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Department of the Treasury

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

OMB No 1545-0052 2011

		evenue Service Note. The Touridation m	ay b	e able to	use a c					requirements		
		lendar year 2011 or tax year beginning				0:	3/01 , 2011,	and endin	-		02/28,20	12
-		e of foundation							- *	Employer ident		
THE STOUT FAMILY FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) Room/suite									20-45272			
Number and street (or P O box number if mail is not delivered to street address) Room/suite							te E	•	per (see instructions)			
										(3	36) 292-2917	7
PC	2_	BOX 22092								····		
Cit	y c	or town, state, and ZIP code		· <u></u>					Į.			
									0	If exemption applic pending, check her		•
_GF	₹E	ENSBORO, NC 27420-2092								perioning, orient fier		
GC	he	ck all that apply Initial return			Initia	return	of a former pu	iblic charity	<i>,</i> ,) 1. Foreign organiza	ations check here	•
		Final return			_	nded ret		,		2 Foreign organiza		_
		Address chang	е		Name	e chang	e			85% test, check	here and attach	
H C	he	ck type of organization X Section 5)(3) ex					\neg	•		·
	7	ection 4947(a)(1) nonexempt charitable trust	1 -				ıvate foundatı	on			n status was terminated	
I F			CCO					rual			b)(1)(A), check here .	
		ear (from Part II, col (c), line			ecify)	∨ ت					in a 60-month termination b)(1)(B), check here .	-
	-					ist be or	n cash basis)			3,100, 3000011 207(A. Well ellery light	
		Analysis of Revenue and Expenses (. 10/1110						(d) Disbursemen	nts
للنهد	1	total of amounts in columns (b), (c), and (d)	, ,,,,		Revenue		(b) Net inve		(c)	Adjusted net	for charitable	
		may not necessarily equal the amounts in		ех	penses	per	incom	income		ıncome	purposes	1
_	_	column (a) (see instructions))	_			5,150.	-				(cash basis onl	iy}
1		Contributions, gifts grants, etc., received (attach schedule) if the foundation is not required to	٠,		·	, 150.	1				ļ	
2		Check ► attach Sch B	}				-					
3	3	Interest on savings and temporary cash investment				4.	 	4.			2 mars 4	
4	ļ	Dividends and interest from securities				859.	-	859.			ATCH 1	
5	i a	Gross rents	٠.,									
	b	b Net rental income or (loss) a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all				-						
<u>و</u> 6												
Revenue		assets on line 6a	∤								 -	
		Capital gain net income (from Part IV, line 2)										
8		Net short-term capital gain	·								 	
10		Income modifications · · · · · · · · · · · · · · · · · · ·	•									
'		and allowances · · · ·					 				 	
		Less Cost of goods sold .										
		Gross profit or (loss) (attach schedule)					 					
11		Other income (attach schedule)				010		062			+	
12	<u> </u>	Total Add lines 1 through 11	_		7	,013.		863.			-	
13	,	Compensation of officers, directors, trustees, etc				0				-	-	
14	ŀ	Other employee salaries and wages	۱۳									
မ္တ 15		Pension plans, employee benefits									ļ	
ទី 16	а	Legal fees (gitach schedule)	ᆀ				ļ				ļ	
Expenses 16	b	Accounting es (attach schedule)012.	3			650.		650.				
	С	Other professional fees (attach schedule)	ا (د									
Administrative 18 19 20			[] [
[일 18	}	Taxes (attach schedule) (see instructions)	1 [1	
≝ 19	l	Depreciation (attach schedule) and depletion	ا ."									
통 20	l	Occupancy	. [
Ā 21		Travel, conferences, and meetings	г									
등 ₂₂		Printing and publications	- i									
E 23		Other expenses (attach schedule)										
23 24		Total operating and administrative expense										
<u>a</u>		Add lines 13 through 23				650.		650.		_		
5		Contributions, gifts, grants paid			6	,350.				_	6,	,350
_ 26		Total expenses and disbursements Add lines 24 and 2				,000.		650.			0 6,	,350
27		Subtract line 26 from line 12										
*'		Excess of revenue over expenses and disbursements				13.						
		Net investment income (if negative, enter -0)-;					213.			1	
		Adjusted net income (if negative, enter -0-).	· [—— 				
1	·	Adjusted lift income (n negative, citter -0-).	• 1				1					

For Paperwork Reduction Act Notice, see instructions.

