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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 Open to public Inspection

For c	alen	dar year 2012 or tax year beginning		, and ending		
Nan	ne of	foundation			A Employer identification numbe	r
L	EG <i>l</i>	ATUS FOUNDATION			31-1737683	
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	_
		WEST FOURTH STREET			(336) 721-367	
-		own, state, and ZIP code			C If exemption application is pending, c	heck here
_		STON-SALEM, NC 27101 all that apply: Initial return	Initial return of a for	rmer nublic charity	D 1. Foreign organizations, check	here
<b>u</b> c	HECK	Final return	Amended return	The public charty	1. Torongir organizations, oncok	11010
		Address change	Name change		Foreign organizations meeting the check here and attach computation	85% test,
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation status was	terminated
	Sec		Other taxable private founda	tion	under section 507(b)(1)(A), che	eck here 🕨 🔲
		rket value of all assets at end of year   J Accounti	-	Accrual	F If the foundation is in a 60-mon	- ( )
(fr		Part II, col. (c), line 16) Ut 12,882,099. (Part I, colu	her (specify)	ages 1	under section 507(b)(1)(B), che	eck here
	rt I	Analysis of Revenue and Expenses			(a) Adjusted not	) Disbursements
		(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 field	charitable purposes cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check X of the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	4,083.	4,083		TEMENT 1
	4	Dividends and interest from securities	173,383.	173,383	STA	TEMENT 2
	_	Gross rents				
	_	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	55,116.			
nge	b	Gross sales price for all 3, 286, 421.				
Revenue	7	Capital gain net income (from Part IV, line 2)		55,116		
Œ	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns		<del> </del>		
	10a	and allowances			-	-
	l	Less Cost of goods sold Gross profit or (loss)				
	11	Other income				
	12	Total. Add lines 1 through 11	232,582.	232,582		
	13	Compensation of officers, directors, trustees, etc	0.	0		0.
	14	Other employee salaries and wages				
es S		Pension plans, employee benefits				
nse	16a	Legal fees				
×pe	F	Accounting fees Other-professional fees STMT 3	34,761.	18,005		16,756.
ě	17	Interest /	34,701.	10,000	<u> </u>	2077501
and Administrative Expense	18	Taxes STMT 4	3,531.	C	).	0.
nist	19,	Depreciation and depletion Occupancy 2 0 2017				
Ë	20				<u> </u>	
Ϋ́	214	Travel, conferences, and meetings,				
Jan	22	Printing and publications Other expenses 17 STMT 5	20.		).	0.
ting	23 <sup>-</sup> 24	Other expenses 7 1 STMT 5 Total operating and administrative	20.		/ •	<u> </u>
Operating		expenses. Add lines 13 through 23	38,312.	18,005	5.	16,756.
Ö	25	Contributions, gifts, grants paid	613,849.			613,849.
		Total expenses and disbursements.				
	<u> </u>	Add lines 24 and 25	652,161.	18,005	5.	630,60 <u>5</u> .
		Subtract line 26 from line 12:	410 550			
	1	Excess of revenue over expenses and disbursements	<419,579.	>214,577	7	
•		Net investment income (if negative, enter -0-)  Adjusted net income (if negative, enter -0-)		214,37	N/A	
		and the state of t		·		

LHA For Paperwork Reduction Act Notice, see instructions.

For						1-1737683 Page 2			
	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	En	d of year				
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market	Value			
	1	Cash - non-interest-bearing	11,095.	64,910	64	,910.			
	2	Savings and temporary cash investments	221,639.	941,191	941	,191.			
	3	Accounts receivable ►							
		Less; allowance for doubtful accounts							
	4	Pledges receivable ▶							
		Less: allowance for doubtful accounts ▶							
	5	Grants receivable							
	6	Receivables due from officers, directors, trustees, and other							
		disqualified persons							
	7	Other notes and loans receivable							
		Less: allowance for doubtful accounts							
g	8	Inventories for sale or use							
Assets	9	Prepaid expenses and deferred charges							
Ą		Investments - U.S. and state government obligations							
	1	Investments - corporate stock STMT 7	6,829,671.	6,489,435	7,351	,399.			
	ı	Investments - corporate bonds STMT 8	2,245,083.	2,656,467					
	l	Investments - land, buildings, and equipment, basis							
		Less accumulated depreciation							
	12	Investments - mortgage loans							
	13	Investments - other STMT 9	1,620,000.	1,350,458	3. 1,778	,967.			
	14	Land, buildings, and equipment: basis ▶							
		Less accumulated depreciation							
	15	Other assets (describe ►	-	·					
						· ·			
_	16	Total assets (to be completed by all filers)	10,927,488.	11,502,461	L. 12,882	,099.			
	17	Accounts payable and accrued expenses							
	18	Grants payable							
Š	19	Deferred revenue							
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons							
iabi	21	Mortgages and other notes payable							
ت	22	Other liabilities (describe >)							
_	23	Total liabilities (add lines 17 through 22)	0.	(	<u>)</u>				
		Foundations that follow SFAS 117, check here							
Ø		and complete lines 24 through 26 and lines 30 and 31.							
ည	24	Unrestricted							
alar	25	Temporarily restricted			_				
Ö	26	Permanently restricted							
or Fund Balances		Foundations that do not follow SFAS 117, check here							
ᅜ		and complete lines 27 through 31.							
ţ	27	Capital stock, trust principal, or current funds	0.		<u>0</u> .				
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	<del></del>	<u>0.</u>				
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	10,927,488.	11,502,461					
ž	30	Total net assets or fund balances	10,927,488.	11,502,461	<u>l .</u>				
			40 005 400	44					
_	31	Total liabilities and net assets/fund balances	10,927,488.	11,502,461	<u> </u>				
F	art	Analysis of Changes in Net Assets or Fund Ba	alances						
-	Tota	I not accept or fund halances at haginning of year. Bort II, column (a) line	20		<del></del>				
'		I net assets or fund balances at beginning of year - Part II, column (a), line : st agree with end-of-year figure reported on prior year's return)	JU		1 10,927	122			
2		r amount from Part I, line 27a	•	}					
3		er increases not included in line 2 (itemize)	0 TO 0 TO 0	ATEMENT 6		,579.> ,552.			
4		lines 1, 2, and 3	SEE STA	TEMENI 0	3 994 4 11,502				
-		reases not included in line 2 (itemize)		ŀ	5	0.			
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		6 11,502				
_		and the second of the second o		<del></del>	Form <b>990-F</b>				

