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Form **990-PF**

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.lrs.gov/form990pf.

OMB No 1545-0052

14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees Stmt 3 6,850. 6,850. b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications	For	calen	dar year 2015 or tax year beginning		, and ending		<u></u>
Receivable Policy	Nar	ne of	foundation			A Employer identification	number
C/ C Carol J. Poole, P.O. Box 20105 Gry or two, stello or province, country, and 2IP or freeign possel code Ralle 1gh, NC 27619 G. Check all that apply. Instal return In							<u> </u>
Control of the con			•	•	Room/suite		0.2
Rale igh, NC 27619 6 Check all that apply:						 -	
Check all that apply:				osiai code		if exemption application is p	lending, check here
Final return Amended return Amende				Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
Section 4947(a)(1) nonexempt characteristic trusts Cother taxable private foundation					,		
Section 4947(a)(1) nonexempt charable trust Other taxable private foundation Fair market value of all assets at end of year J. Accounting method: Cash X. Accrual			Address change	Name change		2. Foreign organizations me check here and attach co	pering the 85% test, proputation
Far market value of all assets at end of year J Accounting method: Cash X Accrual If the foundation is in a 50-month termination (from Part II), col. (c), line 15 Other (specify) Part II. column (of) must be on cash basis) Part III Analysis of Revenue and Expenses S25, 036 (Part II. column (of) must be on cash basis) Part III Analysis of Revenue and Expenses (4) Revenue and concessably equal the emonation is oldam (a)) must not concessably equal the semicians of column (of) must not concessably equal the semicians of column (of) must not concessably equal the semicians of column (of) must not concessably equal the semicians of column (of) must not concessably equal the semicians of column (of) must not concessably equal the semicians of column (of) must not concessably equal the semicians of column (of) must not concessably equal the semicians of column (of) must not concessably equal the semicians of column (of) must not not column (of) must not column (of) must not not not not column (of) must not not not not not not not not not no	H C	_				E If private foundation sta	tus was terminated
Contributions, office, grants, etc., received Statement Coldinates of the color of the col	<u> </u>					under section 507(b)(1))(A), check here
S S S S S S S S S S			· 1 —	-	X Accrual		
Part Analysis of Revenue and Expenses (1) Revenue and revenues and Expenses (1) Revenue and revenues and (2) Describble purposes for revenues and several beautiful to the following of the several beautiful to the seve	•		, ,,,,	· · · · · · · · · · · · · · · · · · ·	2000	under section 507(b)(1))(B), check here
1 Contributions, girts, grants, etc., received 2 Check X X X X X X X						(-) (-) (-)	(d) Dishursements
2 Cneek		irt i	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))			income	for charitable purposes
Statement 1		1				N/A	
Seath investments Statement 2		2	Interest on savings and temporary	A	21		Statement 1
Sa Gross rents Sa G		3	cash investments				<u> </u>
B Not rental income or (loss) 8 Not span or (loss) from sale of assets not on line 10 b Gross sales near for in 1786,026. 7 Ceptal gain and income (from Part IV, line 2) 8 Not short-term capital gain 9 Income modifications 10a and disvances 10 Less Cost of poogle-folds 11 Other notifies 1 through 11 12 Total. Jud filmes 1 through 11 13 Semi-transplant gain gain gain gain gain gain gain gain				21,211.	21,211		Deacement 2
Section Colorab Form aste of easests not on line 10 -28,305.		".					
Display Disp	_	_		-28,305.			
8 Net Short-term capital gain 9 Income modifications 108 and allowances b Less Cost of population 11 Other ancome 12 (Total Add lines 1 through 11	nge		Gross sales price for all 796 036				
8 Net Short-term capital gain 9 Income modifications 108 and allowances b Less Cost of population 11 Other ancome 12 (Total Add lines 1 through 11	eve	7			0.		
10e arcioss sales less returns b Less Cost of poose fold c Gross product (10s) 11 Other anothers 12 Total Add lines 1 through 11 -7,060. 21,245. 13 Completes the fold of the	œ	8	Net short-term capital gain				
D Less Cost of goods Goods Cost	2	9					
D Less Cost of goods Goods Cost	2		and allowances				
11 Other modifies 1 through 11	->						
12 Total add lines 1 through 11)					1	
13 Complementation of Deficiers, directors, trusteds 14 Other Employee salaries and vages 15 Pension plans; employee the neftts 15 Eact 15 Eac	=	12 <	Total Add lines 1 through 11	-7,060.	21,245.		
14 Other-imployee salaries and wages 15 Pension-plans-imployee benefits 16a Legal Res Stmt 3 6,850. 6,850. 0. b Accounting fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Stmt 4 11,902. 11,902. 0. 24 Total operating and administrative expenses. Add lines 13 through 23 18,752. 18,752. 0. 25 Contributions, gifts, grants paid 440,200. 440,200. 26 Total expenses and disbursements. Add lines 24 and 25 458,952. 18,752. 440,200. 27 Subtract line 26 from line 12: 8 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter-0-) 2 2,493.	<u>;</u> —		Compensation of officers, directors, trustees etc				0.
16a Legal flees	\supset		Other employee salaries and wages				
c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 11,902. 11,902. 26 Total expenses and disbursements. Add lines 24 and 25 440,200. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 2 2,493.	尝。	15					
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26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 2	Se Se		▼ *				
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26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 27 Subtract line 26 from line 12: 2	ratii	24				1	
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 27 Subtract line 26 from line 12: 2) pe				18,752		0.
Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 2,493.	•	23		440,200.		 	440,200.
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 2,493.		26	-	459 952	19 752		440 200
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 2,493.		27		230,352.	10,/32		= 1
b Net investment income (if negative, enter -0-)		i		-466.012.			
					2,493.		
		l				N/A	

