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Form **990-PF**

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

OMB No 1545-0052

2012

Department of the Treasury Internal Revenue Ser, ice

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

F	or cale	endar year 2012, or tax year beginning	, 2012,	, and ending	,	
	IM Al	ND PEARL KYLE FOUNDATION INC			A Employer identification nur 57-0786826	
		JUANITA DRIVE ENCE, SC 29501-5724			Telephone number (see the 843-662-6236	instructions)
					C If exemption application is	pending, check here
G				ner public charity	D 1 Foreign organizations, chec	ck here
		Final return Address change	Amended return Name change		2 Foreign organizations meet	
H	· · · · · ·		(c)(3) exempt private f		here and attach computation	
T	Fa	Section 4947(a)(1) nonexempt charitable tir market value of all assets at end of year J Acc		ash X Accrual	If private foundation status under section 507(b)(1)(A)	
		rom Part II, column (c), line 16)	Other (specify) column (d) must be or		F If the foundation is in a 60 under section 507(b)(1)(B)	
I	Part I		(a) Revenue and expenses per books	(b) Net investment income	t (c) Adjusted net income	(d) Disbursements for charitable purposes (cash
		sarily equal the amounts in column (a) (see instructions).)				basis only)
		Contributions, gifts, grants, etc, received (att sch) Ck X if the foundn is not req to att Sch B				
		3 Interest on savings and temporary	1.4		4 14	
Ś		cash investments 4 Dividends and interest from securities	14. 29,777.	29,77	4. 14. 29,777.	
SCANNED		5 a Gross rents b Net rental income				
R	R	or (loss) 6 a Net gain/(loss) from sale of assets not on line 10	-16,264.			
m	R E V E	b Gross sales price for all 1,693,167.			0.	
DE	Capital gain net income (from Part IV, line 2)				0.	
C	U E	9 Income modifications 10 a Gross sales less returns and				
== (9)		allowances b Less Cost of				
N		goods sold c Gross profit/(loss) (att sch)	<u> </u>			
013		11 Other income (attach schedule)	F 025			,
		SEE STATEMENT 1 12 Total. Add lines 1 through 11	5,035. 18,562.	29,79		
		Compensation of officers, directors, trustees, etc Other employee salaries and wages	11,000.		5,500.	5,500.
		15 Pension plans, employee benefits				1 -
6	A D	16a Legal fees (attach schedule) b Accounting fees (attach sch)			NOV 2 7 2013	
	М	c Other prof fees (attach sch) SEE ST 2	22,365.	22,36		
	O I	17 Interest	36.		6 4	
!	OPERAT	18 Taxes (attach schedule)(see instrs). SEE STM 3 19 Depreciation (attach	862.		12000 - 20 - 620 200 10	<u>~</u> \
:	1 E	sch) and depletion	3,450.			
1	N V G E	21 Travel, conferences, and meetings	3,977.			3,977.
. 1	A E N D P	22 Printing and publications 23 Other expenses (attach schedule)			-	
,	E N	SEE STATEMENT 4	24,615.		23,113.	269.
•	S E S	24 Total operating and administrative expenses. Add lines 13 through 23	66,305.	22,40	1. 28,613.	9,746.
•		25 Contributions, gifts, grants paid STMT 5	57,500.			57,500.
' _		26 Total expenses and disbursements. Add lines 24 and 25	123,805.	22,40	1. 28,613.	67,246.
		27 Subtract line 26 from line 12: a Excess of revenue over expenses				
		and disbursements b Net investment income (if negative, enter -0-)	-105,243.	7,39	00.	
_		C Adjusted net income (if negative, enter -0-)			1,178.	
Ē	BAA F	or Paperwork Reduction Act Notice, see ins	tructions.		TEEA0504L 12/23/12	Form 990-PF (2012)

1,867,591.

5

6

Decreases not included in line 2 (itemize)

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

(a) List and describ	be the kind(s) of property sold (e g , realise, or common stock, 200 shares MLC	al estate. (b) How	rchase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a SEE STATEMENT 12			nation		
b ·			-		
С С				 -	
					
e			1		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b					
С					
d					
<u>e</u>	<u></u>				
	wing gain in column (h) and owned by			(1) Gains (Colu	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (ı) over column (ı), ıf any		n minus column (k 1 -0-) or Losses (fr	
a					
b					
c		Va. V	ļ		
d					
<u>e</u>			<u> </u>		
2 Capital gain net income or (no		enter in Part I, line 7 er -0- in Part I, line 7	2		-16,264.
If gain, also enter in Part I, lir	(loss) as defined in sections 1222(5) ane 8, column (c) (see instructions) If (l	_			00.000
in Part I, line 8	Castian 4040/6\/an Dadward	Toy on Not Investment Inc	3		<u>-29,866.</u>
	er Section 4940(e) for Reduced to the section 4940(e) to the section 4940(e) for Reduced				
If 'Yes,' the foundation does not qua	ection 4942 tax on the distributable amo alify under section 4940(e) Do not con in each column for each year; see the	nplete this part		Yes	X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution nn (b) divided	
2011	170,615.	2,066,801	+		0.082550
2010	175,298.	1,936,076			0.090543
2009	174,978.	2,079,715			0.084136
2008	143,171.	1,880,306			0.076142
2007	254,638.	2,445,490			0.104126
2 Total of line 1, column (d)			2		0.437497
3 Average distribution ratio for the number of years the foundation	the 5-year base period — divide the toton has been in existence if less than 5	al on line 2 by 5, or by the years	3		0.087499
4 Enter the net value of noncha	ritable-use assets for 2012 from Part X	K, line 5	4		1,858,693.
5 Multiply line 4 by line 3			5		162,634.
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		74.
7 Add lines 5 and 6			7		162,708.
8 Enter qualifying distributions t	from Part XII, line 4	,	8		124,746.
If line 8 is equal to or greater	About the 7 shoots the best on Dock VIII.	ing 1h, and complete that part lieu		tay rate. See t	
Part VI instructions.	than line 7, check the box in Part VI, ii	ine 10, and complete that part usin	ıy a 176	tax rate. See ti	ne

