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Förm 990-PF

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

Depar	tment	t of the Treasury	Tr	eated às a Privat	e Founda	ation	rtina roquiromonto	2012
_		renue Service Note. The foundation dar year 2012 or tax year beginning	illay be	able to use a copy of this	and e		rang requirements.	Open to public inspection
		foundation			, and c	- Indining	A Employer identificati	on number
		FAILE FOUNDATION					06-137981	2
		nd street (or P O box number if mail is not delivered to	street ad	dress)		Room/suite	B Telephone number	004
		S. ELM STREET					336-272-9	
		own, state, and ZIP code ENSBORO, NC 27401					C If exemption application is	s pending, check here
		all that apply: Initial return		Initial return of a fo	rmer public (charity	D 1. Foreign organizatio	ns, check here
		Final return		Amended return	•	•		
		Address change		Name change			Foreign organizations is check here and attach	meeting the 85% test, computation
H C	heck	type of organization: X Section 501(c)	(3) exen	npt private foundation	•		E If private foundation s	tatus was terminated
		ction 4947(a)(1) nonexempt charitable trust		her taxable private founda			under section 507(b)(1)(A), check here
		· I =		method: Cash	Acci		F If the foundation is in	
(fre		Part II, col. (c), line 16) 2, 650, 389. (Part I		r (specify) MODIFI		<u> </u>	under section 507(b)(1)(B), check here
	rt I	Analysis of Revenue and Expenses				wastmont	(c) Adjusted net	(d) Disbursements
Га		(The total of amounts in columns (b), (c), and (d) may necessarily equal the amounts in column (a))	not	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received					N/A	
	2	Check X if the foundation is not required to attach Sch	в					
	3	Interest on savings and temporary cash investments						
	4	Dividends and interest from securities		11,810.	1	1,810.		STATEMENT 1
	5a	Gross rents	L					_
		Net rental income or (loss)	ļ-	10 000				S TOTAL IN
e		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 152,08	, -	18,009.			1 1	ECEIVAD
Revenue		assets on line 6a 152, 08 Capital gain net income (from Part IV, line 2)	<u>-</u>		1	8,009.	1	
Re	, B	Net short-term capital gain	-			.0,000.	101	g ct 2 8 2013 -
	9	Income modifications					1 1	it to see
		Gross sales less returns and allowances					1 1	THE METERS
		Less Cost of goods sold					L	
	C	Gross profit or (loss)						
	11		<u> </u>	86,887.		6,887.		STATEMENT :
\dashv	12	Total Add lines 1 through 11		116,706. 0.	<u>_</u>	6,706.		
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	-	0.		· ·		
	15	Pension plans, employee benefits	-					
şes		Legal fees	-					
ens		Accounting fees STMT	3	4,200.		0.		4,20
Expenses		Other professional fees STMT	4	29,000.	2	9,000.		
ķ	17	Interest	_ [
Administrative		Taxes STMT	5 <u> </u>	5,089.		0.		5,08
inis	19	Depreciation and depletion	ļ					
Ē	20	Occupancy Travel conferences and mastings					 	
and A	21 22	Travel, conferences, and meetings Printing and publications					 	
gar	23	Other expenses STMT	5 F	188.		0.	† 	
aţi	1	Total operating and administrative	· -					
perating		expenses. Add lines 13 through 23		38,477.	2	9,000.		9,28
Ō	25	Contributions, gifts, grants paid		131,000.				131,00
Operating and Adn	26	Total expenses and disbursements.	Γ					
		Add lines 24 and 25		169,477.	2	9,000.		140,28
	27	Subtract line 26 from line 12:		EO 777				
		Excess of revenue over expenses and disbursements	L	-52,771.		776		
		Net investment income (if negative, enter -0-)				7,706.	N/A	
2225) 1 - 12	Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice		otwotie e c	L		I N/A	Form 990-PF (20

LHA For Paperwork Reduction Act Notice, see instructions.

