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Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Note. The foundation may be	reated as a Private able to use a copy of this i	e Foundation eturn to satisfy state repo	rting requirements.	<u> 2011</u>
For calendar year 2011 or tax year beginning		, and ending		
Name of foundation			A Employer identificatio	n number
SILVERBACK FOUNDATION, INC	•		83-0380210	0
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
1414 RALEIGH ROAD #250			(919)969-	9300
City or town, state, and ZIP code CHAPEL HILL, NC 27517			C If exemption application is	pending, check here
G Check all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here
Final return Address change	Amended return Name change	, ,	Foreign organizations in 2. check here and attach of	neeting the 85% test,
H Check type of organization X Section 501(c)(3) ex			E If private foundation st	
	Other taxable private founda	tion	under section 507(b)(
I Fair market value of all assets at end of year J Accounti		Accrual	F If the foundation is in a	
(from Part II, col. (c), line 16)	her (specify)		under section 507(b)(
▶\$ 4,793,775. (Part I, colu	mn (d) must be on cash b	asis.)		
Part Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check X if the foundation is not required to attach Sch. B				- M
3 Interest on savings and temporary cash investments	11,317.	11,317.	,	STATEMENT 1
4 Dividends and interest from securities		·		
5a Gross rents				
b Net rental income or (loss)	43,734.		,,,	
o 62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 60,000.	43,/34.			
assets on line 6a	, , , , , , , , , , , , , , , , , , ,	43,734	· · · · · · · · · · · · · · · · · · ·	1.14-mm 1.111
7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		43,734		
9 Income modifications		. , , , , , , , , , , , , , , , , , , ,	r	***************************************
Gross sales less returns and allowances				
b Less Cost of goods sold	111 11 1 111 1 11 1 1 1 1 1 1 1 1 1 1 1	· , ,		(1.11)
c Gross profit or (loss)				
11 Other income				
12 Total. Add lines 1 through 11	55,051.	55,051	•	
13 Compensation of officers, directors, trustees, etc	0.	0	•	0.
14 Other employee salaries and wages			<u> </u>	
15. Pension plans, employee benefits			<u> </u>	
b-Accounting tees STMT 2	1,900.	0		0.
	1,300.	U	•	
Other professional fees interesty 2 1 2012		<u> </u>	 	
15 Interest 2 1 2012 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23	1,101.	0	•	0.
19 Depreciation and depletion	, =	·		
E-20—Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				<u> </u>
23 Other expenses STMT 4	357.	0	•	0.
24 Total operating and administrative	2 252	^		_
expenses. Add lines 13 through 23	3,358.	0	•	249,686.
25 Contributions, gifts, grants paid	249,686.			243,000.
26 Total expenses and disbursements.	253,044.	0		249,686.
Add lines 24 and 25 27 Subtract line 26 from line 12	233,044.			245,000.
3 Excess of revenue over expenses and disbursements	-197,993.			
b Net investment income (if negative, enter -0-)		55,051	•	rx
c Adjusted net income (if negative, enter -0-)		•	N/A)

