

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

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

Open to Public Inspection

For	calend	lar year 2012 or tax year beginning ,	and ending				
Nan	ne of fou	ndation			A Emplo	oyer identification number	
T	he (Grace Foundation			56	-2006078	
Nun	nber and	street (or P O box number if mail is not delivered to street address)	Ro	om/suite	B Telepi	none number (see instruction:	s)
=		Cape Center Dr.					
•		state, and ZIP code			C If exer	nption application is pending,	check here
		tteville NC 28304					
G C	heck a		irn of a former public cha	anty	D 1. Fo	reign organizations, check he	ere
		Final return Amended				reign organizations meeting t	
		Address change Name cha	 		85	% test, check here and attach	computation •
<u>H</u> C	heck t	ype of organization $oxtimes$ Section 501(c)(3) exempt private	foundation		E If priva	ate foundation status was terr	minated under
	Section	4947(a)(1) nonexempt charitable trust Other taxab	le private foundation		section	n 507(b)(1)(A), check here	▶ ∐
I Fa	ur marl	ket value of all assets at J Accounting method	X Cash Acc	rual		oundation is in a 60-month te	. 1 1
en	d of ye	ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	nere 🕨 📘
	e 16) 🕽	\$ 546,208 (Part I, column (d) must	be on cash basis)				
_Pa	<u>ırt I</u>	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	estment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	incor	ne	ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	25,954				Todas pass only
	2	Check ► If the foundation is not required to attach Sch. B					, ,
	3	Interest on savings and temporary cash investments	5,382		5,382		
	4	Dividends and interest from securities	6,573		6,573		
345		Gross rents					آ مغد ،
20	ь	Net rental income or (loss)					,
N(Rév <u>enye</u> 2013	6a	Net gain or (loss) from sale of assets not on line 10	132,441				
. <u>`</u> ē	ь	Gross sales price for all assets on line 6a 358, 379		·			
æ	7	Capital gain net income (from Part IV, line 2)		1.	32,441		
\geq	8	Net short-term capital gain				0	ſ
	9	Income modifications					
SCANNED	10a	Gross sales less returns and allowances					
Z	b	Less Cost of goods sold				<u> </u>	
S	С	Gross profit or (loss) (attach schedule)					
\widetilde{S}	11	Other income (attach schedule)	ļ			-	
	12	Total. Add lines 1 through 11	170,350	1.	44,396	0	
S	13	Compensation of officers, directors, trustees, etc	0				
penses	14	Other employee salaries and wages					[
)e	15	Pension plans, employee benefits				,	<u> </u>
	16a	Legal fees (attach schedule)					
ē	b	Accounting fees (attach schedule) Other professional fees (attach schedule) Stmt 1	2,018		2,018		
ţ	C 47		2,018	 	2,010		
štr	17	Interest RECEIVED Taxes (atfach schedule) (see instructions), ()	-				
Ę.	18 19	Depression (attacheckedyle) and depletion					1
Ξ	20	Occupancy		 			· ·
Ă	21	Travel, conferences, and meetings of					
Б	22	Printing and publications					
a	23	Other expenses (all sch)	80		80		
ij	24	Total operating and administrative expenses.					
Operating and Administrative Ex		Add lines 13 through 23	2,098		2,098	0	0
þe	25	Contributions, gifts, grants paid	178,157				178,157
	26_	Total expenses and disbursements. Add lines 24 and 25	180,255		2,098	0	178,157
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	-9,905				
	b	Net investment income (if negative, enter -0-)		1	42,298		
	C	Adjusted net income (if negative, enter -0-)		1		0	<u> </u>

See Statement 5

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

Form 990-PF (2012)

16

568,503

568,503

3

4

5

6

3 Other increases not included in line 2 (itemize) ▶

5 Decreases not included in line 2 (itemize) ▶

4 Add lines 1, 2, and 3

Form 990-PF (2012)