For	m 99	0-PF (2012) THE FAILE FOUNDATION		06-1	L379812 Page 2
<u></u>	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
<u></u>	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	4,559.	41,838.	41,838.
		Savings and temporary cash investments			
	3	Accounts receivable ▶			
	_	Less: allowance for doubtful accounts			
	4	Pledges receivable -			
	_	Less: allowance for doubtful accounts			
		Grants receivable Receivables due from officers, directors, trustees, and other			
	6	disqualified persons			
	7	Other notes and loans receivable			
	′	Less; allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 7	2,393,671.	2,303,621.	2,608,551.
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe)			
		Total and the base of the base of the self-time.	2,398,230.	2,345,459.	2,650,389.
_		Total assets (to be completed by all filers)	2,330,230.	2,343,437.	2,030,303.
	17 18	Accounts payable and accrued expenses Grants payable			
(0	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ig.	21	Mortgages and other notes payable			
Ë		Other liabilities (describe)		·····	
		,			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
,		and complete lines 24 through 26 and lines 30 and 31.			
češ	24	Unrestricted			
alan	25	Temporarily restricted			
Fund Balances	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
ě		and complete lines 27 through 31.	2,976,788.	2,976,788.	
ets	27	· · · · · · · · · · · · · · · · · · ·	2,970,788.	2,970,788.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds	-578,558.	-631,329.	
et/	30	Total net assets or fund balances	2,398,230.	2,345,459.	
Z	30	Total net assets of fund balances	2,330,230.	2,313,1331	
	31	Total liabilities and net assets/fund balances	2,398,230.	2,345,459.	
Р	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	2,398,230.
2	Ente	r amount from Part I, line 27a		2	-52,771.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	2,345,459.
		eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	2,345,459.
					Form 990-PF (2012)

Part IV Capital Gains and I	osses for Tax on Ir	rvestment	Income						
(a) List and describe the 2-story brick warehous	kınd(s) of property sold (e.g e; or common stock, 200 sh	., real estate, s. MLC Co.)		(p) I	low ac - Purc - Dona	quired hase ation	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a									
b SEE ATTACHED ST.	ATEMENT	_						_	
<u> </u>		·		ļ		·		 	
<u> </u>				-					
e	f) Depreciation allowed	(a) Coo	t or other basis	ا			(b) G	ıın or (loss	
(e) Gross sales price	(or allowable)	, ,,,	xpense of sale					(f) minus	
a	· 			.					
b									<u>,</u>
c d						<u>.</u> .			
e 152,088.			134,07	79.					18,009.
Complete only for assets showing gain	in column (h) and owned by	the foundation				(1) Gains (C	ol. (h) gain	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (j), if any				. (k), but r	ot less that (from col. (n -0-) or
a									
b									
С									
d		ļ							10 000
e		<u> </u>				1			18,009.
2 Capital gain net income or (net capital lo	ss) $\begin{cases} \text{If gain, also ente} \\ \text{If (loss), enter -0} \end{cases}$	r in Part I, line I- in Part I, line	7 7	}	2				18,009.
3 Net short-term capital gain or (loss) as d	lefined in sections 1222(5) ar	nd (6):		١,					
If gain, also enter in Part I, line 8, column	n (c).			 				3T / 3	
If (loss), enter -0- in Part I, line 8 Part V Qualification Under	Santian 4040/a\ far	Dodugod	Tay on Not	1	3 octo	iont Inc	omo	N/A	·
, , , , , , , , , , , , , , , , , , , 							Joine		
(For optional use by domestic private found	ations subject to the section	4940(a) tax on	net investment ir	тсотте	÷.)				
If section 4940(d)(2) applies, leave this part	blank.								
Was the foundation liable for the section 49	42 tax on the distributable an	nount of any ve	ear in the base nei	riod?					Yes X No
If "Yes," the foundation does not qualify und			•						
1 Enter the appropriate amount in each co				entries	j.				
(a) Base period years	(b)			(c)		-		Distrib	(d) oution ratio
Calendar year (or tax year beginning in)	Adjusted qualifying dis	1	Net value of no						rided by col. (c))
2011		4,659.				5,464			.109215
2010		0,000.				6,750			.030049
2009		0,061.				3,852			.047401
2008		3,481.				0,524			.057689
2007	1 10	6,978.			, 65	2,407			.045717
O Tatal of loss of solvers (d)							,		.290071
2 Total of line 1, column (d) 2 Average distribution ratio for the 5 years	hana pariod - divida the total	on line 2 by 5	or by the number	r of vo	250		2		. 230071
3 Average distribution ratio for the 5-year the foundation has been in existence if le		on line 2 by 5,	or by the number	UI ye	ais		3		.058014
the tourndation has been in existence it is	555 IIIaii 5 years						<u> </u>		
4 Enter the net value of noncharitable-use	assets for 2012 from Part X,	line 5					4		2,656,237.
5 Multiply line 4 by line 3							5		154,099.
6 Enter 1% of net investment income (1%	of Part I, line 27b)						6		877.
7 Add lines 5 and 6							7		154,976.
8 Enter qualifying distributions from Part 3	KII, line 4						8		140,289.
If line 8 is equal to or greater than line 7. See the Part VI instructions.		e 1b, and comp	lete that part usin	ng a 1'	% tax	rate.			