123511 12-02-11

Part IV Capital Gains an	d Losses for Tax of	on Investment	Income						
(a) List and describe 2-story brick wareh	the kind(s) of property sol ouse, or common stock, 2	d (e g , real estate, 00 shs MLC Co)		P	low acc - Purch - Dona	iase	(c) Date a (mo., da	cquired y, yr)	(d) Date sold (mo , day, yr)
18 RIGHTS TO PURCHA	RIGHTS TO PURCHASE PROPERTY						06/01	1/11	11/21/11
b									
С				ļ					
d									
<u>e </u>				<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					in or (loss (f) minus	(g)
a 60,000.			16,26	6.					43,734.
<u>b</u>		<u> </u>							
c d		-							
e									·
Complete only for assets showing g	iain in column (h) and own	ed by the foundation	on 12/31/69			(1)	Gaine /C/	ol (h) gain	- minue
Complete only for assets shortning g	(i) Adjusted basis		cess of col (I)			col	(k), but n	ot less tha	ın -0-) or
(i) F.M V as of 12/31/69	as of 12/31/69	, , ,	col (j), if any				Losses (from col.	(h)) ´
a									43,734
b									,
C								_	
d									
е									
	∫ If gain, als	o enter in Part I, line	7)					
2 Capital gain net income or (net capita	al loss) { If (loss), e	nter -0- ın Part I, line	7	ľ	2				43,734
3 Net short-term capital gain or (loss)	as defined in sections 122	2(5) and (6)		_					
If gain, also enter in Part I, line 8, col		-(-, (-,		Ì					
If (loss), enter -0- in Part I, line 8 Part V Qualification Und					3			N/F	A
Was the foundation liable for the section f "Yes," the foundation does not qualify		,,	•	rıod?					Yes X No
1 Enter the appropriate amount in each	h column for each year; se	e instructions before	e making any entri	es.					
(a) Base period years))		(c				Distri	(d) Ibution ratio
Calendar year (or tax year beginning	in) Adjusted qualify		Net value of no					(col. (b) di	ivided by col (c))
2010		210,780.				1,332			.05202
2009		140,055.		<u>_</u>	,83	6,279 2,281	•		.07627
2008		117,072. 102,237.		<u></u>	90	3,075	•		.05261
2007 2006		90,162.				5,075 5,751			.04586
		30,102.	L		, , , ,	<i>5,15</i> 1	1		.04500
2 Total of line 1, column (d)							2		.28897
3 Average distribution ratio for the 5-y		e total on line 2 by 5	or by the number	r∩fv	216				12003.
the foundation has been in existence		o total on line 2 by 5,	, or by the namber		Ju13		3		.05779
		•	• •						
4 Enter the net value of noncharitable-	use assets for 2011 from F	Part X, line 5					4		4,807,809
		•		•	•	•			<u> </u>
5 Multiply line 4 by line 3							5		277,867
6 Enter 1% of net investment income	(1% of Part I, line 27b)						6		551
7 Add lines 5 and 6	•						7		278,418
									0.40
8 Enter qualifying distributions from P							_ 8		249,686
If line 8 is equal to or greater than lin	ne 7, check the box in Part	VI, line 1b, and com	plete that part usii	ng a 1	% tax ı	rate.			
See the Part VI instructions	-,	··							Form 000 DE /201:

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Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctior	ıs)
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 here and enter 1%		1,1	01.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
3	Add lines 1 and 2		1,1	01.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,, ,, ,,,,,,,,	1,1	01.
6	Credits/Payments			
	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 305.			
	Exempt foreign organizations - tax withheld at source . 6b			
	Tax paid with application for extension of time to file (Form 8868) 6c 1,000.			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d 7		1,3	05.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2	04.
	Enter the amount of line 10 to be: Credited to 2012 estimated tax > 204 . Refunded > 11			0.
	art VII-A Statements Regarding Activities		V	NI-
1 4	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
h	any political campaign?	1a		<u>X</u>
u	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		
	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.			
r	Did the foundation file Form 1120-POL for this year?	40		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	16		
Ī	(1) On the foundation \blacktriangleright \$ O . (2) On foundation managers \blacktriangleright \$ O .			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, 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
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	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			
	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
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	Enter the states to which the foundation reports or with which it is registered (see instructions) NC			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	х	
9				
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV.	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