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income				
	cribe the kind(s) of property sold (e.g., real estate, varehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date : (mo , da		(d) Date sold (mo , day, yr)
1a See Worksheet						
_ b						
_ c						
_ d			<u> </u>			
_e		·	<u></u>			l
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis			n or (loss) () minus (g)
_ a	 					
b	 					
<u>c</u>						
_ d						··
Complete only for assets showing	gain in column (h) and owned by the foul	l ndation on 12/31/69				
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ss of col (i)	1	(k), but not	(h) gain minus less than -0-) or om col (h))
а						
b						
c						
d						···········
e						
2 Capital gain net income or (net ca	Ipital loss) If gain, also enter in If (loss), enter -0- in If	Part I, line 7 Part I, line 7		2		132,441
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6)					
If gain, also enter in Part I, line 8,	column (c) (see instructions) If (loss), ent	ter -0- in		.		
Part I, line 8				3		133,161
Part V Qualification Ur	nder Section 4940(e) for Reduce	ed Tax on Net In	<u>vestment Incom</u>	<u>e</u>		
(For optional use by domestic private	foundations subject to the section 4940(a) tax on net investme	ent income)			
If section 4940(d)(2) applies, leave thi	s part blank					
Mas the foundation liable for the soci	on 4942 tax on the distributable amount o	fany year in the has	e negod?			Yes X No
	fy under section 4940(e) Do not complete	• •	e penou			
	each column for each year, see the instruc		any entries			
1 Enter the appropriate amount in e		LIONS DEIDIE MAKING		,-		(d)
Base period years	(b) Adjusted qualifying distributions	s Net valu	(c) ue of noncharitable-use asse	ts		tribution ratio divided by col. (c))
Calendar year (or tax year beginning i	···	,219	478,	117	(00)	0.148957
2010		,000	411,	318		0.036468
2009		,089	354,			0.050992
2008		,844	382,			0.041450
2007		,000	404,			0.012368
					T	
2 Total of line 1, column (d)				2	İ	0.290235
	5-year base penod – divide the total on line	e 2 by 5, or by the				
-	as been in existence if less than 5 years	• •		_3		0.058047
•	•					
4 Enter the net value of nonchantal	ple-use assets for 2012 from Part X, line 5	i		4	 	460,168
5 Multiply line 4 by line 3				5	-	26,711
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6_		1,423
7 Add lines 5 and 6				7_	 	28,134
8 Enter qualifying distributions from				8 See the	<u> </u>	178,157
If line 8 is equal to or greater than Part VI instructions	n line 7, check the box in Part VI, line 1b, a	anu complete that pa	it using a 1% tax rate	see ine		
I DIT AT HISH OCHOLIS						

<u>Form</u>	990-PF (2012) The Grace Foundation ' '56-2006078				P	age 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruction	ns)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1	٦ [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	<u> </u>	1		1,	423
	here ▶ X and enter 1% of Part I, line 27b	Π				
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-)		2			0
3	Add lines 1 and 2		3		1.	423
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-		5		1	423
6	Credits/Payments	<u> </u>	<u> </u>			
	2012 estimated tax payments and 2011 overpayment credited to 2012	6				-
a		~				
Ь	Z. A. Marian and	\dashv				-
C	Tax paid with application for extension of time to file (Form 8868) 6c	\dashv				
d -	Backup withholding erroneously withheld 6d					6
7	Total credits and payments Add lines 6a through 6d	_	7			$-\frac{6}{1}$
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	_	8		1	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		1,	418
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>	0			
<u>11</u>	Enter the amount of line 10 to be Credited to 2013 estimated tax Refunded	<u> </u>	1			
Pa	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				Yes	No
	participate or intervene in any political campaign?			1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				i	
	Instructions for the 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 or distributed by the foundation in connection with the activities					
С	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 ▶ \$ (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 > \$					
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		x
ча b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		•	5		X
5	If "Yes," attach the statement required by General Instruction T.					
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
6						
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that 					
				6	X	
_	conflict with the state law remain in the governing instrument?	Y\/		7	X	\vdash
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	. ^ v		<u> </u>		
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			P.	X	 '
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				 	
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"					v
	complete Part XIV	•		9	 	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			1		~
	names and addresses		L.481	10	00 5	X F (2012)
	11 / 15 TNT 21 FTP 42 TOT	3	L.461	Form 14	コリ・ピ	ピ (2012)

