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Form **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.

Department of the Treasury Internal Revenue Service

OMB No 1545-0052	
2012	
mon to public inconcition	•

For calendar year 2012 or tax year beginning , and ending							
Name	of foundation	A Employer identification	number				
AL	PHIN FAMILY FOUNDATION						
C/	O JESSE C. ALPHIN		56-2108036				
Numbe	r and street (or P O box number if mail is not delivered to street	B Telephone number					
34	89 U.S. 301 SOUTH			910-892-87	'51		
	town, state, and ZIP code		· · · · · · · · · · · · · · · · · · ·	C If exemption application is p			
•	NN, NC 28334			in examplion application is p	ending, discribe		
	ck all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	check here		
• 00	Final return	Amended return	mor poblic onancy	7. Torongin organization.	s, check here		
	Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,		
H Che	ck type of organization: X Section 501(c)(3) ex						
		Other taxable private founda	ution	E If private foundation sta			
		ng method: X Cash	Accrual	under section 507(b)(1)	• •		
	· 1 ——	her (specify)	Accrual	F If the foundation is in a			
(<i>non</i>	183,051. (Part I, colu	mn (d) must be on cash l	hasis)	under section 507(b)(1)	o(B), check here		
Part				(-) Adminded	(d) Durburgary		
rait	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes		
		40,613.		N/A	(cash basis only)		
	Contributions, gifts, grants, etc., received	40,013.		N/A	<u> </u>		
	Check from from the foundation is not required to attach Sch. B. Interest on savings and temporary						
	cash investments	2 262	2 262		Gt - 1 - 1 - 1		
. 1		3,262.	3,262.		Statement 1		
'	ia Gross rents						
	b Net rental income or (loss)	-7 005	 -				
e '	A Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	<7,005.	>				
Revenue	assets on line 6a						
é j	Capital gain net income (from Part IV, line 2)		0.				
_ {							
	Gross sales less returns						
10	Ja and allowances						
	D Less Cost of goods sold			· · · · · · · · · · · · · · · · · · ·			
	c Gross profit or (loss)						
11		26 272	2 2 2 2				
12	2 Total. Add lines 1 through 11	36,870.	3,262.				
13		0.	0.		0.		
14					·		
_ω 15							
60 14	Sa Legal fees						
Expense	b Accounting fees Stmt 2	1,092.	0.	RECE	/ <u>50</u> 0.		
ΔĬ	c Other professional fees						
±=	Interest		 	<u> </u>			
E 18				₫ MAY ½ 1	7012		
을 19	• • • • • • • • • • • • • • • • • • • •				<u> </u>		
[20				OGD			
				1	<u></u> ~		
E 22	•						
E 23		107.	0.		0.		
Operating	Total operating and administrative						
g	expenses. Add lines 13 through 23	1,199.	0.		0.		
2:	Contributions, gifts, grants paid	10,730.			10,730.		
26	Total expenses and disbursements.						
	Add lines 24 and 25	11,929.	0.		10,730.		
27	Subtract line 26 from line 12:						
ł	8 Excess of revenue over expenses and disbursements	24,941.	<u> </u>				
	b Net investment income (if negative, enter -0-)		3,262.				
223501	C Adjusted net income (if negative, enter -0-)		<u> </u>	N/A			

12-05-12 LHA For Paperwork Reduction Act Notice, see instructions.

223511 12-05-12

2012.03040 ALPHIN FAMILY FOUNDATION C/ A51 1

<u>58.</u> ,263.

