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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491129013589

2018

OMB No 1545-0052

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

A Employer destriction number	For	caler	ndar year 2018, or tax year beginning 01-01-20)18 , aı	nd ending 12-31	2018				
No. There and street (or P.C. Downwheld if mail in not selevered to street address) Rozardhalas B. Teluphare rundwar (see matusct criss) C. Ceck all that apply In that return Interest				A Employer id						
Control cont				43-1988927	43-1988927					
City or seven, state or prevener, country, and 22P or fare-or position code City or exemption application is predicting, describers				B Telephone nu	B Telephone number (see instructions)					
3 Ceck all that apply				(336) 547-2102	2					
Final return					C If exemption	application is pending	g, check here			
Foreign regulation Amended return Address change Name change N	G Ch	eck all	I that apply Initial return Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	re \square			
Check type of organization Section 501(c)(3 seem) provides foundation Section 501(c)(3 seem) provides foundation Section 502(c)(3)(1) nonexempt chantable trust Other (specify) Check type of organization Section 501(c)(3) seem) Check type of organization Section 501(c)(3) seem) Check type of organization Section 502(c)(3)(1) nonexempt chantable trust Other (specify) Check type of organization of seem state of check type of organization Check type or			Final return Amended return							
Check type of organization			Address change Name change				· -			
Fair market value of all assets at end of year (from Part II, col. (c), her 16) \$\frac{1}{2}\$ \$7,172,013 Debursements of year (from Part II, col. (c), her 16) \$\frac{1}{2}\$ \$7,172,013 Debursements of year (from Part II), col. (c), and (gin any and markets) Cash Under Section 907(8)(I)(8), check her content of year and the amounts in column (g) fees addressed (c), and (gin any and markets) Cash Underso, gifts, grents, etc., received (attach schedule) 2	H Ch	eck ty	pe of organization $lacksquare$ Section 501(c)(3) exempt private t	foundation						
Analysis of Revenue and Expenses. (The total of amounts in columns (b), (c), and (d) must be on cash basis.) Part I Analysis of Revenue and Expenses. (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal to the amounts in columns (b), (c), and (d) may not necessarily equal to the schedule of amounts in columns (b), (c), and (d) may not necessarily equal to the schedule of amounts in columns (b), (c), and (d) may not necessarily equal to the schedule of a column (d) may not necessarily equal to the schedule of the sc		Section	1 4947(a)(1) nonexempt charitable trust 🔲 Other taxable	e private foundation						
Description Part Description Descri				☐ Cash ☐ Accru						
Part Analysis of Revenue and Expenses (The total of anomals in columns (b), (c), and (a) may not necessary span of the monutary southment (c) and (c) and (a) may not necessary span of the monutary southment (c) and (c			▶ s 7.172.013	be on cash basıs)	under section	п 507(в)(т)(в), спес	k nere			
## Part	Pa	rt T					(d) Dishursements			
1 Contributions, gifts, grants, etc., received (attach schedule) 2 Chack 1	FU						for charitable			
Check			equal the amounts in column (a) (see instructions))	books	income	liicome				