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1:27:18 PM

Form **990-PF** (2011)

1072

106,731 Form **990-PF** (2011)

106,731

3

4

5

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶

3 Other increases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains and Losses for Tax on Investment Income

1 1

Page 3

(a) List ar 2-story b	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)				
1a	orick warehouse, or common stock, 200	, 615 1112 657	D-Donation	(,,			
b			 				
C							
d							
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini			
a							
<u>b</u>							
С							
<u>d</u>	<u> </u>		ļ				
<u>e</u>							
Complete only for assets	showing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) g			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	col (k), but not less than -0-) or Losses (from col (h))			
<u>a</u>							
<u>b</u>							
<u>c</u>							
d			<u> </u>				
<u>e</u>	<u> </u>		 				
2 Capital gain net income or	(net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2				
If gain, also enter in Pa	, , ,	structions) If (loss), enter -0- in $\}$	3				
	Under Section 4940(e) for Rec	duced Tax on Net Investment In					
	·	table amount of any year in the base	period?		Yes X No		
		see the instructions before making ar	nv entries				
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by			
2010	8,650.	59,349.		````	0.145748		
2009	8,900.	50,187.			0.177337		
2008	8,132.	75,201.			0.108137		
2007	7,570.	108,748.			0.069610		
2006	7,750.	111,650.			0.069413		
2 Total of line 1, column (d)			2		0.570245		
3 Average distribution ratio	for the 5-year base period - divide t dation has been in existence if less	the total on line 2 by 5, or by the	3		0.114049		
·					54,840.		
	charitable-use assets for 2011 from		4	······································			
5 Multiply line 4 by line 3			5		6,254.		
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		2.		
7 Add lines 5 and 6			7	 ,	6,256.		
8 Enter qualifying distributio If line 8 is equal to or gr Part VI instructions	ns from Part XII, line 4 eater than line 7, check the box	in Part VI, line 1b, and complete t	8 that part i	using a 1% tax	6,350.		
ISA	···				990-PE (2011)		

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	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			2.
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		-	
3	Add lines 1 and 2			2.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			2.
6	Credits/Payments			
	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			
	Exempt foreign organizations - tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d 6d			0
7	Total credits and payments Add lines 6a through 6d			U
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			2.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	_		۷.
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2012 estimated tax Refunded 11			
	Enter the amount of line 10 to be Credited to 2012 estimated tax ► Refunded ► 11 t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No
	or intervene in any political campaign?	1a		Х
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
-	instructions for definition)?	1b		х
	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			ĺ
С	Did the foundation file Form 1120-POL for this year?	1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$\Bigs\\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities	'		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b_		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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		х	
_	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? If "Yes," complete Part II, col (c), and Part XV	7_		
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 G2 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	"		
J	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9 _		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
_	and addresses	10		х

