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Form 990-PF
Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 2011

For	r cal	endar year 2011 or tax year beginning		, 2011,	and ending	9	, 20
٨	lame	of foundation				A Employer identif	fication number
T	ΉE	R.Y. AND EILEEN L. SHARPE FO	OUNDATION			58	-1722771
$\overline{}$	_	per and street (or P O box number if mail is not deliver			Room/suite	B Telephone numb	per (see instructions)
1	521	5 WEST WT HARRIS BLVD				13	36) 747-8388
_		r town, state, and ZIP code					307 747 0300
_	, -					C If exemption applic pending, check her	ation is
C	'HAI	RLOTTE, NC 28288-5709				pending, check her	е
		ck all that apply: Initial return	Initial return	of a former pu	ublic charit	y D 1 Foreign organiza	ations check here
		Final return	Amended ret	urn .		2 Foreign organiza	ations meeting the
		Address change	Name change			85% test, check	here and attach
L	Che	ck type of organization: X Section 501(c)(3) exempt private fo	oundation			n status was terminated
	s	ection 4947(a)(1) nonexempt charitable trust	Other taxable pri				b)(1)(A), check here
	Fair	market value of all assets at end J Accou	nting method: X Ca	ısh 💹 Accı	ual	F If the foundation is	in a 60-month termination
			ner (specify)			under section 507(b)(1)(B), check here .
			column (d) must be on	cash basis)			
2	irt l	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements for charitable
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	incom		income	purposes
		column (a) (see instructions))	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)				· · · · · · · · · · · · · · · · · · ·	ļ
	2	Contributions, gifts, grants, etc., received (attach schedule). Check X if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	6.		6.		STMT 1
١	4	Dividends and interest from securities	33,768.	3.	3,768.		STMT 2
ĺ		Gross rents					
		Net rental income or (loss)	20.000				
l	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	28,989.	 _		REC	FIVED
		assets on line 6a	<u></u>	2	8,989.		
١		Capital gain net income (from Part IV, line 2)			0,303.	8 MVA	
l	8	Net short-term capital gain				- C MAY	17 2012 ⊖ −
ŀ	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·					121-
ì		and allowances · · · ·	- <u></u>	 -		OGD	
ì		Less Cost of goods sold . Gross profit or (loss) (attach schedule)				<u> </u>	FIV. UI
l	11	Other income (attach schedule)	1,000.	· · · · · · · · · · · · · · · · · · ·			STMT 3
1		Total, Add lines 1 through 11	63,763.	6.	2,763.		1 3 3 3 3 3
_	13	Compensation of officers, directors, trustees, etc		_			
1	14	Other employee salaries and wages			NONE	NON	Е
	15	Pension plans, employee benefits			NONE	NON	E
		Legal fees (attach schedule)					
		Accounting fees (attach schedule) STMT 4	750.		NONE	NON	E 750
		Other professional fees (attach schading, 5.	9,211.		9,211.		
	17	Interest					
1	18	Taxes (attach schedule) (see instructions) STMT. 6.	229.		138.	<u> </u>	
	19	Depreciation (attach schedule) and depletion.	<u> </u>				
	20	Occupancy					<u> </u>
1	21	Travel, conferences, and meetings			NONE	NON NON	
	22	Printing and publications			NONE	NON	<u> </u>
1	23	Other expenses (attach schedule)					
	24	Total operating and administrative expenses.				**	
6		Add lines 13 through 23	10,190.	<u> </u>	9,349.	NON	
1	25	Contributions, gifts, grants paid	106,500.		242	17010	106,500
┱	26_	Total expenses and disbursements Add lines 24 and 25	116,690.		9,349.	NON	E 107,250
1	27	Subtract line 26 from line 12.	E0 000				
		Excess of revenue over expenses and disbursements	52,927.	-	2 414		
		Net investment income (if negative, enter -0-)		5	3,414.		
ᆜ		Adjusted net income (if negative, enter -0-) perwork Reduction Act Notice, see instructions.		L	JSA		Form 990-PF (2011)

For Paperwork Reduction Act Notice, see instructions.

1E1410 1 000 DMK589 5892 04/16/2012 10:19:35

Form 990-PF (2011)