Port IV Copital Gains and	US FOUNDATION	· · · · · · · · · · · · · · · · · · ·	Incomo	<del></del>			3.	<u>L-1/3</u>	<u>/683</u> _	Page 3
Part IV Capital Gains and Losses for Tax on Investment Income  (a) List and describe the kind(s) of property sold (e.g., real estate,			(b) F	(b) How acquired (c		(c) Date acquired (d		(d) Date	o sold	
2-story brick warehouse; or common stock, 200 shs. MLC Co.)				1,2 b.	- Purcl - Dona	hase	(G) Date a (G) (Mo., da		(mo., da	
				<u> </u>	50110					
b SEE ATTACHED S'	TATEMENT			<u> </u>						
_C										
d				<u> </u>						
_e				<u> </u>						-
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	st or other basis xpense of sale					ıın or (loss) (f) mınus (		
a	(0/ 4/10/12/0)	p.00 0	7,0000000000000000000000000000000000000	-+			(0) p.00	(1) 1111100 (		
b		<u> </u>			_					
С								-		
d										
e 3,286,421.			<u>3,231,30</u>	5.					55	,116.
Complete only for assets showing ga	····							ol. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			COI.	Losses (	ot less thar (from col. (	h))	
a										
b		-								
C										
e e									55	,116.
			<del></del>	7				<del></del>		, 110.
2 Capital gain net income or (net capital	loss) { If gain, also enter loss}	ın Part I, ime - ın Part I. line	<i>,</i> 7		2				55	,116.
3 Net short-term capital gain or (loss) as	`			7						
If gain, also enter in Part I, line 8, colu				] [						
If (loss), enter -0- in Part I, line 8	Cti 4040(-) f	D - d		Щ	3			N/A		
· · · · · · · · · · · · · · · · · · ·	er Section 4940(e) for					ient inc	ome			<del></del>
(For optional use by domestic private four	ndations subject to the section 4	1940(a) tax on	net investment in	rcome	:-)					
If section 4940(d)(2) applies, leave this pa	art blank.									
Was the foundation liable for the section	4942 tax on the distributable am	nount of any ve	ear in the base ner	rınd?					☐ Yes	X No
If "Yes," the foundation does not qualify u				iiou:						110
1 Enter the appropriate amount in each				ntries	•					
(a) Base period years	(b)			(c)				Distrib	(d) ution ratio	
Calendar year (or tax year beginning in			Net value of no				<del></del>	(col. (b) dıv	ided by col.	` ''
2011		0,662.		12	<u>, 67</u>	3,883	•			44238
2010 2009		6,206. 6,485.		11	, <u>34</u> 11	3,840 2,704	<u>-</u>	•		<u>42861</u> 66895
2008		7,895.				$\frac{2}{6},045$		•		53081
2007		9,612.				7,188				$\frac{33001}{44607}$
					<u> </u>	.,	1 1	-		
2 Total of line 1, column (d)							2		. 2	<u>51682</u>
3 Average distribution ratio for the 5-year		on line 2 by 5,	or by the number	of ye	ars					
the foundation has been in existence i	f less than 5 years						3		.0	<u>50336</u>
4. Enterthe set of control of the							Ì . I			
4 Enter the net value of noncharitable-us	se assets for 2012 from Part X,	line 5					4	1_	<u>1,778</u>	<u>,803.</u>
5 Multiply line 4 by line 3									EOO	000
3 Multiply fine 4 by fine 3							5	<u> </u>	394	,898.
6 Enter 1% of net investment income (1	% of Part I. line 27b)						6		2	,146.
The state of the s	or are spinio araj									<u>,                                    </u>
7 Add lines 5 and 6							7		595	,044.
8 Enter qualifying distributions from Pai	rt XII, line 4						8		<u>630</u>	,605.
If line 8 is equal to or greater than line	7, check the box in Part VI, line	1b, and comp	olete that part usin	ng a 1	% tax	rate.				
See the Part VI instructions.	<del></del>									

