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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

For	calendar year 2011 or tax year beginning		, and ending		
Nai	me of foundation			A Employer identification	number
С	ARY FOUNDATION			94-3420959	•
Nur	mber and street (or P.O. box number if mail is not delivered to street a	address)	Room/suite	B Telephone number	
_2	117 SOUTHWIND CIRCLE			205.428.48	
City	y or town, state, and ZIP code			C If exemption application is p	ending, check here
B	IRMINGHAM, AL 35244				
G	Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		[
	Address change	Name change		Foreign organizations me 2. check here and attach co	peting the 85% test, proputation
H C	Check type of organization: X Section 501(c)(3) exc	empt private foundation		E If private foundation sta	tus was terminated
	Section 4947(a)(1) nonexempt charitable trust (Other taxable private founda	ition	under section 507(b)(1)	(A), check here
1 Fa	air market value of all assets at end of year J Accountin	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
(fr	rom Part II, col (c), line 16)	ner (specify)		under section 507(b)(1)	(B), check here
	\$ 54,898. (Part I, colur	nn (d) must be on cash b	pasis)		, .
Pa	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 charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	24,000.		N/A	
	2 Check if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	21.	21.	<u>.</u>	STATEMENT 1
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
<u>e</u>	6a Net gain or (loss) from sale of assets not on line 10 h Gross sales price for all				
Revenue	7 Capital gain net income (from Part IV, line 2)		0.		
æ	8 Net short-term capital gain		· · · · · · · · · · · · · · · · · · ·		
	9 Income modifications				
	Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				ļ
	12 Total. Add lines 1 through 11	24,021.	21.		
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
ģ	15 Pension plans, employee benefits				<u> </u>
TS 6	16a Legal fees b Accounting fees	CEIVED			
Expenses	c Other professional fees	10			
_	17 Interest PS MAR				
aţį	18 Taxes	ו וכט ו			
ist	19 Depreciation and depletion	<u> </u>			
Ē	20 Occupancy OG	DEN, UT	···		
¥	21 Travel, conferences, and meetings				
and	22 Printing and publications				
ē	23 Other expenses				
Operating and Administrative	24 Total operating and administrative	_	^		
å	expenses. Add lines 13 through 23	0.	0.		0.
_	25 Contributions, gifts, grants paid	24,375.			24,375.
	26 Total expenses and disbursements.	24,375.	0.		24,375.
	Add lines 24 and 25 27 Subtract line 26 from line 12:	44,3/3.		 	44,313.
	2/ SUBTRACT TIME 20 TOTT TIME 12: a Excess of revenue over expenses and disbursements	<354.	>		
	b Net investment income (if negative, enter -0-)		21.		
	c Adjusted net income (if negative, enter -0-)			N/A	