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6

7

8

104,690.

440,200.

25.

7 Add lines 5 and 6

See the Part VI instructions

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

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.

Form 990-PF (2015) Lonnie & Carol Poole Family For Part VI Excise Tax Based on Investment Income (Section 494)			56-208°			Page 4
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and e) 1	70 000			
Date of ruling or determination letter: (attach copy of letter if ne						
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		,	1			25.
of Part I, line 27b	LAS and Chief 170	1				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	% of Part I, line 12, col. (b)	J	l			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. 0		·	2			0.
3 Add lines 1 and 2	anoro ontor o ,	Ť	3			25.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -O-)	-	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	, , , , , , , , , , , , , , , , , , ,	ŀ	5			25.
6 Credits/Payments:		ŀ		-		
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a 2	480.				
b Exempt foreign organizations - tax withheld at source	6b	, == 0				
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		2,4	80.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached	Ī	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		2,4	55.
11 Enter the amount of line 10 to be; Credited to 2016 estimated tax	2,455.Re	funded -	11		-,-	0.
Part VII-A Statements Regarding Activities		1411404	···			<u> </u>
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate	or intervene i	n	1	Yes	No
any political campaign?	, , , , , , , , , , , , , , , , , , ,		••	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (see instructions for t	he definition)	?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities ar	•			- 12		
distributed by the foundation in connection with the activities	copies or any mater.					İ
c Did the foundation file Form 1120-POL for this year?				1c		х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e vear			· · ·		
(1) On the foundation. ▶ \$ 0 • (2) On foundation managers		0.				
e Enter the reimbursement (if any) paid by the foundation during the year for political expend						
managers. ► \$ 0.	mare an imposed on roun	ou.ion				
2 Has the foundation engaged in any activities that have not previously been reported to the I	RS?			2		х
If "Yes," attach a detailed description of the activities				<u> </u>		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of inc	progration, or	•			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang				3	-	х
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?			N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	?		,	5		X
If "Yes," attach the statement required by General Instruction T	•			<u> </u>		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither:					
By language in the governing instrument, or	•					İ
By state legislation that effectively amends the governing instrument so that no mandator	ry directions that conflict v	vith the state	law			İ
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," cor	molete Part II. col. (c). a	nd Part XV		7	X	
	<i>'',p'oto''</i> art <i>''</i> , cor (o), c	na ran ran		Ė		
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ons) ►					
NC						,
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or desig	nate)	-			İ
of each state as required by General Instruction G? If "No," attach explanation	,	,		8b	х	ĺ
9 Is the foundation claiming status as a private operating foundation within the meaning of se	ection 4942(i)(3) or 4942(ı)(5) for caler	ıdar			
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," of				9		Х
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu		resses		10		X
			Fo	rm 99 ()-PF	(2015)

