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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.

2012

Open to public inspection

For calendar year 2012 or tax year beginning DEC 1, 2012, and ending NOV 30, 2013

Name of foundation <b>THE COFFEY FOUNDATION, INC.</b>		A Employer identification number <b>56-6047501</b>
Number and street (or P O box number if mail is not delivered to street address) <b>POST OFFICE BOX 1161</b>		B Telephone number <b>(828) 754-9479</b>
City or town, state, and ZIP code <b>LENOIR, NC 28645</b>		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) <b>\$ 8,122,752.</b> (Part I, column (d) must be on cash basis)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		

Part I Analysis of Revenue and Expenses (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 (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received			N/A	
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	77,942.	77,942.		STATEMENT 1
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	<13,262.>			
	b Gross sales price for all assets on line 6a	480,000.			
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
Operating and Administrative Expenses	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	22,165.	22,165.		STATEMENT 2
	12 Total. Add lines 1 through 11	86,845.	100,107.		
	13 Compensation of officers, directors, trustees, etc.	11,200.	0.		11,200.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees	13,650.	13,650.		0.
	c Other professional fees	10,200.	10,200.		0.
17 Interest					
18 Taxes					
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses	79,434.	76,951.		2,483.	
24 Total operating and administrative expenses. Add lines 13 through 23	114,484.	100,801.		13,683.	
25 Contributions, gifts, grants paid	411,000.			411,000.	
26 Total expenses and disbursements. Add lines 24 and 25	525,484.	100,801.		424,683.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	<438,639.>				
b Net investment income (if negative, enter -0-)		0.			
c Adjusted net income (if negative, enter -0-)			N/A		

**Part II Balance Sheets**

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing	8,226,168.	33,724.	33,724.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
<b>Liabilities</b>	11 Investments - land, buildings, and equipment basis ▶			
	Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other	0.	7,723,805.	8,089,028.
	14 Land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation ▶			
	15 Other assets (describe ▶)			
	16 <b>Total assets</b> (to be completed by all filers)	8,226,168.	7,757,529.	8,122,752.
	17 Accounts payable and accrued expenses			
	18 Grants payable			
<b>Net Assets or Fund Balances</b>	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 <b>Total liabilities</b> (add lines 17 through 22)	0.	0.	
<b>Net Assets or Fund Balances</b>	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	8,226,168.	7,757,529.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 <b>Total net assets or fund balances</b>	8,226,168.	7,757,529.		
31 <b>Total liabilities and net assets/fund balances</b>	8,226,168.	7,757,529.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	8,226,168.
2 Enter amount from Part I, line 27a	2	<438,639.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	7,787,529.
5 Decreases not included in line 2 (itemize) ▶ <b>NET ASSET ADJUSTMENT</b>	5	30,000.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	7,757,529.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a PUBLICALLY TRADED SECURITIES - MERRILL LYNCH</b>		<b>P</b>	<b>VARIOUS</b>	<b>VARIOUS</b>
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a <b>480,000.</b>		<b>493,262.</b>	<b>&lt;13,262.&gt;</b>
b			
c			
d			
e			

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			<b>&lt;13,262.&gt;</b>
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	<b>&lt;13,262.&gt;</b>
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	<b>N/A</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2011	<b>398,850.</b>	<b>8,202,282.</b>	<b>.048627</b>
2010	<b>332,508.</b>	<b>8,087,871.</b>	<b>.041112</b>
2009	<b>348,591.</b>	<b>7,305,603.</b>	<b>.047716</b>
2008	<b>442,351.</b>	<b>6,707,838.</b>	<b>.065945</b>
2007	<b>494,758.</b>	<b>9,007,170.</b>	<b>.054929</b>

2 Total of line 1, column (d)	2	<b>.258329</b>
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	<b>.051666</b>
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5	4	<b>8,097,348.</b>
5 Multiply line 4 by line 3	5	<b>418,358.</b>
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	<b>0.</b>
7 Add lines 5 and 6	7	<b>418,358.</b>
8 Enter qualifying distributions from Part XII, line 4	8	<b>424,683.</b>

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	0.
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-)		2	0.
3 Add lines 1 and 2		3	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	0.
6 Credits/Payments:			
a 2012 estimated tax payments and 2011 overpayment credited to 2012	6a	4,834.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	4,834.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	4,834.	
11 Enter the amount of line 10 to be: Credited to 2013 estimated tax <input checked="" type="checkbox"/> 4,834. Refunded <input type="checkbox"/>	11	0.	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	X
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
b 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? If "Yes," attach the statement required by General Instruction T.	5	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • 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, col. (c), and Part XV.	7	X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> NC		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X

N/A

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**Part 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 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? 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? Website address ► N/A	13	X	
14	The books are in care of ► HARRIET HINES Telephone no. ► (828) 754-9479 Located at ► 512 STONECROFT COURT SE, LENOIR, NC ZIP+4 ► 28645			
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	15	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, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►	16	Yes	No X

**Part 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
1a 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input type="checkbox"/>	1b	X
c 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?	1c	X
2 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)):		
a 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? If "Yes," list the years ► , , ,	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect 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)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► , , ,		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," 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.)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
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

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**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:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☒ Yes ☐ 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 ☒ 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 ☒ 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)?

