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Form **990-PF** Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2016

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052 open to Public Inspection

For	calendar year 2015 or tax year beginning		, and ending		
	me of foundation IICKOLAS BUNN BODDIE, SR.	AND		A Employer identification	n number
L	JUCY MAYO BODDIE FOUNDATIO	56-1678893			
Nur	mber and street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
A	ATTN: TAX & RISK MGMT, P.	O. BOX 1908		252-937-20	000
	y or town, state or province, country, and ZIP or foreign po			C If exemption application is p	pending, check here
	ROCKY MOUNT, NC 27802-190				
G (Check all that apply: Initial return		ormer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return		Foreign organizations me check here and attach or	eeting the 85% test,
	Address change Check type of organization: X Section 501(c)(3) ex	Name change		1	
		Other taxable private founda-	ation	E If private foundation sta under section 507(b)(1	
	air market value of all assets at end of year J Accountin		X Accrual	1	
	·	her (specify)	LAL Accida	F If the foundation is in a under section 507(b)(1	
	\$ 6,090,168. (Part I, colui		basis)	under section sor (b)(1)(b), check here
Pa	art Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	1,126,628.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	N/A	
	2 Check I I the foundation is not required to attach Sch B		, ''w' ('''''''	. ~	* * * * * * *
	3 Interest on savings and temporary cash investments	201.	201.		STATEMENT: 1
	4 Dividends and interest from securities	205,982.	205,982.		STATEMENT 2
	5a Gross rents	26 V 8			<u> </u>
	b Net rental income or (loss)	FOF 017	<u> </u>	<u> </u>	ļ,
9	68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 0 1 1 7 2 5 6	505,917.			
Revenue	b Gross sales price for all 8,117,356.		505,917.		
æ	7 Capital gain net income (from Part IV, line 2)		303,317.	** ***, ,	\$ 20 \land \frac{1}{2}
	8 Net short-term capital gain 9 Income modifications 1\/ C	*** / · ·			
	9 Income modifications VED 10a Gross sales less returns VED 10a and altowances	777 7 8 , 3	₹ /		
	D Less Fast of goods sold	***			
	b Less Got of goods sold 2016 9				* ,' *
	11 Other income				1 , 1
	12 Total. Add (I) (S) (1) [1] [T	1,838,728.	712,100.)
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
တ	15 Pension plans, employee benefits				
penses	16a Legal fees	2 500	1 250		1 250
ğ	b Accounting fees STMT 3	2,500.	1,250.		1,250.
Ш́ Ф	c Other professional fees STMT 4	32,383.	32,383.		0.
Operating and Administrative Ex	18 Taxes STMT 5	11,513.	2,788.		0.
İstra	19 Depreciation and depletion	11,5150	2,700.		
Ë	20 Occupancy			, <u>,</u> ,-	
Adr	21 Travel, conferences, and meetings		·· -		
P	22 Printing and publications				
Ę,	23 Other expenses STMT 6	1,186.	436.		750.
atir	24 Total operating and administrative				
ē	expenses. Add lines 13 through 23	47,582.	36,857.		2,000. 319,100.
0	25 Contributions, girts, grants paid	319,100.			319,100.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	366,682.	36,857.		321,100.
	27 Subtract line 26 from line 12:	1 472 046			
	8 Excess of revenue over expenses and disbursements	1,472,046.	675 242		
	b Net investment income (if negative, enter -0-)		675,243.	N/A	
5235	C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see	I	<u> </u>	L N/A	Form 990-PF (2015)
11-2	,4-10 Et DT 1 of 1 apolition floateduor for Holloc, 566				(E010)

NICKOLAS BUNN BODDIE, SR. AND

Form 990-PF (2015)

LUCY MAYO BODDIE FOUNDATION

56-1678893 Page 2 Beginning of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year (c) Fair Market Value (a) Book Value (b) Book Value 3,500 22,019 22,019. 1 Cash - non-interest-bearing 262,758 321,367 321,367. 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 STMT 7 459,095. 6,024,643. 5,664,309. b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 8 4,245,237. 12,763 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ► ACCOUNTS RECEIVABLE) 3,325. 65,169 65,169. 16 Total assets (to be completed by all filers - see the 4,973,915. 6,445,961 instructions. Also, see page 1, item I) 6,090,168. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other habilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Net Assets or Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted $\triangleright X$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 519,025 519,025 28 Paid-in or capital surplus, or land, bldg., and equipment fund 4,454,890. 5,926,936. 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 4,973,915. 6,445,961 4,973,915. 6,445,961 31 Total liabilities and net assets/fund balances 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 4,973,915. (must agree with end-of-year figure reported on prior year's return) 1,472,046. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3