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Pa	rt 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			Ţ	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p	rivileges?		.	
	If "Yes," attach statement (see instructions)		12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A	. (010)0	<u> </u>	0.20	
14	The books are in care of ELLIOT BOSSEN Telephone no.	► <u>(919)9</u>	<u> </u>	930	<u>u</u>
	Located at ► 1414 RALEIGH RD, STE 250, CHAPEL HILL, NC	ZIP+4 ▶27	<u> </u>		т-т
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	Land	 N	/A	ш
46	and enter the amount of tax-exempt interest received or accrued during the year	15	- 14	Yes	No
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	1	146	res	X
	securities, or other financial account in a foreign country?		16	L	
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			1	
Ď.	country art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	 			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		· · · · · ·	Yes	No
1:	During the year did the foundation (either directly or indirectly)				110
•		es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		į		
		es X No			
	· · · · · · · · · · · · · · · · · · ·	es X No			
	· · · · · · · · · · · · · · · · · · ·	es X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
		es 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				
		es X No			
1	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		ĺ		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶□			
1	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 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		1		
	before 2011?	es X No			
	If "Yes," list the years 🚩,,,,,				
-	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrec				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attac				
	statement - see instructions)	N/A	2b	ļ	ļ
-	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
_					
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	. .			
	-	'es X No			
	b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons a				
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule to 1700, to determine if the foundation had expect by the second to 1700, to determine if the foundation had expect by the second to 1700, to determine if the foundation had expect by the second to 1700, to determine if the foundation had expect by the second to 1700, to determine if the foundation had expect by the second to 1700,	o, N/A	25	Ī	1
,	Form 4720, to determine if the foundation had excess business holdings in 2011.)	τλ/ τν ·	3b	+	X
	 a 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 purposes. 	en that	4a	 	1
	had not been removed from leopardy before the first day of the tax year beginning in 2011?	io triat	4b		X

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Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be R	equired (continu	ued)		
5a During the year did the foundation pay or incur any amount to			[
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s 🗓 No 🗼		
(2) Influence the outcome of any specific public election (see section 4955), of	r to carry on, directly or indire				
any voter registration drive?	•	· <u>—</u>	s 🔀 No 🗼		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	L Ye	s 🗶 No 📙		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		L Ye	s 🗓 No 📗		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo				
the prevention of cruelty to children or animals?		L Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described in	n Regulations	4-		
section 53 4945 or in a current notice regarding disaster assistance (see instru	ections)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere .		▶∟∟∤		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?	N	/A LYe	s L No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).		ŀ	•	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		L Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.			[
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	. L Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib	· · · · · · · · · · · · · · · · · · ·	<u> </u>	N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	1		
r aid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	10	Evnanca
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	s acc) Expense ount, other
	to position	enter -0-)	compensation	aı	lowances
ELLIOT G. BOSSEN	VICE PRESIDEN	ll _T .			
1414 RALEIGH ROAD, STE 250	1 00	0.	0		0.
CHAPEL HILL, NC 27517	1.00 PRESIDENT	· · · · ·		•	
CONNIE NICKELL BOSSEN	PRESIDENT				
1414 RALEIGH ROAD, STE 250	1.00	0.	o		0.
CHAPEL HILL, NC 27517	1.00	0.	- 0	•	
	-			1	
	-			Ì	
				-	
	+			}	
	+	•		ļ	
2 Compensation of five highest-paid employees (other than those in	cluded on line 1) If none	enter "NONF."	l		
	(b) Title, and average		(d) Contributions to) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plan and deferred	s lacc	ount, other
NONE	devoted to position		compensation	 "	104401003
NOTE	-			1	
	· · · · · · · · · · · · · · · · · · ·		-		
	†		1		
	-		1		
			<u> </u>	+	
	1		1		
				_	
	1				
Total number of other employees paid over \$50,000					0

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ento	er "NONE."	
(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		D 0
Part IX-A Summary of Direct Charitable Activities	<u> </u>	· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati	stical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc	
1N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of	n lines 1 and 2	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.	j	
3		
Total. Add lines 1 through 3	>	0.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	4,881,024.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	4,881,024.
е	Reduction claimed for blockage or other factors reported on lines 1a and	. 1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,881,024.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	73,215.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	4,807,809.
6	Minimum investment return. Enter 5% of line 5	6	240,390.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part)	d certai	
1	Minimum investment return from Part X, line 6	1	240,390.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2¢	1,101.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,101. 239,289.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	239,289.
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	239,289.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		249,686.
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	<u> 1a</u>	249,686.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
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	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	249,686.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	249,686.
	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	qualifies	s for the section

Part XIII Un	distributed Ir	ncome (see	instructions)
--------------	----------------	------------	---------------