Pai	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 section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12		foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person h	ad advisory privileges? If "Yes," attach statement (see instructions)	12		х
13		oundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website	address ► N/A			
14		s are in care of ▶ RALPH D. STOUT, JR Telephone no ▶ 336-29	2-291	.7	
	Located a	at ▶41 STURBRIDGE LANE GREENSBORO, NC ZIP+4 ▶ 27408			
15		947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	,	>	\cdot
	and enter	the amount of tax-exempt interest received or accrued during the year			
16		time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a ba	nk, securities, or other financial account in a foreign country?	16		Х
		instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
		n country 🕨			
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required	,		
	File For	m 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During th	e year did the foundation (either directly or indirectly)		1	1
	(1) Enga	ge in the sale or exchange, or leasing of property with a disqualified person? Yes X No	}		
	(2) Borro	w money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqu	alified person?			
	(3) Furni	sh goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay (compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			}
	(5) Trans	sfer any income or assets to a disqualified person (or make any of either available for			
	the b	enefit or use of a disqualified person)?			
	(6) Agre	e to pay money or property to a government official? (Exception. Check "No" if the			
	found	lation agreed to make a grant to or to employ the official for a period after			1
	termi	nation of government service, if terminating within 90 days)			
b	olf any ar	swer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			1
		3 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. <u>1b</u>	ļ.——	
	Organiza	tions relying on a current notice regarding disaster assistance check here	ł	ł	l
C	Did the	foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
		corrected before the first day of the tax year beginning in 2011?	. 1c		X
2	Taxes or	failure to distribute income (section 4942) (does not apply for years the foundation was a private			
		foundation defined in section 4942(j)(3) or 4942(j)(5))			
а		d of tax year 2011, did the foundation have any undistributed income (lines 6d and			
		(III) for tax year(s) beginning before 2011? Yes X No			
		st the years (Additional Control of Contro			
C		e any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		ĺ	
	. •	to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	26		x
_	-	isted, answer "No" and attach statement - see instructions)	. 2b		 ^
C	_	usions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	j		ļ
2.		wands to a half more than a 20/ direct or adjust interest in any hyperson enterprise			}
зa		undation hold more than a 2% direct or indirect interest in any business enterprise ie during the year? Yes X No	1		
		did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or		ļ	
L		and persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	-		
		noner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
		15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
		n had excess business holdings in 2011)	. 3b		
4 2		undation invest during the year any amount in a manner that would jeopardize its charitable purposes?	1 .		Х
		foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	` <u> </u>		
•		purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	. 4b		х
			Form 99	0-PF	(2011)

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

3 Five highest-paid independent contractors for professional services (see instru	ictions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
		
otal number of others receiving over \$50,000 for professional services	<u> ▶ </u>	
Part IX-A Summary of Direct Charitable Activities		
	······································	
List the foundation's four largest direct charitable activities during the tax year include relevant statistical	I information such as the number of	Expenses
organizations and other beneficiaries served, conferences convened, research papers produced, etc		<u>. </u>
1 NONE		
2		
3	3	
4		
·		
art IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	12	Amount
1 NONE		
1		
2		·-·
²		
All other program related investments. See instructions		
All other program-related investments. See instructions		
3 NONE		
• WOURT		

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	n foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	52,601.
þ	Average of monthly cash balances	1b	3,074.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	55,675.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	55,675.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	· · · · ·	4	835.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	54,840.
6	Minimum investment return. Enter 5% of line 5	6	2,742.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this p	art)	
1	Minimum investment return from Part X, line 6	1	2,742.
2a	Tax on investment income for 2011 from Part VI, line 5		<u> </u>
b	Income tax for 2011 (This does not include the tax from Part VI)	i	
С	Add lines 2a and 2b	2c	2.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,740.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,740.
6		6	
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	2,740.
_		<u> </u>	
Pa	rt XII Qualifying Distributions(see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	6,350.
b		1b	
2	Program-related investments - total from Part IX-B 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		
ā	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	6,350.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
-	Enter 1% of Part I, line 27b (see instructions)	5	2.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,348.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when call		
	qualifies for the section 4940(e) reduction of tax in those years		

