2003 1900. VANGARD MSCI EMERGIN 12/29/2009 03/07/2011 89,812.00 77,276.00 12,536.00 EFT 6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b 236,162.00

Ε

Schedule D-1 (Form 1041) 2011

# PFIC ANNUAL INFORMATION STATEMENT Granville Multi-Strategy Global Partners, Ltd.

## W. Trent Ragland, Jr. Foundation, Wells Fargo Bank, N.A. as Trustee U/A Dtd 7/6/92

- (1) This Information Statement applies to the taxable year of Granville Multi-Strategy Global Partners, Ltd. ("the PFIC") beginning on January 1, 2011 and ending on December 31, 2011.
- (2) The following is your pro-rata share of the ordinary earnings and net capital gain of the PFIC:

a. Ordinary Earningsb. Net Capital GainNONE12,653

(3) The amount of cash and fair market value of other property distributed or deemed distributed by the PFIC to you is as follows:

a. Cashb. Fair Market Value of PropertyNONE

- (4) The PFIC will permit its shareholders to inspect and copy the permanent books of accounts, records, and such other documents as may be maintained, that are necessary to establish that PFIC ordinary earnings and net capital gain, as provided in Section 1293(e) of the Internal Revenue Code, are computed in accordance with US income tax principles.
- (5) Additional information required to be attached to Form 8621:

#### Number of shares

Class of shares	Beginning	Ending	Change	Date of change
Class A - Reduced Fee	498	498	0	N/A

Date: August 31, 2012

Granville Multi-Strategy Global Partners, Ltd.

By: Stephen Hassenfelt

Title: Director

 Cert Mail Num - Fed
 Account
 Name
 Tax ID
 Tax Due - Over Payment 990PF

 70032260000438840865
 1019894918
 W TRENT RAGLAND JR
 56-6035980
 0 00
 2499 00

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES 

REVENUE AND EXPENSES INVESTMENT PER BOOKS INCOME	2,114. 4,239. 3,522. 240. 2,984. 2,984. 2,984. 2,984. 2,984. 2,984. 2,984. 2,984. 1,024. 1,024. 1,024. 1,760. 1,760. 1,760. 1,760. 1,760. 1,517. 6,569. 6,569. 6,569. 1,379. 1,379.	131,023. 130,917.
DESCRIPTION PER	ABERDEEN EMERG MARKETS-INST #5840 ACADIAN EMERGING MARKETS PTF-1 #1260 ARTISAN INTL SMALL CAP FD-IV #1465 COCA-COLA CO COM DODGE & COX INCOME FD COM DODGE & COX STK FD EATON VANCE GLOBAL MACRO - I #0088 HARBOR FD INTL FD INTL FD INTL BUSINESS MACHINES CORP COM ISHARES & PAMALLCAP 600 INDEX FUND IVY ASSET STRATEGY FUND CLASS I #473 JOHNSON & JOHNSON COM MONSANTO CO NEW COM MONSANTO CO NEW COM MONSANTO CO NEW COM MONGAN STANLEY INS INTN RE I #8085 PIMCO FDS PAC INVT MGMT SER LOW DURATION PIMCO FDS PAC INVT MGMT SER HIGH YLD FD PIMCO FDS PAC INVT MGMT SER HIGH YLD FD PIMCO COMMODITY REAL RET STRAT-I#45 SPDR S&P MIDCAP 400 ETF TRUST FEDERATED PRIME OBLIGATION #10	TOTAL TOTAL ==

FORM 990PF, PART I - OTHER INCOME

12:20:32
/2012
/12,
60
5892
DMJ221

NET INVESTMENT INCOME	1 1 1 1	12,653.	12,653.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			TOTALS
DESCRIPTION		GRANVILLE K1 - NET CAPITAL GAIN	