Organizations relying on a current notice regarding disaster assistance check here

☒

5b

X

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes ☐ No

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?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870

6b

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 7		11,200.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "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 to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

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**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(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

0

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 SCHOLARSHIPS- SEE ATTACHED SCHEDULE OF RECIPIENTS	
	288,000.
2 CHARITABLE CONTRIBUTIONS- SEE ATTACHED SCHEDULE OF RECIPIENTS	
	123,000.
3	
4	

**Part IX-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
3	
All other program-related investments. See instructions.	

Total. Add lines 1 through 3

0.

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**Part X** Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	7,462,946.
b	Average of monthly cash balances	1b	757,712.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	8,220,658.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	8,220,658.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	123,310.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,097,348.
6	Minimum investment return. Enter 5% of line 5	6	404,867.

**Part XI** Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	404,867.
2a	Tax on investment income for 2012 from Part VI, line 5	2a	
b	Income tax for 2012. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	404,867.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	404,867.
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	404,867.

**Part XII** Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	424,683.
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:		
a	Suitability 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	424,683.
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	424,683.

**Note** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
<b>1</b> Distributable amount for 2012 from Part XI, line 7				404,867.
<b>2</b> Undistributed income, if any, as of the end of 2012				
<b>a</b> Enter amount for 2011 only			368,348.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2012:				
<b>a</b> From 2007				
<b>b</b> From 2008				
<b>c</b> From 2009				
<b>d</b> From 2010				
<b>e</b> From 2011				
<b>f</b> Total of lines 3a through e	0.			
<b>4</b> Qualifying distributions for 2012 from Part XII, line 4: ► \$ 424,683.				
<b>a</b> Applied to 2011, but not more than line 2a			368,348.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2012 distributable amount				56,335.
<b>e</b> Remaining amount distributed out of corpus	0.			
<b>5</b> Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
<b>c</b> 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.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
<b>f</b> Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013				348,532.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
<b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7	0.			
<b>9</b> Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	0.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2008				
<b>b</b> Excess from 2009				
<b>c</b> Excess from 2010				
<b>d</b> Excess from 2011				
<b>e</b> Excess from 2012				

## N/A

- ☐ 4942(j)(3) or ☐ 4942(j)(5)

- [illegible]

2012.06010 THE COFFEY FOUNDATION, INC. 13104 1

**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
SEE ATTACHED SCHEDULE OF CONTRIBUTIONS	N/A	501(C)(3)	THE CONTRIBUTIONS ARE NOT CONTROLLED BY THE FOUNDATION BUT BY THE RECIPIENTS	123,000.
SEE ATTACHED SCHEDULE OF SCHOLARSHIPS AWARDED	N/A	N/A	COLLEGE SCHOLARSHIPS	288,000.
<b>Total</b>			<b>3a</b>	<b>411,000.</b>
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>			<b>3b</b>	<b>0.</b>



**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
<b>1</b>	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?		
<b>a</b>	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash	<b>1a(1)</b>	<b>X</b>
	(2) Other assets	<b>1a(2)</b>	<b>X</b>
<b>b</b>	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization	<b>1b(1)</b>	<b>X</b>
	(2) Purchases of assets from a noncharitable exempt organization	<b>1b(2)</b>	<b>X</b>
	(3) Rental of facilities, equipment, or other assets	<b>1b(3)</b>	<b>X</b>
	(4) Reimbursement arrangements	<b>1b(4)</b>	<b>X</b>
	(5) Loans or loan guarantees	<b>1b(5)</b>	<b>X</b>
	(6) Performance of services or membership or fundraising solicitations	<b>1b(6)</b>	<b>X</b>
<b>c</b>	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	<b>1c</b>	<b>X</b>
<b>d</b>	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	Signature of officer or trustee <u>Bruce W. Vanderbeek</u>		Date <u>10/14/14</u>			Title <b>CHAIRMAN</b>		
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature		Date	Check <input type="checkbox"/> if self-employed	PTIN	
	STACEE L. RASH, CPA		STACEE L. RASH, C		10/07/14		P01384038	
	Firm's name ▶ MARTIN STARNES & ASSOCIATES, CPAS, P.A.					Firm's EIN ▶ 56-1761202		
	Firm's address ▶ 730 13TH AVENUE DR SE HICKORY, NC 28602					Phone no. 828-327-2727		

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FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
DIVIDENDS - MERRILL LYNCH	77,068.	0.	77,068.
INTEREST - MERRILL LYNCH	874.	0.	874.
TOTAL TO FM 990-PF, PART I, LN 4	77,942.	0.	77,942.

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FORM 990-PF	OTHER INCOME	STATEMENT	2
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DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MISCELLANEOUS INCOME	22,165.	22,165.	
TOTAL TO FORM 990-PF, PART I, LINE 11	22,165.	22,165.	

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FORM 990-PF	ACCOUNTING FEES	STATEMENT	3
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	13,650.	13,650.		0.
TO FORM 990-PF, PG 1, LN 16B	13,650.	13,650.		0.

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FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	4
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BOOKKEEPING SERVICES	10,200.	10,200.		0.
TO FORM 990-PF, PG 1, LN 16C	10,200.	10,200.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
COMMISSIONS AND FEES	56,620.	56,620.		0.	
SCHOLARSHIP DINNER	2,150.	0.		2,150.	
OFFICE EXPENSES	333.	0.		333.	
MISCELLANEOUS EXPENSE	20,331.	20,331.		0.	
TO FORM 990-PF, PG 1, LN 23	79,434.	76,951.		2,483.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
MUTUAL FUNDS	FMV	7,723,805.	8,089,028.	
TOTAL TO FORM 990-PF, PART II, LINE 13		7,723,805.	8,089,028.	