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				
line 7				239,289.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years				
		0.		
3 Excess distributions carryover, if any, to 2011				
a From 2006				
b From 2007	1			
c From 2008				
d From 2009	}		ĺ	
e From 2010 5,425.				
f Total of lines 3a through e	5,425.			
4 Qualifying distributions for 2011 from				
Part XII, line 4 ► \$ 249,686.			_	
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.	· · · · , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	······································	mmarman akika akikata	
d Applied to 2011 distributable amount	10.000			239,289.
e Remaining amount distributed out of corpus	10,397.	1.1.1 1.11.1	11.1 14111-11.1 1.1111-1.1 1.1111-1	
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	1			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	15,822.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				······
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2010 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012			· · · ·	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	_			
section 170(b)(1)(F) or 4942(g)(3)	0.	~		
8 Excess distributions carryover from 2006	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	15,822.			
10 Analysis of line 9				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010 5, 425.				
e Excess from 2011 10,397.				5 000 DE (0044)

Part XIV Private Operating Fo	ACK FOUNDAT		I-Δ question 9)	N/A	OUZIU Page Tu
1 a If the foundation has received a ruling or			TA, question 9/	N/A	· · - · - ·
foundation, and the ruling is effective for					
b Check box to indicate whether the found	•	•	in section	4942(j)(3) or 49	942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	4542(J)(5) 01 4.	
Income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for	(4) - 5 · ·	(5)-510	(3) = 333	(2) 200	(0)
	l				
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					ļ
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 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		· · · · · · · · · · · · · · · · · · ·			
an exempt organization	_				
(4) Gross investment income		<u> </u>			<u> </u>
Part XV Supplementary Info	•		if the foundation	had \$5,000 or m	ore in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh year (but only if they have contributed n			tributions received by the	foundation before the cl	ose of any tax
SEE STATEMENT 7					
 List any managers of the foundation wh other entity) of which the foundation ha 			(or an equally large portion	on of the ownership of a	partnership or
NONE					
2 Information Regarding Contribut Check here ☐ If the foundation of	only makes contributions	to preselected charitable	e organizations and does n		
the foundation makes gifts, grants, etc	·		•	miplete items za, D, C, at	iu u.
a The name, address, and telephone num ELLIOT BOSSEN, SILVE 1414 RALEIGH RD., ST	RBACK FOUNI	DATION, INC	, 919-969-93	300	
b The form in which applications should to					
NO SPECIFIC FORM c Any submission deadlines					
NONE d Any restrictions or limitations on award	s, such as by geographi	cal areas, charitable fields	s, kinds of institutions, or o	other factors:	
NONE	-, -35 		-,av vamanana, ar (
123601 12-02-11		10	<u> </u>		Form 990-PF (2011)

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor a Paid during the year CAROLINA BALLET PUBLIC CHARITY CHARITABLE 3401-131 ATLANTIC AVENUE RALEIGH, NC 27604 5,000. CENTRAIDE OF GREATER MONTREAL (UNITED PUBLIC CHARITY CHARITABLE WAY) 493 SHERBROOKE STREET WEST MONTREAL, QUEBEC, CANADA H3A 1B6 1,000. CHAPEL HILL-CARRBORO PUBLIC SCHOOL PUBLIC CHARITY EDUCATION ADVANCEMENT FOUNDATION P.O. BOX 877 CARRBORO, NC 27510 500. DUKE CANCER PATIENT SUPPORT PROGRAM PUBLIC CHARITY CHARITABLE DUMC BOX 3139 DURHAM, NC 27710 14,500. DUKE CHILDREN'S HOSPITAL PUBLIC CHARITY CHARITABLE 324 BLACKWELL STREET DURHAM, NC 27701 5,000. SEE CONTINUATION SHEET(S) Total ➤ 3a 249,686. b Approved for future payment NONE Total

