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Form 990-PF

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

Department of the Treasury Internal Revenue Service For calendar year 2011 or tax year beginning . and ending Name of foundation A Employer identification number THE ROBERT P. HOLDING FOUNDATION, INC. 56-6044205 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number POST OFFICE BOX 1415 (919) 989-3281 City or town, state, and ZIP code C If exemption application is pending, check here SMITHFIELD, NC 27577 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. check here and attach computation Address change Name change H Check type of organization X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here i Fair market value of all assets at end of year | J | Accounting method X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 20, 316, 775. (Part I, column (d) must be on cash basis) ▶\$ Analysis of Revenue and Expenses Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for chantable purposes (cash basis only) expenses per books Income income 500. N/A **S** Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. B SCANINED SEP Interest on savings and temporary cash investments 330,998. 330,998. STATEMENT 4 Dividends and interest from securities 5a Gross rents D Net rental income or (loss) 0. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a . 29,344. RECEIVED 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain SEP 0 6 2012 q Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold ogdein, ut c Gross profit or (loss) 11 Other income 331,498. 330,998, 12 Total. Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 2 463. STMT 231. 232. 16a Legal fees 1,925. STMT 963. 962. **b** Accounting fees c Other professional fees 17 Interest STMT 4 2,079. 0. 18 Taxes 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 5 75. 38. 37. Operating 23 Other expenses 24 Total operating and administrative 4,542. 1,232. 1,231. expenses. Add lines 13 through 23 994,904 994,904. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 999,446. 1,232. 996,135. Add lines 24 and 25 27 Subtract line 26 from line 12 -667,948 2 Excess of revenue over expenses and disbursements 329,766. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2011

For	m 99	0-PF(2011) THE ROBERT P. HOLDING	FOUNDATION, INC.	. 56 <u>-</u> 6	5044205 Page 2
Б	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	135,277.	276,813.	276,813.
		Savings and temporary cash investments			· ···, · · · · · · · · · · · · · · · ·
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶	<u> </u>		
	4	Pledges receivable ►	_		
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	l _	disqualified persons			
	7	Other notes and loans receivable	-	1	
		Less allowance for doubtful accounts			
Assets	8	Inventories for sale or use			-
Ass	9	Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations	1 022 764	1 027 049	10 772 220
	l	Investments - corporate stock STMT 6 Investments - corporate bonds STMT 7	1,033,764.	1,806,479.	18,773,239.
	ı		1,740,000.	1,000,479.	1,200,723.
	11	Investments - land, buildings, and equipment basis	-		
	10	Less: accumulated depreciation			
	l	Investments - mortgage loans			·
	13	Investments - other			
	14	Land, buildings, and equipment basis		1	
	15	Other assets (describe			
	13	Offiel goods (neocline	'		
	16	Total assets (to be completed by all filers)	2,915,101.	3,111,240.	20,316,775.
-	17			· / / /	
	18	Grants payable			
ģ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abil	21	Mortgages and other notes payable			
⊐	22	Other liabilities (describe)		
		·			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
lan	25	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted			
n n		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.			
ts	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
۲	29	Retained earnings, accumulated income, endowment, or other funds	2,915,101.	3,111,240.	
ž	30	Total net assets or fund balances	2,915,101.	3,111,240.	
			2 015 101	2 111 240	
_	31	Total liabilities and net assets/fund balances	2,915,101.	3,111,240.	
F	art	Analysis of Changes in Net Assets or Fund	Balances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), lii			
•		st agree with end-of-year figure reported on prior year's return)	··	1	2,915,101.
2		r amount from Part I, line 27a		2	-667,948.
- 3		r increases not included in line 2 (itemize) ► WRITE UP O	F STOCK GIFTED	- 3	864,087.
-		lines 1, 2, and 3		4	3,111,240.
		reases not included in line 2 (itemize)		5	0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II,	, column (b), line 30	6	3,111,240.