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FORM 990-PF      PART VIII - LIST OF OFFICERS, DIRECTORS      STATEMENT      7  
                          TRUSTEES AND FOUNDATION MANAGERS

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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
LESLIE D. HINES, JR. 512 STONECROFT CT. SE LENOIR, NC 28645	TRUSTEE 2.00	1,200.	0.	0.
BETTY LOU MILLER 414 HIGHLAND AVE SW LENOIR, NC 28645	TRUSTEE 2.00	2,000.	0.	0.
BRUCE VANDERBLOEMEN PO BOX 1320 LENOIR, NC 28645	TRUSTEE 2.00	2,000.	0.	0.
JENNIE GOODMAN DEAL 2950 WILLOWBROOK ROAD LENOIR, NC 28645	TRUSTEE 2.00	2,000.	0.	0.
DEBORAH ASHLEY SMITH 1415 NC HIGHWAY 268 LENIOR, NC 28645	TRUSTEE 2.00	800.	0.	0.
RAHN CHASE 813 BEVERLY CIRCLE LENIOR, NC 28645	TRUSTEE 2.00	1,600.	0.	0.
ROBERT O FLOYD PO BOX 309 LENIOR, NC 28645	TRUSTEE 2.00	1,600.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		11,200.	0.	0.

**The Coffey Foundation, Inc.**  
**Scholarships Awarded**  
FID: 56-6047501  
For the Year Ended November 30, 2013

Taylor Leigh Ramsey	Appalachian State University	ASU Box 32005 Boone, NC 28608	8,000
Syndney R. Sides	Appalachian State University	ASU Box 32005 Boone, NC 28608	8,000
Austin G. Beard	Campbell University	PO Box 567, Buies Creek, NC 27506	8,000
Owen Scott Williams	Case Western Reserve University	10900 Euclid Ave, Cleveland, OH 44106	8,000
Joshua McMenemy	Duke University	2138 Campus Dr Durham, NC 27705	8,000
Jeremiah Jordan Hamby	Gardner Webb University	PO Box 997 Boiling Springs, NC 28017	8,000
Ashton P. Kirby	High Point University	833 Montlieu Avenue, High Point, NC 27262	8,000
Blanca Gisselle Parada	Johnson C Smith University	100 Beatties Ford Rd Charlotte, NC 28216	8,000
Santara Logan Greene	Liberty University	1971 University Boulevard, Lynchburg, VA 24502	8,000
Kierston Matheson	Mount Olive University	634 Henderson St, Mt Olive, NC 28365	8,000
Jonah Alexander Farris	NC State University	2005 Harris Hall, Box 7213, Raleigh, NC 27695	8,000
Grayson Kreg Walker	NC State University	2005 Harris Hall, Box 7213, Raleigh, NC 27695	8,000
Cearly Desiree Patterson	Queens College of Charlotte	1900 Selwyn Ave, Charlotte, NC 28207	8,000
John Edward Bumgarner	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
James Stephen Collette	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Patrick D. Livingston	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Laura Robertson	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Gentry Jean Sanders	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Joshua D. Miller	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Kasey T. Gragg	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
James D. Johnson, Jr.	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Christopher J. Hendel	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Amanda Faith Transou	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Jennifer A. Hughes	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Douglas Terry	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Keely M. Mullally	UNC Chapel Hill	PO Box 1080, 300 Pettigrew Chapel Hill, NC 28514	8,000
Colby Ford	UNC Charlotte	9201 University City Blvd Charlotte, NC 28223	8,000
Spencer Hamilton Greer	UNC Charlotte	9201 University City Blvd Charlotte, NC 28223	8,000
Devin Potter	University of South Carolina	816 Bull St Columbia, SC 29208	8,000
Caitlin D. Bush	Wake Forest University	1834 Wake Forest Road Winston-Salem, NC 27109	8,000
Bryson C. Rominger	Wake Forest University	1834 Wake Forest Road Winston-Salem, NC 27109	8,000
Morgan Carlton	Wake Forest University	1834 Wake Forest Road Winston-Salem, NC 27109	8,000
Luis Javier Lopes	Wake Forest University	1834 Wake Forest Road Winston-Salem, NC 27109	8,000
Franklin Nathaniel Hagan	Western Carolina University	1 University Way, Cullowhee, NC 28723	8,000
Ashley Marie Leonhardt	Wingate University	220 N Camden Rd, Wingate, NC 28174	8,000
Mekenzie Brook Enloe	Individual Grant	4700 Blair Dr, Lenoir, NC 28645	1,000
Jonahan Hunter Gillen	Individual Grant	2695 Connelly Springs Rd, Granite Falls, NC 28630	1,000
Meredith Brianne Hall	Individual Grant	4045 Quarry Estates Rd, Hudson, NC 28638	1,000
Savannah Lonon Hall	Individual Grant	2006 Cedar Rock Est Dr, Lenoir, NC 28645	1,000
Ethan Conley Hicks	Individual Grant	1889 Kuri Cat Way, Lenoir, NC 28645	1,000
Sierra Jo Kimberlin	Individual Grant	4028 Meadow Circle, Lenoir, NC 28645	1,000
Abigail Spencer Parlier	Individual Grant	5147 South Oak Circle, Granite Falls, NC 28630	1,000
Zoie Estelle Sain	Individual Grant	124 Haigler Road, Lenoir, NC 28645	1,000