			<u> 1737</u>			Page 4
	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see ir	ıstru	ctior	<u>15)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%	1			<u>2,1</u>	<u>46.</u>
	of Part I, line 27b					
	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.
3	Add lines 1 and 2	3			2,1	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<del></del>			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			2,1	46.
	Credits/Payments:					
	2012 estimated tax payments and 2011 overpayment credited to 2012  From torong organizations tax withhold at equipment.					
	Exempt foreign organizations - tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6c					
	Backup withholding erroneously withheld  6d					
	Total credits and payments. Add lines 6a through 6d	7			5 7	71.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			<i>5,,</i>	<u>/ 1 • </u>
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			3.6	25.
	Enter the amount of line 10 to be: Credited to 2013 estimated tax	11			<u> </u>	0.
	rt 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 or intervene	ın			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		[	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or	ſ			
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. > \$O.		-			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		İ	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	)r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	27	/*	4a		X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	N	/A	4b		v
J	If "Yes," attach the statement required by General Instruction T.			5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
•	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	a law				
	remain in the governing instrument?	,		6	<b>X</b> _	
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.				<b></b>	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NC					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-				
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		Х
			Forr	n <b>99</b> 0	-PF	(2012)

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orm 990-PF (2012) LEGATUS FOUNDATION			<u>31-17376</u>	<u>83 Page 6</u>
Part VII-B Statements Regarding Activities for Which i	Form 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?		Ye	s X No	1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described i	n Regulations	1	
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	rom the tax because it maintai	ned		
expenditure responsibility for the grant?	N	/A 🔲 Ye	s 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	· • ·	Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a g	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.			T	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Y€	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	Itable to the transaction?		. N/A	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly		<del></del>
List all officers, directors, trustees, foundation managers and their	· · · · · · · · · · · · · · · · · · ·		[ ( n	· · · · · · · · · · · · · · · · · · ·
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
RANLET S. BELL	DIRECTOR & PR	ESIDENT		
L93 SOUTH BEACH ROAD				
HOBE SOUND, FL 33455	10.00	0.	0.	0.
RANK M. BELL, JR.	SECRETARY & T	REASURER		
193 SOUTH BEACH ROAD				
HOBE SOUND, FL 33455	10.00	0.	0.	0.
Compensation of five highest-paid employees (other than those inc	T	enter "NONE."	(d) Contributions to	(-) Europe
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
170120	devoted to position	.,	compensation	allowances
NONE				
	-	}		
	<u> </u>			
	-			
		<del></del>		
	-			
			-	<del></del>
	1			
F. 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	<u> </u>	<u> </u>	<u> </u>	L

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	11,895,802.
b	Average of monthly cash balances	1b	62,374.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	11,958,176.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	11,958,176.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	179,373.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,778,803.
6	Minimum investment return. Enter 5% of line 5	6	588,940.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	ı
1	Minimum investment return from Part X, line 6	1	588,940.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)	]	
C	Add lines 2a and 2b	2c	2,146.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	586,794.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	586,794.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	586,794.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1 1	
а	(-),	1a	630,605.
þ		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:	1 1	•
а	,	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	630,605.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	2,146.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	628,459.
	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 the section

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,	· · · · · · · · · · · · · · · · · · ·			
line 7			1	586,794.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			629,143.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007				
<b>b</b> From 2008				
<b>c</b> From 2009				
<b>d</b> From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 630,605.				
a Applied to 2011, but not more than line 2a			629,143.	
<b>b</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.			
d Applied to 2012 distributable amount				1,462.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount	0.			0.
6 Enter the net total of each column as				
indicated below:	_			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	· · · · · · · · · · · · · · · · · · ·		
<b>b</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				585,332.
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.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	•			
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012				
O ENGUIO II OIII EU IE		<u> </u>	<u> </u>	Form <b>990-PF</b> (2012)