2 Check ▶ ☑ If the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6 Net gain or (loss) from sale of assets not on line 10 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross prift or (loss) (stach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salanes and wages 15 Pension plans, employee benefits 16 Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 18 Divident (see instructions) 19 Depreciation (attach schedule) (see instructions) 19 Depreciation (attach schedule) (see instructions) 10 Occupancy 11 Travel, conferences, and meetings 11 Travel, conferences, and meetings 12 Total expenses and disbursements 14 Add lines 13 through 23 (see instructions) 19 Depreciation (attach schedule) (see instructions) 10 Occupancy 11 Travel, conferences, and meetings 12 Travel, conferences, and meetings 13 Other expenses (attach schedule) (see instructions) 14 Other expenses (attach schedule) (see instructions) 15 Other expenses (attach schedule) (see instructions) 16 Occupancy 17 Travel, conferences, and meetings 18 Taxes (attach schedule) (see instructions) 19 Oper cash of the depletion (see instructions) 19 Occupancy 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications (see instructions) 23 Other expenses (attach schedule) (see instructions) 24 Other expenses (attach schedule) (see instructions) 25 Octor (see instructions) (see instructions) 26 Octor (see instructions) (see instruction		1								
Sch B		2	,							
100		_	Sch B							
100 100			· · ·							
10		-		190,067	190,067					
100 S7,261 Section Section S7,261 Section Section S7,261 Section Sectio										
8 Net short-term capital gain	e	_	` ,	87 261						
8 Net short-term capital gain	3.0	_		87,201						
8 Net short-term capital gain	eve				87 261					
9 Income modifications	~				07,201	0				
Description		_	· -							
C Gross profit or (loss) (attach schedule)		10a	Gross sales less returns and allowances							
11 Other income (attach schedule) 12 Total. Add lines 1 through 11 277,328		b	Less Cost of goods sold							
12 Total. Add lines 1 through 11		С	Gross profit or (loss) (attach schedule)							
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 0 0 0 0 0 0 15 Pension plans, employee benefits 0 0 0 0 0 0 16 16a Legal fees (attach schedule) 0 0 0 0 0 0 0 0 0		11	Other income (attach schedule)							
14 Other employee salaries and wages 0 0 0 0 0 0 15 Pension plans, employee benefits 0 0 0 0 0 16 16a Legal fees (attach schedule) 0 0 0 0 0 0 0 0 0 0		12	Total. Add lines 1 through 11	277,328	277,328					
15 Pension plans, employee benefits		13	Compensation of officers, directors, trustees, etc							
16a Legal fees (attach schedule)		14	Other employee salaries and wages		0	0	0			
Total operating and administrative expenses. Add lines 13 through 23	ses					0				
Total operating and administrative expenses. Add lines 13 through 23	ens	16a		The state of the s			·			
Total operating and administrative expenses. Add lines 13 through 23	Ξxp									
23 Other expenses (attach schedule)				29,828	29,828					
23 Other expenses (attach schedule)	rati			9 220	2.200					
23 Other expenses (attach schedule)	II ST		, , , , , , , , , , , , , , , , , , , ,	<u> </u>	·					
23 Other expenses (attach schedule)	E				<u> </u>					
23 Other expenses (attach schedule)	Act					0				
23 Other expenses (attach schedule)	pu			1.939			1.939			
26 Total expenses and disbursements. Add lines 24 and 25			•				_,			
26 Total expenses and disbursements. Add lines 24 and 25	atın		, , , , , , , , , , , , , , , , , , ,							
26 Total expenses and disbursements. Add lines 24 and 25)er:		, -	43,832	33,250	0	5,639			
25	ŏ	25	_	400,000			400,000			
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		26	•	442.022	33.350	_	405.630			
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		27		443,832	33,250	0	405,639			
disbursements b Net investment income (If negative, enter -0-) c Adjusted net income (If negative, enter -0-) 0										
c Adjusted net income (if negative, enter -0-)			disbursements	-166,504						
		_	·		244,078					
	For '				Cat No. 11300	0	m 000 BE (3010)			