		7-07868		F	Page 4
Par		see instruct	ions)		
1 a	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 instrs)				
t	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			<u> 148.</u>
	check here ► ☐ and enter 1% 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, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
_	foundations only. Others enter -0-)	2	_		<u>0.</u>
3	Add lines 1 and 2	3			148.
4	Subtitle 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-	5			148.
6	Credits/Payments				
	2012 estimated tax pmts and 2011 overpayment credited to 2012				
	Exempt foreign organizations — tax withheld at source				Ì
	Tax paid with application for extension of time to file (Form 8868)				}
_	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d	7			<u>0.</u>
8	Enter any penalty for underpayment of estimated tax. Check here	8			1 40
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	► 9 ► 10			<u> 148.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	► 11	-		
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax VII-A Statements Regarding Activities				
			·	Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	ı t	1 a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		16		х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities				
c	Did the foundation file Form 1120-POL for this year?		10		X
c	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation		0.		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers • \$ 0.				
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	5	3	· ·	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	Х	
	of 'Yes,' has it filed a tax return on Form 990-T for this year?		41	+	1
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	<u> </u>	X
	If 'Yes,' attach the statement required by General Instruction T				1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				}
	Ry state legislation that effectively amends the governing instrument so that no mandatory directions that confluence	~†		İ	
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	^	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-			
	N/A				
t	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 ² If 'No,' attach explanation		8 5	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3 for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' com	3) or 4942(ı)	(5)	<u> </u>	
	for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' com	plete Part X	îν 9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name	es:]	
BAA	and addresses		10 Form 99	0-PF (X 2012)
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Form 990-PF (2012)

jeopardize its charitable purpose that had not been removed from jeopardy before the first day of

the tax year beginning in 2012?

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Form 990-PF (2012) HM AND PEARL KYLE				-078682	26	Page	e <b>6</b>
Part VII-B   Statements Regarding Activiti	es for Which Form	4720 May Be Requ	uired (continue	ed)			
5 a During the year did the foundation pay or incu	-		Π.,				
(1) Carry on propaganda, or otherwise attemp			∐ Yes	X No			
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra			Yes	X No			
(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 the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	ganization described ictions)	Yes	X No			
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	, literary, or or animals?	Yes	X No			
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to o a current notice regard	qualify under the exception disaster assistance	tions		5 b	N/A	
Organizations relying on a current notice rega	rding disaster assistanc	e check here	1	► □			
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	 ∏ No			
If 'Yes,' attach the statement required by Regi	ulations section 53 4945	5-5(d)		ш			
6 a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes	XNo			
<b>b</b> Did the foundation, during the year, pay premi	iums, directly or indirec	tly, on a personal bene	fit contract?		6 ь	:	X
If 'Yes' to 6b, file Form 8870		.h.tad tau ahaltar transa	ation2 DV	Vala			
<b>7 a</b> At any time during the tax year, was the found <b>b</b> If 'Yes,' did the foundation receive any procee				X No N/A	7 b	<u> </u>	
Part VIII   Information About Officers, D	rectors. Trustees.	Foundation Manage	ers, Highly Pa			 ;,	
and Contractors	,	•		<u> </u>			
1 List all officers, directors, trustees, foundation	n managers and their o	ompensation (see inst	ructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee ben plans and defe compensation	efit erred		e accour llowance	
SEE STATEMENT 13							
							_
		11,000.		0.			0.
					**		
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none, enter 'I	NONE',			
(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 employee ben plans and defe compensation	efit rred		e accour llowance	
NONE							
							_
							_
			-	<del></del>			_
	1						
				-+			
	1						
		<u> </u>	<u></u>	<del></del>  _			
Total number of other employees paid over \$50,000	TEEA0306L 1	2/25/12	<del></del>	F	orm <b>990</b> -	- <b>PF</b> (2012	<u>2)</u>

Page 6

-orm	990-PF (2012) HM AND PEARL KYLE FOUNDATION INC 57-078	
Ŗar	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	~~·	
- <del>-</del> -		
Total	number of others receiving over \$50,000 for professional services	0
Pari	Summary of Direct Charitable Activities	
ist the	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	FLORENCE COUNTY DISABILITIES FOUNDATION: PROMOTES MAKING A DIFFERENCE	
	IN PEOPLE'S LIVES BY SPONSORING OPPORTUNITIES, SUCH AS SUMMER CAMPS,	
_	HOLIDAY MEALS, UNIFORMS FOR SPECIAL OLYMPICS AND OTHER PROGRAMS	15,000.
2	DIOCESE OF EAST CAROLINA: TO ASSIST IN PROVIDING GROWTH IN CHRIST; TO	
	RESTORE ALL PEOPLE TO UNITY WITH GOD AND EACH OTHER IN CHRIST.	15 000
3	SEE STATEMENT 14	15,000.
	OFF DIVIDUE 13	
		10,000.
4	SEE STATEMENT 15	
		5,000.
Pari	Summary of Program-Related Investments (see instructions)	
Desc	ribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
	<u>N/A</u>	
2		<del></del>
2		
	~	
All o	ther program-related investments. See instructions	
3		
	Add lines 1 through 3	0.
3AA		Form <b>990-PF</b> (2012)