CLUMBER NAR 19 2012

For	m 99	0-PF (2011) CARY FOUNDATION		94-3	3420959 Page 2	
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year			
<u> </u>		Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	55,252.	54,898.	54,898.	
		Savings and temporary cash investments				
	3	Accounts receivable >				
	١,	Less: allowance for doubtful accounts				
	4	Pledges receivable				
	_	Less: allowance for doubtful accounts ► Grants receivable				
		Receivables due from officers, directors, trustees, and other				
		disqualified persons				
	7	Other notes and loans receivable		-		
	'	Less; allowance for doubtful accounts				
so.	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges		1		
Ş	1 -	Investments - U.S. and state government obligations				
	1	Investments - corporate stock		-	-	
	i	Investments - corporate bonds				
	ı	Investments - land, buildings and equipment basis				
	İ	Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation				
	15	Other assets (describe				
				54 000	F.4. 000	
_	1	Total assets (to be completed by all filers)	55,252.	54,898.	54,898.	
	1	Accounts payable and accrued expenses				
	18	Grants payable				
es	19	Deferred revenue		-		
Liabilities		Loans from officers, directors, trustees, and other disqualified persons				
E.	1	Mortgages and other notes payable				
	22	Other liabilities (describe				
	,,	Total liabilities (add lines 17 through 22)	0.	0.1		
_	23	Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.				
es	24	Unrestricted				
ances	1	Temporarily restricted				
Bağ		Permanently restricted				
pu		Foundations that do not follow SFAS 117, check here				
Ξ.		and complete lines 27 through 31.				
S	27	Capital stock, trust principal, or current funds	0.	0.		
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
Net Assets or Fund Bala	29	Retained earnings, accumulated income, endowment, or other funds	55,252.	54,898.		
Net	30	Total net assets or fund balances	55,252.	54,898.		
			050	54 000		
_	31	Total liabilities and net assets/fund balances	55,252.	54,898.		
F	art	III Analysis of Changes in Net Assets or Fund Ba	alances			
_		I net assets or fund balances at beginning of year - Part II, column (a), line	30			
!		st agree with end-of-year figure reported on prior year's return)	••	1	55,252.	
2		r amount from Part I, line 27a		2	<354.>	
		r increases not included in line 2 (itemize)		3	0.	
-		lines 1, 2, and 3		4	54,898.	
		eases not included in line 2 (itemize)		5	<u> </u>	
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	54,898.	
_					Form 990-PF (2011)	

Form 990-PF (2011)	CARY FO	UNDATION	_			9	<u>4-342(</u>	959	Page 3
Part IV Capital	I Gains and Lo	osses for Tax on li	nvestmen	t Income					
		and(s) of property sold (e.ç or common stock, 200 sh			(b) How acquired P - Purchase D - Donation	(c) Date a (mo., d	acquired ay, yr.)	(d) Dat (mo., d	
1a		····			1				
b	NONE							_	
С									
d									
<u>e</u>									
(e) Gross sales pr	rice (f)	Depreciation allowed (or allowable)		st or other basis expense of sale			ain or (loss) (f) minus (ç))	
8									
<u>b</u>									
<u>c</u>									
<u>d</u>									
<u>e</u>	l	<u>-</u>	<u> </u>						
Complete only for as:	sets showing gain in	column (h) and owned by	the foundation	on 12/31/69			ol. (h) gain r		
(i) F.M.V. as of 12/3	31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i)	CO		ot less than (from col. (h		
<u>a</u>				<u></u>					
<u>b</u>			ļ						
<u>c</u>			<u> </u>						
<u>d</u>			ļ						
<u>e</u>			Ļ		_ 				
2 Capital gain net incom	e or (net capital loss	If gain, also ente $\left\{ \begin{array}{ll} & \text{If gain, also ente} \\ & \text{If (loss), enter -0} \end{array} \right.$	r in Part I, line)- in Part I, line	7 - 7	} 2				-
3 Net short-term capital	gain or (loss) as def	ined in sections 1222(5) a	nd (6).						
If gain, also enter in Pa		c).			 				
If (loss), enter -0- in P	art I, line 8	Section 4940(e) for	Reduced	Tay on Net	Investment In	come			
						201110			
(For optional use by dome	estic private foundat	ions subject to the section	4940(a) tax on	i net investment in	icome.)				
If section 4940(d)(2) appl	lies, leave this part b	lank.							
Was the foundation liable	for the section 4949	tax on the distributable an	nount of any v	ear in the hase nei	rind2			Yes	X No
		section 4940(e). Do not co					'		
		mn for each year, see instr			es.				
(a) Base period		(b)			(c)		Dietrib	d) ition ratio	
Base periód Calendar year (or tax ye	years ear beginning in)	Adjusted qualifying dis	stributions	Net value of no	ncharitable-use assets	: (טוגנווטן col. (b) divii)	ded by col.	(c))
2010		1	4,000.		44,440).		. 3	15032
2009			8,700.		42,29	7.		. 4	42112
2008			0.		42,963				00000
2007			0.		32,79	3.			<u> 00000</u>
2006			1,000.		22,350).		.0	<u>44743</u>
								_	
2 Total of line 1, column	* *					2		.8	<u>01887</u>
-	-	se period - divide the total	on line 2 by 5,	or by the number	of years				
the foundation has bee	en in existence if less	s than 5 years				3		.1	<u>60377</u>
4 Enter the net value of a	noncharitable-use as	sets for 2011 from Part X,	line 5			4		44	,073.
5 Multiply line 4 by line 3	3					5		7	<u>,068.</u>
									•
6 Enter 1% of net invest	ment income (1% of	Part I, line 27b)				6			<u> 0.</u>
-						_		-	060
7 Add lines 5 and 6						7			<u>,068.</u>
8 Enter qualifying distrib	outions from Part XII	, line 4				8		24	<u>,375.</u>
If line 8 is equal to or (greater than line 7, c	heck the box in Part VI, line	e 1b, and comp	olete that part usin	g a 1% tax rate.				
See the Part VI instruc	tions.								