> 6,445,961. Form **990-PF** (2015)

5 Decreases not included in line 2 (itemize)

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

Part IV Capital Gains	and Los	ses for lax on in	ivestmen	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.)						v acquired urchase onation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)	
1a AS REPORTED BY	CAPTI	RUST				P	VARI	ous	VARIOUS	
	CAPTI					P	VARI	OUS	VARIOUS	
c AS REPORTED BY			·			P	VARI		VARIOUS	
	CAPTI					P P	01/2		08/11/15	
e CAPITAL GAINS					-		01,2	3, 0,	00/11/13	
(e) Gross sales price	(f) De	preciation allowed or allowable)		st or other basis				ain or (loss s (f) minus		
	<u> </u>	or anowable)	i .	•			(e) piu:	5 (1) 11111103		
a 2,569,854.				2,554,96					14,893.	
b 3,429,281.				3,206,92					222,357.	
c 1,070,207.				1,126,62					-56,421.	
d 1,043,967.	<u> </u>			722,92	6.				321,041.	
e 4,047.									4,047.	
Complete only for assets showing	ng gain in co	lumn (h) and owned by t	the foundation	on 12/31/69			(I) Gains (C	ol. (h) gain	minus	
(i) F.M.V. as of 12/31/69		Adjusted basis s of 12/31/69		cess of col. (I)			ol. (k), but i	not less tha (from col. (n -0-) or	
a	 				一				14,893.	
b				 -					222,357.	
	-	• •	<u> </u>		_				-56,421.	
d									321,041.	
					 }			 -	4,047.	
e			l		_			·	4,047.	
2 Capital gain net income or (net ca	apıtal loss)	If gain, also enter If (loss), enter -0-	r in Part I, line - in Part I, line	7 7	} _ 2	!			505,917.	
3 Net short-term capital gain or (los	ss) as define	d in sections 1222(5) an	nd (6):			-				
If gain, also enter in Part I, line 8,	column (c).				l l					
If (loss), enter -0- in Part I, line 8					ئال	<u> </u>		N/A	·	
Part V Qualification U	Jnder Se	ction 4940(e) for	Reduced	Tax on Net	Inves	tment In	come			
If section 4940(d)(2) applies, leave to Was the foundation liable for the sec If "Yes," the foundation does not qua 1 Enter the appropriate amount in	tion 4942 ta lify under se	x on the distributable am ction 4940(e). Do not co	mplete this pa	ırt.					Yes X No	
(a)	June 1		130 0000113 00	lore making any en					(d)	
Base period years Calendar year (or tax year beginni	ıng ın)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) ncharital	ole-use asset	ts	Distribution ratio (col. (b) divided by col. (c))		
2014		28	6,816.			189,04			.052252	
2013	· · · · · · · · · · · · · · · · · · ·	25	2,684.	_	5,3	315,35	4.		.047539	
2012		24	7,078.		4,9	84,13	3.		.049573	
2011			6,945.			372,75			.040418	
2010			9,390.			92,85			.053142	
2 Total of line 1, column (d)			b O b - 5				2		.242924	
3 Average distribution ratio for the the foundation has been in existe	-	•	on nine 2 by 5,	or by the number	or years		3		.048585	
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5				4	<u> </u>	5,812,268.				
5 Multiply line 4 by line 3				5		282,389.				
6 Enter 1% of net investment income (1% of Part I, line 27b)					. 6		6,752.			
7 Add lines 5 and 6							7		289,141.	
8 Enter qualifying distributions from			dl. a. i	data that are t	461 :		8		321,100.	
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, ched	K the box in Part VI, line	10, and comp	viete that part usin	g a 1% t	ax rate.				