X

3b

4a

Yes X No

N/A

during the year?

b If "Yes," did it have excess business holdings in 2015 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,

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

Form 4720, to determine if the foundation had excess business holdings in 2015)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

orm 990-PF (2015) Lonnie & Carol Poole Fam			<u>56-20877</u>	30 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (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			es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); of	er to carry on, directly or indire			
any voter registration drive?			es 🗶 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es [X] No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Y ₁	es 🗶 No	i l
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?		Y	es 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	in Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		. —		
expenditure responsibility for the grant?	N	I/A	es L No	
If "Yes," attach the statement required by Regulations section 53 494.	5-5(d)		1	1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Y₁	es 🗶 No	.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es 🗶 No 📙	
b If "Yes," did the foundation receive any proceeds or have any net income attribi				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	ınagers, Highl	y	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		I () Componentian	(d)	T
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	`enter'-0-)'	compensation	allowances
Carol J. Poole	Pres/Direct			
700 N. Peninsula				
New Smyrna Beach, FL 32169	5.00	0.	0.	0.
Robert H. Hall	Sec/Treas			
2600 Hilltop Farms Road				
Apex, NC 27502	1.00	0.	0.	0.
		ļ		
		1		
]			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	/d\ c	1 1 1 Europea
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(0)	compensation	allowances
NONE				
]		l	
				<u> </u>
]			
				<u> </u>
Total number of other employees paid over \$50,000			>	0
			Form	990-PF (2015)

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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		<u> </u>
Total number of others receiving over \$50,000 for professional services	<u> </u>	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.	F	Expenses
1 N/A	1	
]	
	<u>l</u>	
2		
	├	
3	4	
	4	
	+	
4	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.	T	Amount
1 N/A	1	
	1	
	1	
2		
]	
	<u> </u>	
All other program-related investments. See instructions.		
3	1	
]	
	—	
Total. Add lines 1 through 3	<u> </u>	0.
	Form	990-PF (2015)

	m 990-PF (2015) Lonnie & Carol Poole Family Foundation	<u> 56-</u>	2087730 Page 8
LP	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	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	597,555.
	Average of monthly cash balances	1b	597,555. 70,184.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	667,739.
е	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	667,739.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,016.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	657,723.
6	Minimum investment return. Enter 5% of line 5	6	32,886.
P	art 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.)	id certain	
1	Minimum investment return from Part X, line 6	1	32,886.
2a	·		
	Income tax for 2015. (This does not include the tax from Part VI.)		
С		2c	25.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	32,861.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	32,861.
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	32,861.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		1a	440,200.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	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	440,200.
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	25.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	440,175.
	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 for	the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7				32,861.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 514,394.				
b From 2011				
c From 2012 54,652. d From 2013 1,359.				
15 45 45				
	617,460.			
f Total of lines 3a through e 4 Qualifying distributions for 2015 from	017,400.			
Part XII, line 4: ►\$ 440, 200.				
a Applied to 2014, but not more than line 2a			0.	1
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	1	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				32,861.
e Remaining amount distributed out of corpus	407,339.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,024,799.			
b Prior years' undistributed income. Subtract	·	-		
line 4b from line 2b		0.		
c Enter the amount of prior years'		_		
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	_			
may be required - see instructions)	0.		<u> </u>	
8 Excess distributions carryover from 2010	514,394.			
not applied on line 5 or line 7	314,334.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	510,405.			
10 Analysis of line 9:	210,403.			<u> </u>
a Excess from 2011				
b Excess from 2012 54,652.			1	
c Excess from 2013 1,359.				
d Excess from 2014 e Excess from 2015 407,339.				
				Form 990-PE (2015)