er gross amounts unless otherwise indicated	Unrelated b	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exemp
Program service revenue:	code	Amount	code	Amount	function income
l	_				
)					 -
·					
	_		-		····
e	_				
	_				
Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash			14	11 217	
investments			14	11,317.	
Dividends and interest from securities	<u> </u>	· · · · · · · · · · · · · · · · · · ·			, , , , , , , , , , , , , , , , , , ,
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property Other investment income					•
Gain or (loss) from sales of assets other					-
than inventory			01	43,734.	
Net income or (loss) from special events			-	13,7315	
Gross profit or (loss) from sales of inventory					
Other revenue:					
_					
b	-		1 1		
	-				
d					
e	_				
Subtotal Add columns (b), (d), and (e)			0.	55,051.	
Total. Add line 12, columns (b), (d), and (e)	<u> </u>			. 13	55,0
ee worksheet in line 13 instructions to verify calculations	١				
Part XVI-B Relationship of Activities	s to the Accon	npiisnment of	Exempt P	urposes	
ine No. Explain below how each activity for which in	ncome is reported in (column (e) of Part X	VI-A contributed	I importantly to the accom	plishment of
▼ the foundation's exempt purposes (other th				•	•
			-		
1					

Part /	V 31]	Exempt Organi		iiers 10 a	na iransac	uons a	nu Relationsh	iips with Nonch	arıtable	3	
1 Did	the ora	anization directly or indire		f the following	with any other	organizatını	n described in section	on 501(c) of	1	Yes	No
		ther than section 501(c)						55.(5) 5.			
		rom the reporting founda									
	Cash				,				1a(1)	[]	X
	Other a			•		• •		• •	1a(2)		X
		actions				•••					
		of assets to a noncharitat	ole exempt organizatı	on					16(1)		X
• •		ises of assets from a nor						··	1b(2)		X
		of facilities, equipment, of	•	3			•		1b(3)		X
		ursement arrangements				•			1b(4)		X
		or loan guarantees							1b(5)		X
		mance of services or mei		ing solicitation	ns				1b(6)		X
c Sha	ring of	facilities, equipment, mai	iling lists, other asset	s, or paid emi	ployees .				10		X_
		er to any of the above is				should alw	vays show the fair m	arket value of the goods	, other as	sets,	
or s	ervices	given by the reporting fo	oundation. If the foun	dation receive	ed less than fair r	narket valu	e in any transaction	or sharing arrangement	, show in		
col	umn (d)	the value of the goods,	other assets, or servi	ces received							_
(a) Line n	o (b) Amount involved	(c) Name of	noncharitable	exempt organiza	ation	(d) Description	of transfers, transactions, an	d shanng a	mangeme	ents
	.										
	ļ										
	<u> </u>										
	_										
						_					
		dation directly or indirect	•	•		mpt organi	zations described				_
		501(c) of the Code (othe	٠.	(3)) or in sect	tion 527?	-			Yes	<u> </u>	No No
<u>b if "</u>	Yes," co	mplete the following sch			I a		1				
		(a) Name of org	janization		(b) Type of org	anization		(c) Description of relatio	nship		
		N/A						 			
							-				
	Unda-	penalties of penury, I declare	that I have eva	e return traduction	0.0000000000000000000000000000000000000	hadulas and	etatemente and to the	heet of my knowledge			
0:		penalties of perjury, I declare lief, it is true, project, and cor						han any bandadan	May the IRS	discuss	this erer
Sign Here		() Olala			1 1/0	11	WICE I	t :	shown belo	w (see in	str)?
nere	Sign	ature of officer or trustee	, •					RESIDENT	X Ye	:s ∟	No
	J			Preparer's s	Date (Title Date	Check If PTI	N		
		Print/Type preparer's na	טוונ	riepalei S S	ignature		Date	self- employed	14		
Paid		יי ד תדעוגת	II INITIOONI		L. HUNT	OON	11/08/12		0007	820/	1
Prep	arer	DAVID L. H			BROWN P		11/00/12	Firm's EIN ► 56-			<u> </u>
Use		riim s name 🚩 COL	IERMI HONI	OON &	PKOMIN P	TIC		FIRM S EIN F 30-	1744.	ノエマ	
U36 (Ji ii y	Firm's address ▶ PO	BOX 4320								
			APEL HILL		7515_42	20		Рнопе по. 919	- 968	_49	11
			EST LIT HITH	17 140 2	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Tritule IIU. 213	Form 99		
									33	- I I	(2011)