Part II		Polones Chasts	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	End of year	
_	art II	Dalatice Streets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-beari	ng				
	2	Savings and temporary	cash investments	15,811.	36,477	36,477.	
	3	Accounts receivable ▶					
		Less allowance for doub	otful accounts >				
	4	Pledges receivable					
		Less: allowance for doub	otful accounts >				
	5	Grants receivable					
	6	Receivables due from	officers, directors, trustees, and other				
			ach schedule) (see instructions)				
			eceivable (attach schedule)				
		Less allowance for doub	otful accounts >NONE				
Ś	8		se			 	
Assets	9	Prepaid expenses and d	eferred charges		 -		
Ą			government obligations (attach schedule)			<u> </u>	
			stock (attach schedule) STMT .7				
	11 C	Investments - land, building	bonds (attach schedule) STMT .8.	790,746.	386,388	398,082	
		and equipment basis Less accumulated deprecia (attach schedule)	ation				
	12	Investments - mortgage	loans				
	13 14	Investments - other (atta	ich schedule)				
	•	Land, buildings, and equipment basis Less accumulated deprecia	ition				
	15	Other assets (describe	>			1	
	16		completed by all filers - see the				
		instructions Also, see p	age 1, item I)	833,692.	785,705	824,632	
	17	Accounts payable and a	ccrued expenses				
	18						
S	19						
Ĭ	20		rs, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other no	tes payable (attach schedule)				
_	22	Other liabilities (describe	• ▶)			-	
_	23	Total liabilities (add line	es 17 through 22)				
			low SFAS 117, check here ► 24 through 26 and lines 30 and 31.				
ç	24	•	· ·				
alances	25		• • • • • • • • • • • • • • • • • • • •			1	
ala	26					=	
9			not follow SFAS 117,			7	
Fund			plete lines 27 through 31. \blacktriangleright X				
5	27		cipal, or current funds	833,692.	785,705		
		•	r land, bldg , and equipment fund	<u> </u>		7	
Net Assets	29		lated income, endowment, or other funds			7	
Ą	30	Total net assets or fund	d balances (see instructions)	833,692.	785,705		
Š	31	Total liabilities and	net assets/fund balances (see				
		instructions)		833,692.	785,705		
F	art II	Analysis of Cha	anges in Net Assets or Fund	Balances			
1			palances at beginning of year - Part				
			on prior year's return)			833,692.	
2	Ente	r amount from Part I, I	ine 27a ed in line 2 (itemize) ► SEE STA		2	-52,927.	
3	Othe	r increases not includ	ed in line 2 (itemize) SEE STA	TEMENT 9	3	5,617.	
4	Add	lines 1, 2, and 3	line 2 (itemize) ▶ SEE STA		4	786,382.	
						677.	
6	Tota	I net assets or fund ba	lances at end of year (line 4 minus li	ne 5) - Part II, column (b). line 30 6	l 785.705.	

Part IV Capital Gair	is and Losses for Tax on Inve	estment Income	1610		I -
(a) List a	(b) How acquired P-Purchase	(c) Date	(d) Date sold (mo , day, yr)		
2-story	D-Donation	(mo, day, yr)	, ,,, , , ,		
1a PUBLICLY TRADED b	SECOKITIES				
c					
d					
e				<u> </u>	
(e) Gross sales price		(h) Gain or (lo (e) plus (f) mine			
a 214,382.		189,026.			25,356.
b					
С					
d			-	 .	
e		<u> </u>	ļ		
Complete only for assets	s showing gain in column (h) and owned	1		Gains (Col (h) ga (k), but not less	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	"	Losses (from co	
a					25,356.
<u>а</u> b				•	
C					
d					
е					
2 Capital gain net income o		gain, also enter in Part I, line 7			
. •	· (II	(loss), enter -0- in Part I, line 7	2		28,989.
	in or (loss) as defined in sections 12:				
_	art i, line 8, column (c) (see inst	1	,		
	Under Section 4940(e) for Red		ncome		
	or the section 4942 tax on the distrib		ase perio	od?	Yes X No
	s not qualify under section 4940(e).		any ontr	ine	
(a)	nount in each column for each year;		any entr	(d)	
Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ration (col. (b) divided by	
2010	100,599.	901,586.			158003784
2009	72,781.	857,121.			491333196
2008	80,400.	1,050,690.			652114325
2007	191,986.	1,309,109.			6653 <u>94555</u>
2006	74,730.	1,279,897.	,	0.05	838751087
					0055066
	d)		2	0.47	<u>805596947</u>
=	o for the 5-year base period - divide		,	0.00	E C 1 1 1 0 2 0 0
number of years the fou	ndation has been in existence if less	than 5 years	3	0.09	<u>561119389</u>
4 Enter the net value of no	oncharitable-use assets for 2011 from	m Part X, line 5	4		897,565
				· -	55,1505
5 Multiply line 4 by line 3			5		85,817
. , ,					
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		534
	·				•
7 Add lines 5 and 6			7		86,351
			1 _		405 05
8 Enter qualifying distribution of the street of the st	tions from Part XII, line 4	in Part VI, line 1b, and complete	8 that part	using a 1% ta	107,250 x rate. See th

Form §	99-PF (2011) 58-1722771		P	age 4
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	ıstru	tions	<u> </u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			-
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		5	<u>34.</u>
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
	Add lines 1 and 2		5	<u>34.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		N	<u>IONE</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		5	<u> 34.</u>
6	Credits/Payments Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 152.			
b	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		1	<u>52.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		3	<u>82.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11			
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	L	Yes	No
	or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the		,	
	Instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$\)\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$	•		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			ļ
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	ļ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NCNC	-		
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	}		1
	(or designate) of each state as required by General Instruction G7 If "No," attach explanation	_8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete	1		
	Part XIV	9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	1	1	
	and addresses	10		X
			90-PF	(2011)

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? . . .