		ole Family 1			87730 Page 10
Part XIV Private Operating F	oundations (see	instructions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter t	hat it is a private operating			
foundation, and the ruling is effective fo	r 2015, enter the date	of the ruling	▶		
b Check box to indicate whether the found	lation is a private oper	ating foundation described	in section	4942(j)(3) or 49	942(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 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(j)(3)(B)(III)					
(3) Largest amount of support from			-		·
an exempt organization					
(4) Gross investment income	-	 	-		<u> </u>
Part XV Supplementary Info	rmation (Com	olete this part only	if the foundation	n had \$5.000 or m	ore in assets
at any time during t			, , , , , , , , , , , , , , , , , , , ,		
1 Information Regarding Foundation	n Managers:		1		
a List any managers of the foundation wh year (but only if they have contributed r	o have contributed mo		ntributions received by th	e foundation before the clo	ose of any tax
Carol J. Poole					
b List any managers of the foundation who other entity) of which the foundation ha			n (or an equally large port	tion of the ownership of a p	partnership or
None					
2 Information Regarding Contribut Check here ► X if the foundation of the foundation makes gifts, grants, etc.	only makes contributio	ns to preselected charitable	e organizations and does	not accept unsolicited req complete items 2a, b, c, an	uests for funds. If d d.
a The name, address, and telephone num	ber or e-mail address	of the person to whom app	olications should be addr	essed:	
b The form in which applications should be	oe submitted and infor	mation and materials they	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geograp	hical areas, charitable fields	s, kinds of institutions, or	other factors:	

Part XV Supplementary Information				
3 'Grants and Contributions Paid During the	Year or Approved for Future If recipient is an individual,	Payment		
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
Alliance Medical Ministry		Public	Charitable	
01 Donald Ross Drive				
Raleigh, NC 27610				20,000
Andy Russell Celebrity Classic		Public	Charitable	
3600 Forbes Ave				
Pittsburgh, PA 15213				1,500
Saptist Childrens Homes of NC		Public	Charitable	
1091 Oak Lawn Drive				
Sanford, NC 27330				150,000
Fathers Forver		Public	Charitable	
223 US 70				
Garner, NC 27529				5,000
Raleigh Rescue Mission		Public	Charitable	
31 4 E Hargett Street Raleigh, NC 27601				10,000
	ontinuation shee	et(s)	▶ 3a	440,200
b Approved for future payment				
None				
None				
		1		
Tatal		<u> </u>	▶ 3b	
Total	· ·			rm 990-DF (201

Part XVI-A Analysis of Income-Producing Activities

523621 11-24-15

	I Unrelated	business income	Evelu	ded by section 512, 513, or 514	(-)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		CODE		
8	 				
C					
d					
e					
1	<u> </u>				
g Fees and contracts from government agencies			 	-	
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14		
4 Dividends and interest from securities			14	21,211.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					<u></u>
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	-28,305.	
9 Net income or (loss) from special events			<u> </u>		
10 Gross profit or (loss) from sales of inventory			ļ		
11 Other revenue:	1 1				
å					
b	<u> </u>				
<u> </u>		·	 		
0	 				
12 Subtotal. Add columns (b), (d), and (e)		0.	· · · · ·	-7,060.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u></u>			13	-7,060.
(See worksheet in line 13 instructions to verify calculations.)					. , , ,
Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	cemp	t Purposes	
Line No. Explain below how each activity for which income the foundation's exempt purposes (other than			contrib	outed importantly to the accom	nplishment of
the foundation's exempt purposes (other than	by providing ran	<u> </u>			
	 -	*			
				•••	
					·
				····	
	 	·		<u>.</u>	
		 			