NICKOLAS BUNN BODDIE, SR. AND LUCY MAYO BODDIE FOUNDATION

orm			1678			age 4
Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49)48 -	· see i	nstruc	tion	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter *N/A* on line 1.	1				2
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					<u></u>
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	_1_		6	,7!	52.
	of Part I, line 27b			-		
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					 .
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3		6	, 7!	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		<u> </u>	,7!	52.
6	Credits/Payments:		ľ	1,30		:
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 8,140.			· ;		
	Exempt foreign organizations - tax withheld at source 6b	,	10			
C	Tax paid with application for extension of time to file (Form 8868) 6c	<u> </u>	,	\$ -1		ĩ
đ	Backup withholding erroneously withheld 6d 6d		2			
7	Total credits and payments. Add lines 6a through 6d	7		8	1,1	<u>40.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		1	.,3	88.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ 1,388. Refunded ▶	11		•		0.
Pa	rt VII-A Statements Regarding Activities					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		× 、	Yes	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published					. 26
	distributed by the foundation in connection with the activities			23		
c	Did the foundation file Form 1120-POL for this year?			10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			Ĭ	ź	
-	(1) On the foundation. ▶ \$ 0 • (2) On foundation managers. ▶ \$ 0 •			ļ	1.	2
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1 1	*	
Ī	managers.▶\$ 0.			ا کی		أعت
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					١,
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
	If "Yes," attach the statement required by General Instruction T			1 1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1 1		
	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	<u> </u>
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	<u> </u>
				1 1		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NC					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar].]	-	
	year 2015 or the taxable year beginning in 2015 (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
			F	orm 99 0	-PF	(2015)

Pa	rt VII-A Statements Regarding Activities (continued)			
		T	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1 1	İ	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	j	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	i	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ B. MAYO BODDIE, DIRECTOR Telephone no. ▶ 252-93	37-20	000	
	Located at ▶ P. O. BOX 1908, ROCKY MOUNT, NC ZIP+4 ▶2'			08
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	7.5°	* * * * * * * * * * * * * * * * * * *	20
	foreign country	3,35		
Pa	rt 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.	- 1 × 1	Yes	No
1a	During the year did the foundation (either directly or indirectly):	3.1	5	* 1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			.]
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		× .	
	a disqualified person? Yes X No			2
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	**	-	ď.
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	2	. 40,	
	(5) Transfer any income or assets to a disqualified person (or make any of either available		Š	1
	for the benefit or use of a disqualified person)?]],	₹	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	-#:[7		
	if the foundation agreed to make a grant to or to employ the official for a period after			ž.
	termination of government service, if terminating within 90 days.)		. **	·,
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	2	.A.	_,
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		% .	: 4
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	1		X
	before the first day of the tax year beginning in 2015?	10		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	15th	1.5	! - #
	defined in section 4942(j)(3) or 4942(j)(5)):		`	1
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	79.		3 1
	before 2015?		٠, * [-1
	If "Yes," list the years	^,\$-	•	, 1
þ	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	-4	
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1 1		
•	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1 1	Ť	1
за	السا السا			,
	• •	1 1		
D	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after		ļ	1
	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 heldings accounted by early a head on the 10 15 or 20 year first phase heldings accounted to the Section 4943(c)(7) to dispose of heldings accounted by early and the head of the 10 15 or 20 year first phase heldings accounted to the Section 4943(c)(7) to dispose of heldings accounted to the section 4943(c)(7) to dispose of heldings accounted to the section 4943(c)(7) to dispose of heldings accounted to the section 4943(c)(7) to dispose of heldings accounted to the section 4943(c)(7) to dispose of heldings accounted to the section 4943(c)(7) to dispose of heldings accounted to the section 4943(c)(7) to dispose of heldings accounted to the section 4943(c)(7) to dispose of heldings accounted to the section 4943(c)(7) to dispose of the 10 to the 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 2015) N/A	3b	-+	v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
0	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	41	[
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b orm 990		_

Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	lequired (contin	ued)				
5a During the year did the foundation pay or incur any amount to:							
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?							
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,							
any voter registration drive?			es X No				
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es 🗶 No	- 1			
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section						
4945(d)(4)(A)? (see instructions)			es 🗓 No 📙	1 1			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or		,,,			
the prevention of cruelty to children or animals?			es 🛣 No 💈	` ;			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described in	n Regulations					
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b			
Organizations relying on a current notice regarding disaster assistance check hi							
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			[
expenditure responsibility for the grant?	N	/A Ye	es L No -	· - [5] [
If "Yes," attach the statement required by Regulations section 53 4945	• •						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		(-				
a personal benefit contract?		Y ₀	es . X No				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X			
If "Yes" to 6b, file Form 8870			[.22 :,			
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y					
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b			
Part VIII Information About Officers, Directors, Trustor Paid Employees, and Contractors	ees, Foundation Ma	nagers, Higniy	<i>'</i>				
1 List all officers, directors, trustees, foundation managers and their	compensation		·				
List all officers, directors, a disters, foundation managers and dien	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense			
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	account, other			
B. MAYO BODDIE	to position PRESIDENT	enter -0-)	compensation	allowances			
ATTN:TAX & RISK MANAGEMENT, C/O BODDI	PKESIDENI						
ROCKY MOUNT, NC 278021908	1.00	0.	0.	0.			
	VICE PRESIDEN		0.				
ATTN:TAX & RISK MANAGEMENT, C/O BODDI	VICE INESTEEN	-		i			
ROCKY MOUNT, NC 278021908	1.00	0.	0.	0.			
	SECRETARY						
ATTN:TAX & RISK MANAGEMENT, C/O BODDI							
ROCKY MOUNT, NC 278021908	1.00	0.	0.	0.			
	TREASURER			 			
ATTN:TAX & RISK MANAGEMENT, C/O BODDI							
ROCKY MOUNT, NC 278021908	1.00	0.	0.	0.			
2 Compensation of five highest-paid employees (other than those inc		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	(e) Expense account, other			
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allowances			
NONE							
			_	l			
				}			
				<u> </u>			
Total number of other employees paid over \$50,000			<u> </u>	0			
			Form	990-PF (2015)			