167

Decreases not included in line 2 (itemize) ► 2011 FEDERAL TAX

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

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(a) List and desc	ribe the kind(s) of property sold (e.g arehouse; or common stock, 200 shs	., real estate,		(b) H	ow acquired Purchase Donation	(c) Date a	cquired y, yr.)	(d) Date (mo., da	
1a 400 SHARES QUA				"	P	02/11	/98	12/17	7/12
							/07	02/29	
	200 SHARES ROYAL BANK OF CANADA D						/07	02/29	
d 84 SHARES DUKE			RW			00, 22	,, , ,	<u> </u>	,,
e (STOCK SPLIT)					P	09/07	7/04	07/03	3/12
(e) Gross sales price	(f) Deprectation allowed (or allowable)		t or other basis xpense of sale			(h) Gai	in or (loss (f) minus)	,
a 24,179.			30,55	2.				<6	373.
b 5,549.			5,22						324
c 11,099.		l -	12,07						<975
dd				-					
e 46.			2	7.		 -			19.
	ng gain in column (h) and owned by	the foundation) Gains (Co	I (h) nain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1)			L (k), but no		n -0-) or	
2								<6.	373.
b					·				324.
C									<975
d					· · · · · · · · · · · · · · · · · · ·				
e					···				19.
2 Capital gain net income or (net ca	If gain, also enter			}	2			<7	005
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8 Part V Qualification U	column (c).		Tax on Net	Inve	3 estment Inc	come	N/A		
If section 4940(d)(2) applies, leave to Was the foundation liable for the sec If "Yes," the foundation does not quate the appropriate amount in	tion 4942 tax on the distributable am	mplete this pa	rt.		-			Yes	X No
(a) Base period years	(b) Adjusted qualifying dis	tributions	Net value of no	(c)	tahle-use assets		Distrib	(d) oution ratio	(-)\
Calendar year (or tax year beginni	iig iii/		1101 14100 01 1101				car (a) aiv	ided by col.	
2011		3,125.			137,370				95545
2010		9,475.			111,471				35000
2009		7,976.			103,760				76870
2008		1,900.	·		117,233				150
	5	7,391.			133,845	· -		.42	28787
						2		.78	37709
3 Average distribution ratio for the the foundation has been in existe	o-year base period - divide tile total (nce if less than 5 years		-	-		3		. 1 4	57542
		• • • • • • • • • • • • • • • • • • • •				 " 			
4 Enter the net value of noncharital				•		4			,505
4 Enter the net value of noncharital	ole-use assets for 2012 from Part X,	line 5						154	
4 Enter the net value of noncharital 5 Multiply line 4 by line 3	ole-use assets for 2012 from Part X,	line 5				5		154	,341.
4 Enter the net value of noncharital 5 Multiply line 4 by line 3 6 Enter 1% of net investment incor	ole-use assets for 2012 from Part X,	line 5				5		154 24	, 505 , , 341 , , 33 ,
4 Enter the net value of noncharital 5 Multiply line 4 by line 3 6 Enter 1% of net investment incor 7 Add lines 5 and 6	ole-use assets for 2012 from Part X,	line 5				5		154 24 24	, 3 4 1 ,

· ` · ALPHIN FAMILY FOUNDATION

Form	1990-PF (2012) C/O JESSE C. ALPHIN 56-2108	036		Page 4
	ort VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			
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)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			65.
	of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2			65.
4	Subtrile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			65.
6	Credits/Payments:			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 6			
	Exempt foreign organizations - tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			65.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11_	Enter the amount of line 10 to be: Credited to 2013 estimated tax			
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 participate or intervene in		Yes	No
	any political campaign?	1a	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		ł	
	distributed by the foundation in connection with the activities.		l	-
c	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	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. ► \$ 0.		1	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		ĺ	
	managers. ► \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2	<u> </u>	<u>X</u>
	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_
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5_	<u> </u>	<u>X</u>
	If "Yes," attach the statement required by General Instruction T.	1	İ '	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		1	
	remain in the governing instrument?	6_		X_
7	Did the foundation have at least \$5,000 in assets at any time during the year?	 7 _	X	<u> </u>
_	If "Yes," complete Part II, col. (c), and Part XV.		1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NC		1	
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 calendar	1		
ــ د	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	-	X
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X	L

