√m 990-PF

EXTENDED TO NOVEMBER 15, 20 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

Go to www.irs.gov/Form990PF for instructions and the latest information.

Depart	tment of the Treasury al Revenue Service			gov/Form990PF for inst		•	• -	Open to Public Inspection
			AUG	1, 2017	, and en		DEC 31, 2017	T Open to rustic massession
Nam	ne of foundation		·				A Employer identification	number
PI	RTM FAMIL	Y FOUNDATION					81-4289471	
		pox number if mail is not delivered to	street ad	dress)		Room/suite	B Telephone number	
10	01 N. CHE	RRY STREET, SU	JITE	501			336-331-40	11
City	or town, state or pr	ovince, country, and ZIP or for	eign pos	tal code			C If exemption application is pe	ending, check here
_ W :	<u>INSTON-SA</u>	LEM, NC 2710:						
G CI	heck all that apply:	X Initial return		Initial return of a f	former public ch	arity	D 1 Foreign organizations,	, check here
*		Final return		Amended return			2 Foreign organizations mes	oting the 95% test
		Address change	2. Foreign organizations mee check here and attach cor	mputation P				
H C	heck type of organiz		$\overline{}$	npt private foundation	Jahran)	E If private foundation stat	
<u>L</u>) nonexempt charitable trust assets at end of year J Acc		her taxable private found method: X Cash	Accru	<u>, , , , , , , , , , , , , , , , , , , </u>	under section 507(b)(1)(
	om Part II, col. (c), l	· I –	~~, ·	r (specify)	Acciu	aı	F If the foundation is in a 6 under section 507(b)(1)(
\.\.\				(d) must be on cash bas	sis.)		dilaci 3001011 307 (b)(1)((D), Olicok field
	Analysis of R	evenue and Expenses ounts in columns (b), (c), and (d) may at the amounts in column (a))		(a) Revenue and expenses per books	(b) Net inv		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		gifts, grants, etc., received		70,000.			N/A	(
		if the foundation is not required to attach Sch	h B					
	3 Interest on saving cash investments	gs and temporary s						
	4 Dividends and	interest from securities						
	5a Gross rents		-		ļ			
İ	Net rental income	or (loss)			<u> </u>			
e	6a Net gain or (loss) Gross sales price	from sale of assets not on line 10 for all	-		 			100
Revenue	assets on line 6a	ncome (from Part IV, line 2)	— -		 	0.		
æ	8 Net short-term		-		 		SEP 21	2018 6
	9 Income modifi	, •			 			<u> </u>
	Gross sales less and allowances				<u> </u>		OCALA	
<u> </u>	b Less Cost of god	ods sold					College Constitution of the College Constitution of the College Colleg	
	c Gross profit or	(loss)	L		<u> </u>			
ĺ	11 Other income		-		 			
· ——		es 1 through 11		70,000.		<u>0.</u>	 	
	ĺ	f officers, directors, trustees, etc	-	0.		0.		0.
,	, ,	e salaries and wages , employee benefits	-		 			
es	15 Pension plans. 16a Legal fees	STMT	1	10,904.	 	0.		0.
ens	b Accounting fee		_ -					
Expenses	c Other professi							
ative	17 Interest							
rat	18 Taxes		. _		<u> </u>			
nis	19 Depreciation a	nd depletion ,			ļ			
ďmj	20 Occupancy		Ļ		 			
ΑÞ	21 Travel, confere	ences, and meetings	-		 		 	
an (22 Printing and p 23 Other expense		,	36.	 	0.	 	0.
Operating and Administrative	24 Total operation	g and administrative	~	50.	' 			<u>U</u> .
Sera	expenses Ad	d lines 13 through 23		10,940.		0.		0.
ŏ	25 Contributions,	s, gifts, grants paid 51,000.				51,000.		
	Į.	s and disbursements.	Γ					
	Add lines 24 a	nd 25		61,940.		0.		51,000.
	27 Subtract line 2	6 from line 12:					†	
		e over expenses and disbursements	, -	8,060.				
		nt income (if negative, enter -0-)	-		 	0.		
	<u>j c Adjusted net i</u>	NCOME (if negative, enter -0-)			<u> </u>		N/A	L