Form 990-l		e & Carol Poo				56-208			ge 13
Part X		egarding Transfers	To and Trans	actions ar	nd Relations	hips With Noncha	ritable	9	
•	Exempt Organ								
1 Did th	he organization directly or indi	rectly engage in any of the fol	llowing with any oth	ier organization	i described in secti	on 501(c) of		Yes	No
	ode (other than section 501(c			political organiz	zations?				1
	sfers from the reporting found	ation to a noncharitable exem	npt organization of;						
(1) (Cash						18(1)		X
(2) (Other assets						1a(2)		Х
b Other	r transactions:								
	Sales of assets to a noncharita						1b(1)		X
	Purchases of assets from a no	, -	tion				1b(2)		X
	Rental of facilities, equipment,						1b(3)		X
	Reimbursement arrangements	;					1b(4)		X
(5) l	Loans or loan guarantees						1b(5)		Х
	Performance of services or me	•					1b(6)		X
	ing of facilities, equipment, ma						10		X
	answer to any of the above is				-	•		sets,	
	rvices given by the reporting f			ur market value	in any transaction	or sharing arrangement, s	snow in		
	nn (d) the value of the goods,				1 (4) -	 			
(a)Line no	(b) Amount involved	(c) Name of noncha	<u> </u>	nization	(0) Description	of transfers, transactions, and	sharing ai	rangeme	ints
		N/	/ A						
					 				
		ļ							
		 							
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		+	· · · · · · · · · · · · · · · · · · ·		+				
		 			+				
		+			+				
		+			-				
2a ic the	Ie foundation directly or indirec	the affiliated with or related to	one or more tay-	vomnt organiz	ations described				
	ction 501(c) of the Code (othe	•	•	ixempi organiza	alions described	Г	Yes	X	☐ No
	es," complete the following sch		11 56611011 327						_ 110
וו ע	(a) Name of org		(b) Type of	organization		(c) Description of relations	ship		
	N/A		(5) 1)	o.gazao		(0) = 00011 priorit or 1014			
	11/11_					<u></u>			
									
							-		
									
	Under penalties of perjury, I declare	that I have examined this return, is	ncluding accompanying	g schedules and s	statements, and to the	best of my knowledge	ou the IUC	dinauco	thic
Sign	and belief, it is true, correct, and co	mplete Declaration of preparer (oth	her than taxpayer) is ba	sed on all informa	ation of which prepare	ras any knowledge ret	ay the IRS turn with th	e prepar	rer
Here	Yenhit	1 Hall	1 2/2	4/11	Treas		X Yes		ู้ ั∾
ļ	Signature of officer or trustee	8	Date	7//6	Title				
	Print/Type preparer's na		er's signature		Date	Check If PTIN			
	7,			,	1 ;	self- employed			
Paid	J. Timmons	Robinson /	mmere Kol	2012	2/23/11-	P0	0142	596	
Prepai		thes Pittman 8			120/10	Firm's EIN ▶ 56-1			
Use O		,							
		00 Sunday Dri	ive, Suit	e 300				_	
		aleigh, NC 276		-		Phone no. 919-2	32-5	900	ļ

Phone no. 919-232-5900 Form **990-PF** (2015)

Lonnie & Carol Poole Family Foundation 56-2087730

Part XV Supplementary Information 3 Grants and Contributions Paid During the You				
· Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
Salvation Army		Public	Charitable	
P.O. Box 10666				
Raleigh, NC 27605				1,000
		h	D	
We Care WSMGA 1105 Bentham Drive		Public	Charitable	
Raleigh, NC 27614				3,000
The James Madison Institute		Public	Charitable	
100 North Duval Street				
Tallahassee, FL 32301			<u> </u>	500
Knightdale United Methodist Church		Public	Charitable	
7071 Forestville Road Knightdale, NC 27545				200
Sugar Mill Country Club Scholarship		Public	Charitable	
Fund 100 Clubhouse Circle		1		
New Smyrna Beach, FL 32168				1,000
Durham Nativity School		Public	Charitable	
1004 N. Mangum Street				10 000
Durham, NC 27701				10,000
		n., h.1.1	Charitable	
Read and Feed 193 High House Road		Public	Charitable	
Cary, NC 27511				15,000
Boys and Girls Club		Public	Charitable	
701 N. Raleigh Boulevard				5 000
Raleigh, NC 27610	<u> </u>			5,000
		nh1 /	Observation 1.2	
YMCA of the Triangle 801 Corporate Center Drive, Suite 200		Public	Charitable	
Raleigh, NC 27607				200,000
Waste Industries Employee Assistance		Public	Charitable	
waste industries employee Assistance Fund			Direct 1 capte	
3301 Benson Drive, Suite 601				
Raleigh, NC 27609				1,000
Total from continuation sheets				253,700