	ADFILIN FAMILI FOUNDATION			
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Pa	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		1	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	ŀ		
	If "Yes," attach statement (see instructions)	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► <u>JESSE C. ALPHIN</u> Telephone no. ► <u>910-8</u> !	<u> 32-8</u>	751	
	Located at ► 3489 US 301 SOUTH, DUNN, NC ZIP+4 ►2	<u> 3334</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	_16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country >			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	İ		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1	i	
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception, Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
,	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
١	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	10		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
•	before the first day of the tax year beginning in 2012?	۱,		v
•		10		<u> </u>
Z	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
_	defined in section 4942(j)(3) or 4942(j)(5)):			
ž	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2012? Yes X No	}		
	If "Yes," list the years \(\bigcup_{\text{\tint{\text{\tint{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\text{\texi\tint{\text{\text{\text{\text{\texi}\tin\text{\text{\texict{\text{\text{\texit{\text{\text{\texicl{\tin\text{\text{\texit\			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	2b		
(; If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	.		
_				
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
ı	of Tyes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2012.)	3b	ļ	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
ı	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			, '
	had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		x

ALPHIN FAMILY FOUNDATION Form 990-PF (2012) C/O JESSE C. ALPHIN 56-2108036 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? Yes X No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes X No b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to guestion 5a(4), does the foundation claim exemption from the tax because it maintained N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 6b If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account other (If not paid, enter -0-) (a) Name and address allowances See Statement 6 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Trtle, and average hours per week devoted to position (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation allowances NONE

Form **990-PF** (2012)

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

ALPHIN FAMILY FOUNDATION

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation 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		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati number of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 N/A		
2		
3		
3		
	_	
4		
Det IV P. C. C. D. L.		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year or	n lines 1 and 2	Amount
1 N/A	rines rand z.	Amount
1		
2		
All other program-related investments. See instructions.		
3		
Total, Add lines 1 through 3	<u></u>	0.

Form 990-PF (2012) C/O JESSE C. ALPHIN

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	143,660.
ь	Average of monthly cash balances	1b	13,198.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	156,858.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	156,858.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,353.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	154,505.
6_	Minimum investment return. Enter 5% of line 5	6	7,725.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	7,725.
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	65.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	7,660.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	7,660.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	7,660.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		40 500
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	10,730.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Surtability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	10,730.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	10,730.
_	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	aualifies for	
	AQAΩ(a) reduction of tay in those years		

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,				7,660.
line 7				1,000.
2 Undistributed income, if any, as of the end of 2012			0.	
a Enter amount for 2011 only				
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2012:			 	
5 0007 FO 767				
	i			
	69,961.	Ì		
f Total of lines 3a through e	09,901.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 10,730.			0.	
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.			7 ((0
d Applied to 2012 distributable amount	2 070			7,660.
e Remaining amount distributed out of corpus	3,070.			
5 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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	73,031.			
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	50,767.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	22,264.	}		
10 Analysis of line 9:				
a Excess from 2008 6,090.		Ì		
b Excess from 2009 2,839.		j		
c Excess from 2010 3,951.				
d Excess from 2011 6,314.	1	†		
e Excess from 2012. 3,070.		Ì		
		 		Form 000 DE (0040)

b The form in which applications should be submitted and information and materials they should include;

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

c Any submission deadlines:

Form 990-PF (2012) C/O JESSE C. ALPHIN
Part XV Supplementary Information (continued)

56-2108036 Page 11

3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
DUNN ROTARY CLUB	N/A	CHARITY		•••
				100.
HARNETT COUNTY COMMUNITY FOUNDATION	N/A	CHARITY		
				200.
VIDAMACI, DADA II GOLADOR				
HERITAGE BIBLE COLLEGE	N/A	CHARITY		6_350.
LONG BRANCH CHURCH	N/A	CHARITY		
				2,750.
SANSOM CHAPEL CHURCH	N/A	CHARITY		
		<u> </u>		500.
total See com b Approved for future payment	tinuation shee	t(s).	. ▶ 3a	10,730.
b Approved for factore payment				
Mana				
None				
Total	<u> </u>		▶ 3b	0.
			- 30	000 DE