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

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

X

orm	<u> 990-PF (2012)</u> The Grace Fo	undation	56-2	006078			<u>P</u> a	<u>ige 6</u>
Pa	art VII-B Statements Regardin	ng Activities for Which Form	4720 May Be Re	quired (contin	ued)			
5a		•			-			
	(1) Carry on propaganda, or otherwise at	tempt to influence legislation (section 4	945(e))?		Yes X No			İ
	(2) Influence the outcome of any specific	public election (see section 4955), or to	o carry on,					1
	directly or indirectly, any voter registra	, , , , , , , , , , , , , , , , , , , ,	•		Yes X No			}
	(3) Provide a grant to an individual for tra			=======================================	Yes X No			
	(4) Provide a grant to an organization oth		described in					I
	section 509(a)(1), (2), or (3), or sectio				Yes X No		.	ļ
	(5) Provide for any purpose other than re		educational					1
	purposes, or for the prevention of crue	•		Γ,	Yes X No			1
b	If any answer is "Yes" to 5a(1)-(5), did an		er the exceptions desc	_				
_	Regulations section 53 4945 or in a currer	•	•		N/A	5b		
	Organizations relying on a current notice r	• •			▶ □			
С	If the answer is "Yes" to question 5a(4), do	• •			, .	1 1		
·	because it maintained expenditure respon	•	iii tiic tax	n/a 🗌	Yes No		1	1
	If "Yes," attach the statement required by	•		/	163 110			-
e -	Did the foundation, during the year, receiv	•	v premiume					
6a	on a personal benefit contract?	e any funds, unectry of indirectry, to pa	y premiums		Yes X No			
_	•	and the second s	aanal hanafit aantraat	<u></u>	165 21 140	6b		X
b	Did the foundation, during the year, pay pr	emiums, directly or indirectly, on a per-	sonai beneiil contract	•		H _{0D}		<u> </u>
_	If "Yes" to 6b, file Form 8870	t i t t t t t t t t t t t t t t t t t t	-111		Yes X No			1
-	At any time during the tax year, was the fo	' '			Yes X No N/A			
	If "Yes," did the foundation receive any pro				·	7b		—
Pa		icers, Directors, Trustees, Fo	undation wanag	ers, Hignly P	aid Employee	es,		
	and Contractors			·\				
1 1	ist all officers, directors, trustees, four	idation managers and their comper	isation (see instruc	uons).	1 2			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Ex	pense acc	count.
	(a) Name and a	ddress	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		r allowand	
					compensation	+		
Ch	arlene Hamlett	Durham	President					
Ρ.	O. Box 52328	NC 27717	1.00		<u> </u>	<u> </u>		0
			-					
	-					+		
					ļ	-		
					1			
					1			
2	Compensation of five highest-paid em	iployees (other than those included	d on line 1 – see ins	tructions). If no	ne, enter			
	"NONE."				Τ			
			(b) Title, and average		(d) Contributions to employee benefit	(a) Ev	pense acc	count
	(a) Name and address of each employee	paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		er allowan	
			devoted to position		compensation	<u> </u>		
NC	ONE					1		
						<u> </u>		
_								
						-		
	I	000					T	

Form 990-PF (2012)

Form 990-PF (20	12) The Grace Foundation	56-2006078	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foun and Contractors (continued)	dation Managers, Highly Paid Emp	
3 Five highe	est-paid independent contractors for professional services (see ins	structions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			(0,00)
		}	
Total number of o	others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	four largest direct charitable activities during the tax year. Include relevant statistical information that beneficiaries served, conferences convened, research papers produced, etc.	on such as the number of	Expenses
1 N/A	· · · · · · · · · · · · · · · · · · ·		
•			
2			
3		1	
4		· ·	
· Rant IX-B	Summary of Program-Related Investments (see instr	uctions)	<u> </u>
	gest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
		1	
2			
		,	
_	lated investments. See instructions		
3			

Total. Add lines 1 through 3

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 Amounts set aside for specific charitable projects that satisfy the 3 Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3ь b 178,157 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 1,423 5 Enter 1% of Part I, line 27b (see instructions) 176,734 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)

Pa	rt XIII U	ndistributed Income	(see instructions)				
				(a)	(b)	(c)	(d)
1	Distributable a	mount for 2012 from Part XI	,	Corpus	Years prior to 2011	2011	2012
	line 7						21,585
2	Undistributed i	income, if any, as of the end	of 2012				
а	Enter amount	for 2011 only					
ь	Total for prior	years 20, 20	, 20				
3		utions carryover, if any, to 20					
а	From 2007						
b	From 2008						
C	From 2009	[
d	From 2010						
е	From 2011		43,933				
f	Total of lines	3a through e		43,933			
4	Qualifying dist	ributions for 2012 from Part	XII,				
	line 4 ▶ \$_	<u> 178,157</u>					
а	Applied to 201	1, but not more than line 2a	Ĺ				
b	Applied to und	istributed income of prior ye	ars				
	(Election requi	red – see instructions)					
С	Treated as dis	tributions out of corpus (Elec	ction				
	required - see	: instructions)					
d	Applied to 201	2 distributable amount					21,585
е	Remaining am	ount distributed out of corpu	s	156,572			
5	Excess distribi	utions carryover applied to 2	012				
	(If an amount a	appears in column (d), the s	ame				
	amount must b	oe shown in column (a))					
6	Enter the net	total of each column as					
	indicated bel	ow:					
а	Corpus Add II	nes 3f, 4c, and 4e Subtract	line 5	200,505			
b	Prior years' un	idistributed income. Subtrac	ì				
	line 4b from lin	ne 2b					
C	Enter the amo	unt of prior years' undistribu	ted			1	
	income for wh	ich a notice of deficiency has	S	1]	
	been issued, o	or on which the section 4942	(a)	1			
	tax has been p	oreviously assessed					
d	Subtract line 6	ic from line 6b Taxable					
	amount – see		-				
е		income for 2011 Subtract lir	ne]	İ
		a Taxable amount – see					
_	instructions					 	
f		income for 2012, Subtract lir					
		line 1. This amount must be					0
_	distributed in 2						
7		ed as distributions out of co	`				
		irements imposed by section			u.	1	
0		or 4942(g)(3) (see instruction	i i				<u></u>
8		utions carryover from 2007					
		e 5 or line 7 (see instructions				 	
9		ibutions carryover to 2013). 	200,505			
40		7 and 8 from line 6a		200,303		 	
10	Analysis of line	1]	}
a	Excess from 2						
b	Excess from 2]	
G	Excess from 2 Excess from 2		43,933				
d	Excess from 2		156,572			1	