NICKOLAS BUNN BODDIE, SR. AND

orm 990-PF (2015)	LUCY	OYAM	BODDIE	FOUNDAT	IO

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Form **990-PF** (2015)

Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		į
The Laurehor of others recovered over CEO 000 for professional convers		• 0
Total number of others receiving over \$50,000 for professional services Part X-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produce	o, etc.	
1N/A		
2		
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	s 1 and 2.	Amount
1N/A		
2		
2		
	··	
All other program-related investments. See instructions.		
3	ł	
Total. Add lines 1 through 3	>	0.

P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes;		
а	Average monthly fair market value of securities	1a	4,919,361.
	Average of monthly cash balances	1b	442,585.
	Fair market value of all other assets	1c	538,834.
	Total (add lines 1a, b, and c)	10	5,900,780.
	Reduction claimed for blockage or other factors reported on lines 1a and	* T	
	1c (attach detailed explanation) 1e 0.	2v er	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,900,780.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	88,512.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,812,268.
6	Minimum investment return, Enter 5% of line 5	6	290,613.
F	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	290,613.
2a	Tax on investment income for 2015 from Part VI, line 5	Ž.	
b			
C	Add lines 2a and 2b	2c	6,752.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	283,861.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	283,861.
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	283,861.
F	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	I	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	321,100.
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:	1,000	
а	Surtability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	321,100.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1 T	
	income. Enter 1% of Part I, line 27b	5	6,752.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	314,348.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	r the section

Form **990-PF** (2015)

Form 990 PF (2015)

Part/XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI line 7		The state of the s		283,861.
2 Undistributed income if any as of the end of 2015				· · · · · · · · · · · · · · · · · · ·
a Enter amount for 2014 only		一种 一种 一种 一种 一种 一种 一种 一种 一种 一种 一种 一种 一种 一	203,590	
b Total for prior years	と は、「現場は、」	The state of the s	· 其,四 · 事 · 新	
		0.		
3 Excess distributions carryover, if any, to 2015	The form of the second			李墨、德特·
a From 2010	是描述的			
b From 2011		基 为 对 建		经基本 第 油 擅
c From 2012				上海 五州山 司
d From 2013	一事 "是"			声量 等計 温
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from	"看"的"是"。 "是一个"	進高, 四門	한다. 그 때문	현실을 중심한 경
Part XII, line 4 ▶\$ 321,100.				
a Applied to 2014, but not more than line 2a		E THE SECTION	203,590.	原、源、混凝、。
b Applied to undistributed income of prior	"到量品" 严 脏计一			医圆性 经混乱
years (Election required - see instructions)		0.	图 學	表现"主義教、·理
c Treated as distributions out of corpus		· "是"。"是"		建 本马马
(Election required - see instructions)	0.	作"。"("大 <u>森")</u>		
d Applied to 2015 distributable amount	元年をかい、 温温に	经,就承天哪?	[1][[1][[] [1][[][[]][[]][[][[]][[]][[]]	117,510.
e Remaining amount distributed out of corpus	0.	是一里。	Fa A LITTLE	世里に 温雄 任
5 Excess distributions carryover applied to 2015	0.	題。 华江 李龙 建了	the territory	0.
(If an amount appears in column (d) the same amount must be shown in column (a))	LATIN TEST		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	で、医師・こうについ
6 Enter the net total of each column as				上 本 全 日
indicated below			F4	
& Corpus Add lines 3f 4c and 4e Subtract line 5	0.	William		
b Prior years, undistributed income. Subtract	全种型的数量	1		
line 4b from line 2b		0.		建建 生 高、星
c Enter the amount of prior years'			[12] 二雪 韓	建型 海馬
undistributed income for which a notice of deficiency has been issued, or on which	金工业		The state of the s	第二章 第二章
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable	是'垂'是'			
amount - see instructions	· 基件 (本) 表示	0.	COLC LEGIST	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
e Undistributed income for 2014. Subtract line			_	
4a from line 2a Taxable amount - see instr	THE THE PERSON NAMED IN		U.	First Start
f Undistributed income for 2015 Subtract		国务、 / 写写		1
lines 4d and 5 from line 1. This amount must	医遗 虫病感觉中心			166 251
be distributed in 2016	一 表现了了上面的 秦 4 m m m m m m m m m m m m m m m m m m		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	166,351.
7 Amounts treated as distributions out of			· 建二基	
corpus to satisfy requirements imposed by		美国人民产品	基础是一个是处理	
section 170(b)(1)(F) or 4942(g)(3) (Election	0.		F	
may be required - see instructions)	<u>-</u>	1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
8 Excess distributions carryover from 2010	0.			事章 造化
not applied on line 5 or line 7				
9 Excess distributions carryover to 2016 Subtract lines 7 and 8 from line 6a	0.		1. 多位于基础图	
			1	
10 Analysis of line 9 a Excess from 2011	- 1145 -	對於 "你說法"		
b Excess from 2012		[金]斯 [雪玉梅		医断耳 点目
c Excess from 2013	"事与"的"	1	(FA)	
d Excess from 2014			-3 主治風	
e Excess from 2015	1327年			
523581 11 24 15	_ = =03_	<u> </u>	1	Form 990-PF (2015)