Form 990-PF (2012) C/O JESSE C. ALPHIN

nter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue:	Code		1		
a			 -		
b	-	·	 	 ,	
<u> </u>			├──		
d	-		+		
e	-		 		
	-	·	+-		
g Fees and contracts from government agencies	-		 		
Membership dues and assessments			 		
Interest on savings and temporary cash					1
investments			14	3,262.	
Dividends and interest from securities			14	3,202.	
Net rental income or (loss) from real estate:			 -		
a Debt-financed property	-				
b Not debt-financed property			 -		
Net rental income or (loss) from personal				16	
property					
Other investment income					· · · · · · · · · · · · · · · · · · ·
Gain or (loss) from sales of assets other			10	-7 005	
than inventory	-		18	<7,005.	<u> </u>
Net income or (loss) from special events			├		
Gross profit or (loss) from sales of inventory			\vdash		:
Other revenue:			İ		
<u>.</u>	- }				
Ъ			}		
c	-		 	· · · · · · · · · · · · · · · · · · ·	
d	-		ļ		
	1 1		+	<3,743.	
e				<3./45.	>
Subtotal. Add columns (b), (d), and (e)		0.			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)					<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.)				13	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.) Relationship of Activities	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ew worksheet in line 13 instructions to verify calculations.) Relationship of Activities ine No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ew worksheet in line 13 instructions to verify calculations.) Relationship of Activities ine No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities ine No. Explain below how each activity for which inc	to the Acco	omplishment of Ex	cemp	t Purposes	<3,74

	1990-PF (2	012) C/O	JESSE C. A	LPHIN			56-2108	3036	Pa	ige 13
Pa	rt XVII	Information F	Regarding Tran	sfers To a	and Transactions	and Relations	hips With Nonchar			
		Exempt Orga	nizations							
1	Did the or	ganization directly or in	directly engage in any	of the followin	g with any other organizati	on described in sect	on 501(c) of		Yes	No
					7, relating to political organ		, ,			
2		from the reporting foun			- · · · · ·					İ
•		· -	oddon to a nononana	ibio exempt or §	gamzadon or.			4-(4)		v
	(1) Cash	• • • •	••					1a(1)		X
	(2) Other	•						1a(2)		X
b	Other tran									
		of assets to a nonchari						1b(1)		X
	(2) Purch	nases of assets from a n	oncharitable exempt o	organization .				1b(2)		X
	(3) Renta	ıl of facilities, equipmen	t, or other assets					1b(3)		X
		bursement arrangemen	to		••	•		16(4)		X
		s or loan guarantees			•	• • • • • • • • • • • • • • • • • • • •		1b(5)		X
		rmance of services or n								
_			· •	-				1b(6)		X
		f facilities, equipment, n						<u>1c</u>		X
ď							narket value of the goods, of		ets,	
					ed less than fair market vali	ue in any transaction	or sharing arrangement, sh	ow in		
	column (d) the value of the goods	, other assets, or serv	rices received.						
a) ∟	ne no	(b) Amount involved	(c) Name of	f noncharitable	exempt organization	(d) Description	of transfers, transactions, and sl	hanng an	angeme	nts
				N/A						
				-						
			 							
										
			 							
					 					
			1					_		
		· · · · · · · · · · · · · · · · · · ·								
										
			 							
		 _	 							
					 					
2a	Is the four	ndation directly or indire	ctly affiliated with, or	related to, one	or more tax-exempt organi	izations described				
		501(c) of the Code (oth						Yes	X] No
h		emplete the following so		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				00		,
		(a) Name of o			(b) Type of organization		c) Description of relationship	ın.		
		N/A	ganacaton		(b) Type of organization	<u> </u>	by besoription of relationship	. <u> </u>		
		IN/A			· 	ļ				
		· · · · · · · · · · · · · · · · · · ·				 				
										