	990-PF (2012) THE FAILE FOUNDATION			- W V - 4	- 1-/ \			13/9			age 4
	rt VI Excise Tax Based on Investment Income (Section 4940)	_			940(e),	or 4	948	- see i	nstru	ctior	<u>1S)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter	er "N/	'А" ог	n line 1.	Ì						
	Date of ruling or determination letter: (attach copy of letter if necess	ssary	-see	ınstructi	ons)			ļ			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		and	enter 1%	. }	•	1			1, <u>7</u>	<u>54.</u>
	of Part I, line 27b										
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	of Par	t I, lır	ne 12, col	.(b). 丿		1				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers er	nter -	·0-)			2				<u>0.</u>
3	Add lines 1 and 2						3			1,7	<u>54.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	ers e	nter ·	-0-)			4	<u> </u>			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-						5			1,7	54.
6	Credits/Payments:										
а	2012 estimated tax payments and 2011 overpayment credited to 2012	6a									
b	Exempt foreign organizations - tax withheld at source	6b	1				1				
С	Tax paid with application for extension of time to file (Form 8868)	6c	1				1				
	Backup withholding erroneously withheld	6d	T								
	Total credits and payments. Add lines 6a through 6d						7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach	ned					8				7.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						9			1,7	<u>61.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						10	<u> </u>			
	Enter the amount of line 10 to be: Credited to 2013 estimated tax				Refunde	ed 🕨	11		_		
	rt VII-A Statements Regarding Activities										
	During the tax year, did the foundation attempt to influence any national, state, or local legislat	tion o	or did	l it partici	pate or inf	ervene	ın			Yes	No
	any political campaign?								1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose	s (se	e ins	tructions	for definit	ion)?			1b		X
٠	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and						ed or				
	distributed by the foundation in connection with the activities.	٠٠,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
c	Did the foundation file Form 1120-POL for this year?								1 c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y	ear.									
ŭ	(1) On the foundation. \$ 0. (2) On foundation managers.		:			0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditu	ire tax	,	nosed on	foundatio		•				
•	managers. > \$	110 107	^ III.1P	J0304 011	1041104110						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	32							2		Х
_	If "Yes," attach a detailed description of the activities										
2	Has the foundation made any changes, not previously reported to the IRS, in its governing ins	etrum	ent	articles o	funcornor	ation (nr				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		10111,	u i iioioo o		a, .	•		3		Х
A a	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?						N	I/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?						_	.,	5		Х
J	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 eith	er.									
U	By language in the governing instrument, or										
	 By state legislation that effectively amends the governing instrument so that no mandatory 	direct	tione	that cont	flict with t	he stati	a law				
	remain in the governing instrument?	unco	110113	inat com	HOC WILL C	no stati	Juv		6		х
7	•								7	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year?								 		
a ~	If "Yes," complete Part II, col (c), and Part XV.	e) 🕨									
σa	Enter the states to which the foundation reports or with which it is registered (see instructions FL	o) 🔽									
		0500	, Co-	oral /c= -	anicacta)						
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atte	orney	, Gen	ierai (or d	esignatė)				a.	Х	
_	of each state as required by General Instruction G? If "No," attach explanation		0.40	(.)(0) 1	0.40(3)(5)				8b	Λ	
9	Is the foundation claiming status as a private operating foundation within the meaning of sect				942(J)(5)	ior cale	endar				v
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," co								9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule	listing	g their	r names an	d addresse:	s _			10		lacksquare

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4a

X

X

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

Form 990-PF (2012) THE FAILE FOUNDATION		1379812 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(B) Type of service	(c) compensation
NONE	-	
	- 	
	-	
	_	
	1	
Total number of others receiving over \$50,000 for professional services		▶ 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 statistic		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc.	Expenses
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 on li	nes 1 and 2.	Amount
1 N/A		
2	·	····
All other program-related investments. See instructions.		
3		
<u> </u>		
Total. Add lines 1 through 3	•	0.
Total, Add miles tillough 5		0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 2,679,813. a Average monthly fair market value of securities 1a 16.874. 1b b Average of monthly cash balances c Fair market value of all other assets 10 2,696,687. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 4 40,450 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 2,656,237. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 132.812. 6 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 132,812. Minimum investment return from Part X, line 6 1 1,754 2a 2a Tax on investment income for 2012 from Part VI, line 5 Income tax for 2012. (This does not include the tax from Part VI.) 2b ,754 Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 131.058. 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 131,058 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 140,289 a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 140,289. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form **990-PF** (2012)