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

factors
None

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year WRTP His Radio 7610 Falls of Neuse Road 501 (c) (3) General Fund Raleigh NC 27615 5,000 Fruit Bearing Ministries of Durham Post Office Box 52328 501(c)(3) Durham NC 27717 General Fund 67,579 Grace Ministries of Durham Post Office Box 52328 501 (c) (3) Durham NC 27717 General Fund 92,578 Christian Outreach Ministires 501(c)(3) 3620 Cape Center Dr. Fayetteville NC 28304 General Fund 10,000 Cresset Academy Educational Fd. 3707 Garrett Rd. Durham NC 27707 General Fund 2,000 Shannon Forrest Christian School 829 Garlington Rd. General Fund Greenville SC 29615 1,000 178,157 ▶ 3a **b** Approved for future payment N/A

▶ 3b

Total

Part XVI-A	Analysis of Income-Producing Activ	vities				
Enter gross amo	unts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program ser						(See instructions)
				<u> </u>		
				_		
c			 	<u> </u>		
				-		 -
						
f	d contracts from government agencies		<u> </u>	 		
	dues and assessments	·	 	 		
	avings and temporary cash investments			14	5,382	
	nd interest from securities		-	14	6,573	
	come or (loss) from real estate				3,73.3	
	anced property					
	t-financed property					
	come or (loss) from personal property					
7 Other investi						
8 Gain or (loss	s) from sales of assets other than inventory			18	132,441	
	or (loss) from special events					
10 Gross profit	or (loss) from sales of inventory					
11 Other revenu	ue a					
				ļ		
d	 	ļ				
е				<u> </u>		
	d columns (b), (d), and (e)		0	<u> </u>	144,396	
	ne 12, columns (b), (d), and (e)				13	144,396
	Relationship of Activities to the Acc	nomplichm.	ent of Evennt Du	rnococ		
Part XVI-B	Explain below how each activity for which income is				d managements, to the	
Line No.	accomplishment of the foundation's exempt purpose)
N/A	accompliant and the real action of stempt purpose	55 (51.151 1.12.77	y promaing target for a	оси рагр	(000)	,
						
						
			 .			
						
						
						
		_				
				-		
	 					
						

Part		Information Rega Exempt Organiza		nsfers To and	Transactio	ns and Relationships Witl	Noncharitable		
1 D				n any of the follow	wing with any o	her organization described		Yes	No
	_	•		=		ction 527, relating to political		1	
	rganization					and the political			
	•	om the reporting founda	ition to a non	charitable exempt	organization of			Ì	1
	I) Cash	on the reporting loanua		onantable exempt	organization of		[;	la(1)	X
•	2) Other as	ceate						la(2)	$\frac{1}{x}$
•	ther transa						ř	<u> </u>	+
		assets to a nonchantal	hla avamnt o	raanization			į	lb(1)	X
•	•	es of assets from a nor	•	•	•			lb(2)	X
-	-	of facilities, equipment, of			-		F	lb(3)	X
		rsement arrangements	or other asse				Г	b(4)	X
		r loan guarantees						lb(5)	X
		ance of services or me	mhershin or i	fundraising solicita	tions		F	b(6)	X
	•	cilities, equipment, mai					f	1c	X
	=		=			n (b) should always show the fair	market L	<u>.,, , , , , , , , , , , , , , , , , , ,</u>	
				=		he foundation received less than fa			
		-	_			he goods, other assets, or service			-
	Line no	(b) Amount involved		ne of noncharitable exen		T	transactions, and sharing arr	angements	
N/A					.,				
				•					
					•				
						-		_	
	•								
	•								
d	escnbed in "Yes," con	ation directly or indirectly section 501(c) of the Complete the following schools are the following schools because of the complete the following schools because of the complete the following schools because of the complete the following schools because of the complete the following schools because of the complete the following schools because of the complete the com	ode (other th	nan section 501(c)	(3)) or in section	1 527?	ription of relationship] Yes [X No
N		a) Name of organization		(b) Type of	- gameador	(c) Desc			
		_ ,		 					
		······································							
						 			