									-	
	Under	peralities of perjury, I declar	e that I have examined thi	is return, including	g accompanying schedules and	statements, and to the	best of my knowledge			=
Sig	and be	ellef, it is true, correct, and c	omplete Declaration of pr	eparer (other than	taxpayer) is based on all inform	nation of which preparer	return	the IRS on with the	prepare	er 1
Hè	re	XInne	O. (1) Q4/1	11.	15-13-13	PRESI		n below	(see inst	ו ו
	 	rátrifa of officer or tructi			J	- 	ENT LA	Yes		J No
	Jaigi	ature of officer or truste		Description 1	Date	Title	Chook Corne			
	ĺ	Pfint/Type preparer's		Preparer's si	gnature	Date	Check if PTIN			
_		/Nina A. B	utts,	0-	-0 -11 -00	ا ہے ہے ا	self- employed			
Pa		C.P.A.		Tuna	A. Buth, CP.A.	5-13-13	P00	449	607	
Pr	eparer		car N. Har	ris &	Associates,	P.A.	Firm's EIN ► 56-14			
Us	e Only			· •		- == -			_ •	
	-	Firm's address					 			
		I -	O Po- F7	10 D	אר מסטפר	0E70	Dhana - 010 0	0.0	100	1
		<u> </u>	•O• ROX 2/	o, pun	<u>n, NC 28335-</u>	· U D / B	Phone no. 910-8	74-	<u> 102</u>	Τ

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 ALPHIN FAMILY FOUNDATION C/O JESSE C. ALPHIN 56-2108036 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 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 33 1/3% 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, chantable, etc.. purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or 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 II, 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).

Name of organization
ALPHIN FAMILY FOUNDATION
C/O JESSE C. ALPHIN

Employer identification number

56-2108036

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Parti	Corta ibators (see instructions). Ose duplicate copies of Part I il additiona	a space is needed.	_
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JESSE C. ALPHIN 3489 U.S. 301 SOUTH DUNN, NC 28334	\$8,165.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ALLENE W. ALPHIN 3489 U.S. 301 SOUTH DUNN, NC 28334	\$8,164.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JESSE C. ALPHIN 3489 U.S. 301 SOUTH DUNN, NC 28334	\$12,142.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ALLENE W. ALPHIN 3489 U.S. 301 SOUTH DUNN, NC 28334	\$12,142.	Person Payroll Noncash X (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 Oncash 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.)

Name of organization

ALPHIN FAMILY FOUNDATION

Employer identification number

C/O JESSE C. ALPHIN

56-2108036

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	150 SHARES ROYAL BANK OF CANADA		
			02/27/12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	150 SHARES ROYAL BANK OF CANADA	_	
		\$8,164.	02/27/12
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	200 SHARES QUALCOMM INC.		
		\$12,142.	12/14/12
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	200 SHARES QUALCOMM INC.		
-			12/14/12
(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
		 \$	

AT.DUTN	T'AMTT.V	FOINDATIO

TESS	AMILY FOUNDATION E. C. ALPHIN Exclusively religious charitable at a indi-	widual contributions to section 501(c)	56-2108036		
Ļ	ear. Complete columns (a) through (e) and the total of exclusively religious, charitable, elements duplicate copies of Part III if addition	the following line entry. For organization to, contributions of \$1,000 or less for the space is needed.	7), (8), or (10) organizations that total more than \$1,000 for s completing Part III, enter the year. (Enter this information once) \$		
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee		
No. m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee		
No.					
m tl	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
1	Transferee's name, address, a	and 7IP + 4	Relationship of transferor to transferee		

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount contribution status of Name and address (home or business) recipient N/A CHARITY STUDENTS INTERNATIONAL 500. THE HERITAGE FOUNDATION N/A CHARITY 100. COATS ELEMENTARY SCHOOL A\n CHARITY 30. DUNN AREA WOMAN'S CLUB N/A CHARITY 100. ROTARY CLUB OF LILLINGTON N/A CHARITY 100. Total from continuation sheets 830.