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•							
	ROBERT P. HOLDI			INC.	<u> </u>	56-60	044205 Page 3
(a) List and descri	the the kind(s) of property sold (e grehouse, or common stock, 200 shs	, real estate,	1001110	(b) How a P - Puro D - Don	chase	(c) Date acquired (mo , day, yr)	d (d) Date sold (mo , day, yr)
	SIFIED FDG LTD 3		9.25%	2 50	P		03/22/11
<u>b</u>				-			
d d							
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			(h) Gain or (i (e) plus (f) min	ius (g)
a 29,344.			29,34	4.			0.
b c							
d							
е							
Complete only for assets showing	g gain in column (h) and owned by	T				(i) Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (ı) l (ı), ıf any		CC	l (k), but not less Losses (from c	ol (h))
a							0.
b							·
<u>C</u>	······						
d e				- 			
2 Capital gain net income or (net cap	oital loss) { If gain, also enter			} 2			0.
3 Net short-term capital gain or (los:				7			
If gain, also enter in Part I, line 8, o If (loss), enter -0- in Part I, line 8	column (c)			} 3			/A
Part V Qualification U					nent In	come	
(For optional use by domestic private	foundations subject to the section	4940(a) tax on ne	t investment ir	ncome)			
If section 4940(d)(2) applies, leave th	is part blank						
Was the foundation liable for the section		• • •	in the base pe	nod?			X Yes No
	fy under section 4940(e) Do not co ach column for each year, see instr		aking any entri	es		···	
(a) Base period years Calendar year (or tax year beginnin	(b) ig in) Adjusted qualifying dis	stributions	Net value of no	(c) oncharitable	-use asset	s (col (b	(d) stribution ratio) divided by col (c))
2010							
2009							
2008							
2006							· · · · · · · · · · · · · · · · · · ·
2 Total of line 1, column (d)3 Average distribution ratio for the 5	i-veer hees named - divide the total	on line 2 by 5, or	hy the number	of veare		2	
the foundation has been in existen	· ·	on line 2 by 3, or	by the number	or years		3	
4 Enter the net value of noncharitab	le-use assets for 2011 from Part X,	line 5				4	
5 Multiply line 4 by line 3						5	
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6	
7 Add lines 5 and 6						- 7	
8 Enter qualifying distributions from	ı Part XII, line 4					8	
	line 7, check the box in Part VI, line	e 1b, and complet	e that part usin	ng a 1% tax	rate		
123521 12-02-11							Form 990-PF (2011)

	1 990-PF (2011) THE ROBERT P. HOLDING FOUNDAT Int VI Excise Tax Based on Investment Income (Section 494	ION,	, IN	C. b) 4940(e			6044 see ii			Page 4
	Exempt operating foundations described in section 4940(d)(2), check here				<u>,, o</u>				01,0,	
10	Date of ruling or determination letter (attach copy of letter if ne									
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ □	and ent	er 1%	,	1 1		(6,5	95.
IJ	of Part I, line 27b		, 4114 011	107 1 70			711117			-
_	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 45	% of Par	rt Lline :	12 col (b)	}					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only C				•	2				0.
	Add lines 1 and 2		0 /			3		-	6,5	95.
_	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	Others e	enter -0-	١		4			- , -	0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	Juli 13 6	onici o	,		5			6,5	95.
	Credits/Payments								- , -	
	2011 estimated tax payments and 2010 overpayment credited to 2011	6a	1	6.	200.					
	Exempt foreign organizations - tax withheld at source	6b								
	Tax paid with application for extension of time to file (Form 8868)	6c								
	Backup withholding erroneously withheld	6d								
			.			7			6,2	00.
	Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is att	ached				8			- ,	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	uviidu			•	9			3	95.
-	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			Refun	dad 🕨	11				
	art VII-A Statements Regarding Activities			Incian	ucu >					
	During the tax year, did the foundation attempt to influence any national, state, or local legi	elation .	or did it	narticinate or i	ntervene	· In		<u> </u>	Yes	No
14	any political campaign?	Siation	or did it	participate of i	III CI VOII C			1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	1000 (00	e instru	ctions for defin	ntion\2			1b		X
IJ	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities a					ed or		"		
	distributed by the foundation in connection with the activities	ia cop	nes or a	ny matemas	publish	0,				
	Did the foundation file Form 1120-POL for this year?							10		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th	o voar						16		
u	(1) On the foundation > \$ 0 . (2) On foundation manager	e ► 9	ŧ		0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expension					-				
e	managers > \$0 .	טונטוכ נמ	ıx iiiipus	ea on loanaat	IVII					
2	Has the foundation engaged in any activities that have not previously been reported to the	IRS2						2		Х
-	If "Yes," attach a detailed description of the activities.									
2	Has the foundation made any changes, not previously reported to the IRS, in its governing	instrum	ment art	icles of incorn	oration i	nr				
,	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			10100 01 111001p	0.4.0.,	٠,		3		Х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year.							4a		Х
	o If "Yes," has it filed a tax return on Form 990-T for this year?					N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year	2						5		Х
·	If "Yes," attach the statement required by General Instruction T.									
6		either								
•	By language in the governing instrument, or	-								
	By state legislation that effectively amends the governing instrument so that no mandato	ry direc	ctions th	at conflict with	the state	e law				
	remain in the governing instrument?	,						6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?							7	Х	
-	If "Yes," complete Part II, col. (c), and Part XV.				-					
8a	a Enter the states to which the foundation reports or with which it is registered (see instructi	ons)	•							
	NC	- ,				•				
h	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorne	y Genera	l (or designate	e)					
	of each state as required by General Instruction G? If "No," attach explanation			,	•			8b	X	
9	A District Control of the Control of	ection 4	4942(ı)(:	3) or 4942(1)(5	i) for cal	endar				
-	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"				,			9		Х
10					ses			10		X
	The state of the s		.,				For	m 990	-PF	(2011)
			_							