3ь

Form 9	90-PF (2011)		58-17	22771	
Part	VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requi	red (continued)	
5a	During the year did the foundation pay or incur any amoun	nt to			
	(1) Carry on propaganda, or otherwise attempt to influence	e legislation (section	4945(e))?	. Yes X No	,
	(2) Influence the outcome of any specific public elec-				
	directly or indirectly, any voter registration drive?			. Yes X No	,
	(3) Provide a grant to an individual for travel, study, or oth	er similar purposes?		. Yes X No	,
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described i	n	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (si	ee instructions)		. Yes X No	,
	(5) Provide for any purpose other than religious, chi				
	purposes, or for the prevention of cruelty to children o				,
ь	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the ex	cceptions described in	,
	Regulations section 53 4945 or in a current notice regard				5b
	Organizations relying on a current notice regarding disaste	er assistance check h	ere	▶ 🗌	
С	If the answer is "Yes" to question 5a(4), does the				
	because it maintained expenditure responsibility for the gi		•		,
	If "Yes," attach the statement required by Regulations secti	on 53.4945-5(d).			
6 a	Did the foundation, during the year, receive any fund	s, directly or indire	ctly, to pay premium	s	
	on a personal benefit contract?			. Yes X No	,
	Did the foundation, during the year, pay premiums, directly			:t?	6b X
	If "Yes" to 6b, file Form 8870.				
7 a	At any time during the tax year, was the foundation a part	y to a prohibited tax :	shelter transaction?	. Yes X No	,
b	If "Yes," did the foundation receive any proceeds or have a				7b
Part	Information About Officers, Directors and Contractors	, Trustees, Foun	dation Managers,	Highly Paid Empl	oyees,
1		nagers and their	compensation (see	instructions).	
1	List all officers, directors, trustees, foundation ma	(b) Title, and average		(d) Contributions to	(e) Expense account,
1			compensation (see (c) Compensation (if not paid, enter -0-)	,	(e) Expense account, other allowances
1	List all officers, directors, trustees, foundation ma	(b) Title, and average hours per week	(c) Compensation (if not paid, enter	(d) Contributions to employee benefit plans	
<u>1</u>	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter	(d) Contributions to employee benefit plans	
<u>1</u>	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allowances
<u>1</u>	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allowances
1	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allowances
	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allowances
1	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allowances
	List all officers, directors, trustees, foundation ma	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation - () -	other allowances
2	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other allowances
2	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-) - 0 -	(d) Contributions to employee benefit plans and deferred compensation - 0 -	other allowances - 0 - ons). If none, enter
	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred	other allowances
	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position (other than thos	(c) Compensation (if not paid, enter -0-) - 0 -	(d) Contributions to employee benefit plans and deferred compensation - () -	ons). If none, enter
(a)	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (If not paid, enter -0-) - 0 -	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter (e) Expense account, other allowances
	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) - 0 -	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred	ons). If none, enter
(a)	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (If not paid, enter -0-) - 0 -	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter (e) Expense account, other allowances
(a)	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (If not paid, enter -0-) - 0 -	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter (e) Expense account, other allowances
(a)	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (If not paid, enter -0-) - 0 -	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter (e) Expense account, other allowances
(a)	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (If not paid, enter -0-) - 0 -	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter (e) Expense account, other allowances
(a)	List all officers, directors, trustees, foundation ma (a) Name and address Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hours per week hours per week hours per week	(c) Compensation (If not paid, enter -0-) - 0 -	(d) Contributions to employee benefit plans and deferred compensation - () - (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter (e) Expense account, other allowances

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

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors (continued)	oyees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NOI	NE."
(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	NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 <u>N</u> ONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1NONE	
2	
All other program-related investments. See instructions	
3 <u>NONE</u>	
Total, Add lines 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign foundation	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	1 1	
а	Average monthly fair market value of securities	. 1a	892,423.
	Average of monthly cash balances		18,810.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	. 1d	911,233.
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation)	_	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3			911,233.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	. 4	13,668.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	. 5	<u>897,565.</u>
6	Minimum investment return. Enter 5% of line 5	. 6	44,878.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this	s part.)	
1	Minimum investment return from Part X, line 6	T - 1"	44,878.
2-	Tax on investment income for 2011 from Part VI, line 5 2a 53	1	11,070.
2 a	Tax on investment income for 2011 from Part VI, line 5 2a 53 Income tax for 2011. (This does not include the tax from Part VI.) 2b	"	
	Theories tax for 20 ft. (This does not more as the tax north art vity)	2c	534.
3	Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1	` _	44,344.
3 4	Recoveries of amounts treated as qualifying distributions	· 	1,000.
5		•	45,344.
6	Add lines 3 and 4 Deduction from distributable amount (see instructions)	•	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		NONE
•		. 7	45,344.
_	<u>line 1 </u>	•	43,344.
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		. 1a	107,250.
b		. 1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	i l	
	purposes	. 2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	. 3a	NONE
b			NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		107,250.
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	534.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		106,716.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years.		ether the foundation