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Part X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign fo	undations,
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.	1 a	1,589,807.
<b>b</b> Average of monthly cash balances	1 b	146,801.
c Fair market value of all other assets (see instructions)	1 c	190,085.
d Total (add lines 1a, b, and c)	1 d	1,926,693.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	1	
(attach detailed explanation) 1 e 0.	.}	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,926,693.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) SEE STATEMENT 16	4	68,000.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,858,693.
6 Minimum investment return. Enter 5% of line 5	6	92,935.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► □ and do not complete this part.)	iting fou	ndations
	1 1	02 035
·		92,935.
2 a Tax on investment income for 2012 from Part VI, line 5  2 a 148.	-	
b Income tax for 2012. (This does not include the tax from Part VI.)	<del>                                     </del>	1.40
c Add lines 2a and 2b	2 c	148.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	92,787.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	92,787.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	92,787.
Part XII Qualifying Distributions (see instructions)	<del> </del>	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:	1 a	67 246
a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 b	67,246.
b Program-related investments — total from Part IX-B	2	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	<del></del>	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
<b>b</b> Cash distribution test (attach the required schedule) SEE STATEMENT 17	3 b	57,500.
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	124,746.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	124,746.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years	undation	
BAA	1	Form <b>990-PF</b> (2012)

Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	<b>(d)</b> 2012
Distributable amount for 2012 from Part XI, line 7				92,787.
2 Undistributed income, if any, as of the end of 2012:				32,767.
a Enter amount for 2011 only			0.	
<b>b</b> Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2012				
<b>a</b> From 2007				
<b>b</b> From 2008				
c From 2009				
<b>d</b> From 2010				
e From 2011				
f Total of lines 3a through e 4 Qualifying distributions for 2012 from Part	0.			
XII, line 4 ► \$ 124,746.				
a Applied to 2011, but not more than line 2a			0.	
	···.		0.	
<ul> <li>Applied to undistributed income of prior years (Election required – see instructions)</li> </ul>		0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			20 707
d Applied to 2012 distributable amount	21 252			92,787.
e Remaining amount distributed out of corpus	31,959.			0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the				<u> </u>
same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	31,959.			
<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	<del></del>	0.		
d Subtract line 6c from line 6b Taxable				
amount – see instructions	<u> </u>	0.		
e Undistributed income for 2011. Subtract line 4a from			0.	
line 2a. Taxable amount — see instructions		<del>-</del>	<u> </u>	
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)				
(see instructions)	0.			
8 Excess distributions carryover from 2007 not	_			
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	31,959.			_
10 Analysis of line 9	***************************************			
a Excess from 2008				
<b>b</b> Excess from 2009				
c Excess from 2010				
d Excess from 2011			1	
<b>e</b> Excess from 2012 31, 959.			<u>L., </u>	

orm 990-PF (2012) HM AND PEARL KYLI			· / /// / / · · · ·	57-0786826	
Private Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2012, enter the date of the	rmination letter that ruling	it is a private operat	ing foundation, and th	e ruling	
<b>b</b> Check box to indicate whether the foundat	ion is a private op	erating foundation o	described in section	4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	(e) Total
<b>b</b> 85% of line 2a	<del></del>				
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets .					<del></del>
(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 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())(3)(B)(III)					·
(3) Largest amount of support from an exempt organization					
(4) Gross investment income			<u> </u>	<b>1</b> 222	•
Supplementary Information assets at any time during the	(Complete this e year — see ir	s part only if the nstructions.)	e foundation had	\$5,000 or more	ın
Information Regarding Foundation Managers of the foundation who have close of any tax year (but only if they have NONE	e contributed more t	than 2% of the total cethan \$5,000) (See	contributions received section 507(d)(2))	by the foundation befo	ore the
b List any managers of the foundation who own a partnership or other entity) of which the NONE	10% or more of the foundation has a	e stock of a corporation 10% or greater inter	on (or an equally large rest	e portion of the owner	ship of
2 Information Regarding Contribution, Gra	nt, Gift, Loan, Sch	olarship, etc, Progr	ams:		
Check here ► X if the foundation only marequests for funds If the foundation make	akes contributions to s gifts, grants, etc	preselected charitab (see instructions) t	ole organizations and o o individuals or orga	does not accept unsol inizations under othe	icited er conditions,
a The name, address, and telephone number o	r e-mail of the perso	on to whom application	ons should be address	ed	
	·				
<b>b</b> The form in which applications should be	submitted and info	ormation and materi	als they should inclu	de.	
c Any submission deadlines.					
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	able fields, kinds of i	nstitutions, or other	factors:

3 b

Total

## Part XVI-A Analysis of Income-Producing Activities

inter gross amounts unless otherwise indicated.	Unrelated b	ousiness income	Excluded by	section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a	<del>                                     </del>				
b					
C					
d	<b>-</b>				
e	<u> </u>				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					×
3 Interest on savings and temporary cash investments		<del></del>	14	14.	
4 Dividends and interest from securities			14	29,777.	_ · <del></del>
5 Net rental income or (loss) from real estate		•			·
a Debt-financed property					
<b>b</b> Not debt-financed property	531110	-18,864.			
6 Net rental income or (loss) from personal property					<del></del>
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					-16,264
9 Net income or (loss) from special events.					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
С					
d					
e					
Subtotal Add columns (b), (d), and (e)		-18,864.		29,791.	-16,264
13 Total. Add line 12, columns (b), (d), and (e)				13	-5,337
See worksheet in line 13 instructions to verify calculate	ions.)			_	

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain 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) (See instructions)
N/A	
•	
-	

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of 1 a (1) Х (1) Cash Х (2) Other assets 1 a (2) **b** Other transactions 1 b (1) (1) Sales of assets to a noncharitable exempt organization