orm	1990-PF(2011) THE ROBERT P. HOLDING FOUNDATION, INC. 56-6044	1205	Page 5
Pa	art 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	44	х
12	section 512(b)(13)? If "Yes," attach schedule (see instructions) Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	11	— —
12	If "Yes," attach statement (see instructions)	12	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X
	Website address ► N/A		
14	The books are in care of ► FIRST CITIZENS BANK & TRUST Telephone no ► (919)	989-	-3281
	Located at ▶ POST OFFICE BOX 1415, SMITHFIELD, NC ZIP+4 ▶2	7577	
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	N/	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	, [Yes No
	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 the foreign		
Pa	country Cou		1
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes No
1 a	a 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?		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		
	a disqualified person? $igsquare$ Yes $igsquare$ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" If the foundation agreed to make a grant to or to employ the official for a period after		
	termination of government service, if terminating within 90 days) Yes X No		
	o 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)? N/A	16	Ì
	Organizations relying on a current notice regarding disaster assistance check here		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		
	before the first day of the tax year beginning in 2011?	10	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		
	defined in section 4942(j)(3) or 4942(j)(5))		
a	a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		
	before 2011? Yes X No If "Yes." list the years ▶		
	If "Yes," list the years >,,,,		
٠	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		
	statement - see instructions) N/A	2b	
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		
	>		
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		
	during the year?		1
t	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.) N/A	3"	
۸.	Form 4720, to determine if the foundation had excess business holdings in 2011.) N / A a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	78	-+-
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b	х
			PF (2011)

rm 990-PF (2011) THE ROBERT P. HOLDING F			<u>56-60442</u>	-05	Page (
art VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (secti	ion 4945(e))?	Y6	s X No		
(2) Influence the outcome of any specific public election (see section 4955),	, or to carry on, directly or indir	ectly,	ľ		
any voter registration drive?		Y6	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	es?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organizat	ion described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literar	y, or educational purposes, or	for		-	
the prevention of cruelty to children or animals?		☐ Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	nder the exceptions described	ın Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see inst		•	N/A	5b]
Organizations relying on a current notice regarding disaster assistance check			▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		uned			
expenditure responsibility for the grant?		J/A Tye	s 🗔 No		
If "Yes," attach the statement required by Regulations section 53.49	145-5(d).				
a Did the foundation, during the year, receive any funds, directly or indirectly, t	• •				
a personal benefit contract?	o pay promisino on	Γ Yε	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	nersonal benefit contract?			6ь	X
If "Yes" to 6b, file Form 8870.	portocinar bonone contract		ļ		-
a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		s X No		
b if "Yes," did the foundation receive any proceeds or have any net income attri		٠. رــــا	N/A	7b	
Information About Officers Dispetors True		anagers Highly			
Paid Employees, and Contractors	stees, i ouridation me	ariagers, riigin	•		
List all officers, directors, trustees, foundation managers and the	ir compensation.	· · ·			
	(b) Title, and average	(c) Compensation	(d) Contributions to	le) Expense
		1 ' ' '	employee benefit along	, , ,-	
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acc	count, othe llowances
(a) Name and address		1 ' ' '	employee benefit plans and deferred compensation	acc	count, othe llowances
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred compensation	acc	e) Expense count, other llowances
	hours per week devoted	(If not paid, enter -0-)	compensation	a	<u>llow</u> ances
	hours per week devoted	(If not paid,	employee benefit plans and deterred compensation	a	<u>llow</u> ances
	hours per week devoted	(If not paid, enter -0-)	compensation	a	<u>llow</u> ances
	hours per week devoted	(If not paid, enter -0-)	compensation	a	<u>llow</u> ances
	hours per week devoted	(If not paid, enter -0-)	compensation	a	ount, other
	hours per week devoted	(If not paid, enter -0-)	compensation	a	<u>llow</u> ances
	hours per week devoted	(If not paid, enter -0-)	compensation	a	<u>llow</u> ances
(a) Name and address EE STATEMENT 8	hours per week devoted	(If not paid, enter -0-)	compensation	a	<u>llow</u> ances
	hours per week devoted	(If not paid, enter -0-)	compensation	a	llowances
	hours per week devoted	(If not paid, enter -0-)	compensation	a	<u>llow</u> ances
EE STATEMENT 8	hours per week devoted to position	(If not paid, enter -0-)	compensation	a	<u>llow</u> ances
EE STATEMENT 8 Compensation of five highest-paid employees (other than those in	hours per week devoted to position ncluded on line 1). If none	(If not paid, enter -0-)	(d) Contributions in	•	O Expense
EE STATEMENT 8	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position ncluded on line 1). If none	(If not paid, enter -0-)	(d) Contributions in	• (e	O .
Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	ncluded on line 1). If none (b) Title, and average hours per week	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	• (e	e) Expense