	FOUNDATION				<u>-1737683</u> Page 1	0
Part XIV Private Operating F	oundations (see ins	structions and Part VII-	A, question 9)	<u> </u>		_
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating				
foundation, and the ruling is effective fo	r 2012, enter the date of t	he ruling	<b>▶</b>			_
<b>b</b> Check box to indicate whether the found	lation is a private operatir	g foundation described in		4942(j)(3) or \	4942(j)(5)	_
2 a Enter the lesser of the adjusted net	Tax year	<u></u>	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	Ì					
for active conduct of exempt activities.						
Subtract line 2d from line 2c Complete 3a, b, or c for the	ļ					_
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					İ	
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			<u> </u>	<del></del>	<del></del>	_
(4) Gross investment income		4 - 41-1 4 1	 	b-d &F 000	av mara in acceta	
Part XV Supplementary Info			it the foundati	on nad \$5,000	or more in assets	
at any time during	tne year-see inst	ructions.)		<del></del>		_
1 Information Regarding Foundation	on Managers:					
a List any managers of the foundation wi			ributions received by	the foundation before	e the close of any tax	
year (but only if they have contributed	more than \$5,000). (See :	section 507(d)(2).)				
NONE						
b List any managers of the foundation w	ho own 10% or more of the	he stock of a corporation (	or an equally large p	ortion of the ownersh	ip of a partnership or	
other entity) of which the foundation ha	as a 10% or greater intere	st.				
NONE						
2 Information Regarding Contribut	tion, Grant, Gift, Loan	. Scholarship, etc., Pr	ograms:			_
Check here ► X if the foundation	•		-	es not accept unsolic	ated requests for funds. If	
the foundation makes gifts, grants, etc.						
a The name, address, and telephone num					<del> </del>	_
a The name, address, and telephone hun	מושטו טו ש זוומוו טו נווכ 1615	on to whom applications t	modiu ne audi coocu.			
h The form is which and it is	ha automited and orto	tion and materials the state	hould rectude:		<del></del>	_
<b>b</b> The form in which applications should	be submitted and informa	ation and materials they si	noula include:			
			<del></del>		<del></del>	_
c Any submission deadlines:						
						_
d Any restrictions or limitations on award	ds, such as by geographic	cal areas, charitable fields,	kınds of institutions,	or other factors:		
						_
223601 12-05-12					Form <b>990-PF</b> (201	21

Form 990-PF (2012) · LEGATUS FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Y	<del> </del>	Payment	···	
Recipient	If recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Paid during the year	or ododania commodici			
BLUE RIDGE PARKWAY FOUNDATION	NONE	PUBLIC	GENERAL SUPPORT OF	
717 S. MARSHALL ST, STE 105B WINSTON-SALEM, NC 27101			PARKWAY	250
SANCTON DIMM, NO 27101				
BOYS AND GIRLS CLUB OF MARTIN COUNTY	NONE	PUBLIC	GENERAL SUPPORT	
11500 SE LARES AVENUE HOBE SOUND, FL 33475				504
NOBE 300ND, FB 33473				500
BROOKGREEN GARDENS	NONE	PUBLIC	GENERAL SUPPORT	
P.O. BOX 3368 PAWLEYS ISLAND, SC 29585				<b>5</b> 500
FAMILIS ISLAND, SC 27505				7,500
CENTENARY UNITED METHODIST CHURCH 646 WEST FIFTH STREET	NONE	PUBLIC	GENERAL SUPPORT	
WINSTON-SALEM, NC 27101				4,000
DEPARTMENT OF STATE	170117			
2201 C STREET NW	NONE	PUBLIC	DIPLOMATIC RECEPTION ROOMS	
WASHINGTON DC 20520		<u> </u>	ROOMS	10,000
Total SEE COI	NTINUATION SHE	T(S)	<b>▶</b> 3a	613 849
b Approved for future payment				
NONE				
Total	1		<b>▶</b> 3b	
				0 n <b>990-PF</b> (2012

223611 12-05-12

Part XVI-A	Analysis	of Incom	e-Producing	Activities
1 CHENTAL TO	A I LUI Y SIS	,	v , ,vuuviiig	ACCITICO

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		ded by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code		- COGB		
a b	-				
	-				
	1 1		_		
<u> </u>	1 1				
e			<del></del>		
Fees and contracts from government agencies			<del>                                     </del>		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	4.083.	
4 Dividends and interest from securities			14	4,083. 173,383.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	55,116.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					<del> </del>
11 Other revenue:					
a	_				
b					
c					
d					
e	_	-			
12 Subtotal. Add columns (b), (d), and (e)			0.	232,582.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	232,582
(See worksheet in line 13 instructions to verify calculations.	)				

Part XVI-B	Relationship of Activities to the Accomplishme	ent of Exempt Purposes

Line No.	xplain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).				
<del>}</del>					