7

ES	11 {1
[±]	H
됴	Ш
ליז	
$\approx$	ii
Ħ	ï
⊣	П
Z	II
9	ij.
$\mathcal{E}$	II
$\approx$	
Æ	ii
	II
i	Ш
	II
Н	!!
_	
2	ii
$\mathbf{z}$	ii
D.	Ï
	П
_ `	I)
ᅜ	ii.
0P	11
9	ii
g.	ii
	Ï
Σ	П
쏬	ij
ည	II.
щ	11

CHARITABLE PURPOSES	750.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	750.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

- TAXES	11 11 11 11 11 11
	ii
$\vdash$	Ш
_	II
H	II
吗	ij
ď	11
Д	ii.
_	ä
டு	ï
Ы	ï
0	ï
9	ij.
σ	Iŧ
	Ш
Σ	II
8	II.
ည	Ħ
щ	II

NET INVESTMENT INCOME	2,479.	2,674.
REVENUE AND EXPENSES PER BOOKS	9,013. 10,321. 2,479. 195.	22,008.
DESCRIPTION	FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS

Ŋ

STATEMENT

Ω II I	REVENUE AND EXPENSES PER BOOKS	3,600.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
FORM 990PF, PART I - OTHER EXPENSES	DESCRIPTION	CAROLYN HOKE EXPENSE MOVIN ON MOVERS EXPENSE	

4,700.

TOTALS

CHARITABLE PURPOSES

9

STATEMENT

3,106,493.

2,353,038.

TOTALS

STOCK	H H H H
CORPORATE	
1	II
ĬI	       
PART	11 11 11 11
990PF,	
FORM	

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV 
03021714 ABERDEEN EMERGING 0758M162 ACADIAN EMERGING 075W0759 EDGEWOOD GROWTH 3875R205 ARBITRAGE FUND C 4314H808 ARTISAN INTL SMA 91216100 COCA COLA CO 56219106 DODGE & COX STOC 77923728 EATON VANCE GLOB 69604103 GENERAL ELECTRIC 11511306 HARBOR INTERNATI 59200101 INTERNATIONAL BU 66001864 IVY ASSET STRATE 78160104 JOHNSON & JOHNSC 83438206 KALMAR GR W/VAL 0075N104 KRAFT FOODS INC 1166W101 MONSANTO CO NEW 1744J317 MORGAN STANLEY I	00,00 00	135,597. 163,054. 373,151. 171,723. 81,857. 411,035. 172,367. 52,924. 427,468. 36,776. 140,723. 202,445. 144,180. 56,040. 35,035.
722005667 PIMCO COMMODITY REAL 779556109 T ROWE PRICE MID CAP	138,623. 232,192. 	96,

ENDING FMV

ENDING BOOK VALUE		70 4, 282 
NOI	DODGE EATON PIMCO PIMCO PIMCO ARTISA DODGE EDGEWO ISHARE ACADIA HARBOR ISHARE VANGUA MORGAN	PIMCO LOW DURATION
DESCRIPTION	256210105 277911491 693390841 693390700 722005220 04314H808 256219106 0075W0759 464287804 779556109 00758M162 411511306 464287465 922042858 617444317	693390304

! !	339,428. 71,773. 87,371. 163,719. 181,400.	286,071. 1,129,762.
	317,223. 75,927. 77,070. 160,406. 174,752.	289,407. 1,094,785.

TOTALS

7

ω

56-6035980

FORM 990PF, PART II - OTHER INVESTMENTS

COST/ FMV C OR F

DESCRIPTION

#70A147678 GRANVILLE CAPITAL

ບ

TOTALS

70A147678 GRANVILLE MULTI-STRA

DESCRIPTION

TOTALS

END ING FMV	1 1 1	481,782.	481,782.	
ENDING BOOK VALUE	1 1 1 1 1 1 1	500,760.	500,760.	

σ

56-6035980

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES \_\_\_\_\_\_ TUUOMA DESCRIPTION -----MUTUAL FUND TAX EFFECTIVE DATE BEFORE TYE 16,589. TOTAL 16,589.