Page 9

Part XIII Undistributed Income (see instructions)

THE FAILE FOUNDATION

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,		70070 71107 10 20 11	2011	
line 7				131,058.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007				
b From 2008				
c From 2009				
dFrom 2010				
e From 2011 78,128.				
f Total of lines 3a through e	78,128.		<u></u>	
4 Qualifying distributions for 2012 from				
Part XII, line 4: ►\$ 140,289.				
a Applied to 2011, 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.			121 050
d Applied to 2012 distributable amount	0 221			131,058.
e Remaining amount distributed out of corpus	9,231.			0
Excess distributions carryover applied to 2012 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	87,359.			
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 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				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 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.	0- 0-			
Subtract lines 7 and 8 from line 6a	87,359.			
10 Analysis of line 9:			1	
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
dExcess from 2011 78,128.				
e Excess from 2012 9, 231.				

	LE FOUNDAT				379812 Page 10
Part XIV Private Operating F			l-A, question 9)	N/A	
1 a If the foundation has received a ruling o		, , ,			
foundation, and the ruling is effective fo	2012, enter the date of	the ruling	▶		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed				,	
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	 -				
e Qualifying distributions made directly	 	·			
for active conduct of exempt activities.	İ				
Subtract line 2d from line 2c	l				
3 Complete 3a, b, or c for the					
alternative test relied upon:	İ				
a "Assets" alternative test - enter: (1) Value of all assets	İ				
, .		· · · · · · · · · · · · · · · · · · ·			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return	ı				
shown in Part X, line 6 for each year	İ				
listed	,				
c "Support" alternative test - enter:	l				
(1) Total support other than gross	l				
investment income (interest, dividends, rents, payments on	1				
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 foundatior	n had \$5,000 or m	ore in assets
at any time during t	ne year-see inst	ructions.)			
1 Information Regarding Foundatio	•				
a List any managers of the foundation who			ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed m	ore man \$5,000). (See s	section 507(a)(2).)			
NONE			 		·
b List any managers of the foundation who other entity) of which the foundation has) own 10% or more of the a 10% or greater interest	ie stock of a corporation (et	or an equally large porti	on of the ownership of a p	artnership or
NONE	a 1070 of greater intere	J.			
		<u> </u>			
2 Information Regarding Contributi Check here ► X if the foundation o					and for fraudo 16
the foundation makes gifts, grants, etc. (see instructions) to indi	io preselecteu charitable. Aduals or organizations ii	organizations and does i	not accept unsolicited requ omniete items 2a, b, c, and	iesis for lunus. If
a The name, address, and telephone numb					
a The name, address, and telephone number	ier or e-mail of the perst	on to whom applications s	illouid de addressed.		
b The form in which applications should b	e submitted and informa	tion and materials they sh	rould include.		
c Any submission deadlines:					
d Any restrictions or limitations on awards	cuch as hy goographic	al argae charitable fields	kinds of institutions or	other factors:	-
a rany resultations of miniations off awards	, sacii as by geographic	ai ai 6a3, chailtable licius,	niius oi ilistitutioiis, Of	omer lactors.	