Part XV Supplementary Information 3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
UKE UNIVERSITY		PUBLIC CHARITY	EDUCATION ADVANCEMENT	
2127 CAMPUS DRIVE				20.000
DURHAM, NC 27708				30,000
OURHAM-CHAPEL HILL JEWISH FEDERATION		PUBLIC CHARITY	CUADITARID	
622 LYCKAN PKWY		FORDIC CHARITI	CHARITABLE	
OURHAM, NC 27707				25,000
EMILY KRZYZEWSKI CENTER		PUBLIC CHARITY	CHARITABLE	
904 WEST CHAPEL HILL STREET				
DURHAM, NC 27710				1,000
HEARTS OF HOPE SOCIETY (RONALD		PUBLIC CHARITY	CHARITABLE	
(CDONALD HOUSE)				
506 ALEXANDER AVENUE				
DURHAM, NC 27705				1,000
TAKE A WISH FOUNDATION OF EASTERN NO		PUBLIC CHARITY	CUADITADI.P	
2880 SLATER ROAD STE 105		FORBIC CHARIII	CHARTIABLE	
MORRISVILLE, NC 27560				5,000
MUSEUM OF LIFE AND SCIENCE		PUBLIC CHARITY	CHARITABLE	
433 WEST MURRAY AVENUE				
DURHAM, NC 27704				10,000
NASHER MUSEUM OF ART AT DUKE		PUBLIC CHARITY	CHARITABLE	
UNIVERSITY				
2001 CAMPUS DRIVE DURHAM, NC 27705				1,000
NORTH CAROLINA SYMPHONY		PUBLIC CHARITY	CHARITABLE	
3700 GLENWOOD AVENUE, STE 130				<u>.</u>
RALEIGH, NC 27612		-		2,500
PLAYWORKS DURHAM			CHARITABLE	
119 MARKET STREET			P.I.A.I IABBE	
DURHAM, NC 27701				250
STUDENT SOLUTIONS, INC.		PRIVATE	EDUCATION ADVANCEMENT	
1414 RALEIGH ROAD #250		FOUNDATION		
CHAPEL HILL, NC 27517 Total from continuation sheets	<u> </u>	_l_		147,936 223,686

2011 DEPRECIATION AND AMORTIZATION REPORT

1,822. 1,822. 1,822. 0. 1,822. 1,822. 0.	Asset No	Asset	Date Acquired	Method	Life	U O E >	Line Una	Unadjusted Cost Or Basis	Bus %	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated	Current Sec 179	Current Year Deduction	Ending Accumulated
AMORT AM	1					>	4	_1	\neg			_	Depreciation	Expense		å
1,922. 1,822. 1,	-	ORGANIZATION COSTS	01/31/04		60M	HY43		1,822.				1,822.	1,822.		0	1,822.
1,622.		* TOTAL 990-PF BG 1 DEPR &								•••••	•	********				
	<u>:.ī.</u>	AMORT						1,822.		****	_	1,822.			Ö	
	-,						·			******	•					
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			_								_					

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH IN	VESTMENTS S	TATEMENT 1
SOURCE				AMOUNT
FIRST CITIZENS BANK SUNTRUST BANK			_	35. 11,282.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	_	11,317.
FORM 990-PF	ACCOUNTI	NG FEES	S	STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	1,900.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	1,900.	0.		0.
FORM 990-PF	TAX	ES	8	STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SECTION 4940 TAX	1,101.	0.		0.
TO FORM 990-PF, PG 1, LN 18	1,101.	0.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 4
DESCRIPTION		(B) NET INVEST- MENT INCOME		
BANK SERVICE CHARGESS	357.	0.		0.
	357.	0.		0.