Lonnie & Carol Poole Family Foundation 56-2087730

3 Grants and Contributions Paid During the	Year (Continuation)			
* Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
American Diabetes Association		Public	Charitable	
1701 North Beauregard Street		Fublic	Charicable	
Alexandria, VA 22311				25
Els for Autism		Public	Charitable	
18370 Limestone Creek Road		Fubile	Charicable	
Jupiter, FL 33458				25
Motheread, Inc. 3803-B Computer Drive, Suite 204		Public	Charitable	
Raleigh, NC 27609				5,00
Mount Moriah Baptist Church 3000 East Garner Road		Public	Charitable	
Raleigh, NC 27610				1,00
The Pediatric Brain Tumor Foundation		Public	Charitable	
302 Ridgefield Court				
Asheville, NC 28806				25
American Cancer Society 250 Williams Street NW		Public	Charitable	
Atlanta, GA 30303				25
Ravenscroft School		Public	Charitable	
7409 Falls of Neuse Road Raleigh, NC 27615				10,00
Total from continuation sheets				

Form 990-PF Intere	est on Savir	ngs and Tem	porary	Cash In	vestments	Statement 1		
Source	Reve			(b) vestment come	(c) Adjusted Net Income			
BB&T Investment Acc				34.				
Total to Part I, li				34.				
Form 990-PF	Dividends	and Inter	est fro	om Secur	ities	Statement 2		
Source	Gross Amount	Capital Gains Dividend	Re	(a) evenue r Books	(b) Net Inves ment Inco			
BB&T Investment Account #243	21,211.		0.	21,211.	21,21	.1.		
Po Part I, line 4 21,211			21,211.		21,21	1.		
Form 990-PF		Legal	Fees			Statement 3		
Description		(a) Expenses Per Books	(b) Net Invest- ment Income		(c) Adjusted Net Incom			
Trustee Fees		6,850.	6,850.			0.		
To Fm 990-PF, Pg 1, ln 16a		6,850.	6,850.			0.		
Form 990-PF		Other E	Other Expenses			Statement 4		
Description		(a) Expenses Per Books	(b) Net Invest- ment Income		(c) Adjusted Net Incom			
Management Fees Taxes		10,500. 1,402.	10,500.		_	0.		
To Form 990-PF, Pg	1, ln 23	11,902.	-	11,902.		0.		
	=							

Form 990-PF U.S. and State	Statement	5			
Description	U.S. Gov't	Other Gov't	Book Value	Fair Marke Value	t
US & State Government Obligations	<u> x</u>		20,032.	19,6	53.
Total U.S. Government Obligations	20,032.	19,6	53.		
Total State and Municipal Governme	ent Oblig	ations			
Total to Form 990-PF, Part II, lin	20,032.	19,6	53.		
Form 990-PF Co	orporate	Bonds		Statement	6
Description			Book Value	Fair Marke Value	t
Corporate Bonds	71,778. 69,0		68.		
Total to Form 990-PF, Part II, lin	71,778. 69,00		68.		
Form 990-PF Oth	her Inves	tments		Statement	7
Description		ation hod	Book Value	Fair Marke Value	t
Corporate Obligations International Obligations Specialty Funds	CC	OST OST OST	167,848. 216,146. 33,611.	155,9 201,8 28,3	94.
Total to Form 990-PF, Part II, lin	417,605.	386,1	86.		