**Total Scholarships Awarded**

**\$ 288,000**

**The Coffey Foundation, Inc.**  
**Contributions**  
FID 56-6047501  
For the Year Ended November 30, 2013

Foundation of Caldwell Community College	PO Box 1613, Lenoir, NC 28645	501(c)(3)	\$ 30,000
Helping Hands Clinic	PO Box 1341, Lenoir, NC 28645	501(c)(3)	11,000
Shelter Home of Caldwell County	PO Box 2422, Lenoir, NC 28645	501(c)(3)	11,000
United Way of Caldwell County	216 Eastwood Park, Lenoir, NC 28645	501(c)(3)	10,000
Communities in Schools	951 Kenham Place, Lenoir, NC 28645	501(c)(3)	8,000
The Education Foundation of CC Schools	PO Box 1890, Lenoir, NC 28645	501(c)(3)	7,500
Lenoir Soup Kitchen	PO Box 249, Crossnore, NC 28616	501(c)(3)	6,000
Caldwell House, Inc.	PO Box 2784, Lenoir, NC 28645	501(c)(3)	5,000
Caldwell County Habitat for Humanity	PO Box 2431, Hickory, NC 28603	501(c)(3)	5,000
Caldwell County Yokefellow	1792 Ft. Defiance Dr , Lenoir, NC 28645	501(c)(3)	5,000
James C. Harper School of Performing Arts	PO Box 600, Lenoir, NC 28645	501(c)(3)	4,000
Robin's Nest	PO Box 98, Banner Elk, NC 28604	501(c)(3)	3,500
Catawba Science Center	PO Box 933, Lenoir, NC 28645	501(c)(3)	3,000
Grandfather Home for Children	PO Box 959, Lenoir, NC 28645	501(c)(3)	2,500
Caldwell Friends	PO Box 646, Lenoir, NC 28645	501(c)(3)	2,000
Caldwell People	PO Box 426, Lenoir, NC 28645	501(c)(3)	2,000
Caldwell Senior Center, Inc.	PO Box 359, Granite Falls, NC 28630	501(c)(3)	2,000
Caldwell Arts Council	810 Harper Ave, Lenoir, NC 28645	501(c)(3)	1,500
South Caldwell Christian Ministries	PO Box 390, Lenoir, NC 28645	501(c)(3)	1,500
Crossnore School, Inc	PO Box 128, Banner Elk, NC 28604	501(c)(3)	1,250
Lees-McRae College	PO Box 1054, Lenoir, NC 28645	501(c)(3)	1,250
<b>Total Contributions</b>			<b><u>\$ 123,000</u></b>

# THE COFFEY FOUNDATION SCHOLARSHIP

Exhibit A

## Application Form

Name \_\_\_\_\_  
Last
First
Middle
Telephone Number

Address \_\_\_\_\_, North Carolina \_\_\_\_\_  
Route or Street
Box
City
Zip Code

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex: M \_\_\_\_\_ F \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_  
Month/Day/Year

Father's Name \_\_\_\_\_ Living \_\_\_\_\_ Deceased \_\_\_\_\_  
Last
First
Middle

Mother's Name \_\_\_\_\_ Living \_\_\_\_\_ Deceased \_\_\_\_\_  
Last
First
Middle

Please list children in family, including yourself, in chronological order:

Name (first)	Age	What year in school?	Place of Employment	Married	Single	Living at Home?

### INFORMATION REGARDING PARENTS' EMPLOYMENT:

Father's Employer \_\_\_\_\_ Type of work done: \_\_\_\_\_

Mother's Employer \_\_\_\_\_ Type of work done: \_\_\_\_\_

### INFORMATION REGARDING OTHER FINANCIAL ASSISTANCE:

Please list scholarships that you have applied for and amounts received:

Name of Grant/Scholarship			Amount/Year	Official Notification		
				Approved	Denied	Do Not Know
1						
2						
3						
4						

Name of high school that you attended \_\_\_\_\_

Name(s) of colleges or universities where you have been accepted \_\_\_\_\_

Name of college or university that you plan to attend \_\_\_\_\_

Course of study \_\_\_\_\_

Your scholastic rating in your Senior Class \_\_\_\_\_ Number of students in your high school graduating class \_\_\_\_\_

Class offices held and year \_\_\_\_\_

#### HOBBIES & SPECIAL INTERESTS (Please describe)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### HONORS & AWARDS

Academic (list) \_\_\_\_\_

Athletic (list) \_\_\_\_\_

Other (list) \_\_\_\_\_

#### MEANINGFUL ACTIVITIES

In all your school/community activities, what two activities have been most meaningful to you, and why?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

#### PLEASE INCLUDE THE FOLLOWING WITH YOUR APPLICATION:

- A recent school photograph
- An original written paper stating why a particular course of study and future work was chosen.
- Complete transcript of applicant's high school courses and grades.
- Results of supplemental tests (examples: College Entrance, California Mental, California Achievement, etc.).