3 Grants and Contributions Paid During the Y		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	Toopion		
A HELPING HAND 1777 FORDHAM BLVD, SUITE 202-2 CHAPEL HILL, NC 27514	NONE	509(A)(2)	SUPPORT TO SENIOR CITIZENS	10,000
NATIONAL DOWN SYNDROME SOCIETY 666 BROADWAY, 8TH FLOOR NEW YORK, NY 10012	NONE	509(A)(2)	DOWN SYNDROME SUPPOT	12,000
INSTITUTE FOR BIRD POPULATIONS PO BOX 1346, 11435 S.R.#1, SUITE 23 POINT REYES STATION, CA 94956	NONE	509(A)(2)	WILDLIFE SUPPORT	1,500
ISLAND RESOURCES FOUNDATION 6292 ESTATE NAZARETH #100 ST. THOMAS, VIRGIN ISLANDS, VIRGIN ISLANDS, U.S. 00802	NONE	509(A)(1)	ENVIRONMENTAL EDUCATION	35,000
QUEEN LOUISE HOME LUTHERAN SOCIAL SERVICES OF USVI 516 HOSPITAL STREET FREDERIKSTED, ST. CROIX, VIRGIN ISLANDS, VIRGIN ISLANDS, U.S. 00840	NONE	509(A)(1)	PROVIDE SUBSIDIZED LOW INCOME HOUSING FOR SENIORS	25 000
	TINUATION SHE	፲ ኛጥ(S)	▶ 3a	25,000 131,000
b Approved for future payment				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NONE				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies			 		
2 Membership dues and assessments					
3 Interest on savings and temporary cash			†		
investments					
4 Dividends and interest from securities			14	11,810.	
5 Net rental income or (loss) from real estate:	· · · · · · · · · · · · · · · · · · ·				
a Debt-financed property					
b Not debt-financed property	··		-		
6 Net rental income or (loss) from personal			\vdash		
property			İ		
7 Other investment income			18	86,887.	
8 Gain or (loss) from sales of assets other		•	10	00,007.	
than inventory			18	18,009.	
9 Net income or (loss) from special events			1 0	10,005.	
10 Gross profit or (loss) from sales of inventory					,
11 Other revenue:	-		 		
•					
b					
· —	<u> </u>				
<u> </u>					
d		· · ·			
e		0.		116 706	0.
12 Subtotal. Add columns (b), (d), and (e)		0.		116,706.	116,706.
13 Total. Add line 12, columns (b), (d), and (e)				13	110,700.
(See worksheet in line 13 instructions to verify calculations.)				 	
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
					
Line No. Explain below how each activity for which incom			contrit	outed importantly to the accon	nplishment of
the foundation's exempt purposes (other than b	y providing tu	nas for such purposes).			· · · -
					
					-
	•				
		· · · · · · · · · · · · · · · · · · ·			

Form 99	0-PF (2012) THE F	AILE FOU	NDATION	ī		06-13	379812	Pa	age 13
Part :			nsfers To a	and Transactions	and Relation	ships With Nonc	haritable	Э	
	Exempt Organ					·		134	T 8.0
	the organization directly or ind					ction 501(c) of		Yes	No
	Code (other than section 501(c			- ·	nizations?				
	nsfers from the reporting found	lation to a nonchari	table exempt or	ganization of:					1,7
٠,	Cash						1a(1)	ļ <u> </u>	X
	Other assets						1a(2)		Х
	er transactions:								١,,
	Sales of assets to a noncharita	, -					1b(1)		X
	Purchases of assets from a no		t organization				1b(2)		X
	Rental of facilities, equipment,						1b(3)		X
	Reimbursement arrangements	5					1b(4)		X
	Loans or loan guarantees	ambarahia ar fiindr					1b(5)		X
	Performance of services or mi	•	-				1b(6)	 	X
	aring of facilities, equipment, ma				oahatha fo		10		
	ne answer to any of the above is services given by the reporting t							eis,	
	umn (d) the value of the goods,				Je III aliy ilalisacii	on or snaring arrangeme	iii, Siiuw iii		
(a)Line n	· · · · · · · · · · · · · · · · · · ·			e exempt organization	(d) Descript	ion of transfers, transactions,	and charing or	rangeme	note
(-)	(4)//////	(0)1101110	N/A		(u) Descript	ion or transfers, transactions,	and snaming ai	angome	
			M/A		1				
		 							
-		 			<u> </u>				
		 		· · · · · · · · · · · · · · · · · · ·					
			-						
		<u> </u>		·	 				
-				· .	 				
				—					
					-				
-		-							
			 						
									
		<u> </u>			1	,,,,			
2a Ist	he foundation directly or indirec	tly affiliated with, o	r related to, one	or more tax-exempt organ	zations described			-	
	ection 501(c) of the Code (othe						Yes	X] No
b_lf"\	es," complete the following sch								
	(a) Name of or	ganization		(b) Type of organization	I	(c) Description of relati	onship		
	N/A								
			· ·						
٥.	Under penalties of perjury, I declare and belief, it is true, correct, and co						May the IRS		
Sign	25	22 2000	12	107.7.			return with th	(see ins	er itr)?
Here	V JONE	II DULL	WY_	לון וועו	PRESI	DENT	LXL Yes		∐ No
	Signature of officer or trustee			Date	Title	1.05.4.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	110		
	Print/Type preparer's n	ame	Preparer's s	ignature	Date	Check if PT	IIV		

P01345659

704-377-1678

Firm's EIN ▶ 56-0574444

Phone no.