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		044205 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NON	IE."	·
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
	· · · · · · · · · · · · · · · · · · ·	
	-	
	<u> </u>	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
	armation such as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, e	etc	Expenses
1 N/A		
2		
3		
<u> </u>		
4		
Doubt V Dio		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 N/A	uno z	Amount
2		
All the second states and the second states are second states and the second states are second states and the second states are second sta		
All other program-related investments See instructions 3		
J		
Total. Add lines 1 through 3	•	0.
		Form 990-PF (2011)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		<u> </u>
	Average monthly fair market value of securities	1a	21,448,939. 231,427.
	Average of monthly cash balances	1b	231,427.
	Fair market value of all other assets	10	
	Total (add lines 1a, b, and c)	1d	21,680,366.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	21,680,366.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	325,205.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	21,355,161.
6	Minimum investment return. Enter 5% of line 5	6	1,067,758.
P	Distributable Amount (see Instructions) (Section 4942(I)(3) and (I)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	1,067,758.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 6,595.		
b	Income tax for 2011 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	6,595. 1,061,163.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,061,163.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,061,163.
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	1,061,163.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		006 125
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	996,135.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	006 125
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	996,135.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		Λ
_	income Enter 1% of Part I, line 27b	5	996,135.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	770,13J.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualities f	TOT LITE SECTION

Form **990-PF** (2011)

Page 9 Part XIII Undistributed Income (see instructions) (d) (b) (c) 2010 2011 Corpus Years prior to 2010 1 Distributable amount for 2011 from Part XI, 1,061,163. line 7 2 Undistributed income, if any, as of the end of 2011 935,113. a Enter amount for 2010 only **b** Total for prior years 0. 3 Excess distributions carryover, if any, to 2011 a From 2006 **b** From 2007 c From 2008 d From 2009 e From 2010 0 f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, line 4 > \$ 996,135 935,113. a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 61,022 d Applied to 2011 distributable amount 0. e Remaining amount distributed out of corpus 0. 0. Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: 0 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract 0. line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0. assessed d Subtract line 6c from line 6b Taxable 0 amount - see instructions e Undistributed income for 2010 Subtract line 0 4a from line 2a Taxable amount - see instr f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must 1,000,141. be distributed in 2012 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 0 section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2006 0. not applied on line 5 or line 7 9 Excess distributions carryover to 2012

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Subtract lines 7 and 8 from line 6a

10 Analysis of line 9 a Excess from 2007 b Excess from 2008 c Excess from 2009 d Excess from 2010 e Excess from 2011

0.

	BERT P. HOLD			56-60	44205 Page 10
Part XIV Private Operating	Foundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a rulin	g or determination letter tha	t it is a private operating			
foundation, and the ruling is effective	for 2011, enter the date of	the ruling	▶		
b Check box to indicate whether the fo	undation is a private operati	ng foundation described	ın section	4942(J)(3) or 49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed					_
b 85% of line 2a					
c 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	. .				
e Qualifying distributions made directly	<i>i</i>				
for active conduct of exempt activitie	s				
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		 			
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(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	1				
an exempt organization			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
(4) Gross investment income	formetion (Commi	ata thia mart amb	if the foundation	had \$5 000 as m	ore in essets
Part XV Supplementary Ir	g the year-see inst		ii the loundation	i nau \$5,000 or m	ore in assets
		1 40110113.7			
1 Information Regarding Foundation	_	than 20/ of the total oor	tributions received by the	toundation before the cla	co of any tay
a List any managers of the foundation year (but only if they have contribute			illibutions received by the	s loundation before the cit	se of any tax
NONE					
b List any managers of the foundation other entity) of which the foundation	who own 10% or more of t has a 10% or greater intere	he stock of a corporation est	(or an equally large porti	on of the ownership of a p	artnership or
NONE					
2 Information Regarding Contril	oution, Grant, Gift, Loar	n, Scholarship, etc., F	rograms:		
Check here X if the foundation makes gifts, grants, e					
a The name, address, and telephone n			· 		
a The Name, address, and telephone in	uniber of the person to who	on applications should b	. 400105500		
b The form in which applications shou	ld be submitted and inform	ation and materials they	should include		
c Any submission deadlines			-		
d Any restrictions or limitations on aw	ards, such as by geographi	cal areas, charitable fields	s, kinds of institutions, or	other factors	