Form **990-PF** (2011)

	Distributable amount for 2011 from Port VI	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
ı	Distributable amount for 2011 from Part XI,	Сограз	Today prior to do to		45,344
	Undistributed income, if any, as of the end of 2011				
2	Enter amount for 2010 only			NONE	
	Total for prior years 20 09 , 20, 20		NONE		
3	Excess distributions carryover, if any, to 2011				
	From 2006				
	From 2007 128, 679.				
c	From 2008				
d	From 2009				
	From 2010 55,822.				
	Total of lines 3a through e	255,544.			
	Qualifying distributions for 2011 from Part XII,	•			,
	line 4 ▶ \$107,250				
а	Applied to 2010, but not more than line 2a			NONE	
h	Applied to undistributed income of prior years				
~	(Election required - see instructions)		NONE		
c	Treated as distributions out of corpus (Election				
•	required - see instructions)	NONE			
d	Applied to 2011 distributable amount				45,344
e	Remaining amount distributed out of corpus	61,906.			
5	Excess distributions carryover applied to 2011	NONE			NOI
3	(If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	317,450.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		NONE		
С	Enter the amount of prior years' undistributed				· "·
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has been previously assessed		NONE		
a	Subtract line 6c from line 6b Taxable amount - see instructions		NONE		
e	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount - see instructions			NONE	
f	Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2012				NON
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)	NONE			
8	Excess distributions carryover from 2006 not				
	applied on line 5 or line 7 (see instructions)	11,984.			
9	Excess distributions carryover to 2012.				
	Subtract lines 7 and 8 from line 6a	305,466.			
0	Analysis of line 9				
а	Excess from 2007 128,679.				
b	Excess from 2008 28,716.				
C	Excess from 2009 30,343.				
d	Excess from 2010 55,822.				
е	Excess from 2011 61,906.			1	

	NN D: 1 C				- 0)	NOW ADDITORDI
		ating Foundations				NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private opera	ating	
	foundation, and the ruling	is effective for 2011, en	ter the date of the ruling		. ▶	
ь	Check box to indicate who				49420)(3) or 4942(j)(5)
_			[Prior 3 years	· · · · · · · · · · · · · · · · · · ·	T T
2 a	Enter the lesser of the ad-	Tax year		T		(e) Total
	justed net income from Part	(a) 2011	(Б) 2010	(c) 2009	(d) 2008	
	I or the minimum investment				1	
	return from Part X for each		i			
	year listed			 		
ь	85% of line 2a					
С	Qualifying distributions from Part	!	l			
	XII, line 4 for each year listed	1			1	
d	Amounts included in line 2c not			-		
•	used directly for active conduct					
	of exempt activities					
e	Qualifying distributions made		1			į
	directly for active conduct of	·			ŀ	
	exempt activities Subtract line				İ	
•	2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon	i				
а	"Assets" alternative test - enter		i		ì	
_	441	1				
	(1) Value of all assets (2) Value of assets qualifying					-
	under section		j	İ	1	
	4942(j)(3)(B)(i)				1	
b	"Endowment" alternative test-	,				1
	enter 2/3 of minimum invest-				i	
	ment return shown in Part X,					
	line 6 for each year listed					
C	"Support" alternative test - enter					
	(1) Total support other than	1				
	gross investment income			i		
	(interest, dividends, rents, payments on securities		1			
	loans (section 512(a)(5)),			1		
	or royalties)			1		
	(2) Support from general		_			
	public and 5 or more					.
	exempt organizations as provided in section 4942					ľ
	(j)(3)(B)(m)					
	(3) Largest amount of sup-		1	i		
	port from an exempt			!		1
	organization					
В.		Information /C		ante if the found	tion had \$5 000	or more in eccets
Рa				only if the found	ation nad \$5,000	or more in assets
	at any time of	during the year - se	e instructions.)			
1	Information Regarding	Foundation Manage	rs:			
а	List any managers of	the foundation who I	nave contributed mor	e than 2% of the tota	Il contributions receiv	ed by the foundation
	before the close of any					
	*-		•			
	N/A					
b	List any managers of					y large portion of the
	ownership of a partner	rship or other entity) o	f which the foundation	n has a 10% or greater	nterest.	
	•					
	/-					
	N/A					
2	Information Regarding	g Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:		
	Check here ► X if t	the foundation only	makes contributions	to preselected chari-	table organizations a	and does not accept
	unsolicited requests f	or funds If the found	ation makes difts dr	ents etc (see instruct	tions) to individuals of	or organizations under
	other conditions, comp			(000		. organizations and
	<u>`</u>					
8	The name, address, an	id telephone number (of the person to whom	applications should b	e addressed:	
b	The form in which app	lications should be su	bmitted and informati	on and materials they	should include:	
-						
			<u> </u>	· · · · · · · · · · · · · · · · · · ·		
C	Any submission deadle	ines:				
d	Any restrictions or I	imitations on awards	such as by deogra	aphical areas charita	ble fields, kinds of	institutions, or other
u	factors:		, Jaon 20 by googn		,	