•	S BUNN BODD: YO BODDIE FO	•		56	-1678893 Page
Part XIV Private Operating Fo			A, question 9)	N/A	20,000
1 a If the foundation has received a ruling or	determination letter that	it is a private operating		· · · · · · · · · · · · · · · · · · ·	
foundation, and the ruling is effective for	2015, enter the date of th	ne ruling	▶		
b Check box to indicate whether the found	ation is a private operatin	g foundation described in	section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for			_		
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c				ļ	
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter;					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		··· · · · ·			
b "Endowment" alternative test - enter		-			
2/3 of minimum investment return shown in Part X, line 6 for each year 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					
Part XV Supplementary Information at any time during the			f the foundati	ion had \$5,000 c	or more in assets
1 Information Regarding Foundation	n Managers:	**************************************			
a List any managers of the foundation who year (but only if they have contributed m			butions received by	the foundation before t	he close of any tax
NONE					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large p	ortion of the ownership	of a partnership or
NONE	a rate or grandr midion	_			
	on Cront Cift I	Cabalanahin sta Diri			
2 Information Regarding Contribution Check here ► X if the foundation or the foundation makes gifts, grants, etc. (nly makes contributions to	preselected charitable o	rganizations and do	es not accept unsolicite s, complete items 2a, b,	d requests for funds. If , c, and d.
a The name, address, and telephone numb	er or e-mail address of th	e person to whom applic	ations should be ad	dressed:	

523601 11-24-15

c Any submission deadlines:

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

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

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Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the	Year or Approved for Future F	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
	1			
SEE STATEMENT ATTACHED	1			
	-			319,100.
				
	1			
Total			N 20	319,100.
b Approved for future payment			<u>▶ 3a</u>	319,100.
• Approved for lattice payment				
NONE				
	1			
	\ \ \ \ \ \			
				-
	<u> </u>			
Total			▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Feter grace amounts unless athenuse indicated	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(0)
Enter gross amounts unless otherwise indicated. 1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
•	Code				
ab			┼──		
	·			 	
			-		
	·			·	
e	·		-		
a Fees and contracts from government agencies	· 				<u> </u>
g Fees and contracts from government agencies	 	40.			
2 Membership dues and assessments	 		├──	·	
3 Interest on savings and temporary cash			14	201.	
investments 4 Dividends and interest from securities			14	205,982.	
	, 1924	· 4	17		
5 Net rental income or (loss) from real estate:	7 777		3.5		
a Debt-financed property					·
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			-	 	
7 Other investment income			1		<u> </u>
8 Gain or (loss) from sales of assets other			18	EOE 017	
than inventory			10	505,917.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	-		-	· · · · · · · · · · · · · · · · · · ·	
11 Other revenue:					
a	- }	·	├		
b	-	·	├		
<u> </u>	-	······································	 	······································	
<u> </u>	-		├—		
6	- 75.	0.	-	712 100	
12 Subtotal. Add columns (b), (d), and (e)		U •	L	712,100.	712,100.
13 Total. Add line 12, columns (b), (d), and (e)				13_	/12,100.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acco	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which inc	ome is reported i	in column (e) of Part XVI-A	contrib	nuted importantly to the accord	nnlishment of
the foundation's exempt purposes (other than			0011416	rated importantly to the accom	inplication of
				<u></u>	
		····			· · · · · · · · · · · · · · · · · · ·
		·-			
					