	n 990-PF (2011) CARY FOUNDATION		94-	<u>34209</u>	<u>59</u>		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	40(e), or 4	1948	- see in:	<u>stru</u>	ctior	าร)
1a	ı Exempt operatıng 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 instruction	18)	1				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	· }	_1				0.
	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).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	(-,-	2				0.
	Add lines 1 and 2		3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
	Credits/Payments:		<u> </u>				
	2011 estimated tax payments and 2010 overpayment credited to 2011						
	Exempt foreign organizations - tax withheld at source 6b		1				
			1				
	· · · · · · · · · · · · · · · · · · ·		1				
	Backup withholding erroneously withhold 6d	•	┨				Λ
	Total credits and payments. Add lines 6a through 6d		7	 			0.
8	······································	_	8	<u> </u>			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10	ļ <u>.</u>			
		Refunded 🚩	11	<u> </u>			
	art 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 participa	te or intervene	e in	<u> </u> _		Yes	
	any political campaign?			-	1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions fo	r definition)?			<u>1b</u>		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	enals publish	ed or				1
	distributed by the foundation in connection with the activities				ĺ	ĺ	
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:				Ì		
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	0.	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fo	undation				ļ	1
	managers. ▶ \$ 0.					i	
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 i	ncorporation,	or			1	
-	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
	of "Yes," has it filed a tax return on Form 990-T for this year?		N		4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			· -	5		Х
٠	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					ĺ	
v	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	t with the stat	e law				
	remain in the governing instrument?	t mai aio stat	0 1411		6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			-	7	X	
′				-	' +	^	
	If "Yes," complete Part II, col. (c), and Part XV						}
ъа	Enter the states to which the foundation reports or with which it is registered (see instructions)				- 1		
	AL			<u> </u>	- 1	ĺ	
b	olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or des	ignate)			,		
	of each state as required by General Instruction G? If "No," attach explanation			-	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494	2(J)(5) for cal	endar	-			4-
	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 a	ddresses			10	55	X
				Form 5	59 0-	· ۲۲ (2011)

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Pa	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	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 pri	vileges?			
	If "Yes," attach statement (see instructions)		12		_X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address ► N/A				
14	The books are in care of ▶ WILLIAM E. CARY JR. Telephone no. ▶	205-42	8 – 4	800	
	Located at ▶ 2117 SOUTHWIND CIRCLE BIRMINGHAM, AL	ZIP+4 ▶35	244		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			•	
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign				
	country >				
Pa	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
1a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	for the benefit or use of a disqualified person)?	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			İ	
	if the foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days.)	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here				
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected]		
	before the first day of the tax year beginning in 2011?		1c		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)):				
8	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning				
	before 2011? Yes	X No			
	If "Yes," list the years \blacktriangleright				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
	statement - see instructions.)	N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	>			i	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	X No			
b	olf "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons afte	·			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dis	pose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,				
	Form 4720, to determine if the foundation had excess business holdings in 2011)	N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose	.hat			
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?		4b		<u> X</u>
		Forn	n 990	-PF (2011)