W TRENT RAGLAND JR

56-6035980

W TRENT RAGLAND JR

FORM 990PF, PART III - OTHER DECREAS	ES IN NET	WORTH OR	FUND BALANCE	S =
DESCRIPTION			AMC	UNT 
MUTUAL FUND POSTING DATE AFTER TYE STOCK CONTRIBUTION DIFF BW COST & FM ROUNDING	V			13,310. 76,496. 5.
Т	OTAL		3	89,811.

56-6035980 W TRENT RAGLAND JR

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF \_\_\_\_\_

NAME: WELLS FARGO BANK NA

ADDRESS: ONE WEST 4TH STREETD4000-062 WINSTON SALEM, NC 27101-4000

TELEPHONE NUMBER: (336)747-8190

W TRENT RAGLAND JR 56-6035980

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

WELLS FARGO BANK NA

ADDRESS:

1525 WEST W.T. HARRIS BLVD CHARLOTTE, NC 28288-1114

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40

TOTAL COMPENSATION:

29,279.

W TRENT RAGLAND JR 56-6035980 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_\_ RECIPIENT NAME: ZETA PSI EDUCATIONAL FOUNDATION ADDRESS: 15 SOUTH HENRY STREET PEARL RIVER, NY 10965 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 250. RECIPIENT NAME: JOHN WILLIAM POPE CENTER FOR HIGHER EDUCATION POLICY ADDRESS: 200 W MORGAN STREET RALEIGH, NC 27601 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: HOLY TRINITY ANGLICAN CHURCH ADDRESS: 879-A WASHINGTON STREET RALEIGH, NC 27605 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARTIY AMOUNT OF GRANT PAID ..... 100. W TRENT RAGLAND JR 56-6035980 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: DUKE UNIVERSITY HEALTH SYSTEM ADDRESS: 3400 WAKE FOREST ROAD RALEIGH, NC 27609 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 5,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: THE SALVATION ARMY ADDRESS: 215 S PERSON STREET RALEIGH, NC 27601-1423 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: COMMUNITY MUSIC SCHOOL ADDRESS: 23 NORTH SIXTH STREET ALLENTOWN, PA 18101 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 200.

AMOUNT OF GRANT PAID .....

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: NAVAL WAR COLLEGE FOUNDATION, INC ADDRESS: 686 CUSHING ROAD NEWPORT, RI 02841-1207 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: NONE AMOUNT OF GRANT PAID ..... 100. RECIPIENT NAME: NC MUSEUM OF ART FOUNDATION INC ADDRESS: 4630 MAIL SERVICE CTR RALEIGH, NC 27699 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 2,500. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: HISTORIC SALISBURY FOUNDATION ADDRESS: 215 DEPOT ST SALISBURY, NC 28144 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 1,000. AMOUNT OF GRANT PAID ......

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: CAPITAL AREA PRESERVATION INC (CAP) ADDRESS: PO BOX 28072 RALEIGH, NC 27611 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 200. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: THE HERITAGE FOUNDATION ADDRESS: 214 MASSACHUSETTS AVENUE WASHINGTON, DC 20002 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 500. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: NC CENTRAL UNIVERSITY FDN ADDRESS: PO BOX 52466 DURHAM, NC 27717 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 100. AMOUNT OF GRANT PAID .....

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: CUPLOA HOUSE ASSOCIATION ADDRESS: PO BOX 311 EDENTON, NC 27932 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: EXEMEPT AMOUNT OF GRANT PAID ..... 100. RECIPIENT NAME: HILLSDALE COLLEGE ADDRESS: 33 EAST COLLEGE STREET HILLSDALE, MI 49243 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: NAVY LEAGUE OF THE UNITED STATE ADDRESS: PO BOX 2410 MERRIFIELD, VA 22KK6-9868 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY

AMOUNT OF GRANT PAID .....