2017.04011 PRIM FAMILY FOUNDATION

For	m 99	0-PF(2017) PRIM FAMILY FOUNDATION		81-4	<u> 1289471</u>	Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of		
	ar t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market	
	1	Cash - non-interest-bearing		8,060.	8	<u>,060.</u>
	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 ▶				
ţ	8	Inventories for sale or use				
ssets	9	Prepaid expenses and deferred charges				
ĕ	10a	Investments - U.S. and state government obligations				
	1	Investments - corporate stock				
	C	Investments - corporate bonds				
	l	Investments land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	1	Land, buildings, and equipment: basis ▶			-	
	ļ · ·	Less accumulated depreciation				
	15	Other assets (describe ►)				
	1	Total assets (to be completed by all filers - see the				
	.0	instructions. Also, see page 1, item I)	0.	8,060.	8	,060.
_	17	Accounts payable and accrued expenses		- 0,000.	<u> </u>	7000.
	18	Grants payable				
"	19	Deferred revenue				
ţ	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilitı	21	Mortgages and other notes payable		····-		
Lia	22	Other liabilities (describe)				
	22	Other natimites (describe				
	22	Total liabilities (add lines 17 through 22)	0.	0.		
_	23		0.			
		Foundations that follow SFAS 117, check here				
S		and complete lines 24 through 26, and lines 30 and 31.				
ĕ	24	Unrestricted				
ala	25	Temporarily restricted				
d B	26	Permanently restricted Foundations that do not follow SFAS 117, check here		<u>-</u>		
Ë	ļ					
Net Assets or Fund Balances		and complete lines 27 through 31		0		
ts	27	Capital stock, trust principal, or current funds	0.	0.		
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
it A	29	Retained earnings, accumulated income, endowment, or other funds	0.	8,060.		
ž	30	Total net assets or fund balances	0.	8,060.		
				2 252		
_	31	Total liabilities and net assets/fund balances	0.	8,060.		
F	art	III Analysis of Changes in Net Assets or Fund B	alances			
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30	1 1		_
	•	st agree with end-of-year figure reported on prior year's return)		1		0.
		r amount from Part I, line 27a		2	8	,060.
		r increases not included in line 2 (itemize)		3		0.
		fines 1, 2, and 3		4	8	,060.
		eases not included in line 2 (itemize)		5		0.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6		<u>,060.</u>
					Form 990- l	PF (2017)

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs MLC Co.)					P	How a - Purd - Don		(c) Date a	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a										
<u>b</u> NO	ONE				<u> </u>			- -		
<u>c</u>	_				ļ					
_d					<u> </u>				-	
<u>e</u>	1		 		L.,	-				
(e) Gross sales price	(f) [epreciation allowed (or allowable)		st or other basis expense of sale	_			(h) Ga ((e) plus	ain or (loss) (f) minus (g))
<u>a</u>										
_b										
<u>c</u>										
							·			
<u>e</u>										·-
Complete only for assets show	ing gain in d	column (h) and owned by	the foundation	n on 12/31/69.			(I) Gains (C	ol. (h) gain	minus
(i) FMV as of 12/31/69				Losses	ot less than (from col (I	1-0-) or 1))				
a										··-
b							•	-,-		
C										
d				_						
e									-	
	•	C If gain, also enter	ın Part I line	7	٦					-
2 Capital gain net income or (net o	capital loss)	If gain, also enter of the loss of the los	- in Part I, line	, : 7	}	2				
				•					<u> </u>	
3 Net short-term capital gain or (le if gain, also enter in Part I, line 8			ia (6).)					
If (loss), enter -0- in Part I, line		·)-			? !	3				
Part V Qualification	Under S	ection 4940(e) for	Reduced	d Tax on Net	Inv	estr	nent In	come		
(For optional use by domestic priva	ite foundatio	ons subject to the section	4940(a) tax o	n net investment ir	ncom	e)				N/A
(i or optional ase by domestic priva	no rouridanc	ma addjoot to the acction	10 ro(u) tax or	THICK III VOSATICIA II	100111	0.,				11/21
If section 4940(d)(2) applies, leave	this part bla	ank.								
Was the foundation liable for the se	etion 4042	tay on the distributable am	nount of any v	ear in the bace no	riod2					Yes No
If "Yes," the foundation doesn't qua					i iou r					L Tes [NO
1 Enter the appropriate amount in					entries					
(a)	1 00011 00101		1311 40110113 131	nore making any c						(d)
Base periód years Calendar year (or tax year begini	ning in)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncha		-use assets	,	Distrib	(d) ution ratio ided by col. (c))
	illig iii)								(cor (n) aiv	ueu by col. (c))
2016						-		-		
2015		 		-			·	-		
2014										
2013		· · · · · · · · · · · · · · · · · · ·		ļ						
2012				<u> </u>				- 		
2 Total of line 1, column (d)							•	. 2		
3 Average distribution ratio for the			on line 2 by 5	0, or by the numb	er of	years				
the foundation has been in exist	tence if less	than 5 years						. 3		
								i i		
4 Enter the net value of noncharita	able-use ass	sets for 2017 from Part X,	line 5					4		
5 Multiply line 4 by line 3								5		
6 Enter 1% of net investment inco	ome (1% of	Part I, line 27b)						6		
7 Add lines 5 and 6								7		
8 Enter qualifying distributions fro	ım Part YII	line 4						8		
			46	alara da esta esta esta esta esta esta esta est		. .		<u> </u>		
If line 8 is equal to or greater the See the Part VI instructions.	an iine /, ch	eck the box in Part VI, line	io, and com	piete that part usir	ig a 1	% tax	rate.			