Paid

Use Only

KELLIANNE F. BENSON

Firm's address ► 1111 METROPOLITAN AVENUE, SUITE 1000 CHARLOTTE, NC 28204

Preparer Firm's name ► CHERRY BEKAERT

Part XV Supplementary Information 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 Amount status of Name and address (home or business) recipient NONE 509(A)(1) SECOND CHANCE DOG RESCUE SUPPORT FOR ANIMALS 6003 CHAPEL HILL ROAD RALEIGH, NC 27607 500. ST. CROIX COUNTRY DAY SCHOOL NONE SCHOOL SUPPORT OF GRADES RR #1, BOX 6199 NURSERY THROUGH 12 KINGSHILL, ST. CROIX, VIRGIN ISLANDS, VIRGIN ISLANDS, U.S. 00850-9807 45,000. TENDER LOVING CANINES NONE 509(A)(1) TRAINING SERVICE DOGS P.O. BOX 1244 SOLANA BEACH, CA 92075 2,000. 47,500. Total from continuation sheets

FORM 990-PF DIVIDENI	OS AND	INTER	EST FROM	SEC	JRITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
DIVIDENDS INTEREST	-		26,570. 11.		14,771.	11,7	99. 11.
TOTAL TO FM 990-PF, PART I, I	IN 4		26,581.		14,771.	11,8	10.
FORM 990-PF	0'	THER I	NCOME			STATEMENT	2
DESCRIPTION			(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME		
JACKSON NATIONAL LIFE INSURANDISTRIBUTION UNRECAPTURED SECTION 1250 GAINONDIVIDEND DISTRIBUTIONS			1,	188. 376. 323.	84,188 1,376 1,323	•	
TOTAL TO FORM 990-PF, PART I	LINE	11	86,8	887.	86,887	•	
FORM 990-PF	ACC	COUNTI	NG FEES	··· <u>-</u>		STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC	EST-	(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	•	4,200.		0	•	4,2	00.
TO FORM 990-PF, PG 1, LN 16B		4,200.		0		4,2	00

FORM 990-PF O	THER PROFES	SIONAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
INVESTMENT MANAGEMENT FEES	29,000.	29,00	0.	0.
TO FORM 990-PF, PG 1, LN 16C =	29,000.	29,00	0.	0.
FORM 990-PF	TAX	ES	140	STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
OTHER TAXES FOREIGN TAXES	4,852. 237.		0.	4,852.
TO FORM 990-PF, PG 1, LN 18 =	5,089.		0.	5,089.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
	(A)	(B)	(C)	(D)
DESCRIPTION	EXPENSES PER BOOKS	NET INVEST		CHARITABLE
	EXPENSES	MENT INCOM		CHARITABLE
MISCELLANEOUS	EXPENSES PER BOOKS	MENT INCOM	E NET INCOM	CHARITABLE E PURPOSES
MISCELLANEOUS TO FORM 990-PF, PG 1, LN 23	EXPENSES PER BOOKS	MENT INCOM	NET INCOM	CHARITABLE PURPOSES
DESCRIPTION MISCELLANEOUS TO FORM 990-PF, PG 1, LN 23 FORM 990-PF DESCRIPTION	EXPENSES PER BOOKS 188. OTHER INVI	MENT INCOM	NET INCOM	CHARITABLE PURPOSES 0.
MISCELLANEOUS TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	EXPENSES PER BOOKS 188. 188. OTHER INVI	MENT INCOM	E NET INCOM 0.	CHARITABLE PURPOSES 0. 0. STATEMENT 7 FAIR MARKET

	LIST OF OFFICERS, DI AND FOUNDATION MANAG	STATEMENT 8		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
TONI FAILE LYERLY 125 S. ELM ST., STE. 100 GREENSBORO, NC 27401	PRESIDENT 0.00	0.	0.	0.
DANICA A. ZUPIC 125 S. ELM ST., STE. 100 GREENSBORO, NC 27401	VICE PRESIDENT 0.00	0.	0.	0.
ALICIA M. ZUPIC 125 S. ELM ST., STE. 100 GREENSBORO, NC 27401	SECRETARY 0.00	0.	0.	0.
JENNIFER J. FAILE 125 S. ELM ST., STE. 100 GREENSBORO, NC 27401	VICE PRESIDENT 0.00	0.	0.	0.
LAWRENCE LYERLY 125 S. ELM ST., STE. 100 GREENSBORO, NC 27401	TREASURER 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	E 6, PART VIII	0.	0.	0.