Part VII-B Statements Regarding Activities for Which I	Form 4720 May Bo D	Pomuirod (<u>94-34209</u>	59 Page 6
· · · · · · · · · · · · · · · · · · ·	-orm 4720 May be r	required (contin	uea)	
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		es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	_		
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y6	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
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 i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		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 fi	om the tax because it mainta	ned		
expenditure responsibility for the grant?	N	/A 🗀 Ye	s No	
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			1 1
a personal benefit contract?		Y ₆	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			Sb 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	helter transaction?	☐ Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Information About Officers Directors Trust		nagers. Highly		
Part VIII Paid Employees, and Contractors			•	
1 List all officers, directors, trustees, foundation managers and their	compensation.		•	
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deterred compensation	account, other allowances
WILLIAM EUGENE CARY JR.	PRESIDENT	Cinci o j	COMPENSATION	4.101741.1000
2117 SOUTHWIND CIRCLE	TREBIED			
BIRMINGHAM, AL 35244	0.00	0.	0.	0.
	DIRECTOR	•		<u> </u>
2117 SOUTHWIND CIRCLE	DIRECTOR			
BIRMINGHAM, AL 35244	0.00	0.	0.	0.
	DIRECTOR	· ·	<u></u>	<u> </u>
	DIRECTOR			
5279 GREYSTONE WAY	0 00	۸ ا	0.	0
BIRMINGHAM, AL 35242	0.00	0.	- 0.	0.
	DIRECTOR			
8884 OLD HWY 280	0 00			0
CHELSEA, AL 35043	0.00	O.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(a) Eynense
(a) Name and address of each employee paid more than \$50,000	` 'hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other
	devoted to position		compensation	allowances
NONE				
		1		
· · · · · · · · · · · · · · · · · · ·				
		L		
Total number of other employees paid over \$50,000			•	0
			Form \$	990-PF (2011)

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	•	
		
		
	· · · · · · · · · · · · · · · · · · ·	
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced,	formation such as the etc.	Expenses
1 PROVIDE FINANCIAL ASSISTANCE FOR QUALIFYING INI	DIVIDUALS FOR	
TORNADO ASSISTANCE RELIEF.		
		12,500.
2 PROVIDE FINANCIAL ASSISTANCE FOR QUALIFYING INI	DIVIDUALS FOR	
MEDICAL PROCEDURES AND OTHER MEDICAL NEEDS.		11,875.
3		11,075.
<u> </u>	······································	
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	I and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
· · · · · · · · · · · · · · · · · · ·		
Total, Add lines 1 through 3	<u> </u>	0.
		Form 990-PF (2011)

_	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou		e instructions)
1 1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		· · · · · · · · · · · · · · · · · · ·
	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	44,744.
	Fair market value of all other assets	1c	
d ·	Fotal (add lines 1a, b, and c)	1d	44,744.
e 1	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
	Acquisition indebtedness applicable to line 1 assets	1 2	0.
	Subtract line 2 from line 1d	3	44,744.
4 (Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	671.
	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	44,073.
	Minimum investment return. Enter 5% of line 5	6	2,204.
	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part.)	nd certain	
1 1	Minimum investment return from Part X, line 6	1	2,204.
2a 1	Fax on investment income for 2011 from Part VI, line 5		
b I	ncome tax for 2011. (This does not include the tax from Part VI.)]	
c /	Add lines 2a and 2b	2c	0.
3 [Distributable amount before adjustments. Subtract line 2c from line 1	3	2,204.
4 F	Recoveries of amounts treated as qualifying distributions	4	0.
5 /	Add lines 3 and 4	5	2,204.
6 [Deduction from distributable amount (see instructions)	6	0.
7 <u>I</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,204.
	rt XII Qualifying Distributions (see instructions)		· ·
1 /	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a E	expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	24,375.
b F	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:		
a :	Suitability test (prior IRS approval required)	3a	
ь (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	24,375.
5 F	oundations that qualify under section 4940(e) for the reduced rate of tax on net investment		,
ı	ncome. Enter 1% of Part I, fine 27b	5	0.
6 /	Adjusted qualifying distributions. Subtract line 5 from line 4	6	24,375.
ı	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 for th	e section