(2)	Purchases of assets fro	m a noncharitab	ole exempt organization			1 b (2)	X
(3) Rental of facilities, equipment, or other assets							
(4) Reimbursement arrangements							
(5)	Loans or loan guarante	es				1 b (5)	Х
(6)	Performance of service	s or membership	o or fundraising solicitations			1 b (6)	Х
c St	naring of facilities, equipm	nent, mailing list	s, other assets, or paid employ	ees		1 c	X
<b>d</b> If the	the answer to any of the e goods, other assets, or se by transaction or sharing a	above is 'Yes,' c ervices given by the arrangement, she	complete the following schedule ne reporting foundation If the four ow in column <b>(d)</b> the value of th	Column (b) should alw idation received less than goods, other assets.	rays show the fair mai i fair market value in or services received	rket value	of
(a) Line			noncharitable exempt organization		sfers, transactions, and sha	ring arrangen	nents
N/A	(2)				<del></del>		
11/11							
					<del> </del>		
	<del></del>	<del> </del>		· · · · · · · · · · · · · · · · · · ·			
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<del></del>	<del></del>	<del></del>					
	<del></del>	<del></del>	<del></del>	-			
de	the foundation directly or in escribed in section 501(c) 'Yes,' complete the follow	of the Code (oth	with, or related to, one or more to her than section 501(c)(3)) or in	exempt organizations section 527?		Yes	χNο
	(a) Name of organiza	_ <del></del>	(b) Type of organization	(0	) Description of relation	onship	
N/A	(4)						
-11/11	*						
	·						
	<del>-</del>						
	Under penalties of perjury, I declar	are that I have examin	ned this return, including accompanying so han taxpayer) is based on all information (	hedules and statements, and to	the best of my knowledge ar	nd belief, it is	true,
Sign					ledge	May the IRS this return wi	discuss
Here	Barun	nawfr	11-15-	7 TRUSTEE PR	ES	preparer show	wn below
	Signature of officer or trustee		Date	Title		X Yes	
	Print/Type preparer's na	ame	Preparer's signature	Date	Check If P	TIN	
Paid	GINGER R LA	WRIMORE. C	PA Cum La	7 ida 11/14/	13 self-employed P	014392	14
Prepa		LAWRIMORE (		MANUFA	Firm's EIN - 46-133		
Use O	• • • • • • •	PO BOX 184	<del></del>				
USE U			SC 29503-1844	· · · · ·	Phone no (843)	662-43	16
BAA				<del></del>		orm <b>990-P</b>	

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## **FEDERAL STATEMENTS**

PAGE 1

### HM AND PEARL KYLE FOUNDATION INC

57-0786826

STATEMENT 1	
FORM 990-PF, PART I, LINE	11
OTHER INCOME	

	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
RENTAL INCOME - NONINVESTMENT PROPERTY TOTAL	\$ 5,035. \$ 5,035.	\$ 0	.\$ 0.

#### STATEMENT 2 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVISORY FEES	TOTAL	\$ 22,365. \$ 22,365.	\$ 22,365. \$ 22,365.	<u>\$</u> 0.	\$ 0.

#### STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES

	EX PE	(A) PENSES R BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
990-PF	TOTAL \$	862. 862.	\$ 0.	\$ 0.	\$ 0.

#### STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	 (C) DJUSTED INCOME	 (D) CHARITABLE PURPOSES
INSURANCE OFFICE EXPENSES POSTAGE RENTAL EXPENSES	<b>\$</b>	1,179. 843. 269. 20,449.		\$ 1,179. 843.	\$ 269.
RENTAL EXPENSES SEMINARS & CONFERENCES WACHESAW EXPENSES	TOTAL <u>\$</u>	642. 1,233. 24,615.	\$ 0.	\$ 20,449. 642. 23,113.	\$ 269.

## FEDERAL STATEMENTS

PAGE 2

HM AND PEARL KYLE FOUNDATION INC

57-0786826

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STATEMENT 5	
FORM 990-PF, PART I, LINE 25	
<b>CONTRIBUTIONS, GIFTS, AND GRANTS</b>	,

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

AMOUNT GIVEN:

ORGANIZATIONAL STATUS OF DONEE:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: NONE ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

ASSIST FAMILIES IN NEED FLORENCE WEST ROTARY CLUB

PO BOX 1933

FLORENCE, SC 29503

NONE

PRIVATE FOUNDATION

EDUCATION COKER COLLEGE

300 E. COLLEGE AVE HARTSVILLE, SC 29550

NONE

EDUCATIONAL ORGANIZATION

ASSIST FAMILIES IN NEED LIGHTHOUSE MINISTRIES

201 E. ELM ST

FLORENCE, SC 29506

NONE

PUBLIC CHARITY

ASSIST FAMILIES IN NEED MERCY MEDICINE CLINIC

500 S COIT ST

FLORENCE, SC 29501

NONE

ASSIST DEAF INDIVIDUALS

FLORENCE MID DAY SERTOMA PO BOX 5822

FLORENCE, SC 29502

RELIGIOUS NEEDS OF INDIVI ST DAVID'S EPISCOPAL CHURCH

605 POLO RD

COLUMBIA, SC 29223

NONE

CHURCH

RELIGIOUS NEEDS OF INDIVI DIOCESE OF EAST CAROLINA

705 DOCTORS DR KINGSTON, NC 28501

NONE

RELIGIOUS ORGANIZATION

15,000.

15,000.

## **FEDERAL STATEMENTS**

PAGE 3

#### HM AND PEARL KYLE FOUNDATION INC

57-0786826

STATEMENT 5 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

ASSIST FAMILIES IN NEED

FLORENCE CTY DISABILITIES FDN 1211 E NATIONAL CEMETERY RD

FLORENCE, SC 29506

NONE

PRIVATE FOUNDATION

5,000.

**EDUCATION** 

FRANCIS MARION UNIVERSITY FDN

PO BOX 100547 FLORENCE, SC 29502

NONE

PRIVATE FOUNDATION

1,000.

57,500. TOTAL \$

**STATEMENT 6** FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION <u>METHOD</u>	BOOK <u>VALUE</u>	FAIR MARKET VALUE
FIRST TR VALUE LINE FVD ISHARES S&P US PREFERRED STOCK	MKT VAL MKT VAL TOTAL	\$ 19,895. 97,901. \$ 117,796.	\$ 19,895. 97,901. \$ 117,796.

## STATEMENT 7 FORM 990-PF, PART II, LINE 10C INVESTMENTS - CORPORATE BONDS

CORPORATE BONDS	VALUATION <u>METHOD</u>	BOOK VALUE	FAIR MARKETVALUE
ISHARES BARCLAYS BOND FD ISHARES CORE LONG ET TERM US BOND ISHARES TRUST BOND FUND ISHARES JPMORGAN EM ISHARES TRUST ET	MKT VAL MKT VAL MKT VAL MKT VAL MKT VAL MKT VAL TOTAL	\$ 98,043. 98,859. 88,249. 98,478. 98,329. \$ 481,958.	\$ 98,043. 98,859. 88,249. 98,478. 98,329. \$ 481,958.