Form 990-PF (2011)				Page 11
Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	g the Year or Appr	oved for F	uture Payment	<u> </u>
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Commission	
a Paid during the year				
OFF CHAMPMENT 12				
SEE STATEMENT 13				
		1		
Total			▶ 3a	106,500
b Approved for future payment				
		1		
Total			> 3b	

	, 513, or 514 d) Related or exempt function income (See instructions)
a b	(See instructions)
b	
d	
е	
g Fees and contracts from government agencies	
2 Membership dues and assessments	
3 Interest on savings and temporary cash investments 14	6.
4 Dividends and interest from securities	33,768.
5 Net rental income or (loss) from real estate	
a Debt-financed property	
b Not debt-financed property	
6 Net rental income or (loss) from personal property .	
7 Other investment income	
8 Gain or (loss) from sales of assets other than inventory 18	28,989.
9 Net income or (loss) from special events	
O Gross profit or (loss) from sales of inventory	
1 Other revenue a	
ь RECOVERY 1	1,000.
c	
d	
е	
2 Subtotal. Add columns (b), (d), and (e)	63,763.
3 Total. Add line 12, columns (b), (d), and (e)	13 63,76
See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
Explain below how each activity for which income is reported in column (e) of Part X accomplishment of the foundation's exempt purposes (other than by providing funds for s	
NOT APPLICABLE	

Part XVII	Information R Exempt Organ	-	nsfers To and Transa	ctions ar	nd Relationships With Nor	cnarı	table	·
1 Did the			ngage in any of the follow	wing with a	ny other organization described		Yes	No
					section 527, relating to political			
organiz	zations?							
		g foundation to a	noncharitable exempt org	ganization o	f:			1
						1a(1)	Ĺ	X
						1a(2)		X
	transactions:	• • • • • • • • • • • • • • • • • • • •						
		charitable exemp	ot organization			1b(1)		Х
								Х
								Х
								Х
	-							Х
								Х
			-			1		Х
					Column (b) should always sho		fair m	
					n. If the foundation received less			
					e of the goods, other assets, or			
					escription of transfers, transactions, and she			
(a) Line no	(b) Amount involved	(c) Name of not	ncharitable exempt organization	(0) De	escription of transfers, transactions, and site	iring arra	ingenie	1113
								
	· 							
		_						
								_
		-						
					· · · · · · · · · · · · · · · · · · ·			
								
							-	
								
					ore tax-exempt organizations	r		.
describ	bed in section 501(c)	of the Code (oth	ner than section 501(c)(3)	or in section	on 527?	□ Y	es	Ϫ No
b If "Yes	," complete the follow	wing schedule.						
	(a) Name of organizatio	n	(b) Type of organization	on	(c) Description of relation	nship		
•								
Unde	er penalties of periory. I decla	are that I have examin-	ed this return, including accompany	ing schedules ar	nd statements, and to the best of my knowle	dge and	belief, it	t is true
Sign corre	or, and complete Declaration of	f preparer tother than tax	kpayer) is based on all information of w	vhich preparer ha	nd statements, and to the best of my knowle is any knowledge			
-	///	Decon	0 3/2017	$\nu_{ m vic}$	e-President May the with the	-		
Here		y 	Daye	Title	(see instruct	preparer	Yes	below
—	mature of officer or tructor	INICOMD	\	1100	(see instruct	ons//	7 1 ten [No.
I_MI	R. DANNY R. NE Print/Type preparer's	WCOMB	Preparer's signature		Date	PTIN		-
Paid					Checkif	Dag.		4.0
Preparer	DAVID APPLE	 	j Kart I	2	04/16/2012 self-employed			48
		ELLS FARGO E			Firm's EIN ► 94	<u>-3080</u>)77 <u>1</u>	
Jse Only				4-044				
	CH	<u> IARLOTTE, 1</u>	NC	28288	Phone no 704-	<u> 427-6</u>		
						Form 99	90-PF	(2011