Part IV Capital Gains and Lo	sses for Tax on Investment Income				
	d describe the kind(s) of property soli rick warehouse; or common stock, 2	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a CAPITAL WORLD					12/06/12
b CAPITAL WORLD					12/06/12
c CAPITAL WORLD	BOND FUND		P	06/27/11	12/06/12
d ALGER GREEN			P	VARIOUS	09/12/12
e CAPITAL WORLD	BOND FUND				12/06/12
1 CAPITAL WORLD	GROWTH & INC		P	VARIOUS	12/06/12
g CAPITAL GAINS	DIVIDENDS	· · · · · · · · · · · · · · · · · · ·			
h					
1					
1					
<u>k</u>					
n			<u> </u>	ļ	
0				<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) ilus (f) minus (g)	
	` <u></u>	992.	(e) p		28.
a 1,020.		494.		-	30.
b 524.					201.
c 3,714.		3,513. 15,971.			-5,971.
d 10,000. e 55,076.		53,218.			1,858.
		59,891.			7,092.
4.4 004		33,031.			$\frac{7,032.}{14,771.}$
g 14,//1. h			 		
					
					
k					
					
m	 	'			
n 0					
	ng gain in column (h) and owned by	the foundation on 12/31/69		sses (from col. (h))	
/// T. M. M. and a f. 40/04/00	(j) Adjusted basis	(k) Excess of col. (i)		of col (h) gain ove	r col. (k),
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any	DUL II	ot less than "-0-")	
a					28.
b					30.
<u>c</u>					201.
<u>d</u>					-5,971.
<u>e</u>			 -		1,858.
<u>f</u>					7,092.
<u>g</u>					14,771.
h					
<u> </u>	 				
<u> </u>	 				
<u>k</u>					
<u>m</u>	 		-		
<u>n</u>				_	···
0	<u> </u>				
2 Capital gain net income or (net c	apital loss) { If gain, also enter	r in Part I, line 7)-" in Part I, line 7	2		18,009.
- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '		,			
3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8	ess) as defined in sections 1222(5) ar . column (c)	1α (b).			
If (loss), enter "-0-" in Part I, line		J	3	N/A	

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev. 1-2013)

• If yo	are filing for an Automatic 3-Month Extension, comp	lete only Pa	art I and check this box			ightharpoons X	
If yo	are filing for an Additional (Not Automatic) 3-Month I	Extension, o	complete only Part II (on page 2 of	this form)	•		
Do not	complete Part II unless you have already been grante	d an automa	itic 3-month extension on a previou	sly filed Fo	orm 8868.		
Electro	nic filing (e-file). You can electronically file Form 8868	f you need a	a 3-month automatic extension of til	me to file (6 months for a c	corporation	
	to file Form 990-T), or an additional (not automatic) 3-n						
	o file any of the forms listed in Part I or Part II with the						
Persor	l Benefit Contracts, which must be sent to the IRS in p	aper format	(see instructions). For more details	on the ele	ctronic filing of t	his form,	
	w irs gov/efile and click on e-file for Charities & Nonprot			· · · · · · · · · · · · · · · · · · ·			
Part							
A corp	ration required to file Form 990-T and requesting an aut	omatic 6-mc	onth extension - check this box and	complete			
Part I c	•					>	
	corporations (including 1120-C filers), partnerships, RE	MICs, and to	rusts must use Form 7004 to reque	st an exter	ision of time		
	come tax returns.			1			
Type o	Name of exempt organization or other filer, see inst	ructions.		Employe	r identification n	umber (EIN) or	
print	MILE ELTE ECINIDAMION			ĺ	06 1050	010	
File by th	THE FAILE FOUNDATION				06-1379	812	
due date filing you return Se	ue date for Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN)			SSN)			
instructio		foreign add	ress, see instructions.				
	GREENSBORO, NC 27401						
Enter ti	e Retum code for the return that this application is for (file a separa	te application for each return)			0 4	
Applic	tion	Return	Application			Return	
ls For		Code	Is For			Code	
Form 9	0 or Form 990-EZ	01	01 Form 990-T (corporation)			07	
Form 9	0-BL	02 Form 1041-A			08		
Form 4	20 (ındividual)	03	03 Form 4720			09	
Form 9	0-PF	04	Form 5227			10	
Form 9	0-T (sec. 401(a) or 408(a) trust)	05	05 Form 6069			11	
Form 9	0-T (trust other than above)	06	Form 8870			12	
			LD NORTH STATE TRU				
	pooks are in the care of 125 S. ELM STI	REET,	SUITE 100 - GREENS	BORO,	NC 2740	01	
Tele	hone No. ► 336-272-9004		FAX No 🕨				
	organization does not have an office or place of busine					>	
If th	is for a Group Return, enter the organization's four dig				_	•	
box 🕨	. If it is for part of the group, check this box		ch a list with the names and EINs o		ers the extension	on is for.	
1 1	equest an automatic 3-month (6 months for a corporati AUGUST 15, 2013 , to file the exen	•	to file Form 990-T) extension of time tion return for the organization nam		The extension		
	for the organization's return for:	-	-				
► X calendar year 2012 or							
)	tax year beginning	, an	d ending		<u> </u>		
2 1	the tax year entered in line 1 is for less than 12 months Change in accounting period	check reas	on: L Initial return L	Final retur	n		
3a II	this application is for Form 990-BL, 990-PF, 990-T, 4720), or 6069, e	nter the tentative tax, less any				
_	nonrefundable credits. See instructions. 3a \$				0.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
					estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$		
<u>e</u>	timated tax payments made. Include any prior year over			3b	\$	0.	
c E		payment wit	h this form, if required,	3b	\$	0.	