Form	990-PF (2017) PRIM FAMILY FOUNDATION					289471		Page 4
	rt VI Excise Tax Based on Investment Income (Section 494			or 49	48 - s	ee instru	ctio	ns)
_ 1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e	nter "N/A	A" on line 1.					
	Date of ruling or determination letter (attach copy of letter if ned	essary-	see instructions)	-	-			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	-	and enter 1%	L	1			0.
	of Part I, line 27b			1				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 49	% of Par	t I, line 12, col. (b). 👃		İ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; o	thers, en	nter -0-)		2			0.
3	Add lines 1 and 2			L	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	thers, er	nter -0-)	L	4		_	0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			L	5			0.
6	Credits/Payments:							
а	2017 estimated tax payments and 2016 overpayment credited to 2017	6a		0.				
b	Exempt foreign organizations - tax withheld at source	6b	<u> </u>	0.				
C	Tax paid with application for extension of time to file (Form 8868)	6c		0.				
d	Backup withholding erroneously withheld	6d		0.				
7	Total credits and payments. Add lines 6a through 6d			L	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	iched		L	8			0.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10			
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax		Refunded		11			
Pa	rt VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation o	r did it participate or inte	rvene II	n		Yes	No
	any political campaign?					1a		_X_
p	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses? Se	e the instructions for the	definit	ion	1b		X
	If the answer is "Yes" to ${f 1a}$ or ${f 1b}$, attach a detailed description of the activities and copies	of any m	naterials published or					:
	distributed by the foundation in connection with the activities.					ĺ	İ	
C	Did the foundation file Form 1120-POL for this year?					1c		_ <u>X</u> _
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the					Ĭ]	
	(1) On the foundation. \$\bigs\\$ 0. (2) On foundation managers			0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend	liture tax	imposed on foundation					
	managers ► \$O.					\	<u> </u>	
2	Has the foundation engaged in any activities that have not previously been reported to the l	RS?				_ 2		_X
	If "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing $$	ınstrume	ent, articles of incorporat	ion, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes					3_		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?				4a		_X_
	If "Yes," has it filed a tax return on Form 990-T for this year?				N/I			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year'	3				5	<u> </u>	X
	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither:						
	By language in the governing instrument, or					l		
	By state legislation that effectively amends the governing instrument so that no mandator	ry directi	ions that conflict with the	state 1	aw	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," comp	plete Par	t II, col. (c), and Part XV			7	X	
						1		
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ons. >						
	NC							ı
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney	General (or designate)					
_	of each state as required by General Instruction G? If "No," attach explanation					86	X	<u> </u>
9	is the foundation claiming status as a private operating foundation within the meaning of se			r calen	dar			
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," con	-				9	<u> </u>	<u>X</u> .
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	ute listing	their names and addresses			10	<u></u>	<u>X</u>
						Form 99 0	J-PF	(2017)

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 2017?

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee 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	0.
b	Average of monthly cash balances	1b	0. 17,212.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	17,212.
	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	
3	Subtract line 2 from line 1d	3	17,212.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	258.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	16,954.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	355.
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.)	d certain	
1	Minimum investment return from Part X, line 6	1	355.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	355.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	355.
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	355.
P	Part XII Qualifying Distributions (see instructions)	l l	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		F1 000
а		1a	51,000.
b	y	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	, , , , , ,	3a	
b	,	3b	F1 000
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	51,000.
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	51,000.
	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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, fine 7				355.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
ь Total for prior years;		0		
3 Excess distributions carryover, if any, to 2017.		0.		
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 51,000.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	-·- 		 	
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				355.
e Remaining amount distributed out of corpus	50,645.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as				
indicated below:	50,645.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	30,043.			
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 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				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.			
8 Excess distributions carryover from 2012				_
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018 Subtract lines 7 and 8 from line 6a	50,645.			
10 Analysis of line 9:	30,043.			
a Excess from 2013				
b Excess from 2014			ı	
c Excess from 2015				
d Excess from 2016				
e Excess from 2017 50,645.				
0.0000.000.000			L	<u> </u>