223621 12-05-12

Part XVII	information Re Exempt Organi		o and Transactions a	nd Relationships With Nonci	haritable	8	
1 Did the org			owing with any other organization	n described in section 501(c) of		Yes	No
		· · · · · · · · · · · · · · · · · · ·	n 527, relating to political organi	` ·		<u> </u>	
a Transfers	from the reporting founda	tion to a noncharitable exemp	rt organization of:		1	1	Ì
(1) Cash					1e(1)	ĺ	X
(2) Other	assets				1a(2)		X
b Other trans			***************************************	***************************************	···		<u> </u>
(1) Sales	of assets to a noncharitat	le exempt organization			1b(1)	•	x
(2) Purch	ases of assets from a non	scharitable exempt organization	ν <b>η</b>		1b(2)	$\vdash$	X
(3) Renta	l of facilities, equipment, o	or other assets	***************************************		1b(3)		X
(4) Reimi	bursement arrangements				1b(4)		X
(5) Loans	or loan guarantees				1b(5)	<b>—</b>	X
(6) Perfo	rmance of services or mer	mbership or fundraising solici	tations	······································	1b(6)		X
c Sharing of	facilities, equipment, mai	ling lists, other assets, or paid	l employees		10	<del>                                     </del>	X
d If the ansv	ver to any of the above is '	Yes," complete the following :	schedule. Column (b) should alw	rays show the fair market value of the good	s, other as	sets.	
				e in any transaction or sharing arrangemen		,	
		other assets, or services receiv			•		
(a)Line no	(b) Amount involved	(e) Name of nonchari	table exempt organization	(d) Description of transfers, transactions,	and sharing ar	rangem	ents
		N/	A				
			<del></del>				
						-	
			· · · · · · · · · · · · · · · · · · ·				
	•	-	one or more tax-exempt organiz	ations described	Yes	X	No No
	omplete the following sche			······································			
<u> </u>	(a) Name of org		(b) Type of organization	(c) Description of relation	onship		
<del></del>	N/A						
<del></del>							
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
				· · · · · · · · · · · · · · · · · · ·			
Under	penalties of perjury, I declare t	that I have examined this return, inc	clutting accompanying schedules and	statements, and to the best of my knowledge	May the HS	A	
Sign and be	olief, it is true, correct, and con	nplate. Declaration of preparer (othe	er then texpeyer) is based on all inform	etion of which preparer has any knowledge.	return with the	ne prepa	rer
Here	Raylot S 6	2.00	11/11/1012	PRESIDENT	X Yes		⊒″No
Sign	rature of officer or trustee	2012	Date	Title			
	Print/Type preparer's na	me Prepare	r's signature	Date Check if PT	IN		
		ميد ا	1.7/1/				
Paid	TINA M. KR	TZANIC /ss	all Avzani	self- employed	01474	387	,
Preparer			LC COA				
Use Only	Lam 2 mans - 200	TOTAL OFFICE D		Tem Sem P 40			
Joo Only	Firm's address 17	152 KERCHEVAL					
		OSSE POINTE,		Phone no. (31	3) 88	11-2	282
	<u>GR</u>	ANDE LATUTE!		1.100000 102	Form 99		

Part IV	Capital Gains and Los	sses for Tax on Investment Income				
	' (a) List and	describe the kind(s) of property sol ick 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 JPM	ORGAN CHASE	BANK-SEE STMTS	ATTACHED	P		12/01/12
b JPM	ORGAN CHASE	BANK-SEE STMTS		P		12/01/12
	ORGAN CHASE		ATTACHED	P		12/01/12
d JPM	ORGAN CHASE	BANK-SEE STMTS	ATTACHED	P	VARIOUS	12/01/12
e HIG	HBRIDGE CAP	ITAL CORP		P	VARIOUS	12/31/12
f CAP	ITAL GAINS	DIVIDENDS				
g						
h						
1						
J						
k						·
1						
m						
n						
0					<u></u>	
(e)	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) plus (f) minus (g)	
<u> </u>	191,772.	(5. 25774510)	202,169.	(0)		-10 207
a b	304,763.		309,550.			<10,397. <4,787.
	2,598,619.		2,719,586.			
d d	139,676.		2,113,500.			<u>120,967.</u> 139,676.
e	139,010.		<del> </del>			139,6/6.
f	51,591.					51,591
						51,591
g h						
<u>'</u>						
k						
<u> </u>					· .	
<u>'</u> m						· · · · · · · · · · · · · · · · · · ·
n						
0						
	lete only for assets showin	ng gain in column (h) and owned by	the foundation on 12/31/69		sses (from col. (h))	
	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	Gains (excess	of col. (h) gain ove not less than "-0-")	r col. (k),
a						<10,397
b						<4,787
С					<	120,967
d						139,676.
е						0.
f						51,591
g						
h						
1						
k						
1						
m						
n						
0						
	<u> </u>		0-4117			
2 Capital	gain net income or (net ca	ipital loss) { If gain, also ente   If (loss), enter "-	r in Part I, line 7 0-" in Part I, line 7			55,116
3 Netcho	ort-term canital nain or floo	ss) as defined in sections 1222(5) a	_			
If gain.	also enter in Part I, line 8,	column (c).	, in (0).			
	\ enter "-N-" in Part I line S		i I.	1	NT / N	