	Under per	nalties of perjury, I declare that	at I have examin	ned this return, including	accompanying sc	nedules and statements, and to the best of	my knowledge and belief, it i	s true,	
	correct, ar	nd complete Declaration of p	reparer (other th	nan taxpayer) is based	on all information o	which preparer has any knowledge	May the IRS discus	ss this return	
Sign		Λ.	A !	Λ			with the preparer s		
Here		IIA. A	///	I Am	<u> </u>	1 1 1 2	(see instructions)?	Yes	No
11010	×	1/1/19/19	# سه	tanell	$\chi_{\perp} = \chi$	11/12/13 N Kas	selent	-	
	Sign	ature of office or trustee		1111.	Da	te Title			
			_			tures	Date	<u> </u>	
	Printity	pe preparer's name			Preparer's signa	Leale Oller, CPA, PA	Date	Cher self-	ck if employed
Paid	W: 11.	iam T. Allen				Andrew Arrest Could be	11/05		citipioyed
Prepar	er 💳		ат Тет	ple Aller	n, CPA,	P.A.		07184	6
Use Or	nly Firm's r	0.600		Center Dri		<u></u>		18338	
	Firm's a		cape c		330 4			-323-	
		Eayet	CC ATT1	.G, HC 20				om 990-l	

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

2012

Name of the organization Employer identification number The Grace Foundation 56-2006078 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III 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 exclusively 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 exclusively religious, charitable, etc , purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Page 1 of 1 of Part I

Name of organization
The Grace Foundation

Employer identification number 56-2006078

Part I	Contributors (see instructions). Use duplicate cop	pies of Part I if additional space is need	led
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	REA Residential, Inc. Post Office Box 52328 Durham NC 27717	\$ 25,954	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
NO.	Name, address, and zir v v	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No.	itaniej addiess, and an 1.4	\$	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
		s	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)

Page 1 of 1 of Part II

Name of organization The Grace Foundation Employer identification number 56-2006078

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1006 Berkeley St, Durham, NC		
		\$ 4,398	11/29/12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	2959/2961 Carolyn, Durham, NC		
		\$ 21,556	10/31/12
(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
		\$	

(15)

Capital Gains and Losses for Tax on Investment Income 990-PF 2012 Form For calendar year 2012, or tax year beginning and ending Name **Employer Identification Number** The Grace Foundation 56-2006078 (a) List and describe the kind(s) of property sold, e.g., real estate 2-story brick warehouse, or common stock, 200 shs. MLC Co (b) How acquired P-Purchase D-Donation (C) Date acquired (mo , day, yr) (d) Date sold (mo, day, yr) 6.6 American Century 08/17/12 P Various (1)1.755 Dodge & Cox P Various 08/17/12 (2)(3) .3333 Duke Energy P 07/03/12 07/03/12 239.086 Mainstay P 08/17/12 Various (4)142.128 Principal Funds P Various 08/17/12 (5) 52.08 Thronburg Invt Trust P 08/17/12 **Various** (6)8.865 American Century P 08/17/12 Various (7)6.678 Bridgeway Funds Inc P 12/16/11 03/27/12 (8) 1.657 Dodge & Cox Stock Fund P Various 08/12/12 (9) 169.913 Mainstay Fund High Yield P Various 08/17/12 (10)172.29 Principal Funds P 08/17/12 Various 79.645 Thornburg P Various 08/17/12 (12)P 08/17/12 723.916 Alger Smallcap 01/16/08 (13)757.959 American Century P 08/17/12 **Various** (14)468.056 Bridgeway Funds P **Various** 03/27/12 (f) Depreciation allowed (or allowable) (e) Gross sales price (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g) 173 9 182 (1) 13 206 193 (2) 23 23 (3)1,442 1,418 24 (4) 1,099 1,079 20 (5) 953 31 984 (6) 244 211 33 (7) 87 15 102 (8) 162 33 195 (9) 49 976 1,025 (10)1,280 52 1,332 (11)95 1,505 1,410 (12)1,324 12,437 11,113 (13)19,737 1,114 20,851 (14)7,580 -405 7,175 (15)Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus il (k), but not less than -0-) Or Losses (from col (h)) (k) Excess of col (i) over col (j), if any (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (1) 13 (2)23 (3) 24 (4)20 (5) 31 (6)33 (7) 15 (8) 33 (9)49 (10)52 (11)95 (12)1,324 (13)1,114 (14)