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## FEDERAL STATEMENTS

PAGE 4

HM AND PEARL KYLE FOUNDATION INC

57-0786826

STATEMENT 8				
FORM 990-PF, PART II,	LINE 11			
<b>INVESTMENTS - LAND</b>	BUILDINGS.	AND	<b>EQUIPMEN</b>	T

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE	FAIR MARKETVALUE
FURNITURE AND FIXTURES MACHINERY AND EQUIPMENT BUILDINGS LAND	\$ 7,728 1,980 86,297 50,000 TOTAL \$ 146,005	. 1,980. . 35,512.	\$ 467. 0. 50,785. 50,000. \$ 101,252.	\$ 1,000. 500. 95,500. 50,000. \$ 147,000.

#### STATEMENT 9 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

	VALUATION <u>METHOD</u>	BOOK VALUE	FAIR MARKET VALUE
OTHER PUBLICLY TRADED SECURITIES			
JAMES BALANCED GOLDEN RAINBOW FD FIRST TRST HLTH CAREETF FIRST TRUST CONSUMER ETF FIRST TRUST CONSUMER ET STAPLES ALPHADEX FIRST TRUST DOW JONES INTERNET INDEX FD FIRST TRUST S&P REIT ET INDEX FUND SPDR S&P EMRG LAT AM ET SPDR S&P 500 TRUST ET	MKT VAL	\$ 20,186. 140,670. 140,775. 139,771. 141,188. 144,627. 87,525. 85,446.	\$ 20,186. 140,670. 140,775. 139,771. 141,188. 144,627. 87,525. 85,446.
	TOTAL	\$ 900,188.	\$ 900,188.

#### STATEMENT 10 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

	_BO	OK VALUE	VALUE VALUE
INITIAL FEE (WACHESAW PLANTATION) ROUNDING	\$	20,000. 1.	\$ 20,000.
UTILITY DEPOSITS		85.	85.
	TOTAL \$	20,086.	\$ 20,085.

#### STATEMENT 11 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS PRIOR PERIOD ADJUSTMENTS

\$	87,028.
	9,151.
TOTAL \$	96,179.

57-0786826

### **HM AND PEARL KYLE FOUNDATION INC**

STATEMENT 12 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		(B) HOW	(C) DATE	(D) DATE
ITEM	(A) DESCRIPTION	ACOUIRED	<u>ACOUIRED</u>	SOLD
1	510 FIRST TRUST HEALTH CARE ETF	PURCHASED	10/12/2011	2/08/2012
2	124 FIRST TRUST HEALTH CARE ETF	PURCHASED	10/12/2011	2/29/2012
2 3 4	217 FIRST TRUST HEALTH CARE ETF	PURCHASED	10/12/2011	5/30/2012
4	182 FIRST TRUST HEALTH CARE ETF	PURCHASED	10/12/2011	6/28/2012
5	22 FIRST TRUST ET UTILITIES	PURCHASED	11/02/2011	2/08/2012
5 6 7	8453 FIRST TRUST ET UTILITIES	PURCHASED	11/02/2011	2/29/2012
ž	155 FIRST TRUST CONSUMER ET	PURCHASED	2/29/2012	5/30/2012
8	70 FIRST TRUST CONSUMER ET	PURCHASED	2/29/2012	6/28/2012
9	717 FIRST TRUST CONSUMER ET	PURCHASED	2/29/2012	12/19/2012
10	264 FIRST TRUST DOW JONES	PURCHASED	6/07/2011	2/08/2012
11	17 FIRST TRUST DOW JONES	PURCHASED	6/07/2011	2/29/2012
		PURCHASED	6/07/2011	
12	84 FIRST TRUST DOW JONES			5/30/2012
13	833 FIRST TRUST S&P REIT ET	PURCHASED	7/21/2011	2/08/2012
14	745 FIRST TRUST S&P REIT ET	PURCHASED	7/21/2011	5/30/2012
15	198 FIRST TRUST S&P REIT ET	PURCHASED	7/21/2011	6/28/2012
16	1 ISHARES BARCLAYS	PURCHASED	8/24/2011	8/24/2012
17	74 ISHARES BARCLAYS	PURCHASED	8/24/2011	5/30/2012
18	24 ISHARES BARCLAYS	PURCHASED	8/24/2011	6/28/2012
19	3 ISHARES BARCLAYS CREDIT BOND	PURCHASED	10/26/2011	2/08/2012
20	924 ISHARES BARCLAYS CREDIT BOND	PURCHASED	10/26/2011	5/30/2012
21	78 ISHARES BARCLAYS ET TRES BOND	PURCHASED	9/14/2011	5/30/2012
22	29 ISHARES BARCLAYS ET TRES BOND	PURCHASED	9/14/2011	6/28/2012
23	77 ISHARES BARCLAYS ET TRES BOND	PURCHASED	VARIOUS	12/19/2012
24	59 ISHARES BARCLAYS TIPSET BOND	PURCHASED	6/07/2011	5/30/2012
25	77 ISHARES BARCLAYS TIPSET BOND	PURCHASED	VARIOUS	6/28/2012
26	739 ISHARES BARCLAYS YEAR TREAS BOND	PURCHASED	9/28/2012	8/23/2012
27	33 ISHARES CORE LONG	PURCHASED	6/28/2012	12/19/2012
28	4 ISHARES IBOXX \$ YEILDET	PURCHASED	2/08/2012	2/29/2012
29	24 ISHARES IBOXX \$ YEILDET	PURCHASED	2/08/2012	5/30/2012
30	1092 ISHARES IBOXX \$ YEILDET	PURCHASED	2/08/2012	6/28/2012
31	91 ISHARES S&P US	PURCHASED	5/30/2012	6/28/2012
32	95 ISHARES S&P US	PURCHASED	5/30/2012	12/19/2012
33	1707 ISHARES TRUST ET	PURCHASED	VARIOUS	2/08/2012
34	62 ISHARES TRUST ET	PURCHASED	8/23/2012	12/19/2012
35	169.03 MONEY MKT OBLIGS	PURCHASED	VARIOUS	2/29/2012
36	142 SPDR INDEX SHS FDS	PURCHASED	2/08/2012	2/29/2012
37	2776 SPDR INDEX SHS FDS	PURCHASED	2/08/2012	5/30/2012
38	19 SPDR S&P EMERGING	PURCHASED	5/30/2012	6/28/2012
39	112 SPDR S&P EMERGING	PURCHASED	5/30/2012	12/19/2012
40	13 SPDR S&P EMRG LAT AM ET	PURCHASED	2/08/2012	6/28/2012
41	5 SPDR S&P EMRG LAT AM ET	PURCHASED	8/02/2012	8/23/2012
42	104 SPDR S&P EMRG LAT AM ET	PURCHASED	2/08/2012	12/19/2012
43	8 SPDR S&P 500 TRUST	PURCHASED	2/08/2012	2/29/2012
44	10 SPDR S&P 500 TRUST	PURCHASED	2/08/2012	5/30/2012
45	16 SPDR S&P 500 TRUST	PURCHASED	2/08/2012	6/28/2012
46	41 SPDR S&P 500 TRUST	PURCHASED	2/08/2012	12/19/2012
47	337201.81 MOMEY MKT OBLIGS TR	PURCHASED	11/23/2011	2/08/2012
48	152813.37 MONEY MKT OBLIGS	PURCHASED	VARIOUS	2/29/2012
49	2889 POWERSHARES DB COMMODITY	PURCHASED	2/29/2012	5/30/2012
50	2751 POWERSHARES DB OIL	PURCHASED	2/29/2012	5/30/2012
51	530 FIRST TRST HLTH CAREETF	PURCHASED	10/12/2011	12/19/2012
52	60 FIRST TRUST DOW JONES INTERNET	PURCHASED	6/07/2011	6/28/2012
53	483 FIRST TRUST DOW JONES INTERNET	PURCHASED	6/07/2011	12/19/2012
54	252 FIRST TRUST S&P REIT ET	PURCHASED	7/21/2011	12/19/2012
55	16 ISHARES BARLCAYS TRES BOND FUND	PURCHASED	8/24/2011	12/19/2012
56	863 ISHARES BARCLAYS ET TRES BOND	PURCHASED	VARIOUS	12/19/2012
20	000 TOURIES DUNCTULO ET TRES DOMO	LONCHASED	AWITOOD	12/13/2012