LEGATUS FOUNDATION

Part XV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** Recipient If recipient is an individual, Foundation show any relationship to Purpose of grant or **Amount** any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient GRAND TETON NATIONAL PARK FOUNDATION NONE PUBLIC GENERAL SUPPORT P.O. BOX 249 5,000. MOOSE WY 83012 GUARDIANS OF MARTIN COUNTY NONE PUBLIC GENERAL SUPPORT P.O. BOX 1489 HOBE SOUND, FL 33475 3,000. HISTORIC ELMWOOD FOUNDATION NONE PUBLIC GENERAL SUPPORT 1200 ELMWOOD AVENUE DETROIT, MI 48270 500. HOBE SOUND COMMUNITY CHEST NONE PUBLIC GENERAL SUPPORT P.O. BOX 511 HOBE SOUND, FL 33475 1,000. HOME MORAVIAN CHURCH NONE PUBLIC GENERAL SUPPORT AND 529 S. CHURCH ST. WOMEN OF CHURCH WINSTON-SALEM NC 27101 6,000. JACKSON HOLE LAND TRUST NONE PUBLIC GENERAL SUPPORT P.O. BOX 2897 JACKSON HOLE, WY 83001 6,000. JUPITER ISLAND MEDICAL FUND, INC NONE PUBLIC GENERAL SUPPORT 100 ESTRADA SQUARE HOBE SOUND FL 33455 1,000. LOON ECHO LAND TRUST NONE PUBLIC GENERAL SUPPORT 8 DEPOT STREET BRIGHTON ME 04009 500. MACULAR DEGENERATION RESEARCH NONE PUBLIC GENERAL SUPPORT 22512 GATEWAY CENTER DR CLARKSBURG, MD 29871 1,000, MISS PORTER'S SCHOOL NONE PUBLIC GENERAL SUPPORT 60 MAIN STREET FARMINGTON CT 06032 3,000. Total from continuation sheets 591,599. LEGATUS FOUNDATION

Part XV **Supplementary Information Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor NATIONAL MUSEUM OF WILDLIFE ART NONE PUBLIC GENERAL SUPPORT P.O. BOX 6825 JACKSON HOLE, WY 83002 1,000. NATIONAL PARK FOUNDATION NONE GENERAL SUPPORT PUBLIC P.O. BOX 17394 BALTIMORE, MD 21298 5,000. NATURE CONSERVANCY (THE) NONE PUBLIC GENERAL SUPPORT AND 258 MAIN STREET CAPITAL CAMPAIGN LANDER WY 85250 55,000. GENERAL SUPPORT AND NATURE CONSERVANCY (THE) -NC CHAPTER NONE PUBLIC 4705 UNIVERSITY DR, STE 290 CAPITAL CAMPAIGN 30,000. DURHAM NC 27707 NORTH CAROLINA ZOOLOGICAL SOCIETY NONE PUBLIC GENERAL SUPPORT 4403 ZOO PARKWAY ASHEBORO NC 27205 500. PARKINSON'S DISEASE FOUNDATION NONE PUBLIC GENERAL SUPPORT P.O. BOX 6012 1,000. ALBERT LEA. MN 56007 PIEDMONT LAND CONSERVANCY NONE PUBLIC GENERAL SUPPORT P.O. BOX 4025 GREENSBORO NC 27407 1,000. ROBERT E. LEE MEMORIAL ASSOCIATION NONE PUBLIC GENERAL SUPPORT 483 GREAT HOUSE ROAD STRATFORD VA 22558 5,000. SMITHSONIAN INSTITUTE NONE PUBLIC GENERAL SUPPORT P.O. BOX 9016 PITTSFIELD MA 01202 1,000. SOUTH CAROLINA ENVIRONMENTAL LAW NONE PUBLIC GENERAL SUPPORT PROJECT P.O. BOX 1380 PAWLEYS ISLAND SC 29585 2,000. Total from continuation sheets

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LEGATUS FOUNDATION

3 Grants and Contributions Paid During the You	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
TOWN OF PAWLEYS ISLAND BEAUTIFICATION FOUNDATION	NONE	PUBLIC	GENERAL SUPPORT	
P.O. BOX 2712			İ	
PAWLEYS ISLAND, SC 29585				500
WAKE FOREST UNIVERSITY	NONE	PUBLIC	BELL LAW SCHOLARSHIP	
P.O. BOX 7227				
WINSTON-SALEM, NC 27109				10,000
WAKE FOREST UNIVERSITY	NONE	PUBLIC	PROFESSORSHIP AND	
P.O. BOX 7227			GENERAL SUPPORT	
WINSTON-SALEM, NC 27109				336,000
WAKE FOREST UNIVERSITY-WFDD PUBLIC	NONE	PUBLIC	GENERAL SUPPORT	
RADIO P.O. BOX 8850				
WINSTON-SALEM, NC 27109				50
WINSTON-SALEM FOUNDATION	NONE	PUBLIC	GENERAL SUPPORT	
860 WEST 5TH STREET				
WINSTON-SALEM, NC 27101				80,17
EVERGLADES FOUNDATION	NONE	PUBLIC	GENERAL SUPPORT	
18001 OLD CUTLER ROAD, SUITE 625 PALMETTO BAY, FL 33157				50
FALMETTO BAT, PL 33137				
JUPITER ISLAND HISTORICAL SOCIETY	NONE	PUBLIC	GENERAL SUPPORT	
P.O. BOX 938	NONE	FOBLIC	SENERAL SOFFORT	
HOBE SOUND, FL 33475				10
JUPITER MEDICAL CENTER FOUNDATION	NONE	PUBLIC	GENERAL SUPPORT	
1210 OLD DIXIE HIGHWAY JUPITER, FL 33458				3,00
SUPITER, FL 33450				3,00
LOAVES AND FISHES OF HOBE SOUND	NONE	PUBLIC	GENERAL SUPPORT	
P.O. BOX 98				
HOBE SOUND, FL 33475				50
NORTH CAROLINA BAR ASSOCIATION	NONE	PUBLIC	GENERAL SUPPORT	
FOUNDATION		1		
8000 WESTON PARKWAY				30.00
CARY NC 27513  Total from continuation sheets	<u> </u>	L		30,00