Page 9 Part XIII Undistributed Income (see instructions) (b) (d) (c) (a) Corpus Years prior to 2010 2010 2011 1 Distributable amount for 2011 from Part XI, 2,204. tine 7 2 Undistributed income, if any, as of the end of 2011 0 a Enter amount for 2010 only **b** Total for prior years 0 3 Excess distributions carryover, if any, to 2011: a From 2006 **b** From 2007 c From 2008 16,585. d From 2009 778. e From 2010 28,363 f Total of lines 3a through e 4 Qualifying distributions for 2011 from 24. 375 Part XII, line 4. > \$ 0 a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 2,204. d Applied to 2011 distributable amount e Remaining amount distributed out of corpus 22,171 0. 0. Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (e)) Enter the net total of each column as indicated below: 50,534 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2010. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2012 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 0 section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2006 0 not applied on line 5 or line 7 Excess distributions carryover to 2012. 50,534 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9. a Excess from 2007 b Excess from 2008

c Excess from 2009

d Excess from 2010

e Excess from 2011

16,585. 11,778.

22.171

	UNDATION			94-34	420959 Page 1
Part XIV Private Operating Fo		······································	II-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	2011, enter the date of	the ruling	•		
b Check box to indicate whether the found	ation is a private operati	ng foundation described	in section	4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed		<u></u>			
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 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					
Part XV Supplementary Info			if the foundatio	n had \$5,000 or m	ore in assets
at any time during the	ne year-see inst	ructions.)			
1 Information Regarding Foundation a List any managers of the foundation who year (but only if they have contributed m	have contributed more ore than \$5,000). (See s		tributions received by th	ne foundation before the cl	ose of any tax
WILLIAM EUGENE CARY			/		
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large por	uon of the ownership of a	parmership of
• •	a 1070 or grouter intere				
NONE	0 0	October 1			·
2 Information Regarding Contribution Check here ☐ if the foundation on the foundation makes gifts, grants, etc. (nly makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone numb WILLIAM B. CARY, JR.	•	m applications should be PHWIND CIRCLE		HAM, AL 3524	14
b The form in which applications should be PROOF OF QUALIFYING 1					
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	

Part XV Supplementary Ir	nformation (continued)			
3 Grants and Contributions Paid	During the Yea		Payment		
Recipient		If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	_
Name and address (home or bus	siness)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year		., .			
DONNA EDWARDS		NONE	N/A	TORNADO RELIEF	
3239 HEATHROW DOWNS			[]		
HOOVER AL 35226					10,000,
NEIL CHAMPMAN		NONE	N/A	TORNADO RELIEF	
4889 6TH AVENUE		NONE	,,,,	TOTAL DO REBIBL	
MULGA AL 35118					1,000.
NI CODDIGUE VINITE		NONE	N/A	MEDICAL PROCEDURES	
NICODEMUS HANJE 2728 BRIARBERRY CIRCLE		NONE	N/A	MEDICAL PROCEDURES	
VESTAVIA AL 35226					6,000
				MEDICAL PROCEDURES	
TONY WILSON 6233 EASTER VALLY ROAD		NONE	N/A	MEDICAL PROCEDURES	
MCCALLA, AL 35111			İ		3,000.
		NO.177	.,,	BURIAL AFTER MEDICAL	
RAPHAL GRACEY 1015 34TH COURT NORTH		NONE	N/A	PROCEDURES	
BESSEMER AL 35020					1,875.
Total	SEE CON	TINUATION SHEE	T(S)	▶ 3a	24,375.
b Approved for future payment					
NONE			,		
10112					
					<u> </u>
			-		
				<u> </u>	
			L	.	
Total				<u>▶ 3b</u>	0. orm 990-PF (2011)