Page 9

	XIII Undistributed Income (see instru	ctions)			Page 5
		(a)	(b)	(c)	(d)
	istributable amount for 2011 from Part XI, Line 7	Corpus	Years prior to 2010	2010	2011
	ndistributed income, if any, as of the end of 2011				
	nter amount for 2010 only				
	otal for prior years 20_09 ,20_08 ,20 07				
3 E	xcess distributions carryover, if any, to 2011				
a Fr	rom 2006				
b Fr	rom 2007				1
c Fr	rom 2008				
d Fr	rom 2009 6 , 3 91 .				
e Fr	rom 2010				
	otal of lines 3a through e	20,929.			
4 Q	ualifying distributions for 2011 from Part XII,				
lır	ne 4 ▶ \$6,350.				
a A	pplied to 2010, but not more than line 2a				
	pplied to undistributed income of prior years				
(E	lection required - see instructions)				
	reated as distributions out of corpus (Election				
	quired - see instructions)				
	oplied to 2011 distributable amount	2 610			2,740.
	emaining amount distributed out of corpus	3,610.			<u> </u>
	xcess distributions carryover applied to 2011 f an amount appears in column (d), the same	 			
•	mount must be shown in column (a))				
	nter the net total of each column as				
	dicated below:	24,539.			
	orpus Add lines 3f, 4c, and 4e Subtract line 5	24,559.		·	
	rior years' undistributed income Subtract				
	ne 4b from line 2b				
เก	come for which a notice of deficiency has been		1		
	sued, or on which the section 4942(a) tax has been previously assessed				
	ubtract line 6c from line 6b Taxable nount - see instructions	1			
e Ui	ndistributed income for 2010 Subtract line				
	a from line 2a Taxable amount - see structions				
	ndistributed income for 2011 Subtract lines and 5 from line 1. This amount must be				
	stributed in 2012				
	mounts treated as distributions out of corpus				
	satisfy requirements imposed by section				
17	70(b)(1)(F) or 4942(g)(3) (see instructions)				
	cess distributions carryover from 2006 not				
ap	oplied on line 5 or line 7 (see instructions)	2,254.			
	xcess distributions carryover to 2012.	00 00-			
	ubtract lines 7 and 8 from line 6a	22,285.			
	nalysis of line 9				
	xcess from 2007 2,193.				
	ccess from 2008 4 , 4 08				
	ccess from 2010 5 , 683				
	3,010.				Form 990-PF (2011)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

JSA 1E1490 1 000

factors

c Any submission deadlines

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or App	roved for I	Future Payment	
Recipient	If recipient is an individual show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Anount
a Paid during the year				
2 · ale com 3 · ale 7 · ale				
ATTACHMENT 4				
ATTACHMENT 4				
		E		
			İ	
			ļ	
		ł		
		<u> </u>	> 2-	6,350.
Total	 			6,330.
b Approved for future payment				
		İ		
		1		
	1		<u> </u>	
Total	<u> <u></u> .</u>	<u> </u>	Sb	

Part XVI	 Analysis of Income-Production 	ucing Act	ivities			
	amounts unless otherwise indicated		ated business income (b)	Excluded by	/ section 512, 513, or 514	(e) Related or exempt
1 Program	n service revenue	Business code	Amount	Exclusion code	Amount	function income (See instructions)
a						
b						
c						
d						
е						
f						
g Fees	and contracts from government agencies					
2 Member	rship dues and assessments					
3 Interest of	on savings and temporary cash investments			14	4.	
4 Dividend	ds and interest from securities			14	859.	
5 Net rent	tal income or (loss) from real estate					
a Debi	t-financed property					
b Not	debt-financed property					
6 Net renta	al income or (loss) from personal property .					
7 Other in	vestment income					
8 Gain or (I	loss) from sales of assets other than inventory					
9 Net inco	ome or (loss) from special events					
10 Gross p	rofit or (loss) from sales of inventory					
11 Other re	evenue a	<u></u>			<u> </u>	
b						
c					.—	·
d						
е						
	I Add columns (b), (d), and (e)				863.	
	dd line 12, columns (b), (d), and (e)				¹³	863.
	heet in line 13 instructions to verify calcula					
Part XVI					-	
Line No.	Explain below how each activity					
▼	accomplishment of the foundation	n's exemp	t purposes (other thar	n by providing	funds for such purpose	s) (See instructions)
-	 					
						