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y		· · · · · · · · · · · · · · · · · · ·		
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	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
PISGAH UNITED METHODIST CHURCH PISGAH CHURCH ROAD GREENSBORO, NC 27407	NONE	PUBLIC	GENERAL SUPPORT	500.
ROCKY MOUNTAIN PGA FOUNDATION 1303 S FIVE MILE RD BOISE, ID 83709	NONE	PUBLIC	GENERAL SUPPORT	500.
UNC SCHOOL OF LAW 160 RIDGE ROAD CHAPEL HILL, NC 27514	NONE	PUBLIC	GENERAL SUPPORT	250.
WALNUT COVE PUBLIC LIBRARY P.O. BOX 706 WALNUT COVE, NC 27052	NONE	PUBLIC	GENERAL SUPPORT	250,
JUPITER ISLAND GARDEN CLUB P.O. BOX 1410 HOBE SOUND, FL 33475	NONE	PUBLIC	GENERAL SUPPORT	250.
NATIONAL MULTIPLE SCLEROSIS SOCIETY 2211 WEST MEADOWVIEW ROAD GREENSBORO, NC 27407	NONE	PUBLÍC	GENERAL SUPPORT	70.
Total from continuation sheets		<u> </u>		

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY C	ASH IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
JP MORGAN TRUST COMPANY (ASSE JP MORGAN TRUST COMPANY (INV) JP MORGAN TRUST COMPANY-OID	=				4,0	4. 44. 35.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A		:	4,0	83.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	.)
JPMORGAN CHASE BANK, NA	<del></del>	224,974.		45,651.	179,3	23.
TOTAL TO FM 990-PF, PART I, I	.N 4	224,974. 45,651.		45,651.	179,323.	
FORM 990-PF C	THER PROFES	SIONAL F	EES	-	STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST- COME	(C) ADJUSTED NET INCOM		
INVESTMENT MANAGEMENT FEES OFFICE MANAGEMENT FEES	18,005. 16,756.		,005.		16,7	0. 56.
TO FORM 990-PF, PG 1, LN 16C	34,761.	18	,005.		16,7	56.
FORM 990-PF	TAX	ES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
FOREIGN TAXES	3,531.		0.	<u> </u>		0.
TO FORM 990-PF, PG 1, LN 18	3,531.		0.			0.

FORM 990-PF	OTHER E	XPENSES	<u> </u>	STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM			
POSTAGE	20.	•	0.		0.
TO FORM 990-PF, PG 1, LN 23	20.		0.		0.
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND	BALANCES	STATEMENT	6
DESCRIPTION				AMOUNT	
 UNREALIZED GAIN/(LOSS) ON STI	RATEGIC INVE	STMENTS		994,55	2.
TOTAL TO FORM 990-PF, PART I	II, LINE 3			994,55	2.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7
	CORPORAT		BOOK VALUE	STATEMENT FAIR MARKET VALUE	
DESCRIPTION	CORPORAT		BOOK VALUE 6,489,435.	FAIR MARKET	
DESCRIPTION EQUITIES	-			FAIR MARKET VALUE	9.
DESCRIPTION  EQUITIES  TOTAL TO FORM 990-PF, PART I	-		6,489,435.	FAIR MARKET VALUE 7,351,39	9.
DESCRIPTION EQUITIES TOTAL TO FORM 990-PF, PART I	I, LINE 10B		6,489,435.	FAIR MARKET VALUE 7,351,39 7,351,39	9.
FORM 990-PF  DESCRIPTION EQUITIES TOTAL TO FORM 990-PF, PART II FORM 990-PF  DESCRIPTION FIXED INCOME	I, LINE 10B		6,489,435. 6,489,435.	FAIR MARKET VALUE 7,351,39 7,351,39 STATEMENT FAIR MARKET	9.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
TACTICAL TRADING FUNDS	COST	1,350,458.	1,778,967
TOTAL TO FORM 990-PF, PART II, LINE	L3	1,350,458.	1,778,967