	NET INVESTMENT INCOME			
FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS	REVENUE AND EXPENSES I PESCRIPTION PER BOOKS		WELLS FARGO - SECURED MARKET DEPOSIT ACC	TOTAL 6.
FORM	DESC	1 1	WELL	

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

NET INVESTMENT INCOME	5,579. 2,010. 1127. 1124. 124. 124. 7,127. 139. 4,469. 3,367. 6,219. 2,095. 130. 130.	
REVENUE AND EXPENSES PER BOOKS	5,579. 642. 11. 11. 124. 127. 114. 124. 25. 54. 84. 4,469. 3,367. 6,219. 6,219. 10. 110. 12. 3,367. 6,219. 130. 130.	
DESCRIPTION	ARTIO TOTAL RETURN BD FD CL I #1524 ARTIO INTERNATIONAL EQ FD 3# 1529 BANK AMER CORP COM CISCO SYS INC COM W/RIGHTS ATTACHED EXPI DODGE & COX STK FD EXXON MOBIL CORP COM GENERAL ELEC CO COM OAKWARK INTERNATIONAL FD CL I HARTFORD FINL SVCS GRP COM INTEL CORP COM INTEL SEP MIDCAP 400 GROWTH IND ISHARES TR-S&P MIDCAP 400 GROWTH IND ISHARES S&P MIDCAP 400/BARRA VALUE JOHNSON & JOHNSON COM LOOMIS SAYLES BOND FD INSTL #1162 OPPENHEIMER DEVELOPING MKT-Y #788 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 PRAXAIR INC COM PROXTER & GAMBLE CO COM STAPLES INC COM W/INVISIBLE RTS TO PUR S TWEEDY BROWNE FD INC GLOBAL VALUE FD WELLS FARGO ADV LG CP GR FD-INS #440 WELLS FARGO ADV LG CP GR FD-INS #440 WELLS FARGO ADV INTL BOND-IS #4705 WE FDS TR ADV S/C VAL FD INSL #3150 NOBLE CORPORATION	

FORM 990PF, PART I - OTHER INCOME ______

> REVENUE AND EXPENSES

DESCRIPTION ------

PER BOOKS

==========

RECOVERY

1,000.

TOTALS

1,000.

FORM 990PF, PART I - ACCOUNTING FEES

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

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58-1722771

PROFESSIONAL FEES	
OTHER	
ı	
Η	11
PART	
990PF,	
FORM	

NET INVESTMENT INCOME	9,211.
REVENUE AND EXPENSES PER BOOKS	9,211. 9,211. ===========
DESCRIPTION	CUSTODIAN & MANAGEMENT FEES (A TOTALS

9

NET INVESTMENT INCOME	1 1 1 1 1	125. 13. 13. 138.
REVENUE AND EXPENSES PER BOOKS	1 1 1 8 1 1 1 1	91. 125. 13 229.
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED

7

FOUNDATION	
SHARPE	
ŗ.	
EILEEN	
AND	
E R.Y.	
TH.	

CORPORATE STOCK

FORM 990PF, PART II

ENDING ENDING BOOK VALUE FMV	31,931. 87,025. 15,000. 14,022. 13,715. 14,022. 12,144. 13,959. 12,385. 14,008. 14,008. 17,483. 17,483. 11,580. 11,580. 352,840.
EN BOOK	
DESCRIPTION	855030102 STAPLES INC 742718109 PROCTER & GAMBLE 30231G102 EXXON MOBIL CORP. 060505104 BANK OF AMERICA 416515104 HARTFORD FINANCIAL 478160104 JOHNSON & JOHNSON 369604103 GENERAL ELECTRIC 17275R102 CISCO SYSTEMS INC 458140100 INTEL CORP 459200101 INTERNATIONAL 74005P104 PRAXAIR INC H5833N103 NOBLE CORPORATION 04315J837 ARTIO INTERNATIONAL 256219106 DODGE & COX STOCK FU 413838202 OAKMARK INTERNATIONA 464287705 ISHARES S&P MIDCAP 4 64287705 ISHARES S&P MIDCAP 4 64287705 ISHARES S&P MIDCAP 4 683974505 OPPENHEIMER DEVELOPI 722005667 PIMCO COMMODITY REAL 87234N849 TCW SMALL CAP GROWTH 901165100 TWEEDY BROWNE FD GLO 94985D277 WELLS FARGO ADV LG C 949951845 WF FDS TR ADV S/C VA

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DMK589 5892 04/16/2012 10:19:35

FOUNDATION	RONDS
SHARPE F	CORPORATE
ŗ.	ı
EILEEN	דד דקעם
Y. AND	99006
THE R	FORM

58-1722771

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
	 	!!!!
04315J209 CARTIO TOT. RTN	100,311.	105,284.
	101,421.	.300,66
	44,570.	40,740.
	105,259.	114,074.
94985D582 WELLS FARGO ADV INTE	34,827.	38,979.
DODGE & COX STC		
87234N849 TCW SMALL CAP GROWTH		
901165100 TWEEDY BROWNE FD		

398,082.