## **FEDERAL STATEMENTS**

PAGE 6

## **HM AND PEARL KYLE FOUNDATION INC**

57-0786826

# STATEMENT 12 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

<u>ITEM</u> 57 58 59 60		S BARCLAYS TRUST CONSU RUST CONSU	MERETF	ID .	(B) ACOU PURCH PURCH PURCH	IRED AC IASED 6/ IASED IASED 6/	) DATE <u>QUIRED</u> '07/2011 '18/2010	(D) DATE SOLD 6/28/2012 2/08/2012 2/29/2012 12/19/2012
59	67 FIRST T	RUST CONSU	MERETF UMERETF  (G) COST BASIS 13,500. 3,282. 5,744. 4,818. 384. 147,505. 3,822. 17,681. 9,321. 2,966. 13,926. 17,681. 9,321. 2,966. 13,925. 3,11. 9,395. 3,047. 100,633. 8,164. 3,035. 8,047. 100,633. 8,164. 3,035. 8,743. 94,014. 2,110. 2,186. 99,446. 37,503. 38,697. 364. 2,110. 2,186. 99,446. 37,503. 37,697. 386. 99,014. 2,110. 2,160.	(H) GAIN (LOSS)  1,396. 458. 703. 636. 1,18112284. 1,011. 16. 874. 128. 100. 21. 753. 265. 4. 1,054. 253. 11030. 598. 5101,5941540. 24719,1124. 1,052.	PURCH	LASED 6/	(K) EXCESS (I) - (J)	2/29/2012 12/19/2012 (L) GAIN (LOSS) \$ 1,396. 458. 703. 636. 5. 1,181. -122. -84. 1,011. 16. 8. -74. 128. 100. 21. 5. 753. 265. 4. 1,054. 253. 110. -30. 598. 510. -1,594. -15. -896. 29. 113. 245. 5. 0. 247. -19,112. -4. 1,052.
40 41 42 43 44 45 46 47	845. 350. 7,690. 1,103. 1,320. 2,105. 5,954. 337,202.		1,063. 409. 8,502. 1,081. 1,351. 2,162. 5,539. 337,202.	-218. -59. -812. 22. -31. -57. 415.				-218. -59. -812. 22. -31. -57. 415.

## **FEDERAL STATEMENTS**

PAGE 7

HM AND PEARL KYLE FOUNDATION INC

57-0786826

# STATEMENT 12 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

<u>ITEM</u>	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
48	152,813.		152,813.	0.				\$ 0.
49	73,779.		85,464.	-11,685.				-11,685.
50	69,160.		85,473.	-16,313.				-16,313.
51	17,653.		14,029.	3,624.				3,624.
52	2,038.		2,118.	-80.				-80.
53	19,200.		17,053.	2,147.				2,147.
54	4,450.		4,213.	237.				237.
55	2,158.		2,031.	127.				127.
56	92,680.		90,228.	2,452.				2,452.
57	87,361.		80,162.	7,199.				7,199.
58	10,317.		7,487.	2,830.				2,830.
59	1,495.		1,147.	348.				348.
60	17,543.		12,876.	4,667.				4,667.
	•						TOTAL	\$ -16,264.