Primary Account: 7RR-02569

THE COFFEY FOUNDATION  
C/O THE COFFEY FOUNDATION  
PO BOX 1161  
LENOIR NC 28645-1161

If you have questions on your statement,  
call 24-Hour Assistance:  
**(866) 4MLBUSINESS**  
**(866) 465-2874**  
Access Code: 63-777-02569

Investment Advice and Guidance:  
Call Your Financial Advisor

Your Financial Advisor:  
BRAWLEY, MILLER, O'REGAN  
150 N COLLEGE STREET STE 2800  
CHARLOTTE NC 28255  
1-800-937-0864

Up-to-date account information can be viewed  
at: [www.mymerrill.com](http://www.mymerrill.com), where your statements  
are archived for three or more years.

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at the top of the screen once you log in.

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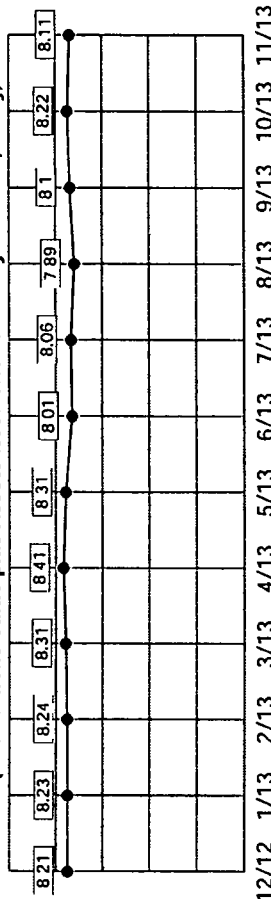
# YOUR MERRILL LYNCH REPORT

November 01, 2013 - November 29, 2013

## PORTFOLIO SUMMARY

	November 29	October 31	Month Change
<b>Net Portfolio Value</b>	<b>\$8,109,923.30</b>	<b>\$8,215,763.70</b>	<b>▼ (\$105,840.40)</b>
Your assets	\$8,109,923.30	\$8,215,763.70	▼ (\$105,840.40)
Your liabilities			
Your Net Cash Flow (Inflows/Outflows)	(\$155,018.78)	(\$80,186.21)	
Securities You Transferred In/Out	\$0.01	(\$22.48)	
<b>Subtotal Net Contributions</b>	<b>(\$155,018.77)</b>	<b>(\$80,208.69)</b>	
Your Dividends/Interest Income	\$355.10	\$11,293.39	
Your Market Change	\$48,823.27	\$187,326.27	
<b>Subtotal Investment Earnings</b>	<b>\$49,178.37</b>	<b>\$198,619.66</b>	

Total Value (Net Portfolio Value plus Assets Not Held/Valued By MLPF&S, if any) in millions, 2012-2013



Primary Account: 7RR-02569

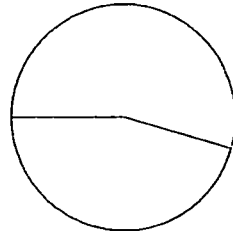
24-Hour Assistance: (866) 4MLBUSINESS  
Access Code: 63-777-02569

# YOUR PORTFOLIO REVIEW

November 01, 2013 - November 29, 2013

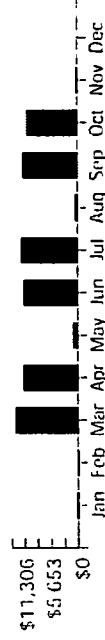
## ASSET ALLOCATION\*

\* Estimated Accrued Interest not included; may not reflect all holdings; does not include asset categories less than 1%; includes the categorical values for the underlying portfolio of individual mutual funds, closed end funds, and UITs.



	Current Value	Allocation
Alternative Investments	4,400,812.56	54.40%
Equities	3,688,215.34	45.60%
<b>TOTAL</b>	<b>\$8,089,027.90</b>	<b>100%</b>

## CURRENT INCOME



	This Report	Year To Date
Tax-Exempt Interest	0.50	385.67
Taxable Interest		
Tax-Exempt Dividends	354.60	77,067.77
Taxable Dividends	\$355.10	\$77,453.44
<b>Total</b>		<b>\$159,173.27</b>

Your Estimated Annual Income **\$159,173.27**

## TOP FIVE PORTFOLIO HOLDINGS

Based on Estimated Market Value

	Current Value	% of Portfolio
DREYFUS APPRECIATION FD	2,789,458.29	34.40%
WELLS FARGO ABSOLUTE	1,743,546.23	21.50%
PIMCO ALL ASSET ALL	1,451,813.66	17.90%
MFS INTERNATIONAL GROWTH	898,757.05	11.08%
PIMCO UNCONSTRAINED	799,852.67	9.86%

## FINANCIAL MARKET INDICATORS

	This Report	Last Report	Previous Year End
S&P 500	1805.81	1756.54	1426.19
Three-Month Treasury Bills	.06%	.04%	.05%
Long-Term Treasury Bonds	3.81%	3.64%	2.95%
One-Month LIBOR	.17%	.17%	.21%
NASDAQ	4059.89	3919.71	3019.51

Online at: [www.mymerrill.com](http://www.mymerrill.com)

THE COFFEY FOUNDATION  
C/O THE COFFEY FOUNDATION  
PO BOX 1161  
LENOIR NC 28645-1161

Account Number: 7RR-02569

24-Hour Assistance: (866) 4MLBUSINESS  
Access Code: 63-777-02569

**Net Portfolio Value: \$8,109,923.30**

Your Financial Advisor:

BRAWLEY, MILLER, O'REGAN  
150 N COLLEGE STREET STE 2800  
CHARLOTTE NC 28255  
1-800-937-0864

## COFFEY FOUNDATION

This account is enrolled in the Merrill Lynch Personal Advisor<sup>SM</sup> Program

November 01, 2013 - November 29, 2013

ASSETS		November 29	October 31
Cash/Money Accounts		20,895.40	20,913.68
Fixed Income		-	-
Equities		-	-
Mutual Funds		8,089,027.90	8,194,850.02
Options		-	-
Other		-	-
Subtotal (Long Portfolio)		8,109,923.30	8,215,763.70
<b>TOTAL ASSETS</b>		<b>\$8,109,923.30</b>	<b>\$8,215,763.70</b>
LIABILITIES			
Debit Balance		-	-
Short Market Value		-	-
<b>TOTAL LIABILITIES</b>		<b>-</b>	<b>-</b>
<b>NET PORTFOLIO VALUE</b>		<b>\$8,109,923.30</b>	<b>\$8,215,763.70</b>

CASH FLOW		This Statement	Year to Date
Opening Cash/Money Accounts		\$20,913.68	
CREDITS			
Funds Received		-	2,730.25
Electronic Transfers		-	19,091.47
Other Credits		-	21,821.72
Subtotal		-	
DEBITS			
Electronic Transfers		(155,000.00)	(480,000.00)
Margin Interest Charged		-	-
Other Debits		(18.78)	(75,689.20)
Visa Purchases (debits)		-	-
ATM/Cash Advances		-	-
Checks Written/Bill Payment		-	-
Subtotal		(155,018.78)	(555,689.20)
<b>Net Cash Flow</b>		<b>(\$155,018.78)</b>	<b>(\$533,867.48)</b>
Dividends/Interest Income		355.10	77,453.44
Dividend Reinvestments		(354.60)	(77,067.77)
Security Purchases/Debits		-	(8,139,999.97)
Security Sales/Credits		155,000.00	480,000.00
<b>Closing Cash/Money Accounts</b>		<b>\$20,895.40</b>	
Securities You Transferred In/Out		0.01	80.21

Merrill Lynch Wealth Management makes available products and services offered by Merrill Lynch, Pierce, Fenner & Smith Incorporated (MLPF&S) and other subsidiaries of Bank of America Corporation. MLPF&S is a registered broker-dealer. Member Securities Investor Protection Corporation (SIPC) and a wholly owned subsidiary of Bank of America Corporation. Investment products:

Are Not FDIC Insured	Are Not Bank Guaranteed	May Lose Value
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THE COFFEY FOUNDATION

Account Number: 7RR-02569

24-Hour Assistance: (866) 4MLBUSINESS  
Access Code: 63-777-02569

## YOUR WCMA BANK DEPOSIT INTEREST SUMMARY

November 01, 2013 - November 29, 2013

Money Account Description	Opening Balance	Average Deposit Balance	Current Yield%	Interest on Deposits	Closing Balance
FIA Card Services, N.A.	20,913	20,903	.03	0.50	20,894
<b>TOTAL ML Bank Deposit Program</b>	<b>20,913</b>			<b>0.50</b>	<b>20,894</b>

## YOUR WCMA ASSETS

CASH/MONEY ACCOUNTS	Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Estimated Annual Income	Est. Annual Yield%
CASH	1.40	1.40		1.40		
+ML BANK DEPOSIT PROGRAM	20,894.00	20,894.00	1.0000	20,894.00	6	.03
+FDIC INSURED NOT SIPC COVERED						
<b>TOTAL</b>		<b>20,895.40</b>		<b>20,895.40</b>	<b>6</b>	<b>.03</b>

A change in tier assignment will automatically convert the class of BBIF money fund shares held in your account. The WCMA Agreement and Program Description and the BBIF Fund Prospectus contain more details.

MUTUAL FUNDS/CLOSED END FUNDS/UIT	Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Total Client Investment	Cumulative Investment Return (\$)	Estimated Annual Current Income	Current Yield%
DREYFUS APPRECIATION FD	54,174	2,484,380.11	51.4900	2,789,419.26	305,039.15	2,449,964	339,454	45,507	1.63
SYMBOL - DGAGX Initial Purchase 01/23/13 Equity 100%									
.7580 Fractional Share	35.58	51.4900	39.03		3.45			1	1.63
MFS INTERNATIONAL GROWTH	28,954	819,977.28	31.0400	898,732.16	78,754.88	819,977	78,754	8,278	.92
FD CL I									
SYMBOL - MQGIX Initial Purchase 01/23/13 Equity 100%									
8020 Fractional Share	22.71	31.0400	24.89		2.18			1	.92