		.			
		<u> </u>			
					
					
					
	_		_		

Form 990-PF (2		MAYO BODDIE H	•	56-10	678 <u>8</u> 93 Page 13
Part XVII				nd Relationships With Nonc	
	Exempt Organ				
1 Did the or			lowing with any other organization	n described in section 501(c) of	Yes No
the Code ((other than section 501(c	c)(3) organizations) or in secti	on 527, relating to political organi	zations?	
a Transfers	from the reporting found	lation to a noncharitable exem	pt organization of:		
(1) Cash					1a(1) X
(2) Other	rassets				1a(2) X
b Other tran	isactions;				7 \$
(1) Sales	of assets to a noncharita	able exempt organization			1b(1) X
(2) Purch	hases of assets from a no	oncharitable exempt organizati	ion		1b(2) X
• •	al of facilities, equipment,				1b(3) X
	bursement arrangements				1b(4) X
, ,	s or loan guarantees				1b(5) X
• •		embership or fundraising solid	citations		1b(6) X
c Sharing o	f facilities, equipment, ma	ailing lists, other assets, or pa	id employees		1c X
-		•		ays show the fair market value of the goo	ds, other assets.
				e in any transaction or sharing arrangeme	
		, other assets, or services rece			
(a)Line no	(b) Amount involved	(c) Name of noncha	ritable exempt organization	(d) Description of transfers, transactions,	and sharing arrangements
		N/	'A		
				T	
					<u></u>
				-	
2a is the four	ndation directly or indirec	tly affiliated with, or related to	, one or more tax-exempt organiz	ations described	
ın section	501(c) of the Code (other	er than section 501(c)(3)) or in	section 527?		Yes X No
b If "Yes," co	omplete the following sch	nedule.			
	(a) Name of or	ganization	(b) Type of organization	(c) Description of relat	ionship
	N/A				·
					·
landbe				statements, and to the best of my knowledge attorn of which preparer has any knowledge	May the IRS discuss this
Sign 👠		12 177.		Now and which the same same with the same same same same same same same sam	return with the preparer shown below (see instr.)?
Here	P. ple go	190d die	11-11-16	1 (1 des	X Yes No
Sign	nature of officer of trustee		Date	Title	
	Print/Type\preparer's n		er's signature	I — I	TIN
	CAROLINE F	P. ABBOTT, /	IND. WILLIAM	self- employed	
Paid		P00039286			
Preparer	Firm's name ► THC	MAŠ, JUDY & 1	CUCKER P. A.	Firm's EIN ► 56	-1965804
Use Only					
	I and the second		EUSE ROAD SUIT	!	
	I RA	ALEIGH, NC 276	09	Phone no. 919	-571-7055 _

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Name of the organization

NICKOLAS BUNN BODDIE, SR. AND LUCY MAYO BODDIE FOUNDATION

Employer identification number

56-1678893

Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a section 501(c)(General Rule X For an organization property) from any	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions in filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions.						
Special Rules							
sections 509(a)(1) a any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.						
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for study to children or animals. Complete Parts I, II, and III.						
year, contributions is checked, enter h purpose Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year						
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization
NICKOLAS BUNN BODDIE, SR. AND
LUCY MAYO BODDIE FOUNDATION

Employer identification number

56-1678893

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MAYO AND JEAN BODDIE ATTN:TAX & RISK MANAGEMENT, C/O BODDIE-NOELL ENTERPRISES, P. O. BOX 19 ROCKY MOUNT, NC 278021908	\$ <u>1,126,628</u> .	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
·		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