fear or Approved for Future If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or	
show any relationship to any foundation manager		Purpose of grant or	
or substantial contributor		contribution	Amount
	recipient		
NONE	EXEMPT	FOR THE PROMOTION AND MAINTENANCE OF ONGOING PROGRAM	5,000
-			
NONE	EDU	FOR PROMOTION OF EDUCATIONAL ACTIVITIES	257,415
NONE	EXEMPT	FOR MAINTENANCE OF FACILITIES AND PROMOTION OF ACTIVITIES	10,297
NONE	EXEMPT	SCHOLARSHIP	
NONE	EXEMPT	FOR PROMOTION AND MAINTENANCE OF CHURCH	1,000
NTINIATION SHE	<u>し</u> 死化なり		51,483
NIINOAIION SHE	21 (2)	34	994,904
A.A			
	NONE	NONE EXEMPT NONE EXEMPT	NONE EXEMPT FOR PROMOTION OF ACTIVITIES NONE EXEMPT SCHOLARSHIP NONE EXEMPT FOR PROMOTION AND MAINTENANCE OF CHURCH ACTIVITIES

٥.

▶ 3b

Total

Form 990-PF (2011)

Part XVI-A

123621 12-02-11

THE ROBERT P. HOLDING FOUNDATION, INC.

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income		ded by section 512, 513, or 514	(e)
Litter gross amounts unless otherwise moleated	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business	Amount	code	Amount	function income
a					
b					
C		•			
d	1 1				
e		* ***			
1					
g Fees and contracts from government agencies		•			
2 Membership dues and assessments					
3 Interest on savings and temporary cash		_		-	
investments			ļ <u>.</u>		
4 Dividends and interest from securities			14	330,998.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal					
property					
7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other					
than inventory .			18		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			_		
11 Other revenue					
a	.				· · · · · · · · · · · · · · · · · · ·
b	-		ļ		
C					
d		<u>.</u>			
e	·	0.	ļ	330,998.	0.
12 Subtotal Add columns (b), (d), and (e)	1	<u> </u>	·I		222 222
13 Total. Add line 12, columns (b), (d), and (e)				13	330,770.
(See worksheet in line 13 instructions to verify calculations)		· · · · · · · · · · · · · · · · · · ·			•
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which income	nme is renorted i	n column (e) of Part XVI-A	Contri	buted importantly to the accor	nnlishment of
the foundation's exempt purposes (other than				outed importantly to the door	
	_	·			
				~~_··	
	<u></u>				
1					