3,078,221

2,902,613

197,003

6,316,972

6.316.972

6,316,972

6,316,972

3,061,811

2,782,528

147,742

6,150,128

6.150.128

6,150,128

6,150,128

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4

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6

6,316,972 -166,504

6,150,468

6,150,128

Form **990-PF** (2018)

340

4,139,155

2,747,611

127,200

7,172,013

ssets	
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13 14

15 16

17 18

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31

Part III

2

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4

Liabilities

Fund Balances

ō

Net Assets

Receivables due from officers, directors, trustees, and other

Other notes and loans receivable (attach schedule)

Less allowance for doubtful accounts ▶ 0

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Accounts payable and accrued expenses

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Temporarily restricted . . . Permanently restricted . . .

Unrestricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶.

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

disqualified persons (attach schedule) (see instructions)

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here 🕨 🗹

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

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

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

Taleav	Capital Gains	and Losses for Tax on Three	tillelit Tilcollie						
		e the kınd(s) of property sold (e g , arehouse, or common stock, 200 sha	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)				
1a See	Addıtıonal Data Tabl	e							
b									
d									
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)			
a See	Addıtıonal Data Tabl	e							
b									
d									
<u>е</u>									
	onlete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	 	1)			
	(i)	(j)	į ((k)	Gains (Col (l) h) gain minus			
F	M V as of 12/31/69	Adjusted basis as of 12/31/69		of col(၊) (j), ıf any		less than -0-) or om col (h))			
a See	Addıtıonal Data Tabl	e							
b									
С									
d									
<u>е</u>									
		1	If gain, also enter in P	art I. line 7					
2 Cap	oital gain net income	or (net capital loss)	If (loss), enter -0- in F		2	87,261			
3 Net	short-term capital o	gain or (loss) as defined in sections	1222(5) and (6)			<u> </u>			
	jain, also enter in Pa Part I, line 8	rt I, line 8, column (c) (see instructi	ions) If (loss), enter -0	}	3				
Part V	Oualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment In	come				
	_	rivate foundations subject to the se							
(1 or option	ar use by domestic p	invate roundations subject to the se	ction +340(a) tax on he	t investment incom	iie)				
If section 4	940(d)(2) applies, le	eave this part blank							
		e section 4942 tax on the distributa ot qualify under section 4940(e) Do		ın the base period	7 L Y	es 🗹 No			
1 Ente	r the appropriate an	nount in each column for each year,	see instructions before	making any entrie	!S				
	(a) nod years Calendar ax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat (col (b) divided by c				
· · · · · ·	2017	410,761		7,716,714	•	0 05323			
	2016	386,804		7,362,543		0 052537			
	2015	428,234		7,702,067		0 0556			
	2014	448,490		8,010,675		0 055987			
	2013	383,951		7,595,462		0 05055			
2 Tota	l of line 1, column (d)		1 _		0 267904			
		o for the 5-year base period—divide				0 053581			
		ndation has been in existence if less ncharitable-use assets for 2018 fror		4	1	7,774,155			
	ply line 4 by line 3		•	5		416,547			
		ent income (1% of Part I, line 27b)		6		2,441			
		, , , , , , , , , , , , , , , , , , , ,							
		· · · · · · · · · · · · · · · · · · ·				418,988			
	8 Enter qualifying distributions from Part XII, line 4 ,								
	uctions	eater than line 7, theth the box in P	are vi, fille ID, and Coll	ipiete tilat part usii	ig a 170 tax rate Se	C die Fait VI			

Page **6**

Fa	Statements Regard	iiiig	ACTIVITIES TOT WITHCH	Form 4720 May Be	Required	Continue	:u)			
5a	During the year did the foundation p	oay o	r incur any amount to						Yes	No
	(1) Carry on propaganda, or otherw	vise a	ttempt to influence legisl	ation (section 4945(e))?		☐ Ves	✓ N			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry									
	on, directly or indirectly, any voter registration drive?									
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									
	(4) Provide a grant to an organization other than a charitable, etc., organization described									
	(5) Provide for any purpose other the					☐ Yes	Y N	°		
	educational purposes, or for the	prev	ention of cruelty to childr	en or animals?		□ ,,	✓ N			
Ь	If any answer is "Yes" to $5a(1)-(5)$,	dıd a	ny of the transactions fa	il to qualify under the ex	ceptions des	☐ Yes cribed in	Y N	°		
	Regulations section 53 4945 or in a		=					5b		
	Organizations relying on a current n					▶				
c	If the answer is "Yes" to question 5a						Ш			
_	tax because it maintained expenditu			•						
	If "Yes," attach the statement requi	red b	y Regulations section 53	4945-5(d)		∐ Yes	∟ N	°		
6a	Did the foundation, during the year,				ums on					
_	a personal benefit contract?					Yes	✓ N			l <u>.</u> .
Ь	Did the foundation, during the year,	pay	premiums, directly or ind	irectly, on a personal be	nefit contract	:2	•	6b		No
_	If "Yes" to 6b, file Form 8870									
7a	At any time during the tax year, wa					☐ Yes	✓ N	o		
	If yes, did the foundation receive ar		•					7b		
8	Is the foundation subject to the sect					tion or				
	excess parachute payment during th	ne ye	ar ⁹			Yes	✓ N	<u>。</u>		<u> </u>
Pa	rt VIII Information About Contractors	Offic	ers, Directors, Trust	ees, Foundation Ma	nagers, H	ighly Pai	d Emp	oloyees	,	
1	List all officers, directors, trustee	es, fo	oundation managers an	nd their compensation	. See instru	tions				
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee be	tributions t enefit plans compensati	and '	(e) Expe	nse acc	
See	Additional Data Table			- /						
		1								
		1								
		1								
	Compensation of five highest-pa	id en	nplovees (other than th	nose included on line	L—see instri	uctions). I	If none	, enter `	NONE	."
						tributions t		·		
(a)	Name and address of each employee	paid	(b) Title, and average hours per week	(c) Compensation		ee benefit		e) Exper		
	more than \$50,000		devoted to position	(0)		nd deferred sensation	[‡]	other a	lowanc	es
NON					Comp	ensacion .				
11011	-									
					+		+			
					_		+			
					1					
Tota	I number of other employees paid ov	er \$5	0,000			<u>. ▶</u>				0
								Form 99	0-PF	(2018)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pai and Contractors (continued)	d Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "	NONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number organizations and other beneficiaries served, conferences convened, research papers produced, etc.	of Expenses
1	
2	
3	
-	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	•
Total. Add lines 1 through 3	Form 990-PF (2018)