723581 01-03-18

orm 990-PF (2017) PRIM FA Part XIV Private Operating F	MILY FOUNDA		A guestion (I)		42894/1 Page 10
			-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		•	n continu	4040(1)(2) 05	14040()(5)
b Check box to indicate whether the found	Tax year	g loundation described i	Prior 3 years	4942(j)(3) or	<u> 4942(j)(5)</u>
2 a Enter the lesser of the adjusted net	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
income from Part I or the minimum	(4) 2017	(5) 2010	(0) 2010	- (4) 2011	(0) 10(0)
investment return from Part X for					
each year listed		<u> </u>			
b 85% of line 2a					
c Qualifying distributions from Part XII,			ļ		
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			1		
for active conduct of exempt activities.		_/			
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	ļ				
alternative test relied upon					
a "Assets" alternative test - enter:		J. Committee of the com			
(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	1				
shown in Part X, line 6 for each year	1/				
listed			 		
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section	ļ	1			
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	umation (Cample	da dhia mark ambi	is the secondary	bd &C 000	
Part XV Supplementary Info			it the foundation	on nad \$5,000 or	more in assets
		<u>uctions.</u> ,			
1 Information Regarding Foundation	-	than 20/ of the total cont	ributions recoved by	the foundation before the	alogo of any toy
a List any managers of the foundation where year (but only if they have contributed representation).			ributions received by	the foundation before the	e close of any tax
, , , , ,	(000 0	001101110011101111111111111111111111111			
NONE	an awa 100/ or mara of th	a stock of a corneration	/av an agually large as		(
b List any managers of the foundation who other entity) of which the foundation had			(or an equally large po	ortion of the ownership o	ra partnersnip or
	ou 1070 or grouter interes	,			
NONE Contribution Contribution	in Oran 0:4 Lan	Cabalasabia ata D			
2 Information Regarding Contribut Check here ► X if the foundation of					annuals for fixeds 16
the foundation makes gifts, grants, etc.	only makes contributions to individuals	to preselected charitable ations under other condi	organizations and doc	es not accept unsolicited.	requests for funds. If
a The name, address, and telephone num	iber or email address of tr	ie person to wnom appii	cations snould be add	ressed:	
. T. 6					
b The form in which applications should l	ve submitted and informat	tion and materials they s	iouia include:		
A a b a d d					
c Any submission deadlines:					
A Any vootvotions or lendstone or	a quah as bu sasasas bu	al arone, aboutable fields	lundo of un-titute-		
d Any restrictions or limitations on award	s, such as by geographica	ai areas, charitable fields,	kings of institutions,	or other factors.	
					5 000 DE (0047)

3 Grants and Contributions Paid During the Ye	ar or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
AMERICAN RED CROSS - HURRICANE RELIEF		PC	FOR HURRICANE RELIEF	
FUND				
PO BOX 37839				1 000
BOONE, IA 50037				1,000.
WINSTON STARTS		PC	FOR GENERAL USE	
500 W 5TH STREET			FOR GENERAL USE	
WINSTON-SALEM, NC 27101				50,000.
		1		
		1		
Total		<u> </u>	▶ 3a	51,000.
b Approved for future payment				
NONE				
		İ		
Total	<u> </u>	L	▶ 3h	