386,388.

TOTALS

ORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR	FUND BALANCES
DESCRIPTION	AMOUNT
TUTUAL FUND TAX EFFECTIVE DATE BEFORE TYE	5,617.
TOTAL	5,617.

FORM 990PF, PART III - OTHER DECRE	ASES IN NET WORTH OR FUND BALANCES
DESCRIPTION	AMOUNT
MUTUAL FUND POSTING DATE AFTER TYE ROUNDING	676. 1.
	TOTAL 677.

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

NAME: WELLS FARGO BANK, NA

ADDRESS: ONE WEST 4TH STREET, D4000-062

WINSTON SALEM, NC 27101-4000

TELEPHONE NUMBER: (336)747-8388

THE *R.Y. AND EILEEN L. SHARPE FOUNDATION 58-1722771 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID _____________________________ RECIPIENT NAME: APPALACHIAN STATE UNIVERSITY ADDRESS: POST OFFICE BOX 32156 BOONE, NC 28608-2007 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY 5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: UNITED WAY OF ALEXANDER COUNTY ADDRESS: POST OFFICE BOX 232 TAYLORSVILLE, NC 28681 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: THE HIDDENITE CENTER, INC ADDRESS: POST OFFICE BOX 311 HIDDENITE, NC 28636 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY

AMOUNT OF GRANT PAID

94,500.

* THE R.Y. AND EILEEN L. SHARPE FOUNDATION 58-1722771 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: BLOWING ROCK HISTORICAL SOCIETY EDGEWOOD COTTAGE FUND ADDRESS: 1094 MAIN STREET BLOWING ROCK, NC 28605 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PUBLIC CHARITY AMOUNT OF GRANT PAID 5,000. TOTAL GRANTS PAID: 106,500. _____

SCHEDULE D (Form 1041)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

► Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for

OMB No 1545-0092

2011

Name of estate or trust Employer identification number THE R.Y. AND EILEEN L. SHARPE FOUNDATION 58-1722771 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (a) Description of property (Example: 100 shares 7% preferred of "Z" Co) (b) Date acquired (e) Cost or other basis the entire year Subtract (e) from (d) (d) Sales price (mo,day,yr) (mo, day, yr) (see instructions) 1a SHORT-TERM CAPITAL GAIN DIVIDENDS 1,577. 4,213. 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . 3 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2010 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back . 5,790 Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (e) Cost or other basis (d) Sales price the entire year Subtract (e) from (d) (Example: 100 shares 7% preferred of "Z" Co) LONG-TERM CAPITAL GAIN DIVIDENDS 2,056. **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b....... 6b 21,143. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Capital gain distributions Gain from Form 4797, Part I 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2010 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a,

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2011

Schedule D (Form 1041) 2011			Page 2
Part III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	(3) Total
Caution: Read the instructions before completing this part.	(see instr.)	or trust's	·- · · · ·
3 Net short-term gain or (loss)			5,790.
4 Net long-term gain or (loss):			
a Total for year			23,199.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.) 14b			
c 28% rate gain			
5 Total net gain or (loss). Combine lines 13 and 14a ▶ 15	1		<u>28,989</u> .
lote: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form			
ains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, complete	Part IV and the Capital	Loss Carryover works	neet, as necessary.
Part IV Capital Loss Limitation			
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, lin			
a The loss on line 15, column (3) or b \$3,000 lote: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line arryover Worksheet in the instructions to figure your capital loss carryover.	e 22 (or Form 990-T, li	ne 34), is a loss, comp	lete the Capital Loss
Part V Tax Computation Using Maximum Capital Gains Rates			
orm 1041 filers. Complete this part only if both lines 14a and 15 in column (2) are gains, or an am	ount is entered in P	art I or Part II and
nere is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than	zero.		
aution: Skip this part and complete the Schedule D Tax Worksheet in the instruc	tions if [.]		
Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or			
Both 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 are gain if Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and cor			
either line 14b, col. (2) or line 14c, col. (2) is more than zero.	inplete the schedule	D Tax Worksneet	in the instructions
	1 1		
7 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	· · 17		
8 Enter the smaller of line 14a or 15 in column (2)			
but not less than zero	_		
9 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	_		
20 Add lines 18 and 19	_		
11 If the estate or trust is filing Form 4952, enter the	,	1 1	
amount from line 4g; otherwise, enter -0 ▶ 21			
Subtract line 21 from line 20. If zero or less, enter -0	22		
Subtract line 22 from line 17. If zero or less, enter -0-	23		
4 Enter the smaller of the amount on line 17 or \$2,300	24		
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.			
No. Enter the amount from line 23	25		
6 Subtract line 25 from line 24	26		
Are the amounts on lines 22 and 26 the same?		į l	
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27		
Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
Subtract line 28 from line 27			
Multiply line 29 by 15% (.15)			
Figure the tax on the amount on line 23. Use the 2011 Tax Rate Scho			
(see the Schedule G instructions in the instructions for Form 1041)		31	
32 Add lines 30 and 31			
Figure the tax on the amount on line 17. Use the 2011 Tax Rate Scho			
(see the Schedule G instructions in the instructions for Form 1041)			
34 Tax on all taxable income. Enter the smaller of line 32 or line 33 here a	ind on Form 1041,	1 1	
G, line 1a (or Form 990-T, line 36)		34	