NICKOLAS BUNN BODDIE, SR. AND LUCY MAYO BODDIE FOUNDATION

Employer identification number

56-1678893

Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	18,424 SHARES OF RBC STOCK		
		\$\\$\\$\	06/30/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
}		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 4 Name of organization Employer identification number NICKOLAS BUNN BODDIE, SR. AND 56-1678893 LUCY MAYO BODDIE FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this inlo once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERES	T ON SAVIN	NGS AND TEM	PORARY	CASH I	NVESTMENTS	STATEMENT	1
SOURCE		(A REVE PER B	NUE		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM	3
CAPTRUST DEUTSCHE BANK ACCT 9 MISC INCOME WELLS FARGO		24. 8. 161. 8.		24. 8. 161. 8.			
TOTAL TO PART I, LIN	1E 3		201.		201.		<u> </u>
FORM 990-PF	DIVIDENDS	S AND INTER	EST FR	OM SECU	JRITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	R	(A) EVENUE R BOOKS			
CAPTRUST DEUTSCHE BANK ALEX	206,234	•		202,187	_		
BROWN - ANT 944726 TO PART I, LINE 4	3,795		7.	205,982	3,79 2. 205,98		
FORM 990-PF		ACCOUNTI	NG FEE	S		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTEI NET INCON		
ACCOUNTING FEES		2,500.		1,250	•	1,2	50.
TO FORM 990-PF, PG	L, LN 16B	2,500.		1,250	•	1,2	50.

FORM 990-PF	OTHER PROFES	SIONAL FEES	S'	ratement 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DEUTSCHE BANK - ADVISORY FEES	32,383.	32,383.		0.
TO FORM 990-PF, PG 1, LN 16C	32,383.	32,383.		0.
FORM 990-PF	TAX	ES	S'	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME .	(D) CHARITABLE PURPOSES
FOREIGN TAXES FEDERAL EXCISE TAX	2,788. 8,725.	2,788.		0.
TO FORM 990-PF, PG 1, LN 18	11,513.	2,788.		0.
FORM 990-PF	OTHER E	XPENSES	S	PATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MEMBERSHIP DUES BANK FEES OTHER EXPENSES	750. 14. 422.	0. 14. 422.		750. 0. 0.
TO FORM 990-PF, PG 1, LN 23	1,186.	436.		750.

FORM 990-PF	CORPORATE STOCK		STATEMENT	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
1815 SHS ISHARES INC MSCI PACIF 3531 SHS WISDOMTREE TR JAPAN HE 4656 SHS WISDOMTREE TR EUROPE H CAPTRUST RPM-021982	DGED EQUITY	EQUITY 0.		
TOTAL TO FORM 990-PF, PART II,	LINE 10B	6,024,643.	5,664,309	
FORM 990-PF	OTHER INVESTMENTS		STATEMENT	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
TITAN MASTERS INTL FUND LTD ANT-944726 SELECT INVESTMENT MULTISTRATEGY	COST COST COST	0. 0. 12,763.	0 0 17,304	
TOTAL TO FORM 990-PF, PART II,	LINE 13	12,763.	17,304	

Nicholas Bunn Boddie & Lucy Mayo Boddie Foundation FOR YEAR ENDED 12/31/2015

PART XV - CONTRIBUTIONS PAID DURING THE YEAR

D-210

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBU AND FOUNDATION STATUS OF RECIPIENT	FOR PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT	VALUE OF GOODS RECEIVED	<u>net</u>	Letter <u>Receipt</u>
ADVENT HISTORIC CHURCH TRUST ENFIELD, NC	NONE 50%(A)(1)&170(B)(1)(C)	CHARITABLE	5,000 00	0 00	5 000 00	YES
AMERICAN RED CROSS TURNAGE CHAPTER ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	5,000 00	0 00	5,000 00	YES
BAPTIST CHILDREN'S HOME OF NC THOMASVILLE, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	5,000 00	0 00	5 000 00	YES
BARIUM SPRINGS HOME FOR CHILDREN BARIUM SPRINGS, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	1,000 00	0 00	1 000 00	YES
BOYS & GIRLS HOMES OF NORTH CAROLINA LAKE WACCAMAW, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	10,000 00	0 00	10,000 00	YES
BOYS & GIRLS CLUB OF ROCKY MOUNT ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	25,000 00	0 00	25 000 00	YES
CASTALIA VOLUNTEER FIRE DEPARTMENT CASTALIA, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	1,000 00	0 00	1,000 00	YES
CITY OF ROCKY MOUNT (WARM PROGRAM) ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	5,000 00	0 00	5,000 00	YES
COMMUNITIES IN SCHOOLS ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	1,000 00	0 00	1 000 00	YES
CONETOE FAMILY LIFE CENTER CONETOE, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	5,000 00	0 00	5 000 00	YES
DOWNEAST RADIO READING PROGRAM ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	500 00	0 00	500 00	YES
DOWNEAST PARTNERSHIP FOR CHILDREN ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	2,000 00	0 00	2,000 00	YES
ECU CHILDREN'S HOSPITAL GREENVILLE, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	5,000 00	0 00	5 000 00	YES
EVERY NATION MINISTRIES BRENTWOOD, TN	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	1,000 00	u 00	1,000 00	YES
FIRST BAPTIST CHURCH ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	5,000 00	0 00	5,000 00	YES
HOSPICE OF NASH GENERAL HOSPITAL ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	2,500 00	0 00	2 500 00	YES
JESSE HELMS CENTER FOUNDATION WINGATE, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	10,000 00	0 00	10 000 00	YES
LOUISBURG COLLEGE-PEARSON HOUSE RENOV LOUISBURG, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	30,000 00	0 00	30 000 00	YES
MAKE-A-WISH FOUNDATION PHOENIX, AZ	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	1,000.00	0 00	1 000 00	YES
MEALS ON WHEELS ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	2,500 00	0 00	2,500 00	YES
THE MEDICAL FOUNDATION OF NC CHAPEL HILL, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	50,000 00	0 00	50,000 00	YES
MOMEYER VOLUNTEER FIRE DEPARTMENT NASHVILLE, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	1,000 00	0.00	1,000 00	YES
MOREHEAD PLANETARIUM SCHOLARSHIP FUNC CHAPEL HILL, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	10,000 00	0.00	10,000 00	YES