CARY FOUNDATION

er gross amounts unless otherwise indicated.	Unrelated I	ousiness income		led by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exemp
l			1 1		
					_
Fees and contracts from government agencies					
embership dues and assessments					
terest on savings and temporary cash					
vestments			14	21.	
vidends and interest from securities					
et rental income or (loss) from real estate					
Debt-financed property			1		
Not debt-financed property					
et rental income or (loss) from personal					
roperty			11		
ther investment income			1 1		
ain or (loss) from sales of assets other					
ian inventory			4		
et income or (loss) from special events			+		
ross profit or (loss) from sales of inventory					
ther revenue			1 1		
-	_		4		
<u> </u>	_				
	1 1		+		
					
				21	
ubtotal. Add columns (b), (d), and (e)		0		21.	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e)		0		21.	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.)			13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.)			13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie	s.)	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie e No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie e No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
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ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie e No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie e No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie e No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie e No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie e No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie e No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	
ubtotal. Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie e No. Explain below how each activity for which	s.) es to the Accon	nplishment of E	xempt	13	

(205)979-4100 Form 990-PF (2011)

P00989558

Firm's EIN ▶ 45-4084437

Check

self- employed

Phone no.

Date

Paid

Preparer

Use Only

Print/Type preparer's name

MEGAN PANDOLPH

Firm's name ► WARREN AVERETT.

Firm's address ► 2500 ACTON ROAD

BIRMINGHAM, AL 35243

Preparer's signature

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Name of the organization

Employer identification number

CA	RY FOUNDATION	94-3420959					
Organization type (check o							
Filers of:	Section:						
Form 990 or 990-EZ (enter number) organization							
4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a section 501(c)(s covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule a						
contributor Compl	ete Parts I and II.						
Special Rules							
509(a)(1) and 170(b	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg o)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the g o) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III							
contributions for use If this box is check purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contribute exclusively for religious, charitable, etc., purposes, but these contributions did not toted, enter here the total contributions that were received during the year for an exclusive amplete any of the parts unless the General Rule applies to this organization because its, etc., contributions of \$5,000 or more during the year	al to more than \$1,000. Iy religious, charitable, etc ,					
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule E Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

CARY	FOUNDATION		4-3420959	
Part I	Contributors (see instructions). Use duplicate copies of Part I is	f additional space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	WILLIAM E. CARY JR 2117 SOUTHWIND CIRCLE BIRMINGHAM, AL 35244	\$ 24,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)	

Employer identification number

CARY FOUNDATION

94-3420959

art II N	oncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given .	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ _		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ _		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			90, 990-EZ, or 990-PF)

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

Employer identification number

CARV F	OUNDATION			94-3420959				
Part III	Exclusively religious, charitable, etc., individ year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc., Use duplicate copies of Part III if additional	following line entry. For organization contributions of \$1,000 or less for	ons completing Part III, enter	s that total more than \$1,000 for the				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	1) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	ription of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held				
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
	Transferee s name; address; and							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		· · · · · · · · · · · · · · · · · · ·						
-	(e) Transfer of gift							
_	Transferee's name, address, and	3 ZIP + 4	Relationship of transferor to transferee					

CARY FOUNDATION 94-3420959 Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation status of recipient Amount Name and address (home or business) DEWAYNE FOSTER NONE N/A MEDICAL PROCEDURES 502 6TH AVENUE BESSEMER, AL 35020 1,000. LINDA NORTHCUTT TORNADO RELIEFE NONE N/A 234 ALLCORN DRIVE REMLAP, AL 35133 1,500.

Total from continuation sheets

2 500

FORM 990-PF	INTEREST	ON	SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE								AMOUNT	
REGIONS BANK									21.
TOTAL TO FORM	4 990-PF,	PAR	T I, LI	NE 3	, COLUMN A				21.