-405

(15)

Capital Gains and Losses for Tax on Investment Income 990-PF 2012 Form For calendar year 2012, or tax year beginning and ending Name Employer Identification Number The Grace Foundation 56-2006078 (b) How acquired P-Purchase D-Donation (C) Date acquired (mo , day, yr) (a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co (d) Date sold (mo , day, yr) 167.567 Dodge & Cox (1) P Various 08/17/12 380.57 Forward Funds Small Cap P (2) Various 03/27/12 5309.194 Mainstay Fund High Yield P 08/17/12 (3)Various 2689.342 Principal Funds P Various 08/17/12 (4) 423.596 RS INVT Trust P Various 08/17/12 (5)1792.055 Thornburg Invt P Various 08/17/12 (6)1251.657 Wells Fargo P 03/27/12 Various (7)701 Gray Ave, Durham, NC P 11/01/11 (8) 01/18/12 1117 N. Miami Blvd, Durham, P 11/01/11 03/08/12 (9) (10)2959/2961 Carolyn, Durham, NC P 10/01/12 10/31/12 1006 Berkeley, Durham, NC P 11/29/12 (11)(12)(13)(14)(15)(g) Cost or other basis plus expense of sale (e) Gross sales price (f) Depreciation allowed (or allowable) (h) Gain or (loss) (e) plus (f) minus (g) 19,686 19,554 132 (1) -995 6,481 7,476 (2) 31,700 32,014 314 (3)21,175 20,789 -386<u>(4)</u> 10,467 -1,40911,876 (5) 33,870 35,238 -1,368(6)14,219 13,260 959 (7) 4,962 4,316 -646(8) 13,128 6,388 19,516 (9) 23,539 66,461 90,000 (10)4,398 58,219 53,821 (11) (12)(13)(14)(15)Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) Or (k) Excess of col (i) (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 over col (i), if any Losses (from col (h)) 132 (1) -995 (2) 314 (3) -386 (4) -1,409(5) -1,368(6)959 (7) -646(8) 13,128 (9)66,461(10)53,821 (11)(12)(13)(14)

1014 The Grace Foundation 56-2006078 FYE: 12/31/2012	Federal Statements	11/5/2013 12:45 PM -
<i>(</i>	Statement 1 - Form 990-PF, Part I, Line 16c - Other Professional Fees	
Description Wells Fargo Total	Total Investment Adjusted \$ 2,018 \$ 2,018 \$ 2,018 \$ 0	Charitable Purpose
	Statement 2 - Form 990-PF, Part I, Line 23 - Other Expenses	
Description	Net Adjusted Total Investment \$	Charitable Purpose
Expenses Bank Charges Total	\$ 08	w
		1-2

Federal Statements

হা
nen
estr
<u>N</u>
ock
e St
orat
oro
ျှ
101
Line
=
Part
0-PF,
990-PF
rm
- Fo
nt 3
mei
ate
تند

Fair Market Value	3,97	12,22	8,495	62	51	01	78	24	75	05	12	79																									
Basis of Valuation	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	00	OS	Cost
End of Year	. 79	S	0	Н	,27	9	,28	, 56	,48	3,503	, 78	12,196								_																	
	l .∞	9	9	8	9	4	თ	П	œ	3	0	4	0	0	근	7	ω		e				0	ćί	.2	ς;	3	9	9	0.				<u>ε</u>	64	ω, (m.
Beginning of Year		14,45	7,09	13,64	$^{\circ}$	$^{\circ}$	6,28	S	4	3,50	_	11,63	4	ω	2,39	0	24		19,36				14,32	ω	ω,	30,38	α	4,		5	∞			19,58	36	ر ا س	11,11
	 	۲																																迅	F.3		
Description	Dan 809		RGY CC	07 ALLIANCE	1000 GENWORTH FINANCIAL INC	100 JOHNSON AND JOHNSON		200 DUKE ENERGY CORP	500 GENWORTH FINANCIAL INC	500 RADIAN GROUP INC.	100 DUKE ENERGY CORP	847.397 HARBOR INTL GROWTH	1460.687 THORNBURG INVST	280.786 THORNBURG INVST	130.227 THORNBURG INVST	1228.683 WELLS FARGO ADVANTAGE	22.974 WELLS FARGO ADVANTAGE	2092.932 WELLS FARGO INTRINSIC	165.847 DODGE & COX	3.377 DODGE & COX	2303.687 DWS INVESTMENT TRUST	74.466 DWS INVESTMENT TRUST	1763.773 PRINCIPAL FDS INC	797.936 PRINCIPAL FDS INC	299.923 PRINCIPAL FDS INC	5088.61 MAINSTAY HIGH YIELD	390.497 MAINSTAY HIGH YIELD	378.985 FORWARD SMALL CAP	423.596 RS VALUE FUND	468.056 BRIDGEWAY SMALL	78 BRIDGEWAY S	701.476 AMERICAN CENTY MUT	9 AMERICAN CENTY MI	6 AMERICAN CENTY	58 AMERICAN	924 ALLIANCE BE	723.916 ALGER FDS SMIDCAP