FORM 990-PF OTHER	LIABILITIES	STATEMENT	6
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
ACCRUED SECTION 4940 TAX	0.	79	6.
TOTAL TO FORM 990-PF, PART II, LINE 2	22 0.	79	96.
-	- LINE 1A	STATEMENT	=

NAME OF MANAGER

ELLIOT G. BOSSEN CONNIE NICKELL BOSSEN

						Page 2
ote. Only	e filing for an Additional (Not Automatic) 3-Month E					$\triangleright [X]$
-	complete Part II if you have already been granted an		- ·	filed Form 8	3868.	
art II	e filing for an Automatic 3-Month Extension, comple			nal (no c	onios ne	adad)
art ir	Additional (Not Automatic) 3-Month I	Extension		-		see instructions
pe or	Name of exempt organization or other files, see instr	uctions	Entermers			on number (EIN) o
nt	Name of exempt organization or other filer, see instr	uctions		cilibioyei	Identincati	on number (Env) o
	SILVERBACK FOUNDATION, INC.			X	83-03	880210
date for	Number, street, and room or suite no. If a P.O. box,		tions.	 	curity numb	
m See]	1414 RALEIGH ROAD #250				,	,
ructions	City, town or post office, state, and ZIP code. For a CHAPEL HILL, NC 27517	foreign add	ress, see instructions.			
•						
ter the R	leturn code for the return that this application is for (f	ile a separa	te application for each return)		·•	0 4
plicatio	n	Return	Application			Return
For		Code_	Is For			Code
m 990		01				
rm 990-E		02	Form 1041-A			08
m 990-E		01	Form 4720			09
m 990-F		04	Form 5227		· · · · -	10
	(sec. 401(a) or 408(a) trust)	05 06	Form 6069 Form 8870			11
	「(trust other than above) not complete Part II if you were not already grante			wieuck file	d Form 88	
If the or	one No. ► (919)969-9300 ganization does not have an office or place of busine for a Group Return, enter the organization's four dis-			If this is fo	r the whole	7 Paroup, check this
If the or If this is to the control of the contro		and atta NOVEM check reas VERIF NECE O, or 6069, e	emption Number (GEN) ach a list with the names and EINs of BER 15, 2012. , and ending the control of the cont	of all memb	eturn D PAR	e group, check this ension is for.
If the or If this is a large For C If the State ADI SOU ACC If this nonr If this or If the I	ganization does not have an office or place of busines for a Group Return, enter the organization's four diginal. If it is for part of the group, check this box. uest an additional 3-month extension of time untilical and a group and the group are tax year beginning that it is for less than 12 months, and the group are tax year entered in line 5 is for less than 12 months, and the group are tax year entered in line 5 is for less than 12 months, and the group are tax year entered in line 5 is for less than 12 months, and the group are tax year entered in line 5 is for less than 12 months, and the group are tax year entered in line 5 is for less than 12 months, and the group are tax year entered in line 5 is for less than 12 months, and the group are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months, are tax year entered in line 5 is for less than 12 months.	and atta NOVEM check reas VERIF NECE o, or 6069, e	emption Number (GEN) ach a list with the names and EINs of BER 15, 2012, and ending ach a list with the names and EINs of BER 15, 2012, and ending ach a list with the names and EINs of BER 15, 2012, and ending ach	of all memb	ers the extrement	group, check this ension is for. TY AND
If the or If this is a previous of the or of t	ganization does not have an office or place of busines for a Group Return, enter the organization's four diginal . If it is for part of the group, check this box usest an additional 3-month extension of time untilestalendar year 2011, or other tax year beginning tax year entered in line 5 is for less than 12 months, Change in accounting period in in detail why you need the extension DITIONAL TIME IS NEEDED TO URCES. THIS INFORMATION IS CURATE RETURN. Is application is for Form 990-BL, 990-PF, 990-T, 4720 refundable credits. See instructions. Is application is for Form 990-PF, 990-T, 4720, or 606 payments made. Include any prior year overpayment yously with Form 8868.	and attaneous Execution of the control of the contr	emption Number (GEN)	of all memb	eturn D PAR' LETE	group, check this ension is for. TY AND