13

orm 990-PF (2		OBERT P. H	OLDING	FOUNDATION	N, INC	<u>. </u>	56-604	44205	Pag	<u>je 13</u>
Part XVII	Information Re Exempt Organ		iers To a	nd Transactions	and Rela	ationsh	nips With Nonch	aritable		
1 Did the ord	ganization directly or indir		the following	with any other organizat	ion describe	ed in section	on 501(c) of	1	/es	No
	other than section 501(c)									
a Transfers	from the reporting founda	ation to a noncharitable	e exempt org	anization of						
(1) Cash								1a(1)		X
(2) Other	assets							1a(2)		<u>X</u>
b Other trans	sactions								1	
(1) Sales	of assets to a noncharital	ble exempt organization	n					1b(1)		<u>X</u>
(2) Purch	ases of assets from a no	ncharitable exempt org	janization					1b(2)		<u>X</u>
(3) Renta	l of facilities, equipment,	or other assets						1b(3)		<u> </u>
(4) Reimb	oursement arrangements							1b(4)		<u>X</u>
(5) Loans	s or loan guarantees							1b(5)		X
(6) Perfo	rmance of services or me	mbership or fundraisin	ng solicitation	ns			-	1b(6)		<u>X</u>
c Sharing of	f facilities, equipment, ma	iling lists, other assets,	, or paid emp	oloyees				10		X
	ver to any of the above is		-		-		_		ts,	
	s given by the reporting fo			d less than fair market va	lue in any tr	ansaction	or sharing arrangement	, show in		
) the value of the goods,				1					
(a) Line no	(b) Amount involved	(c) Name of n		exempt organization	(d)	Description	of transfers, transactions, ar	nd sharing arra	ngemer	ıts
			N/A		_					
					_					
	,									
					-					
			··							
-										
		-			<u> </u>					
				 -	<u> </u>					
2a Is the four	ndation directly or indirec	tly affiliated with, or rel	lated to, one	or more tax-exempt orga	nizations de	scribed				
in section	501(c) of the Code (othe	r than section 501(c)(3	3)) or in secti	on 527?				Yes	X] No
h If "Yes," co	omplete the following sch	edule								
	(a) Name of org	ganization		(b) Type of organization		(c) Description of relation	nship		
	N/A									
	<u> </u>	<u></u> .								
	<u></u>									
	<u></u>				+					
Linder	penalties of perjury, I declare	that I have examined this r	return uncludus	n accompanying schedules ar	nd statements	and to the l	best of my knowledge =			
	elief, it is true, correct, and cor						has any knowledge	May the IRS directurn with the	prepare	er
Here	French R. K	Jel		18/31/12	· • 7	reside	ent l'	shown below (s X Yes	see inst	7)? No
-	nature of officer or trustee	y -		Date	Title		L	163		, 140
	Print/Type preparer's na		Preparer's si		Date		Check If PTII	N		
	CAROLINE P	1.2	h	. all	M-	11	self- employed			
Paid	CPA		MO	lineXIIIott		1112	. P	000392	286	
Preparer	Firm's name ► THC	MAS, JUDY	& TUC	KER P. A.		* '	Firm's EIN ► 56-			
Use Only		·								
	Firm's address ▶ 4.7	700 FALLS C	F NEU	SE ROAD SUI	TE 400	0				
	R.A.	ALEIGH, NC	27609				Phone no 919	-571-7	705	5

THE ROBERT P. HOLDING FOUNDATION, INC. 56-6044205

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FIRST PRESBYTERIAN CHURCH	NONE	EXEMPT	FOR PROMOTION AND MAINTENANCE OF CHURCH ACTIVITIES	25,741
JESSE HELMS CENTER FOUNDATION	none	EXEMPT	FOR THE PROMOTION AND MAINTENANCE OF ONGOING PROGRAMS	5,000
JOHNSTON COMMUNITY COLLEGE	none	EDU	SCHOLARSHIP	500
JOHNSTON HEALTH FOUNDATION	NONE	EXEMPT	FOR THE PROMOTION AND MAINTENANCE OF ONGOING PROGRAMS	5,000
JOHNSTON MEMORIAL HOPITAL FOUNDATION	NONE	EXEMPT	FOR MAINTENANCE OF HOSPITAL FACILITIES	121,966
LOUISBURG COLLEGE	NONE	EDU	FOR PROMOTION OF EDUCATIONAL ACTIVITIES	51,324
MEREDITH COLLEGE	NONE	EDU	SCHOLARSHI P	500
N. C. STATE UNIVERSITY	NONE	EDU	SCHOLARSHIP	500
NC COMMUNITY FOUNDATION	NONE	EXEMPT	FOR ADMINISTRATION AND MANAGEMENT OF PHILANTHROPIC ACTIVITIES	17,500
NORTH CAROLINA COMMUNITY FOUNDATION	NONE	EXEMPT	FOR ADMINISTRATION AND MANAGEMENT OF PHILANTHROPIC	<u> </u>
Total from continuation sheets		1	ACTIVITIES	51,483 669,709

THE ROBERT P. HOLDING FOUNDATION, INC. 56-6044205

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
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	status of recipient	Contribution	
OORTH CAROLINA SYMPHONY SOCIETY INC	NONE	EXEMPT	PROVIDE PROGRAMMING	20,000.
OITT MEMORIAL HOSPITAL FOUNDATION,	NONE	EXEMPT	FOR MAINTENANCE OF HOSPITAL FACILITIES	154,449.
SAINT MARY'S SCHOOL	NONE	EDU	FOR MAINTENANCE OF FACILITIES AND PROMOTION OF	
			ACTIVITIES	51,483.
SPCA OF WAKE COUNTY, INC.	NONE	EXEMPT	FOR THE MAINTENANCE OF	10 000
	-		PROGRAMS	10,000.
SPOT - WILSON BOYS AND GIRLS CLUB	NONE	EXEMPT	FOR PROMOTION AND DEVELOPMENT OF YOUTH ACTIVITIES	10,297
TRYON PALACE COUNCIL OF FRIENDS	NONE	EXEMPT	FOR ADMINISTRATION AND MANAGEMENT OF PHILANTHROPIC	
			ACTIVITIES	51,483
UNITED CHURCH OF CHAPEL HILL	NONE	RELIGIOUS	FOR MAINTENANCE OF FACILITIES AND PROMOTION OF ACTIVITIES	5,000
WOODBURY FOREST	NONE	EDU	FOR PROMOTION OF EDUCATIONAL ACTIVITIES	51,483
CORE SOUND WATERFOWL MUSEUM	NONE	EXEMPT	FOR MAINTENANCE OF FACILITIES AND PROMOTION OF ACTIVITIES	5,000
JOHNSTON CO. SPCA	NONE	EXEMPT	FOR MAINTENANCE OF FACILITIES AND	
			PROMOTION OF	