1014 The Grace Foundation	56-2006078	YE: 12/31/2012
9	56-	F

Federal Statements

Statement 3 - Form 990-PF. Part II. Line 10b - Corporate Stock Investments (continued)

<u> </u>	Fair Market Value	\$ 11,506	\$ 98,112
milenio Iconinina	Basis of Valuation	Cost Cost Cost Cost	
TIE OTOCK IIIVES	End of Year	14,484	120,407
סו סו	Ì	·v-	
", LIIIE 10D - C	Beginning of Year	12,485 1,464 189 13,982 3,817	302,085
ר, דמור	Ш	₩.	•
Statement 3 - FORM 330-FF, Fart II, LINE 10D - COLDONAGE SIOCK IIIVESUNEILIS (CONTINUED	Description	1063.419 ARTIO INTL EQUITY 116.52596 ARTIO INTL EQUITY 20.044 ARTIO INTL EQUITY 4000 GENON ENERGY INC 1000 GENON ENERGY INC	Total

• 1914. The Grace Foundation 56-2006078

Federal Statements

11/5/2013 12:45 PM

FYE: 12/31/2012

Statement 4 - Form 990-PI	, Part II, Line 1	5 - Other Assets
---------------------------	-------------------	------------------

Description	 Beginning of Year	 End of Year	 Fair Market Value
Real Estate	\$ 8,962	\$ 	\$
Total	\$ 8,962	\$ 0	\$ 0

Statement 5 - Form 990-PF, Part III, Line 3 - Other Increases

	Description		Amount
Rounding		\$_	16
Total		\$_	_16

1014 The Grace Foundation 56-2006078

Federal Statements

11/5/2013 12:45 PM

FYE: 12/31/2012

Name of Manager	Amount
Charlene Hamlett	\$
Total	\$0
Form 990-PF, Part XV, Line 2b - Applic	ation Format and Required Contents
Description	
Contact Individual named in 2A	
Form 990-PF, Part XV, Line 2	2c - Submission Deadlines
Description	
None	
Form 990-PF, Part XV, Line 2d - Av	ward Restrictions or Limitations

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

Department of the Internal Revenue S		File	a separate a	application for each return.					
		omatic 3-Month Extension, complet	e only Part !	and check this box					▶ X
	-	ditional (Not Automatic) 3-Month Ext	-		of this form).				ت ،
		ess you have already been granted an				3868			
		·		·	•				
		can electronically file Form 8868 if you							
		Form 990-T), or an additional (not autor			-		m		
		of time to file any of the forms listed in		•					
Return for Tra	nsfers Associat	ed With Certain Personal Benefit Contr	acts, which r	must be sent to the IRS in pap	er format (see				
		on the electronic filing of this form, vis				profits			
Part I		3-Month Extension of Time.							
A corporation i	required to file F	Form 990-T and requesting an automat	ic 6-month e	xtension - check this box and	complete				
Part I only									▶ 📙
All other corpo	rations (includir	ng 1120-C filers), partnerships, REMICs	s, and trusts	must use Form 7004 to reque	st an extension	n of tır	ne		
to file income t	ax returns								
					Enter filer's id	entify	ing num/	ber, see ir	structions
Туре ог	ype or Name of exempt organization or other filer, see instructions Employer identification num						ation num	ber (EIN) c	r
print									
	The Gr	ace Foundation			56-200	607	8		
le by the	Number, stre	et, and room or suite no If a P O box,	see instructi	ons.	Social secur	ity nur	nber (SSI	N)	
due date for	3620 C	ape Center Dr.				•	•	•	
iling your etum See	City, town or	post office, state, and ZIP code. For a t	foreign addre	ess, see instructions.					
nstructions	Fayett		28304						
Enter the Petu	m code for the	return that this application is for (file a s	onarata ann	leastion for each return)					04
			eparate app	reading for each return)					
Application			Return	Application					Return
ls For			Code	Is For					Code
Form 990 or	Form 990-EZ		01	Form 990-T (corporation)					07
Form 990-BL			02	Form 1041-A					08
Form 4720 (i	individual)		03	Form 4720	 				09
Form 990-PF	<u> </u>		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
		Charlene Hamlett							
		P.O. Box 52328							
 The books a 	re in the care of D	▶ Durham					NC	2771	7
								·	
Telephone	No. ▶ 919	9-489-2000	FAX No	•					
If the organ	nization does no	t have an office or place of business in	the United S	States, check this box					▶ 🗌
If this is for	a Group Retur	n, enter the organ <u>iza</u> tion's four digit Gro	oup Exemption	on Number (GEN)	If this	IS			_
or the whole g	roup, check this	box 🕨 🔲 . If it is for part of t	the group, ch	neck this box	and attach				
list with the n	ames and EINs	of all members the extension is for.							
1 request	an automatic 3	-month (6 months for a corporation req	uired to file f	Form 990-T) extension of time	:				
until 0	8/15/13	, to file the exempt organization return	for the orga	nization named above The ex	dension is				
for the or	ganızatıon's ret	urn for:							
▶ 🗓 (calendar year _	2012 or							
<u> </u>	_								
▶ 🗌 t	ax year beginni	ng , and ending							
2 If the tax	year entered in	line 1 is for less than 12 months, chec	k reason:	Initial return Fir	nal return				
	ange in accoun				_				
		orm 990-BL, 990-PF, 990-T, 4720, or 6	3069, enter ti	he tentative tax, less any					
	dable credits S			· ·		3a	\$		0
b If this app	olication is for F	orm 990-PF, 990-T, 4720, or 6069, en	ter any refun	dable credits and					
_		made Include any prior year overpayn	_			3b	\$		6
		ine 3b from line 3a. Include your payme					1		
		ral Tay Payment System). See instruct		, 3		20	٠ ا		0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