100.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE US ADDRESS: 1785 MASSACHUSETTS AVE NW WASHINGTON, DC 20036 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 200. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: RANDOLPH COLLEGE ADDRESS: 2500 RIVERMONT AVE LYNCHBURG, VA 24503 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 1,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: THE VMI FOUNDATION, INC ADDRESS: PO BOX 932 LEXINGTON, VA 24450 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 500. AMOUNT OF GRANT PAID ......

W TRENT RAGLAND JR 56-6035980 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: EPISCOPAL HIGH SCHOOL ADDRESS: 1200 QUAKER LANE ALEXANDRIA, VA 22302 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ...... 500. RECIPIENT NAME: WOODBERRY FOREST SCHOOL ADDRESS: WOODBERRY FOREST DRIVE WOODBERRY FOREST, VA 22989 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 5,000. RECIPIENT NAME: ROBERT L LEE MEMORIAL ASSOCIATION INC (STARTFORD HALL) ADDRESS: 483 GREAT HOUSE ROAD STRATFORD, VA 22558-001 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY

AMOUNT OF GRANT PAID .....

350.

W TRENT RAGLAND JR 56-6035980 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: PEACE COLLEGE OF RALEIGH INC ADDRESS: 15 E PEACE ST RALEIGH, NC 27601-1176 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 2,500. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: SALEM ACADEMY AND COLLEGE ADDRESS: PO BOX 10548 WINSTON-SALEM, NC 27108 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 300. RECIPIENT NAME: SAINT MARY SCHOOL ADDRESS: 900 HILLSBOROUGH ST RALEIGH, NC 27603 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 7,100.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: USO OF NORTH CARLINA, INC ADDRESS: PO BOX 13508 RTP, NC 27709 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 500. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: WHITE MEMORIAL PRESBYTERIAN CHUCH ADDRESS: 1704 OBLERLIN ROAD RALEIGH, NC 27608 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 200. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: SAINT AUGUSTINES COLLEGE ADDRESS: 1315 OAKWOOD AVE RALEIGH, NC 27610-2247 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 1,000.

AMOUNT OF GRANT PAID .....

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: JUNIOR LEAGUE OF RALEIGH ADDRESS: 4020 BARRETT DRIVE, SUITE 104 RALEIGH, NC 27609 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 5,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: CHRIST EPISCOPAL CHURCH ADDRESS: 200 S MCMORRINE STREET ELIZABETH CITY, NC 27909 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 100. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: YMCA OF THE TRIANGLE AREA ADDRESS: 801 CORPORATE CENTER DRIVE RALEIGH, NC 27607 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 100. AMOUNT OF GRANT PAID .....

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: HUGH CHATHAM MEMORIAL HOSPITAL INC ADDRESS: PO BOX 560 ELKIN, NC 28621 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: EXEMEPT 2,500. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: RALEIGH LITTLE THEATRE ADDRESS: 301 POGUE STREET RALEIGH, NC 27607 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 100. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: HILLTOP HOME ADDRESS: 3006 NEW BERN AVE RALEIGH, NC 27601 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY

AMOUNT OF GRANT PAID .....

5,000.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NC LITERARY & HISTORICAL ASSOCIATIO ADDRESS: 109 EAST JONES STREET RALEIGH, NC 27601-2807 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 2,750. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: INDEPENDENT COLLEGE FUND OF NC ADDRESS: 530 NORTH BLOUNT STREET RALEIGH, NC 27604 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 1,500. AMOUNT OF GRANT PAID ...... RECIPIENT NAME: BOYS CLUB OF WAKE COUNTY ADDRESS: 701 N RALEIGH BLVD RALEIGH, NC 27610 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 66,250. AMOUNT OF GRANT PAID ......