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

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

▶ See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

THE R.Y. AND EILEEN L. SHARPE FOUNDATION

Employer identification number 58-1722771

THE R.Y. AND EILEEN L. SHARP Part I Short-Term Capital Gains and								
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	Subtract (e) from (d)			
1a 40. FORD MTR CO DEL COM	05/25/2011	06/27/2011	539.00	576.00	-37.00			
1429.014 LOOMIS SAYLES BON _#1162	07/06/2011	12/01/2011	19,978.00	21,000.00	-1,022.00			
10. MEDCO HEALTH SOLUTIONS	05/25/2011	06/27/2011	545.00	642.00	-97.00			
961.22 TCW GALILEO FDS INC	10/04/2010	06/27/2011	29,000.00	24,992.00	4,008.00			
335.57 WELLS FARGO ADV INT #4705	06/27/2011	12/01/2011	3,916.00	4,000.00	-84.00			
929.189 WF FDS TR ADV S/C #3150	10/04/2010	06/27/2011	29,000.00	27,513.00	1,487.00			
5. WYNN RESORTS LTD	05/25/2011	06/27/2011		716.00				
	03/23/2011	06/27/2011	674.00	716.00	-42.00			
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For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b

Schedule D-1 (Form 1041) 2011

Page 2

Schedule D-1 (Form 1041) 2011

Pame of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side. THE R.Y. AND EILEEN L. SHARPE FOUNDATION			Employer identification number 58-1722771		
Part II Long-Term Capital Gains and			n One Year		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
5a 1073.729 ARTIO TOTAL RETUR #1524	12/22/2008	09/19/2011	15,000.00	13,862.00	1,138.00
546.448 ARTIO INTERNATIONA 1529	12/22/2008	07/06/2011	7,000.00	5,454.00	1,546.00
140. BANK AMER CORP COM	04/03/2003	05/25/2011	1,602.00	4,901.00	-3,299.00
150. CISCO SYS INC COM W/R ATTACHED EXPIRING 6/10/2008	03/06/1997	06/27/2011	2,264.00	927.00	1,337.00
106.326 DODGE & COX STK FD	07/18/2005	03/11/2011	12,000.00	14,053.00	-2,053.00
43.619 DODGE & COX STK FD	07/18/2005	07/06/2011	5,000.00	5,765.00	-765.00
149.881 DODGE & COX STK FD	09/23/2008	12/01/2011	15,084.00	18,550.00	-3,466.00
140. EXXON MOBIL CORP COM	01/19/1995	06/27/2011	10,963.00	2,169.00	8,794.00
265. GENERAL ELEC CO COM	01/14/1993	06/27/2011	4,860.00	1,879.00	2,981.00
100. HARTFORD FINL SVCS GR	04/03/2003	06/27/2011	2,472.00	3,775.00	-1,303.00
150. INTEL CORP COM	07/01/1996	06/27/2011	3,211.00	1,413.00	1,798.00
60. INTL BUSINESS MACHINES	11/22/2002	06/27/2011	10,082.00	2,682.00	7,400.00
125. JOHNSON & JOHNSON COM	12/12/1996	06/27/2011	8,175.00	3,199.00	4,976.00
#1162 HOOMIS SAYLES BOND	10/04/2010	12/01/2011	8,404.00	8,579.00	-175.00
490.734 PIMCO FDS PAC INVT	07/18/2005	12/01/2011	4,343.00	4,858.00	-515.00
10. PRAXAIR INC COM 75. PROCTER & GAMBLE CO CO	08/26/2008	06/27/2011	1,038.00	898.00	140.00
40. STAPLES INC COM W/INVI	04/09/1999	06/27/2011	4,723.00	3,741.00	982.00
PUR SHS UNDER CERTAIN 383.754 WELLS FARGO ADV LG	10/09/2003	06/27/2011	612.00	682.00	-70.00
FD-INS #440 101.448 WELLS FARGO ADV IN	07/18/2005	03/11/2011	12,000.00	10,216.00	1,784.00
#4705 17. NOBLE CORPORATION	07/18/2005	12/01/2011	1,184.00	1,115.00	69.00
17. NOBBE CORPORATION	08/26/2008	05/25/2011	713.00	869.00	-156.00
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6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b . .