### STATEMENT 13 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	
GARY W CRAWFORD 510 S COIT ST FLORENCE, SC 29501	TRUSTEE PRES 10.00	\$ 5,000.	\$ 0.	\$ 0.
WALLACE B PERMENTER 514 JUANITA DR FLORENCE, SC 29501	TRUSTEE SEC/TRE 16.00	6,000.	0.	0.
PRESTON B HUNTLEY JR 312 POWE ST CHERAW, SC 29520	TRUSTEE 2.00	0.	0.	0.
JAMES H KYLE, III 112 DOBBIN AVE FAYETTEVILLE, NC 28305	TRUSTEE 8.00	0.	0.	0.
INGRAM PARMLEY 11 WAKEFIELD DR ASHEVILLE, NC 28803	TRUSTEE-VICE PR 8.00	0.	0.	0.
	TOTAL	\$ 11,000.	\$ 0.	\$ 0.

## **FEDERAL STATEMENTS**

PAGE 8

#### **HM AND PEARL KYLE FOUNDATION INC**

57-0786826

#### STATEMENT 14 FORM 990-PF, PART IX-A, LINE 3 SUMMARY OF DIRECT CHARITABLE ACTIVITIES

DIRECT CHARITABLE ACTIVITIES

EXPENSES

MERCY MEDICINE CLINIC: PROVIDE MEDICAL CARE TO RESIDENCES OF FLORENCE, WILLIAMSBURG & DILLON COUNTIES WHO COULD NOT OTHERWISE RECEIVE MEDICAL CARE, ALSO PROVIDE CONSULTATIONS, TREATMENT AND SERVICES FOR NO CHARGE.

10,000.

STATEMENT 15 FORM 990-PF, PART IX-A, LINE 4 SUMMARY OF DIRECT CHARITABLE ACTIVITIES

#### DIRECT CHARITABLE ACTIVITIES

EXPENSES

LIGHTHOUSE MINISTRIES: PROVIDES FINANCIAL ASSISTANCE TO FAMILIES AND INDIVIDUALS WITH LIMITED RESOURCES, HELPS WITH MORTGAGE, RENT, UTILITIES, MEDICINE, FOOD AND HELPS MOVE PEOPLE BEYOND THEIR CURRENT CRISIS.

5,000.

## STATEMENT 16 FORM 990-PF, PART X, LINE 4 EXPLANATION OF CASH DEEMED HELD FOR CHARITABLE ACTIVITIES

UNIVERSITY OF NC - WILMINGTON	\$	2500.00
FRANCIS MARION UNIVERSITY		2500.00
DIOCESE FOR EAST CAROLINA		3000.00
DIOCESE FOR SOUTH CAROLINA		3000.00
ANNUAL SMALL CHARITIES (BENEFACTOR'S REQUEST)		2000.00
ANNUAL TRUSTEE'S DISCRETIONARY DONATIONS		5000.00
ANNUAL OPERATING EXPENSES	į	50000.00
TOTAL	\$6	68000.00

## STATEMENT 17 FORM 990-PF, PART XII, LINE 3B EXPLANATION FOR CASH DISTRIBUTION TEST

FLORENCE ROTARY CLUB COKER COLLEGE	\$ 1000.00 5000.00
LIGHTHOUSE MINISTRIES	10000.00
MERCY MEDICINE CLINIC	5000.00
FLORENCE MID DAY SERTOMA	500.00
ST DAVID'S EPISCOPAL CHURCH	15000.00
DIOCESE OF EAST CAROLINA	15000.00
FLORENCE CTY DISABILITIES FOUNDATION	5000.00
FRANCIS MARION UNIVERSITY FOUNDATION	1000.00
TOTAL:	57500.00

**Account Number** 

2228272

## Carolina Publishing

Advertising Affidavit

P.O Box 100528 Florence, SC 29501 (843) 317-6397

Date

May 25, 2013

PERMENTER, WALLANCE 514 JUANITA DR. FLORENCE, SC 29501

ſ	Date	Category	Description	Ad Size	Total Cost
	05/25/2013	_Legal Notices	"The annual returns and financial inform	1 x 12 L	119 40

The annual returns and financial information for Calendar year 2012 of the H.M. and Pearl Kyle Foundation, is available for inspection at its principal office on 514 Juanita Dr., Florence, S.C. during regular business hours by any citizen who request inspection within 180 days after date. The telephone number of such foundation is 662-6236 and it's principal financial officer is Wallace B. Permenter Secretary - Treasurer."

(May 23, 24 & 25, 2013)

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## Publisher of the Morning News

This is to certify that the attached "The annual returns and f was published in the Morning News in the City of Florence, state of South Carolina on the following dates:

05/25, 05/23, 05/24/2013

The First insertion being given ... 05/23/2013

Newspaper reference: 0000619932

Sworn to and subscribed before me this

Notary Public

Supervisor

State of South Carolina
My Commission expires

My Commission Expires December 21, 2022



## Mailed 8-14-13



(Rev January 2013)