1014 07/18/20	013 4 46 PM										
3 M. C						F=72	O O	57A S. E			
Form 8868	(Rev. 1-2013) -			1	Taria Tarian		Le se	Pag	e 2		
• If you a	are filing for an Additional (Not Automatic) 3-Month Ext	tension, con	nplete only Part II and check t	his box 📱) (522) []			Ш		
	complete Part II if you have already been granted an auto		·	ed Form 886	8						
	are filing for an Automatic 3-Month Extension, complet										
Part II	Additional (Not Automatic) 3-Month Ex	<u>ktension</u> d	of Time. Only file the orig	ginal (no co	ppies	need	<u>led).</u>				
		<u> </u>	E	nter filer's ic					ions		
Type or	Name of exempt organization or other filer, see insti	ructions.		Employer id	entific	ation n	umber (E	EIN) or			
print											
File by the	The Grace Foundation			56-200							
due date for	Number, street, and room or suite no If a P.O box,	see instructi	ons.	Social secui	rity nui	nber (SSN)				
filing your	3620 Cape Center Dr.										
return See instructions	City, town or post office, state, and ZIP code For a										
	Fayetteville NC	28304									
Enter the R	eturn code for the return that this application is for (file a s	separate app	lication for each return)						04		
Applicati	ion	Return	Application			-		Retu	rn		
Is For		Code	ls For					Code	Э		
Form 990	or Form 990-EZ	01									
Form 990)-BL	02	Form 1041-A					08			
Form 472	20 (ındıvidual)	03	Form 4720					09	09		
Form 990)-PF	04	Form 5227					10			
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069					11			
Form 990)-T (trust other than above)	06	Form 8870					12			
Telepho If the or If this is	ks are in the care of Miriam Wellons one No. 919-489-2000 ganization does not have an office or place of business in for a Group Return, enter the organization's four digit Gre e group, check this box If it is for part names and EINs of all members the extension is for	oup Exempti	States, check this box	. If this is	ich a			>			
 For ca If the C State 	tiest an additional 3-month extension of time until 11, alendar year 2012 or other tax year beginning tax year entered in line 5 is for less than 12 months, check thange in accounting period in detail why you need the extension atting for additional information.			al return i.es.							
nonre	application is for Form 990-BL, 990-PF, 990-T, 4720, or of the fundable credits. See instructions. application is for Form 990-PF, 990-T, 4720, or 6069, en		-		8a	\$					
	ated tax payments made. Include any prior year overpayr	-				1					
	nt paid previously with Form 8868.				8b	\$					
	nce due. Subtract line 8b from line 8a. Include your paym	ent with this	form, if required, by using EFTI	PS							
	ronic Federal Tax Payment System) See instructions		· -		8c	\$					
Under penal	Signature and Verific		st be completed for Pa	·	to the	best of	i my				

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

Author Lysle allen, CPA, FA

CAA

Date ► 07/18/13
Form 8868 (Rev 1-2013)