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: SPCA OF WAKE COUNTRY ADDRESS: 200 PETFINDER LANE RALEIGH, NC 27601 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 100. RECIPIENT NAME: TAMMY LYNN CENTER FOR DEVLOPMENT DISABILITIES ADDRESS: 739 CHAPPELL DRIVE RALEIGH, NC 27606 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 250. RECIPIENT NAME: MEALS ON WHEEL OF WAKE COUNTY ADDRESS: PO BOX 37639 RALEIGH, NC 27627-7639 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 300.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NC SHERIFFS ASSOCIATION ADDRESS: PO BOX 20049 RALEIGH, NC 27619-0049 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 200. RECIPIENT NAME: NORTH CAROLINA SOCIETY ADDRESS: WILSON LIBRARY CAMPUS BOX 3930 CHAPEL HILL, NC 27514 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: EXEMPT AMOUNT OF GRANT PAID ..... 15,000. RECIPIENT NAME: THE HISTORIC PRESERVATION FND OF NC ADDRESS: 220 FAYETTEVILLE ST STE 200 RALEIGH, NC 27601 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY

AMOUNT OF GRANT PAID ......

500.

W TRENT RAGLAND JR 56-6035980 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NC MUSEUM OF HISTORY ASSOCIATES INC ADDRESS: 5 E EDENTON ST RALEIGH, NC 27601 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 10,000. RECIPIENT NAME: FRIENDS OF THE ARCHIVES ADDRESS: 4614 MAIL SERVICE SENTER RALEIGH, NC 27699-4614 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 300. RECIPIENT NAME: HOSPICE OF WAKE COUNTY ADDRESS: 250 HOSPICE CIRCLE RALEIGH, NC 27607 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY

AMOUNT OF GRANT PAID ......

10,100.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_ RECIPIENT NAME: FRIENDS OF NC STATE MUSEUM OF NATURAL SCIENCES ADDRESS: PO BOX 29628 RALEIGH, NC 27626 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 1,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: CHOWAN ARTS COUNCIL ADDRESS: 200 E CHURCH ST EDENTON, NC 27932 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 100. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: WOMENS CENTER ADDRESS: PO BOX 1057 CHAPEL HILL, NC 27514 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 500. AMOUNT OF GRANT PAID .....

W TRENT RAGLAND JR 56-6035980 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: FOOD BANK OF CENTRAL & EASTERN NC ADDRESS: 3808 TARHELL DRIVE RALEIGH, NC 27609 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY RECIPIENT NAME: TRIANGLE COMMUNITY FOUNDATION ADDRESS: 324 BLACKWELL STREET, SUITE 1220 DURHAM, NC 27701 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 2,000. RECIPIENT NAME: THE SHEPHERD'S TABLE SOUP KITCHEN ADDRESS: PO BOX 28024 RALEIGH, NC 27611 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 400.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: ORANGE COUNTY LITERACY ADDRESS: 200 N GREENSBORE STREET, SUITE C-2 CARRBORO, NC 27510 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 200. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: HABITAT FOR HUMANITY OF WAKE COUNTY ADDRESS: 2420 RALEIGH BLVD RALEIGH, NC 27607 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 2,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: REX HOSPITAL, INC ADDRESS: 2500 BLUE RIDGE ROAD, SUITE 325 RALEIGH, NC 27607 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 10,000.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: THE JESSE HELMS CENTER FOUNDATION ADDRESS: PO BOX 247 WINGATE, NC 28174 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 500. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: JOHN LOCKE FOUNDATION ADDRESS: 200 W MORGAN STREET, #200 RALEIGH, NC 27601 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: NC COMMUNITY FOUNDATION ADDRESS: 4601 SIX FORKS ROAD, SUTIE 524 RALEIGH, NC 27609 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 51,200. AMOUNT OF GRANT PAID .....