						-	
Form 990-PF Dividend	ls and	Inter	est from	Secui	rities	Statement	1
Source		Gross	Amount		ital Gains Lvidends	Column (A Amount	.)
DEUTSCHE BANK ALEX. BROWN, LL	ıC		3,262.		0.	3,2	62.
Total to Fm 990-PF, Part I, 1	n 4		3,262.		0.	3,2	62.
Form 990-PF	Ac	counti	ng Fees			Statement	2
Description	Expe	a) enses Books	(b) Net Invo		(c) Adjusted Net Incom		
Professional Fees		1,092.		0.			0.
To Form 990-PF, Pg 1, ln 16b		1,092.		0.			0.
Form 990-PF	C	ther E	xpenses			Statement	3
Description	Expe	a) enses Books	(b) Net Invent Inc		(c) Adjusted Net Incom		
Investment Fee		5.		0.			0.
Foreign Tax		102.		0.			0.
To Form 990-PF, Pg 1, ln 23		107.	· -	0.			0.
Form 990-PF	Co	rporat	e Stock			Statement	4
Description				Вос	ok Value	Fair Marke Value	t
200 SHARES QUALCOMM INC STOCK 75 SHARES FIRST CITIZENS 200 SHARES GENERAL ELECTRIC O 41 SHARES DUKE ENERGY 500 SHARES ABB LTD SPONSORED 20 SHARES CITIGROUP INC COM N 200 SHARES NUVEEN EQUITY PREM 300 SHARES QUALCOMM INC STOCK	O ADR NEW 1 INCO	OME FD	COM		15,276. 8,738. 6,200. 2,895. 8,300. 9,947. 3,615. 9,945.	2,6 10,3 7	63. 98. 16. 95. 91.

ALPHIN FAMILY FOUNDATION C/O	JESSE C. AL		50	6-2108036
200 SHARES QUALCOMM INC STOCK 250 SHARES UNILEVER PLC SPON AI 300 SHARES QUALCOMM INC STOCK 200 SHARES QUALCOMM INC STOCK 200 SHARES QUALCOMM INC STOCK 150 SHARES ROYAL BANK OF CANADA 150 SHARES ROYAL BANK OF CANADA 100 SHARES ROYAL BANK OF CANADA 200 SHARES ROYAL BANK OF CANADA	A A A	8,46 6,57 10,67 12,14 12,14 8,16 8,16	74. 71. 12. 15. 55. 0. 0.	12,372. 9,680. 18,558. 12,372. 12,372. 9,045. 9,045.
Total to Form 990-PF, Part II,	line 10b	131,24	13.	147,003.
Form 990-PF	Other Liabilities		State	ement 5
Description		BOY Amount	EOY A	Amount
LOAN PAYABLE - JESSE C. ALPHIN		2	27.	27.
Total to Form 990-PF, Part II,	line 22		27.	27.
Form 990-PF Part VIII - I	List of Officers, D	irectors	State	ement 6
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	
	Title and	Compen-	Ben Plan	Expense
Name and Address JESSE C. ALPHIN 3489 US 301 SOUTH	Title and Avrg Hrs/Wk PRESIDENT	Compen- sation	Ben Plan Contrib	Expense Account
Name and Address JESSE C. ALPHIN 3489 US 301 SOUTH DUNN, NC 28334 ALLENE W. ALPHIN 3489 US 301 SOUTH	Title and Avrg Hrs/Wk PRESIDENT 1.00 DIRECTOR	Compensation 0.	Ben Plan Contrib	Expense Account 0.
Name and Address JESSE C. ALPHIN 3489 US 301 SOUTH DUNN, NC 28334 ALLENE W. ALPHIN 3489 US 301 SOUTH DUNN, NC 28334 ERNEST J. ALPHIN 3489 US 301 SOUTH	Title and Avrg Hrs/Wk PRESIDENT 1.00 DIRECTOR 1.00 SECRETARY AND	Compensation 0. TREASURER	Ben Plan Contrib 0.	Expense Account 0.
Name and Address JESSE C. ALPHIN 3489 US 301 SOUTH DUNN, NC 28334 ALLENE W. ALPHIN 3489 US 301 SOUTH DUNN, NC 28334 ERNEST J. ALPHIN 3489 US 301 SOUTH DUNN, NC 28334 KAY ALPHIN JOHNSON 3489 US 301 SOUTH	Title and Avrg Hrs/Wk PRESIDENT 1.00 DIRECTOR 1.00 SECRETARY AND 1.00 DIRECTOR	Compensation 0. TREASURER 0.	Ben Plan Contrib 0. 0.	Expense Account 0. 0.