THE ROBERT P. HOLDING FOUNDATION, INC. 56-6044205

Part XV Supplementary Information 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual.	East defect	Durnoss of grant a-	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ST. DAVID'S SCHOOL	NONE	EDU	FOR PROMOTION OF EDUCATIONAL ACTIVITIES	10,000
TOWN OF SMITHFIELD	NONE	EXEMPT	FOR MAINTENANCE OF FACILITIES AND	
		-	PROMOTION OF ACTIVITIES	5,000
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - INSTITUTE FOR THE ENVIRONMENT	NONE	EDU	FOR PROMOTION OF EDUCATIONAL ACTIVITIES	5,000
WHITE MEMORIAL PRESBYTERIAN CHURCH	NONE	RELIGIOUS	FOR MAINTENANCE OF FACILITIES AND PROMOTION OF	,,,,
			ACTIVITIES	5,000
UNC - PEMBROKE	NONE	EDU	SCHOLARSHIP	500
WINSTON-SALEM STATE UNIVERSITY	NONE	EDU	SCHOLARSHIP	500
		-		

SOURCE	GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT)
FIRST CITIZENS BANCORP SC		6,542.		0.	6,5	42.
FIRST CITIZENS BANCSHARES NC A		75,043.		0.	75,0	
FIRST CITIZENS BANCSHARES NC B JPMORGAN CLEARING CORP - SANDLER	t	43,830.		0.	43,8	30.
O'NEILL		68,833.		0.	68,8	
OCEAN SHORE CAPITAL TR		17,340.		0.	17,3	40.
PERSHING, LLC - FIRST CITIZENS INVESTOR PERSHING, LLC - FIRST CITIZENS		20,090.		0.	20,0	90.
INVESTOR		48,556.		0.	48,5	56.
PERSHING, LLC - SANDLER O'NEILL		48,434.		0.	48,4	
WELLS FARGO BANK NA - CNB INV TR	}	2,330.		0.	2,3	30.
TOTAL TO FM 990-PF, PART I, LN 4	ŀ	330,998.		0.	330,9	98.
	(A) KPENSES ER BOOKS	(B) NET INVI		(C) ADJUSTED NET INCOM	STATEMENT (D) CHARITA E PURPOS	
LEGAL FEES	463.	-	231.			32.
	463.		231.			32.
TO FM 990-PF, PG 1, LN 16A	403.		231.			<i>32</i> •
FORM 990-PF	ACCOUNTI	NG FEES	-		STATEMENT	3
	(A) KPENSES ER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
DESCRIPTION						
THOMAS, JUDY & TUCKER, PA	1,925.		963.		9	62.

FORM 990-PF	TAX	ES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
ESTIMATES	2,079.	().	0.
TO FORM 990-PF, PG 1, LN 18	2,079.	().	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
BANK FEES SUPPLIES	13. 62.		7. L.	6. 31.
TO FORM 990-PF, PG 1, LN 23	75.	38	3.	37.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION		I	BOOK VALUE	FAIR MARKET VALUE
20 SHS YADKIN VALLEY 56,831SHS FIRST CITIZENS CL A 36,525 SHS FIRST CITIZENS CL 4,673 SHS FIRST CITIZENS BANG 1.411 SHS AMERISERV FINANCIAL 4,000 SHS JPM CHASE CAP XIV 6,750 SHS BANK AMERICAL CORP 20,000 SHS SUNTRUST CAP IX 9,000 SHS DUKE ENERGY CORP	B CORP SC		1,586. 48,141. 31,839. 66,467. 35,473. 101,725. 98,720. 497,006. 146,991.	58,000. 9,944,857. 6,373,613. 1,426,948. 36,658. 101,520. 127,643. 506,000. 198,000.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		1,027,948.	18,773,239.