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: INTER-FAITH FOOD SHUTTLE ADDRESS: 1001 BLAIR DRIVE, PO BOX 14638 RALEIGH, NC 27620 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 2,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: SAFECHILD ADDRESS: 864 WEST MORGAN STREET RALEIGH, NC 27603 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: DEVELOPEMENT FDN NC CENTER FOR THE THE ADVANCEMENT TEACHING, INC ADDRESS: 276 NCCAT DRIVE CULLOWHEE, NC 28723-9062 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 200. AMOUNT OF GRANT PAID .....

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_\_\_\_ RECIPIENT NAME: WAKEMED FOUNDATION ADDRESS: 3000 NEW BERN AVENUE RALEIGH, NC 27610 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 10,000. RECIPIENT NAME: UNITED WAY OF THE GREATER TRIANGLE INC ADDRESS: 2400 PERIMETER PARK DR STE 150 MORRISVILLE, NC 27560 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 10,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: HEALING PLACE OF WAKE COUNTY ADDRESS: 1251 GOODE ST RALEIGH, NC 27603 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 1,000. AMOUNT OF GRANT PAID .....

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: UNC CHAPEL HILL ADDRESS: CB 3920 DAVIS LIBRARY CHAPEL HILL, NC 27599-3920 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 3,950. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: RALEIGH RESCUE MISSION ADDRESS: PO BOX 27391 RALEIGH, NC 27611-7391 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 1,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: NC STATE UNIVERSITY f/b/o NCSU LIBRARY ADDRESS: BOX 7207 RALEIGH, NC 27695 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 3,100. AMOUNT OF GRANT PAID .....

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: MEDICAL FOUNDATIN OF NC INC ADDRESS: 880 MARTIN LUTHER KING JR BLVD CHAPEL HILL, NC 27514 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 2,000. RECIPIENT NAME: UNC SCHOOL OF THE ARTS ADDRESS: 1533 S MAIN STREET WINSTON-SALEM, NC 27117 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 100. RECIPIENT NAME: JOEL LANE HOUSE ADDRESS: PO BOX 10884 RALIEGH, NC 27605 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: EXEMEPT AMOUNT OF GRANT PAID ..... 250.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: UNC-TV ADDRESS: PO BOX 6000067 RALEIGH, NC 27675-6067 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 700. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: NORTH CAROLINA TRANSPORTATION MUSEUM ADDRESS: PO BOX 69 SPENCER, NC 28159-0069 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: EXEMPT 100. AMOUNT OF GRANT PAID ...... RECIPIENT NAME: EDENTON HISTORICAL COMMISSION ADDRESS: 505 SOUTH BROAD STREET EDENTON, NC 27932 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 1,000. AMOUNT OF GRANT PAID .....

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: URBAN MINISTRIES OF WAKE COUNTY ADDRESS: PO BOX 26476 RALEIGH, NC 27611 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 2,500. RECIPIENT NAME: CHRIST EPISCOPAL CHURCH ADDRESS: 120 E EDENTON STREET RALIEGH, NC 27601 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 4,600. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: NC SYMPHONY FOUNDATION ADDRESS: 3700 GLENWOOD AVE STE 130 RALEIGH, NC 27612 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHAIRTY AMOUNT OF GRANT PAID ..... 1,000. W TRENT RAGLAND JR 56-6035980 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: WAKE EDUCATION PARTNERSHIP ADDRESS: 706 HILLSBOROUGH ST ST A RALEIGH, NC 27603 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY RECIPIENT NAME: NORTH CAROLINA COMMUNITY FDN ADDRESS: 4601 SIX FORK RD STE 524 RALEIGH, NC 27609-5286 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: EXEMPT AMOUNT OF GRANT PAID ..... 2,000. RECIPIENT NAME: MARBLES KID MUSEUM ADDRESS: 201 EAST HARGETT STREET RALEIGH, NC 27601 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 1,000.