3

4

5

6

1a

1b

2

3a 3b

4

5

383.826

383.826

383.826

405,639

405.639

405.639

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Distributable amount before adjustments Subtract line 2c from line 1.

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

3

4 5

6

1

2

3

4

5

Part XII

221,060

162,766

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0

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		-	-	

b Total for prior years

a From 2013. **b** From 2014. . . . c From 2015. . . d From 2016. e From 2017.

1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018

a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. 4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must

(If an amount appears in column (d), the

6 Enter the net total of each column as

be distributed in 2019 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) 8 Excess distributions carryover from 2013 not

9 Excess distributions carryover to 2019.

10 Analysis of line 9 a Excess from 2014. . **b** Excess from 2015. .

c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

indicated below:

d Applied to 2018 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

(a)

Corpus

0

0

0

(b)

Years prior to 2017

(c)

2017

184,579

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Part XIII	Undistributed Income (see instructions)						

Form 990-PF (2	018)
Part XIII	Und

- (276) 233-9145

 b The form in which applications should be submitted and information and materials they should include
 - LETTER FORM
- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

WITHIN THE STATE OF NORTH CAROLINA

OCTOBER 1



er gross	amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exem
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function incom (See instruction
	and contracts from government agencies					
	rship dues and assessments					
Interest	on savings and temporary cash					
				14	100.067	
	ds and interest from securities tal income or (loss) from real estate			14	190,067	
	financed property					
	ebt-financed property.					
	tal income or (loss) from personal property					
	ivestment income					
Gain or invento	(loss) from sales of assets other than			10	07.264	
	ome or (loss) from special events			18	87,261	
	profit or (loss) from sales of inventory			1		
	evenue a					
c						
d						
d e						
d e Subtota	al Add columns (b), (d), and (e).			12	277,328	
d e Subtota Total. /	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	277,328	
d e Subtota Total. / (See wo	al Add columns (b), (d), and (e).	lations)			· · · · · · · · · · · · · · · · · · ·	277,
Subtota Total. A (See wo	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Adshrksheet in line 13 instructions to verify calcu	lations) ne Accomplish income is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
Subtota Total. A See wo rt XVI e No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) ne Accomplish income is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
Subtota Total. A (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) ne Accomplish income is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
Subtota Total. A See wo rt XVI e No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) ne Accomplish income is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
Subtota Total. A See wo It XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) ne Accomplish ncome is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
Subtota Total. A See wo rt XVI e No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) ne Accomplish ncome is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
Subtota Total. A See wo rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) ne Accomplish ncome is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
Subtota Total. A See wo rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) ne Accomplish ncome is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
Subtota Total. A See wo rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) ne Accomplish ncome is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	
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d e Subtota Total. / (See wo rt XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations) ne Accomplish income is report	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribut	ed importantly to	