Part XVI-A	Analysis	of Income	-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
- · · ·	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
c		<u> </u>			
d					122
e					
f					·
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	i				
4 Dividends and interest from securities			1		
5 Net rental income or (loss) from real estate:			l		<u> </u>
a Debt-financed property					
b Not debt-financed property			1		
			├		
6 Net rental income or (loss) from personal					
property			 		
7 Other investment income					
8 Gain or (loss) from sales of assets other			Ì		
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
ā	-				
b			-		
C					
d			-		
e					
			1		l .
12 Subtotal. Add columns (b), (d), and (e)		0.			0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)		0.			0.
12 Subtotal. Add columns (b), (d), and (e)		0.			0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)	o the Acco			13	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t		omplishment of Ex	kemp	13 _ ot Purposes	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No Explain below how each activity for which incompared to the columns of	me is reported	omplishment of Ex	kemp	13 _ ot Purposes	
12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t	me is reported	omplishment of Ex	kemp	13 _ ot Purposes	
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Form 990-PF (2017) PRIM FAMILY FOUNDATION 81-4289471 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the org	ganization directly or indir	ectly engage in any i	of the following	g with any other organization	n described in sect	ion 501(c)		Yes	No
	(other thai	n section 501(c)(3) organ	izations) or in sectio	n 527, relating	to political organizations?					
а	Transfers	from the reporting founda	ation to a noncharital	ble exempt org	ganization of:					
	(1) Cash							1a(1)		<u>X</u>
	(2) Other							1a(2)		<u>X</u>
b	Other trans		ble avamet arganizat	· an				45/41		v
	` '	of assets to a noncharitat nases of assets from a nor						1b(1) 1b(2)		X
		al of facilities, equipment, (•	ii yanizalion				1b(3)		X
	٠,	bursement arrangements						1b(4)		X
		s or loan guarantees						1b(5)		X
	• •	rmance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees										X
d		-			· ·		narket value of the goods, ot		ets,	
					ed less than fair market valu	ie in any transactioi	or sharing arrangement, sh	ow in		
/a.\.	`	the value of the goods, of			avampt organization	(4) =				
ajLi	a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing						naring ari	angeme	nts	
	_			N/A						
						 				
										
							·			
						<u> </u>				
			 				 _			
						 -				
			 			 				
										
2a	Is the four	ndation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described			-	
	ın section	501(c) (other than section	n 501(c)(3)) or ın se	ction 527?				Yes	X] No
b	If "Yes," co	omplete the following sch								
		(a) Name of org	janization		(b) Type of organization		(c) Description of relationshi	ip		
		N/A								
	 -				<u> </u>					
	 									
										
_					g accompanying schedules and			the IRS	discusses i	hio.
Sig	gn 👢	elief, t is true, correct, and con	polete. Declaration of pre	eparer (other than	n taxpayer) is based on all inform	nation of which prepare	return	n with the	e prepar	er
He	re				19.14.18	/ lene		Yes		ĴΝο
	Sıgı	nature of officer of trustee	.)		Date	Title				
		Print/Type preparer's na	ame	Preparer's si	gnature	Date	Check If PTIN			
D -	:			6/2		9/11/18	self- employed			
Pa		JOSEPH P.		70				194		
	eparer se Only	Firm's name ► THE	DANIEL P	KUPESS	IONAL GRP IN	C	Firm's EIN ► 56-12	T 2 6	σI	
Ja	Jilly	Firm's address ▶ 44	OO STIAS	CBEEK	PKY SUITE 20	0	 			
		1	NSTON-SAL			U	Phone no. 336-76	8_3	290	
		ı MI	TID TON DAL	. <u></u> 140	21,402					(2017)
								501		(== 11)

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.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization **Employer identification number** PRIM FAMILY FOUNDATION 81-4289471 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, 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, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file 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) (2017)

Name of organization

Employer identification number

PRIM FAMILY FOUNDATION

81-4289471

Part I	Contributors	(see instructions)	Use duplicate copie	s of Part I if addition	onal space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BILLY D. PRIM 11125 GREEN BAYBERRY PALM BEACH GARDENS, FL 33418	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnocash 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)
1 BILLY D. PRIM 11125 GREEN BAYE PALM BEACH GARDE (a) No. Name, (a) No. Name, (a) No. Name, (a) No. Name,	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

Name of organization

Employer identification number

PRIM FAMILY FOUNDATION

81-4289471

art 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
		\$	
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Name of organ	nization	Employer identification numl	Employer identification number		
PRIM FA Part III	AMILY FOUNDATION Exclusively religious, charitable, etc., contri the year from any one contributor Complete co	butions to organizations described i	81-4289471 in section 501(c)(7), (8), or (10) that total more than \$1,0	000 for	
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or le	less for the year (Enter this info once) > \$		
(a) No. from Part I	Use duplicate copies of Part III if additional space is needed (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		
- - 					
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee		
-			Troduction por autorior of to autoriore		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
 - 					
	Transferee's name, address, an	(e) Transfer of gift	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, an	d ZIP + 4	Relationship of transferor to transferee		

FORM 990-PF	LEGAL FEES		STATEMENT 1		1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
LEGAL FEES	10,904.	0.			0.
TO FM 990-PF, PG 1, LN 16A	10,904.	0.			0.
FORM 990-PF	OTHER EXPENSES		STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAB PURPOSE	
BANK FEES	36.	0.			0.
TO FORM 990-PF, PG 1, LN 23	36.	0.			0.