If the or If this is a previous of the or If t	ganization does not have an office or place of busines for a Group Return, enter the organization's four diginal of the group, check this box. If it is for part of the group, check this box usest an additional 3-month extension of time until calendar year 2011, or other tax year beginning tax year entered in line 5 is for less than 12 months, change in accounting period in detail why you need the extension DITIONAL TIME IS NEEDED TO URCES. THIS INFORMATION IS CURATE RETURN. Is application is for Form 990-BL, 990-PF, 990-T, 4720, or 606 to any ments made. Include any prior year overpayment priously with Form 8868. Ince due. Subtract line 8b from line 8a. Include your lines.	verification of the control of the c	emption Number (GEN)	of all memb	eturn D PAR LETE	egroup, check this ension is for. TY AND 1,305
If the or If this is a previous of the or If t	ganization does not have an office or place of busines for a Group Return, enter the organization's four diginal of the group, check this box. If it is for part of the group, check this box usest an additional 3-month extension of time until calendar year 2011, or other tax year beginning tax year entered in line 5 is for less than 12 months, change in accounting period in detail why you need the extension DITIONAL TIME IS NEEDED TO URCES. THIS INFORMATION IS CURATE RETURN. Is application is for Form 990-BL, 990-PF, 990-T, 4720, or 606 or application is for Form 990-PF, 990-T, 4720, or 606 or application is	nt Group Execution and atternation and atterna	emption Number (GEN) ach a list with the names and EINs aber 15, 2012, and ending ach a list with the names and EINs aber 15, 2012, and ending ach a list with the names and EINs aber 15, 2012, and ending ach	of all memb ng Final r M THIR A COMP 8a 8b	eturn D PAR' LETE	egroup, check this ension is for. TY AND 1,305
If the or If this is a previous of the or If t	ganization does not have an office or place of busines for a Group Return, enter the organization's four diginal of the group, check this box. If it is for part of the group, check this box. Lest an additional 3-month extension of time until calendar year 2011, or other tax year beginning exax year entered in line 5 is for less than 12 months, change in accounting period in detail why you need the extension discount of time until calendar which is in detail why you need the extension discount of the extension discount discount discount discount discount discount discount discount d	verification multiplication multiplication multiplication multiplication in the company of the c	emption Number (GEN)ach a list with the names and EINs of BER 15, 2012, and ending and EINs of BER 15, 2012, and ending and ending ach a list with the names and EINs of BER 15, 2012, and ending ach	ng Final r M THIR A COMP 8a 8b 8c only.	eturn D PAR' LETE	group, check this ension is for. TY AND 1,305
If the or If this is a previous of the or If t	ganization does not have an office or place of busines for a Group Return, enter the organization's four diginal. If it is for part of the group, check this box. Lest an additional 3-month extension of time until calendar year 2011, or other tax year beginning at tax year entered in line 5 is for less than 12 months, change in accounting period at in detail why you need the extension DITIONAL TIME IS NEEDED TO URCES. THIS INFORMATION IS CURATE RETURN. Is application is for Form 990-BL, 990-PF, 990-T, 4720 are fundable credits. See instructions. Is application is for Form 990-PF, 990-T, 4720, or 606 application is for Form 990-PF, 9	verification multiple of the company	emption Number (GEN)ach a list with the names and EINs of BER 15, 2012, and ending a	mg Final r M_THIR A_COMP 8a 8b 8c only. to the best of	ers the ext	group, check this ension is for. TY AND 1,305
If the or of this is ox I require For control of the ADD ACC ACC ACC ACC ACC ACC ACC ACC ACC	ganization does not have an office or place of busines for a Group Return, enter the organization's four diginal. If it is for part of the group, check this box. Lest an additional 3-month extension of time until calendar year 2011, or other tax year beginning at tax year entered in line 5 is for less than 12 months, change in accounting period at in detail why you need the extension DITIONAL TIME IS NEEDED TO URCES. THIS INFORMATION IS CURATE RETURN. Is application is for Form 990-BL, 990-PF, 990-T, 4720 are fundable credits. See instructions. Is application is for Form 990-PF, 990-T, 4720, or 606 application is for Form 990-PF, 9	verification multiple of the company	emption Number (GEN)ach a list with the names and EINs of BER 15, 2012, and ending and EINs of BER 15, 2012, and ending and ending ach a list with the names and EINs of BER 15, 2012, and ending ach	ng Final r M THIR A COMP 8a 8b 8c only.	ers the ext	group, check this ension is for. TY AND 1,305