W TRENT RAGLAND JR 56-6035980 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: NC SUPREME COURT HISTORICAL SOCIETY ADDRESS: PO BOX 26972 RALEIGH, NC 27611 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 200. RECIPIENT NAME: RALEIGH CITY MUSEUM ADDRESS: 210 FAYETTEVILLE STREET RALEIGH, NC 27601 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 100. RECIPIENT NAME: STATE CAPITOL FOUNDATION INC ADDRESS: MAIL SERVICE CTR STE 4624 RALEIGH, NC 27699 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 100.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_\_ RECIPIENT NAME: NATIONAL HUMANITIES CENTER ADDRESS: 7 TW ALEXANDER RESEARCH TRIANGLE RALEIGH, NC 27709 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: EXEMPT 2,000. AMOUNT OF GRANT PAID ..... RECIPIENT NAME: NEW VOCIES FOUNDATION ADDRESS: PO BOX 14047 RTP, NC 27709 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARTIY AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: ADMIRAL NIMITZ FOUNDATION ADDRESS: 328 E MAIN ST FREDERICKSBURG, TX 78624 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY

AMOUNT OF GRANT PAID .....

200.

56-6035980 W TRENT RAGLAND JR FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: PACIFIC AVIATION MUSEUM OF PEARL HARBOR ADDRESS: 319 LEXINGTON BLVD HONOLULU, HI 96818 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID ..... 100.

TOTAL GRANTS PAID:

277,450.

STATEMENT 42

## Form **8868**

(Rev January 2012)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

Internal Revenue	Service	sebarate ab	plication for each return.								
	filing for an Automatic 3-Month Extension, c										
	filing for an Additional (Not Automatic) 3-Mo <i>lete Part II unless</i> you have already been gran										
-											
Electronic fil	ing (e-file). You can electronically file Form	8868 if yo	u need a 3-month auto	matic extension of time to	file (6 months for						
a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form											
8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see											
Instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.											
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).											
	required to file Form 990-T and requesting										
·-											
	porations (including 1120-C filers), partnership										
to file income				Enter filer's identifying nur							
Turne	Name of exempt organization or other filer, see ins	structions.	•	Employer identification in	ntification number (EIN) or						
Type or											
print	W TRENT RAGLAND JR			X 56-6035980							
File by the due date for	Number, street, and room or suite no If a PO box	, see instruc	ctions	Social security number (SSN)							
filing your	1525 W W.T. HARRIS BLVD. D11	14-044									
return See instructions	City, town or post office, state, and ZIP code. For a										
	CHARLOTTE, NC 28288										
Enter the Ret	turn code for the return that this application is	s for (file a	separate application for	each return)	04						
Application		Return	Application		Return						
Is For		Code	Is For		Code						
Form 990		01	Form 990-T (corporati	on)	07						
Form 990-BL		02	Form 1041-A	J.,,	08						
Form 990-EZ		01	Form 4720		09						
Form 990-PF		04	Form 5227		10						
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069		11						
	(trust other than above)	06	Form 8870	m 8870							
The books	are in the care of  WELLS FARGO BAN	K NA		·							
	e No. ► <u>(336) 747-8190</u>		FAX No. ►	<del></del>							
	inization does not have an office or place of b				<del></del> -						
	or a Group Return, enter the organization's for	-			_ If this is						
	e group, check this box		irt of the group, check th	nis box ▶ 🔲 a	and attach						
	e names and EINs of all members the extension		1. CL 5. 000	<b>T</b>	<del></del>						
=	st an automatic 3-month (6 months for a corp				The section is						
until	08/15_, 20 12, to file the	exempt or	ganization return for the	organization named above.	ine extension is						
	organization's return for:										
	X       calendar year 2011 or         tax year beginning										
	tax year beginning	, 20	, and ending	, 20	<u> </u>						
2 If the ta	av year entered in line 1 is for less than 12 mg	onths chec	ck reason: Initial re	eturn Final return							
2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period											
	nenge m eese-milg pener										
3a If this	application is for Form 990-BL, 990-PF, 99	90-T, 4720	), or 6069, enter the	tentative tax, less any							
	onrefundable credits. See instructions.										
nonrefundable credits. See instructions.  b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and											
	estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 10,321										
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS											
(Electronic Federal Tax Payment System). See instructions.  3c \$  Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for											
		withurawai	with this rorm 5668,	SEE FORM 0403-EU AND F	OIIII 00/3-EU 10F						
payment inst	ct and Paperwork Reduction Act Notice, see Instr	uctions.	·····	Form	8868 (Rev 1-2012)						