CHARITABLE

CHARITABLE

0 00

0 00

5,000 00

5,000 00

5,000 00 YES

5,000 00 YES

NONE

509(A)(1)&170(B)(1)(C)

NONE 509(A)(1)&170(B)(1)(C)

MY SISTER'S HOUSE ROCKY MOUNT, NC

NASH COMM COLLEGE FOUNDATION ROCKY MOUNT, NC

NASHVILLE FIRE DEPARTMENT NASHVILLE, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	2,000 00	0 00	2 000 00	YES
OCRACOKE FIRE DEPARTMENT OCRACOKE. NC	NONE 509(A)(I)&170(B)(I)(C)	CHARITABLE	1,000 00	U 00	1,000 00	YES
PAMLICO TAR RIVER FOUNDATION WASHINGTON, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	1,000 00	0 00	1,000 00	YES
PREGNANCY CARE CENTER ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	1,000 00	0 00	1 000 00	YES
ROCKY MOUNT ACADEMY ENDOWMENT ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	20,000 00	0 00	20 000 00	YES
SALVATION ARMY ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	10,000 00	0 00	10 000 00	YES
SMILE TRAIN NEW YORK, NY	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	2,000 00	0 00	2,000 00	YES
SPECIAL OLYMPICS-NC MORRISVILLE, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	12,000 00	0 00	12 000 00	YES
SPECIAL OLYMPICS-VA RICHMOND, VA	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	15,000 00	U 00	15,000 00	YES
STONEWALL MANOR ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	00 000,1	0 00	1,000 00	YES
STONY CREEK RESCUE SQUAD ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	500 00	0 00	500 00	YES
TAR RIVER MISSION CLINIC ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	5,000 00	0 00	5,000 00	YES
TRI COUNTY INDUSTRIES ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	1,000 00	0 00	1,000 00	YES
UNC CHILDREN'S HOSPITAL CHAPEL HILL, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	10,000 00	0 00	10 000 00	YES
UNC LINEBERGER CANCER CENTER CHAPEL HILL, NC	NONE 509(A)(I)&170(B)(I)(C)	CHARITABLE	20,000 00	400 00	19 600 00	YES
UNC-TV RESEARCH TRIANGLE PARK, NC	NONE 509(A)(I)&170(B)(I)(C)	CHARITABLE	1,000 00	0 00	1,000 00	YES
UNC-W SCHOOL OF NURSING WILMINGTON, NC	NONE 509(A)(I)&170(B)(I)(C)	CHARITABLE	10,000 00	0 00	10,000 00	YES
UNION THEOLOGICAL SEMINARY RICHMOND, VA	NONE 509(A)(I)&170(B)(I)(C)	CHARITABLE	10,000 00	0 00	10 000 00	YES
UNITED COMMUNITY MINISTRIES ROCKY MOUNT, NC	NONE 509(A)(1)&170(B)(1)(C)	CHARITABLE	2,500 00	0 00	2,500 00	YES
W L GREENE ALTERNATIVE SCHOOL ROCKY MOUNT, NC	NONE 509(A)(I)&170(B)(I)(C)	CHARITABLE	1,000 00	0 00	1,000 00	YES
TOTAL		TOTAL CONTRIBUTIONS	\$319,500 00 D-215	\$400 00 D-101	319,100 00 D-101	