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			<u>-</u>			
						
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Part 2	XVII	Information I Exempt Orga		ransfers To and Trans	sactions a	nd Relationships With No	oncha	ritab	le
ır	n sect	e organization direc	tly or indirectly	- - •	-	any other organization described section 527, relating to political		Yes	No
	_		g foundation to a	a noncharitable exempt orga	inization of				
(1) Cas	sh					. 1a(1)		Х
							. 1a(2)		X
		ransactions	naharitahla ayan	ant organization			45.44		x
, , , , , , , , , , , , , , , , , , ,	1) Sai 2) Pur	chases of assets fro	nchantable exen	npt organization			. 1b(1) 1b(2)	τ	$\frac{\lambda}{x}$
(;	3) Rei	ntal of facilities, equi	pment, or other	assets			1b(3)		X
į.	4) Rei	mbursement arrang	ements				1b(4)	1	Х
(!	5) Loa	ans or Ioan guarante	es				. 1b(5)	1	X
-				o or fundraising solicitations				 	X
			_	s, other assets, or paid emp		Column (b) should always sho		fo	X
V	alue d	of the goods, other	assets, or serv	rices given by the reporting	foundation	if the foundation received lese of the goods, other assets, or	ss than	fair n	narke
(a) Line		(b) Amount involved		noncharitable exempt organization		escription of transfers, transactions, and sh			
		N/A			N/A				
	$-\downarrow$								
		· · · · · · · · · · · · · · · · · · ·	 			· . ·			
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	-	-				· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·	1	··	_				
]								
	-+								
									
	-+								
			 						
d		ed in section 501(c) of the Code (d			ore tax-exempt organizations on 527?	Y	es x	No
		(a) Name of organization	n	(b) Type of organization	חנ	(c) Description of relation	nship		
		11115		N/A					
								_	
								-	
						d statements, and to the best of my knowle	dge and	belief, it	is true
Sign	Correct	t, and complete Declaration	or preparer (other than	taxpayer) is based on all information of v	vilicii preparei nas		IRS discus	ss this	return
Here		gay & W. III	out of	7.9.12	<u> </u>		preparer		below
	Sign	ature of officer or trustee	(1	Date	Title	(see instruct	ions)?	Yes _	No
	Ь	Print/Type preparer's	name	Preparer's signature		Date 5/ Check If	PTIN		
Paid		DAVID F. LEEP		Sano	leese	self-employed	1	3274	. 9
Prepa	arer			& RUMLEY, LLP	~	Firm's EIN ▶ 56-			
Use C	Only	Firm's address ▶ 3 (STREET, SUITE 100-	A				

Phone no 336-274-3700

GREENSBORO, NC

27455

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

2011

Name of the organization THE STOUT FAMILY FOU	Employer identification number								
Organization type (check one	3)	20-4527293							
Filers of:	Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private for	indation							
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on							
	501(c)(3) taxable private foundation								
	overed by the General Rule or a Special Rule. , (8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule See							
_	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or rone contributor. Complete Parts I and II	nore (in money or							
Special Rules									
under sections 509(a	(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the yi 5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form d II	ear, a contribution of							
during the year, total	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any I contributions of more than \$1,000 for use exclusively for religious, charitables, or the prevention of cruelty to children or animals. Complete Parts I, II, a	ble, scientific, literary,							
during the year, cont not total to more that year for an exclusive	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or								
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file Sch st answer "No" on Part IV, line 2, of its Form 990, or check the box on line H o F, to certify that it does not meet the filing requirements of Schedule B (Form	of its Form 990-EZ or on							
	Separation for Form 000, 000 F7, or 000 PF	D (Form 900, 900 E7, or 900 BE) (2011)							

	B (Form 990, 990-EZ, or 990-PF) (2011) organization THE STOUT FAMILY FOUNDATION	Pag Employer identification number 20-4527293		
Part I	Contributors (see instructions) Use duplicate copie	s of Part I if additional space is ne		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1_	RALPH D STOUT, JR REV. TRUST 41 STURBRIDGE LANE GREENSBORO, NC 27408	\$6,150.	Person X 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	