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THE COFFEY FOUNDATION

Account Number: 7RR-02569

## YOUR WCMA ASSETS

November 01, 2013 - November 29, 2013

MUTUAL FUNDS/CLOSED END FUNDS/UIT Description	(continued) Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Total Client Investment	Cumulative Investment Return (\$)	Estimated Annual Current Income Yield%
PIMCO ALL ASSET ALL AUTHORITY FUND CL P SYMBOL PAUPX Initial Purchase 01/23/13 Alternative Investments 100% .5240 Fractional Share	141,364	1,577,404.30	10.2700	1,451,808.28	(125,596.02)	1,540,812	(89,003)	84,394 5.81
PIMCO UNCONSTRAINED BOND FUND CL P SYMBOL PUCPX Initial Purchase 01/23/13 Alternative Investments 100% .7100 Fractional Share	71,351	821,971.81	11.2100	799,844.71	(22,127.10)	816,240	(16,395)	6,279 .78
TRANSAMERICA MULTI MANAGER ALT STRATEGIES I SYMBOL TASIX Initial Purchase 01/23/13 Alternative Investments 100%	40,000	400,000.00	10.1400	405,600.00	5,600.00	400,000	5,600	9,159 2.25
WELLS FARGO ABSOLUTE RETURN FD CL ADM SYMBOL WARDX Initial Purchase 01/23/13 Alternative Investments 100% .7930 Fractional Share	154,432	1,619,991.69	11.2900	1,743,537.28	123,545.59	1,619,991	123,545	5,545 .31
Subtotal (Equities)				3,688,215.34				
Subtotal (Alternative Investments)				4,400,812.56				

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THE COFFEY FOUNDATION

Account Number: 7RR-02569

24-Hour Assistance: (866) 4MLBUSINESS  
Access Code: 63-777-02569

## YOUR WCMA ASSETS

November 01, 2013 - November 29, 2013

MUTUAL FUNDS/CLOSED END FUNDS/UIT Description	(continued) Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Total Client Investment	Cumulative Investment Return (\$)	Estimated Annual Current Income Yield%
<b>TOTAL</b>		7,723,805.37		8,089,027.90	365,222.53		441,955	159,167 1.97

**Total Client Investment:** Cost of shares directly purchased and still held. Does not include shares purchased through reinvestment.

**Cumulative Investment Return:** Estimated Market Value minus Total Client Investment.

of all shares purchased and still held, including shares acquired through reinvestment of dividends and distributions, which may be greater or less than the actual income distributed.

**Market Timing:** Merrill Lynch's policies prohibit mutual fund market timing, which involves the purchase and sale of mutual fund shares within short periods of time with the intention of capturing short-term profits resulting from market volatility. Market timing may result in lower returns for long-term fund shareholders because market timers capture short-term gains that would otherwise pass to all shareholders and due to increased transaction costs and fewer assets for investment due to the need to retain cash to satisfy redemptions.

**Unrealized Gain or (Loss):** Estimated Market Value minus Total Cost Basis (total cost of shares directly purchased and still held, as well as cost of shares acquired through reinvestment). Provided for Tax Planning purposes only and is not applicable to retirement accounts.

**Initial Purchase:** Date of your initial investment in this fund.

## LONG PORTFOLIO

	Adjusted/Total Cost Basis	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield%
<b>TOTAL</b>	7,744,700.77	8,109,923.30	365,222.53		159,173	1.96

### Notes

♦Cost basis has been adjusted by the deferred loss amount from a previous "Wash Sale" and the acquisition date has been adjusted to include the holding period of the lot closed by that previous "Wash Sale".

## YOUR WCMA TRANSACTIONS

DIVIDENDS/INTEREST INCOME TRANSACTIONS				Reinvestment	Income	Year To Date
Date	Transaction Type	Quantity	Description			
11/29	Bank Interest		BANK DEPOSIT INTEREST		.50	
	Subtotal (Taxable Interest)				.50	385.67
11/01	* Dividend		PIMCO UNCONSTRAINED BOND FUND CL P		354.60	
			PAY DATE 10/31/2013			
11/01	Reinvestment		PIMCO UNCONSTRAINED BOND FUND CL P	(354.60)		

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THE COFFEY FOUNDATION

Account Number: 7RR-02569

## YOUR WCMA TRANSACTIONS

November 01, 2013 - November 29, 2013

DIVIDENDS/INTEREST INCOME TRANSACTIONS (continued)				Reinvestment	Income	Income
Date	Transaction Type	Quantity	Description		Year To Date	
11/01	Divd Reinv	31	PIMCO UNCONSTRAINED			
			BOND FUND CL P			
			REINV AMOUNT \$354.60			
			REINV PRICE \$11.25000			
			QUANTITY BOT 31.5200			
			AS OF 10/31			
Subtotal (Taxable Dividends)					354.60	77,067.77
NET TOTAL				(354.60)	355.10	77,453.44

SECURITY TRANSACTIONS						
TRANSACTIONS CONDUCTED PER THE APPLICABLE WRITTEN AGREEMENT						
Settlement Date	Description	Transaction Type	Quantity	Unit Price	Debit	Credit
11/18	PIMCO UNCONSTRAINED	Sale	-13,802	11.2300		155,000.00
	BOND FUND CL P FRAC SHR QUANTITY 315					
	CUS NO 72201M453					
Subtotal (Sales)					155,000.00	
TOTAL					155,000.00	

REALIZED GAINS/(LOSSES)						
Description	Quantity	Acquired Date	Liquidation Date	Sale Amount	Cost Basis	Gains/(Losses) * This Statement Year to Date
PIMCO UNCONSTRAINED CXL	5307.0000	01/23/13	10/08/13	59,597.61	61,136.64	1,539.03
◆ PIMCO UNCONSTRAINED	1.0000	01/23/13	10/08/13	11.23	11.52	N/C
◆ PIMCO UNCONSTRAINED	31.0000	01/23/13	10/08/13	348.13	357.12	N/C
◆ PIMCO UNCONSTRAINED	5275.0000	01/23/13	10/08/13	59,238.25	60,768.00	(1,529.75)
◆ PIMCO UNCONSTRAINED	35.0000	01/23/13	11/15/13	393.04	403.55	(10.51)
PIMCO UNCONSTRAINED	13767.0000	01/23/13	11/15/13	154,603.42	158,597.86	(3,994.44)
PIMCO UNCONSTRAINED	.2900	01/23/13	11/15/13	3.26	.00	3.26
PIMCO UNCONSTRAINED	.0250	10/31/13	11/15/13	.28	.28	.00