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2013)				Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex				- [X]
Note. Only complete Part II if you have already been granted an a			îled Form 8868.	
If you are filing for an Automatic 3-Month Extension, complete the second of the			1.	
Randli Additional (Not Automatic) 3-Month E	xtensio			
		Enter filer's	identifying number, see in	
, and the state of			Employer identification num	ber (EIN) o
print mue extre economica	THE TATE TO TO TO TO TO TO TO TO TO TO TO TO TO			1 2
File by the due date for		4	06-13798	
filing your return. See 125 S. ELM STREET			Social security number (SS	
City, town or post office, state, and ZIP code. For a for GREENSBORO, NC 27401	oreign add	ress, see instructions.		
Enter the Return code for the return that this application is for (file	a conara	te application for each return)		0 4
the return code for the return that this application is for the	a separa	to application to capit rotatily	,	تبلتا
Application	Return	Application		Return
Is For	Code	Is For		Code
Form 990 or Form 990-EZ	01			
Form 990-BL	02	Form 1041-A		08
Form 4720 (individual)	03	Form 4720		09
Form 990-PF	04	Form 5227		10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other than above)	06	Form 8870		12
STOP! Do not complete Part II if you were not already granted	an auton	natic 3-month extension on a prev	riously filed Form 8868.	
MICHAEL SPOHN (• The books are in the care of ▶ 125 S. ELM STRI		LD NORTH STATE TRU SUITE 100 - GREENS		
Telephone No. ► 336-272-9004		FAX No. ▶		
• If the organization does not have an office or place of business	s in the Ur	nited States, check this box	.	
If this is for a Group Return, enter the organization's four digit (Group Exe	emption Number (GEN) I	f this is for the whole group,	check this
		ch a list with the names and EINs of	all members the extension i	s for.
	OVEM	BER 15, 2013.		
5 For calendar year 2012 , or other tax year beginning		, and ending		·
6 If the tax year entered in line 5 is for less than 12 months, concluded the control of the con	heck reas	on: L Initial return L	Final return	
7 State in detail why you need the extension	·- <u>-</u> ·		· · · · · · · · · · · · · · · · · · ·	
ADDITIONAL TIME IS REQUIRED IN ORDER TO GATHER THE INFORMATION				
NECESSARY TO FILE A COMPLETE A	AND A	CURATE KETURN.	 	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or	or 6069, e	nter the tentative tax, less any	1 1	

EFTPS (Electronic Federal Tax Payment System). See instructions.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form,	, including accompanying schedules and statements, and to the best of my knowledge and belief
it is true, correct, and complete, and that I am anthorized to prepare	a this form

If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid

Balance due, Subtract line 8b from line 8a. Include your payment with this form, if required, by using

Signature Olian Titl

nonrefundable credits. See instructions.

previously with Form 8868.

Manago

Date > 8.13.15

86

8c

Form 8868 (Rev. 1-2013)

0.

0.

0.