		~	Noncasii
			(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)

Person Payroll Name of organization THE STOUT FAMILY FOUNDATION

Employer identification number

20-4527293

Part II Nonc	ash Property (see instructions). Use duplicate copie	s of Part II if additional space is ne	ееаеа.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

20-4527293

Use	organizations completing Part III, e ributions of \$1,000 or less for the duplicate copies of Part III if addition		us, charitable, etc., e. See instructions.) ▶\$		
(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	d ZIP + 4 Re	elationship of transferor to transferee		
(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	1 ZIP + 4 Re	elationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
_					
	(e) Transfer of gift				
	Townstownsky manner address on		elationship of transferor to transferee		
	Transferee's name, address, and	1 ZIP + 4 Re	transfer of transfer of the transfer of		
	Transferee's name, address, and	d ZIP + 4 Re	and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
from					
from					
from					
from		(c) Use of gift (e) Transfer of gift			

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

NET INVESTMENT INCOME	374. 485.	859.
REVENUE AND EXPENSES PER BOOKS	374. 485.	859.
		TOTAL
DESCRIPTION	LINCOLN FINANCIAL GROUP PIEDMONT NATURAL GAS	

ATTACHMENT 1 PAGE 18

ATTACHMENT 2 PAGE 19

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FORM 990PF, PART II - CORPORATE STOCK

ENDING <u>FMV</u>	40,643. 13,861. 54,504.	
ENDING BOOK VALUE	91,468. 13,104.	
BEGINNING BOOK VALUE	91,094. 12,619. 103,713.	
DESCRIPTION_	1,636 SH LINCOLN NATIONAL CORP 428 SH PIEDMONT NATURAL GAS TOTALS	

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

	ATTACHMENT A	

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0
COMPENSATION	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	SOLE DIRECTOR .50	SECRETARY 1.00	GRAND TOTALS
NAME AND ADDRESS	RALPH D STOUT, JR 41 STURBRIDGE LANE GREENSBORO, NC 27408	CAROL R. JOHNSTON 4535 WEST MARKET STREET GREENSBORO, NC 27407	

ATTACHMENT 3 PAGE 20 ATTACHMENT 4

THE YEAR
H
DURING
PAID
GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR
AND
GRANTS
5
PART XV
FORM 990PF.
FORM

RELATIONSHIP FOUNDATIC
4 4 /2 /2
N/A
N/A
N/A

ATTACHMENT 4
PAGE 21

20-4527293

ATTACHMENT 4
PAGE 22

6,350

TOTAL CONTRIBUTIONS PAID

AMOUNT	250	200	150.	200	200
PURPOSE OF GRANT OR CONTRIBUTION	PROVIDE ASSISTANCE FOR GENERAL SCHOOL ACTIVITIES	PROVIDE ASSISTANCE FOR GENERAL SCHOOL ACTIVITIES	PROVIDE ASSISTANCE FOR CHILDREN IN NEED	PROVIDE ASSISTANCE FOR CHILDREN IN NEED	PROVIDE FOR RESEARCH AND CURE OF JUVENILE DIABETES
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A	N/A	N/A	N/A	N/A
RECIPIENT NAME AND ADDRESS	CANTERBURY SCHOOL 5400 OLD LAKE JEANETTE RD GREENSBORO, NC 27455	CALDWELL ACADEMY 2900 HORSE PEN CREEK RD GREENSBORO, NC 27410	BAPTIST CHILDRENS HOME OF NC P O BOX 338 THOMASVILLE, NC 27360	THOMPSON'S CHILDREN HOME 6800 SAINT PETER'S LANE MATTHEWS, NC 28105	JUVENILE DIABETES RESEARCH FOUNDATION 312 N EUGENE STREET, STE D GREENSBORO, NC 27401