# Application for Extension of Time To File an Exempt Organization Return

ternal Revenue S	rile a sepa	rate applicat	ion for each return.	<b>1</b>		
If you are fili	ing for an Automatic 3-Month Extension, co	omplete on	y Part I and check	this box		• 🗆
	ing for an Additional (Not Automatic) 3-Moi				form)	
o not comp	plete Part II unless you have already been gr	anted an au	tomatic 3-month ex	xtension on a previously fi	led F	orm 8868.
	ling (e-file). You can electronically file Form					
corporation	required to file Form 990-T), or an additiona	d (not autom	natic) 3-month exter	nsion of time. You can ele	ectror	nically file Form
868 to requ	est an extension of time to file any of the fo	orms listed i	in Part I or Part II v	with the exception of For	m 88	70 Information
leturn for Ti	ransfers Associated With Certain Personal	Benefit Co	ntracts, which mu	st be sent to the IRS in	pap	per format (see
	For more details on the electronic filing of th		-		nues	& Nonprofits.
Part I	Automatic 3-Month Extension of Time	. Only subr	nit original (no co	pies needed).		<del></del>
	on required to file Form 990-T and reques				x an	
	monting (astrology 1100 A Flag)					•
	porations (including 1120-C filers), partnersh e tax retums.	іря, неміся	s, and trusts must u	use Form 7004 to request	an e.	xtension of time
o me mcom	e lax returns.			F_4 #11		
	Name of exempt organization or other filer, see in	etructions	<del></del>	Enter filer's identifying nu Employer identification num		
Type or	Hame of exempt organization of other filer, see in	istructions.		Employer Identification fluir	100. (1	2114) 01
print	Number, street, and room or suite no. If a P O b	ov see instru	ctions	Social security number (SS	NI)	
File by the due date for	Trained, direct, and recition of state no. If girle b	ox, see manu	Cuons.	Social security fluriber (55	14)	
filing your	City, town or post office, state, and ZIP code Fo	r a foreign ag	dress see instruction	1		
return See instructions	on, normal past amos, attack, and all about to	n a toroight ac	101000, 000 111011 001101			
	·			<del></del>		
Enter the Re	eturn code for the return that this application	is for (file a	separate applicatio	on for each return) .		
Applicatio	on .	Return	Application			Return
ls For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corp	oration)		07
Form 990-	·BL	02	Form 1041-A			08
Form 4720	0 (individual)	03	Form 4720			09
Form 990-	-PF	04	Form 5227			10
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870	·		
<ul> <li>The book</li> </ul>	ks are in the care of ▶					
	ne No. ►			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	ganization does not have an office or place of for a Group Return, enter the organization's f				•	▶□
	tole group, check this box	_	•	· · · ·	<b>▶</b> □	and attach
	the names and EINs of all members the exte	-	ar or the group, on	eck tills box		and attach
	equest an automatic 3-month (6 months for a		required to file Fo	rm 990-T) extension of tin	ne	
un						The extension is
foi	r the organization's return for:			•		
<b>&gt;</b>	alendar year 20 or					
<b>&gt;</b>	tax year beginning the tax year entered in line 1 is for less than	, 2	0, and endir	ng		, 20
2 If	the tax year entered in line 1 is for less than "	12 months, o	check reason: 🔲 li	nıtıal return 🔲 Fınal reti	ım	
	Change in accounting period					
	this application is for Form 990-BL, 990-PF,	990-T, 472	0, or 6059, enter th	ne tentative tax, less any		{
	onrefundable credits. See instructions.		<del></del>	<u>,</u>	3a	\$
	this application is for Form 990-PF, 990-		•			
	stimated tax payments made. Include any pr		<del> </del>		3b	\$
	Salance due. Subtract line 3b from line 3a. In			orm, if required, by using	\ _	
E	FTPS (Electronic Federal Tax Payment System	emi. See inst	TUCTIONS		3c	196
	If you are going to make an electronic fund withdr	<del></del>				

Part II - Additional (Not Automatic) 3-Monte Street III - Name of exempt organization or other filer, Drint    H. M. and Pearl Kyle Foundation. Inc.  Number, street, and room or suite no. If a Post office state and ZIP code in the state in the state and ZIP code in the state and ZIP code in the state in			Enter filer's identifying number, see in	
H. M. and Pearl Kyle Foundation. Inc. Number, street, and room or suite no If a P	see instructions.			structions
H. M. and Pearl Kyle Foundation. Inc. Number, street, and room or suite no If a P tue date for 514 Juanita Drive			Employer identification number (EIN) or	
Number, street, and room or suite no If a P tue date for 514 Juanita Drive			57-0786826	
due date for 514 Juanita Drive	.O. box, see instru	ictions	Social security number (SSN)	
iling your				
iling your eturn. See City, town or post office, state, and ZIP cod	e For a foreign ac	idress, see instruction	S	
nstructions Florence, SC 29501-5724				
Enter the Return code for the return that this applica	tion is for (file a	separate applicatio	n for each return)	0 4
Application	Return	Application		Return
Is For	Code	is For		Code
Form 990 or Form 990-EZ	01			
Form 990-BL	02	Form 1041-A		80
Form 4720 (individual)	03	Form 4720		09
Form 990-PF	04	·Form 5227		10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other than above)	06	Form 8870		12
<ul> <li>If the organization does not have an office or place</li> <li>If this is for a Group Return, enter the organization for the whole group, check this box</li> <li>It is the whole group of the whol</li></ul>	n's four digit Gro	oup Exemption Num	nber (GEN) If the ck this box ▶ □ and att	s is
<ul> <li>I request an additional 3-month extension of For calendar year 2012, or other tax year be If the tax year entered in line 5 is for less that Change in accounting period</li> <li>State in detail why you need the extension weather with an undertermined sickness. He</li> </ul>	eginning an 12 months, ch Mr. Perme	, 20 neck reason:	, and ending  nitial return	under the
<ul> <li>For calendar year 2012, or other tax year be</li> <li>If the tax year entered in line 5 is for less that</li> <li>Change in accounting period</li> <li>State in detail why you need the extension</li> </ul>	eginning an 12 months, ch Mr. Perme	, 20 neck reason:	, and ending  nitial return	under the
<ul> <li>For calendar year 2012, or other tax year be</li> <li>If the tax year entered in line 5 is for less that</li> <li>Change in accounting period</li> <li>State in detail why you need the extension</li> </ul>	eginning an 12 months, ch Mr. Perme expects to be bet	, 20 neck reason:	, and ending  nitial return	under the
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<ul> <li>For calendar year 2012, or other tax year be fit the tax year entered in line 5 is for less that Change in accounting period</li> <li>State in detail why you need the extension weather with an undertermined sickness. He nonrefundable credits. See instructions.</li> <li>If this application is for Form 990-PF, 9 estimated tax payments made. Include a</li> </ul>	Mr. Perme expects to be bet  PF, 990-T, 4720 90-T, 4720, or ny prior year ov	, 20 neck reason:	, and ending nitial return	oo.oo