FORM 990-PF	CORPORATE BONDS		STAT	EMENT
DESCRIPTION		BOOK VALU		MARKET ALUE
MMC A D C	-	220 6	12	E0 00
MMCAPS REGIONAL DIVERSIFIED FDG LTD	1	228,6 360,3		50,00 240,00
REGIONAL DIVERSIFIED FDG DID US CAPITAL FUNDING II	,	99,0		240,00
US CAPITAL FUNDING III		99,8		25 25
OCEAN SHORE CAP		193,1		140,00
DIME COMM CAP		98,5		94,00
FIRST EMPIRE CAP		217,6		207,64
CNB INVT TR II SER B		209,8	09.	230,00
PROGRESS CAP TR II SER B		100,9		102,43
BANK OF AMERICA CAP II NTS		87,2		99,90
SUSQUEHANNA CAP II		111,4	33.	102,25
TOTAL TO FORM 990-PF, PART I	II, LINE 10C	1,806,4	79. 1	,266,72
TRUSTEE	S AND FOUNDATION MANAG	<u> </u>	<u> </u>	
	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-	BEN PLAN	
	TITLE AND	COMPEN-	BEN PLAN	
NAME AND ADDRESS FRANK B. HOLDING POST OFFICE BOX 1377	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT	COMPEN- SATION	BEN PLAN CONTRIB	ACCOUN
NAME AND ADDRESS FRANK B. HOLDING POST OFFICE BOX 1377 SMITHFIELD, NC 27577	TITLE AND AVRG HRS/WK PRESIDENT 0.50	COMPEN- SATION	BEN PLAN CONTRIB	ACCOUN
NAME AND ADDRESS FRANK B. HOLDING POST OFFICE BOX 1377 SMITHFIELD, NC 27577 CARMEN H. AMES POST OFFICE BOX 1377 SMITHFIELD, NC 27577	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT 0.50 TREASURER	COMPEN- SATION 0.	CONTRIB 0.	ACCOUN
NAME AND ADDRESS FRANK B. HOLDING POST OFFICE BOX 1377 SMITHFIELD, NC 27577 CARMEN H. AMES POST OFFICE BOX 1377 SMITHFIELD, NC 27577	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT 0.50	COMPEN- SATION	CONTRIB 0.	ACCOUN
NAME AND ADDRESS FRANK B. HOLDING POST OFFICE BOX 1377 SMITHFIELD, NC 27577 CARMEN H. AMES POST OFFICE BOX 1377 SMITHFIELD, NC 27577 VIRGINIA HOPKINS POST OFFICE BOX 1377 SMITHFIELD, NC 27577 T. E. WILLIAMS	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT 0.50 TREASURER 0.50 ASST. TREAS/SEC	COMPEN- SATION 0. 0.	CONTRIB 0.	ACCOUN
NAME AND ADDRESS FRANK B. HOLDING POST OFFICE BOX 1377 SMITHFIELD, NC 27577 CARMEN H. AMES POST OFFICE BOX 1377 SMITHFIELD, NC 27577 VIRGINIA HOPKINS POST OFFICE BOX 1377 SMITHFIELD, NC 27577 T. E. WILLIAMS POST OFFICE BOX 1377	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT 0.50 TREASURER 0.50	COMPEN- SATION 0. 0.	CONTRIB 0.	ACCOUN
NAME AND ADDRESS FRANK B. HOLDING POST OFFICE BOX 1377 SMITHFIELD, NC 27577 CARMEN H. AMES POST OFFICE BOX 1377 SMITHFIELD, NC 27577 VIRGINIA HOPKINS POST OFFICE BOX 1377 SMITHFIELD, NC 27577 T. E. WILLIAMS POST OFFICE BOX 1377 SMITHFIELD, NC 27577 OLIVIA B. HOLDING	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT 0.50 TREASURER 0.50 ASST. TREAS/SEC 0.50 SECRETARY	COMPEN-SATION 0. 0.	O. O.	ACCOUN
NAME AND ADDRESS FRANK B. HOLDING POST OFFICE BOX 1377 SMITHFIELD, NC 27577 CARMEN H. AMES POST OFFICE BOX 1377 SMITHFIELD, NC 27577 VIRGINIA HOPKINS POST OFFICE BOX 1377 SMITHFIELD, NC 27577 T. E. WILLIAMS POST OFFICE BOX 1377 SMITHFIELD, NC 27577	TITLE AND AVRG HRS/WK PRESIDENT 0.50 VICE PRESIDENT 0.50 TREASURER 0.50 ASST. TREAS/SEC 0.50	COMPEN- SATION 0. 0.	O. O.	ACCOUN