#### **EXPLANATION**

THE FUNDS CONTRIBUTED BY THE FOUNDATION TO A DONOR ADVISED FUND, WHICH ARE TREATED AS QUALIFYING DISTRIBUTIONS BY THE FOUNDATION, ARE ALL REQUESTED TO BE DISTRIBUTED TO OTHER 501(C)(3) PUBLIC CHARITIES BY THE COMMUNITY FOUNDATION TO ACCOMPLISH CHARITABLE PURPOSES UPON THE RECOMMENDATION OF THE ADVISORS WITHIN THE YEAR IN WHICH THE DISTRIBUTION BY THE FOUNDATION IS MADE TO THE COMMUNITY FOUNDATION. THIS ALLOWS THE COMMUNITY FOUNDATION TO VERIFY THE EXEMPT STATUS OF THE RECIPIENT ORGANIZATIONS AND TO MEET COMMUNITY PRIORITIES.

Form 8868 (Rev_1-2013)					Page 2	
<ul> <li>If you are filing for an Additional (Not Automatic) 3-Month Ex</li> </ul>	tension, c	complete only Part II and check this	box		▶ X	
Note. Only complete Part II if you have already been granted an a				868		
If you are filing for an Automatic 3-Month Extension, complete			00 1 01111 0	000.		
Part II Additional (Not Automatic) 3-Month E			al /no co	nies need	ed)	
Transfer (1007) Committee (1007)	ALOHOIO.	<del></del>		<del></del>		
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Type or Name of exempt organization or other filer, see instru-	ctions		Employer	Identification	number (EIN) or	
File by the LEGATUS FOUNDATION				31-173	37683	
	·					
tiling your return See ONE WEST FOURTH STREET	Social sec	curity numbe	r (55N)			
instructions  City, town or post office, state, and ZIP code For a forward WINSTON-SALEM, NC 27101	reign add	ress, see instructions				
WINSTON-SALEM, NC 27101				<del></del>		
					$\overline{\alpha}$	
Enter the Return code for the return that this application is for (file	a separa	te application for each return)		••	0 4	
Application	Return	Application			Return	
Is For	Code	Is For			Gode	
Form 990 or Form 990-EZ	01	TS FOR	11.76	्राप्त के सम्बद्धाः स्टब्स		
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Form 990-BL	02	Form 1041-A			09	
Form 4720 (individual)	03	Form 4720		<del></del>	10	
Form 990-PF	04	Form 5227				
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11 12			
Form 990-T (trust other than above)	06	Form 8870	invelvatile	d Form 886		
STOP! Do not complete Part II if you were not already granted RANLET S. BELL	an autor	natic 3-month extension on a prev	iousiy iile	u POMII 660	o	
• The books are in the care of ▶ ONE WEST FOURTH	י פייים	FET - WINSTON-SALE	א אור	27101		
Telephone No $\triangleright$ (336) 721-3675	1 SIK		11, 110	27101	<del></del>	
	_ 1_ 44 1 1_	FAX No				
If the organization does not have an office or place of business			i thin in fai	thougholog	roup chock this	
If this is for a Group Return, enter the organization's four digit						
box If it is for part of the group, check this box		ach a list with the names and EINs of BER 15, 2013	an memo	ars the exter	ISION IS IOI.	
			_			
5 For calendar year 2012, or other tax year beginning			Final re	-A		
6 If the tax year entered in line 5 is for less than 12 months, o	neck reas	on: LInitial return L	rinai n	sturn		
Change in accounting period						
7 State in detail why you need the extension WE RESPECTFULLY REQUEST ADDIT:	TONTAT	MINE MO ETTE OTT	מוזיהים ס	N BEC	AUSE WE	
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REQUIRED TO FILE A COMPLETE A		· · · · · · · · · · · · · · · · · · ·	- 11			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			5,771.	
nonrefundable credits. See instructions.			8a	\$	3,771.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	_		THE REAL PROPERTY.			
tax payments made. Include any prior year overpayment al	lowed as	a credit and any amount paid			5,771.	
previously with Form 8868			8b	\$	3,111.	
c Balance due. Subtract line 8b from line 8a. Include your pa	-	th this form, if required, by using		•	0.	
EFTPS (Electronic Federal Tax Payment System) See Instr	uctions	at he completed for Dort II	8c	\$	<u></u>	
		st be completed for Part II o		والمساورة المساورة	a and halist	
Under penalties of perjury, I declare that I have examined this form, including it is true, correct_and complete, and that I am authorized to prepare this form.	ung accomi orm.	panying schedules and statements, and to	. 1290 sm c	iny knowiedę	je anu venet,	
() (1) - (1)	PRESI	DENT	Date	- 7/2z	12013	
Signature > KALVOL Signature > Title >	LICEL		Date		868 (Rev. 1-2013)	
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