Form 8868 (	(Rev 1-2012)					Page 2			
• If you a	ere filing for an Additional (Not Automatic) 3-Mo	nth Exten	sion, complete only Part II	and	check this box	▶ X			
	y complete Part II if you have already been grant			nap	reviously filed Form 8868				
	are filing for an Automatic 3-Month Extension, o				<del></del> <del></del>				
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).									
		nter filer's identifying number, see instructions							
	Name of exempt organization or other filer, see in		Employer identification number (EIN) or						
Type or				( <del></del> )	F.C. C.D.F.D.D.D.				
print	W TRENT RAGLAND JR			X 56-6035980 Social security number (SSN)		<del></del>			
File by the	Number, street, and room or suite no If a P.O box			Social security flumber (SSIV)		,			
due date for			1_1						
filing your return See									
instructions	CHARLOTTE, NC 28288								
	Return code for the return that this application i			ch ret	turn)				
Application	on	Return Code	Application			Return			
ls For			Is For	Est which the	A GREEN COMMENTS AND AND AND AND AND AND AND AND AND AND	Code			
Form 990	)	01		o 1 3	Marie La Marie La La La La La La La La La La La La La				
Form 990	)-BL	02	Form 1041-A		· <del></del>	08			
Form 990	)-EZ	01	Form 4720			09			
Form 990	)-PF	04	Form 5227			10			
Form 990-T (sec 401(a) or 408(a) trust)			Form 6069	<del></del>					
Form 990-T (trust other than above)			Form 8870			12			
	not complete Part II if you were not already g		automatic 3-month extens	ion c	on a previously filed Form	8868.			
	ooks are in the care of   WELLS FARGO BAN								
	one No. ► <u>(336)747-8190</u>	•	FAX No. ▶						
	organization does not have an office or place of b					▶ 📖			
	is for a Group Return, enter the organization's for								
	hole group, check this box ▶ 🔃 . If		irt of the group, check this b	ox.	▶ and att	ach a			
	he names and EINs of all members the extension		-	- /					
	quest an additional 3-month extension of time ur		· · · · · · · · · · · · · · · · · · ·		<u>5</u> , 20 <u>12</u> .				
	calendar year 2011 , or other tax year beginni				_ <del></del> '	20			
6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return  Change in accounting period									
7 Stat	te in detail why you need the extension WAIT	ING ON	A K-1 FROM GRANVI	<u>LLE</u>	MULTI-STRATEG				
<u>GLO</u>	BAL PARTNERSHIP								
					·				
8a If th	nis application is for Form 990-BL, 990-PF, 99	90-T, 4720	), or 6069, enter the tent	ative	tax, less any				
	refundable credits. See instructions.				8a \$	7,569.			
b If t	his application is for Form 990-PF, 990-T, mated tax payments made. Include any pr	4720, o	r 6069, enter any refun	dable	credits and				
		ior year o	overpayment allowed as	a cr	edit and any	10,321.			
amount paid previously with Form 8868.									
	c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS								
(Ele	ctronic Federal Tax Payment System) See instru				8c \$				
	Signature and Verifica		=		•				
	alties of perjury, I declare that I have examined this form, rrect, and complete, and that I am authorized to prepare this fo		companying schedules and statem	ents,	and to the best of my knowled	lge and belief,			
	DA4								
Signature >	- JEFI M		Title ▶Trustee			3/2012			
	-				Form <b>8868</b>	(Rev 1-2012)			