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THE COFFEY FOUNDATION

Account Number: 7RR-02569

24-Hour Assistance: (866) 4MILBUSINESS  
Access Code: 63-777-02569

## YOUR WCMA TRANSACTIONS

November 01, 2013 - November 29, 2013

### REALIZED GAINS/(LOSSES) (continued)

Description	Quantity	Acquired Date	Liquidation Date	Sale Amount	Cost Basis	This Statement	Gains/(Losses) * Year to Date
Subtotal (Short-Term)				214,597.61	220,138.33	(3,992.41)	(13,262.37)
<b>TOTAL</b>						<b>(3,992.41)</b>	<b>(13,262.37)</b>

\* - Excludes transactions for which we have insufficient data

N/C - Results may not be calculated for transactions which involve the amortization of premium, the repayment of principal, the sale of partnership interests, derivative products purchased in the secondary market, or the determination of ordinary income and/or capital items for discount and zero-coupon issues.

CXL - Indicates the cancellation of an error transaction.

✦ This transaction has been affected by a "Wash Sale" based on IRS regulations. There are two different types of adjustments that may be occurring.

(A) If the gain/loss displays as N/C, this transaction has been identified as a "Wash Sale" based on IRS regulations and the loss has been added to the cost basis of the related purchase.

(B) If the gain/loss is calculated, the cost basis has been adjusted by the deferred loss amount from a previous "Wash Sale" and your gain or loss will be inclusive of this amount.

### SECURITIES YOU TRANSFERRED IN/OUT

Date	Description	Transaction Type	Quantity	Value of Securities	Year To Date
11/01	PIMCO UNCONSTRAINED BOND FUND CL P FULL SHARE ACCUM	Journal Entry	1	11.24	
11/18	SHARE VALUE \$11.24 PIMCO UNCONSTRAINED BOND FUND CL P FULL SHARE ACCUM	Journal Entry	-1	(11.23)	
	SHARE VALUE \$11.23				
<b>NET TOTAL</b>				<b>.01</b>	<b>80.21</b>

### CASH/OTHER TRANSACTIONS

Date	Transaction Type	Quantity	Description	Debit	Credit
11/18	Funds Transfer		TO BAC#000241001296	155,000.00	
	Subtotal (Electronic Transfers)			155,000.00	

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THE COFFEY FOUNDATION

Account Number: 7RR-02569

## YOUR WCMA TRANSACTIONS

November 01, 2013 - November 29, 2013

### CASH/OTHER TRANSACTIONS (continued)

Date	Transaction Type	Quantity	Description	Debit	Credit
11/15	Journal Entry		REPAY OVERDRAFT LOAN	18.78	
	Subtotal (Other Debits/Credits)			18.78	
	NET TOTAL			155,018.78	

## YOUR WCMA MONEY ACCOUNT TRANSACTIONS

Date	Description	Withdrawals	Deposits	Date	Description	Withdrawals	Deposits
11/15	ML BANK DEPOSIT PROGRAM	19.00					
	NET TOTAL	19.00					

COPIES OF THIS STATEMENT HAVE BEEN SENT TO:

FAO THE COFFEY FOUNDATION  
ATTN: MS. JENNIE DEAL  
2950 WILLOWBROOK RD  
LENOIR NC 28645-9167

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

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ☒ **X**
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

## Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete ☐

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	<b>THE COFFEY FOUNDATION, INC.</b>	<b>56-6047501</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	<b>POST OFFICE BOX 1161</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	<b>LENOIR, NC 28645</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

### HARRIET HINES

- The books are in the care of ► **512 STONECROFT COURT SE - LENOIR, NC 28645**
- Telephone No. ► **(828) 754-9479** FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **JULY 15, 2014**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year or
- ☒ tax year beginning **DEC 1, 2012** and ending **NOV 30, 2013**

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	4,834.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

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

Form 8868 (Rev. 1-2013)

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).**

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
File by the due date for filing your return. See instructions.	<b>THE COFFEY FOUNDATION, INC.</b>	<b>56-6047501</b>
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	<b>POST OFFICE BOX 1161</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	<b>LENOIR, NC 28645</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) **04**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**HARRIET HINES**

• The books are in the care of **512 STONECROFT COURT SE - LENOIR, NC 28645**

Telephone No. **(828) 754-9479**

FAX No. ☐

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **OCTOBER 15, 2014.**

5 For calendar year ☐ or other tax year beginning **DEC 1, 2012**, and ending **NOV 30, 2013**.

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

**ADDITIONAL TIME IS REQUESTED TO COMPLY INFORMATION TO CORRECTLY COMPLETE THE TAX RETURN**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	4,834.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

**Signature and Verification must be completed for Part II only.**

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

Signature **Bruce W. Vanderbloemen** Title **CHAIRMAN**

Date **6-30-14**

Form 8868 (Rev. 1-2013)