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+4	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part	XVII	Exempt Organ		ransfers To a	and Transacti	ons and	Relatio	nships With Non	charitable		
		ganization directly or in than section 501(c)(3)	ndirectly enga						n 501	Yes	No
` '	`	from the reporting four	-	,	, , ,	,	arnzacion	J .			
									1a(1)		No
(1) Cash									. 1a(2)		No
b Other transactions									- (-)		
		of assets to a nonchar	ntable exemp	t organization.					. 1b(1)		No
		nases of assets from a	•	-					. 1b(2)		No
		al of facilities, equipme							. 1b(3)		No
(4)	Reim	bursement arrangemen	nts						1b(4)		No
(5)	Loan	s or loan guarantees.							. 1b(5)		No
(6)	Perfor	mance of services or m	nembership o	r fundraısıng sol	licitations				. 1b(6)		No
c Sha	ring of	f facilities, equipment, i	mailing lists,	other assets, or	paid employees.				. 1c		No
		wer to any of the above									
		ds, other assets, or sen nsaction or sharing arra									
iii u	ily ciai	isaction of sharing arre	ingeniene, sn	ow in column (c	a) the value of th	ic goods, o	tilei asse	ts, or services receive	cu		
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	(d) Des	scription of	transfers, transactions, a	and sharing arra	ngemen	ts
	_										
	_										
2a Ic t	no four	ndation directly or indir	octly affiliate	d with or rolato	d to one or mor	o tay-oyom	ont organ	zations			
		in section 501(c) (othe	•						s 🗹 No		
				11 301(0)(3)) 01	in section 5277.			ш те:	5 110		
D IT	res, c	omplete the following s (a) Name of organizati		1 0	b) Type of organization	tion	1	(c) Description o	of relationship		
		(a) Name of organizati	011	,	b) Type of organiza	cion		(C) Description (or relationship		
	of m	er penalties of perjury, ny knowledge and belie ch preparer has any kno	f, it is true, c								
Sign						F			May the IRS di	scuss th	ııs
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	 					 ∤ -			with the prepa below	rer snow	vn
		Signature of officer or t	ignature of officer or trustee		Date	Title		(see instr)?	✓ Yes [□No	
		Print/Type preparer's	s name	Preparer's Sign	nature	Date		P' Check if self-	TIN		
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Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 50000 US TREASURY NOTE DTD 11/17/2008 3 75% 11 2018-01-12 30000 JPMORGAN CHASE & CO DTD 12/20/2007 6% 01 2013-08-27 2018-01-15 25000 US TREASURY NOTE DTD 11/17/2008 3 75% 11 2018-01-18 10000 GENERAL ELEC CAP CORP DTD 02/11/2011 5 3 2013-08-27 2018-01-23 9000 GENERAL ELEC CAP CORP DTD 02/11/2011 5 3 2013-08-27 2018-01-23 11000 GENERAL ELEC CAP CORP DTD 02/11/2011 5 3 2013-08-27 2018-01-26 25000 DR HORTON INC DTD 08/05/2013 5 75% 08/ 2017-06-15 2018-02-09 25000 O'REILLY AUTOMOTIVE INC DTD 03/08/2016 3 2018-02-09 2017-11-14 30000 NEWELL BRANDS INC DTD 03/30/2016 3 15% 0 2018-02-28 168 ACTIVISION BLIZZARD INC 2018-03-07 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 50.797 51.180 -383 30.000 30.000 25,393 25,563 -170 10,666 10,410 256 9,598 9,369 229 11,717 11,450 267 27,698 28,269 -571 24,592 25,308 -716 29,685 30,413 -728 12,342 4.483 7,859 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -383 -170 256 229 267 -571 -716 -728 7,859

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 179 CISCO SYSTEMS 2011-01-18 2018-03-07 195 LIVE NATION COMMON 2016-01-29 2018-03-07 700 VANGUARD REIT VIPERS 2018-03-09 35000 VISA INC DTD 12/14/2015 2 2% 12/14/2020 2015-12-09 2018-04-20 30000 KEYCORP DTD 11/13/2013 2 3% 12/13/2018 2014-02-28 2018-04-23 30000 CVS HEALTH CORP DTD 05/25/2016 2 875% 06 2016-05-16 2018-04-24 150 ABBOTT LABORATORIES 2007-05-22 2018-04-25 50 JOHNSON & JOHNSON 2007-05-22 2018-04-25 50 NOVARTIS AG 2010-04-12 2018-04-25 138 OCCIDENTAL PETE CORP 2018-04-25 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 7,898 3,806 4,092 8,529 4,412 4,117 52,525 49,261 3,264 34,460 34,970 -510 29,958 30,026 -68 27,341 29,742 -2,4018,698 4,177 4,521 6,273 3,180 3,093 3,789 2,678 1,111 10,572 11,570 -998 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 4,092 4,117 3,264 -510 -68 -2,401 4,521 3,093 1,111 -998

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 50 PEPSICO INCORPORATED 2018-04-25 1 250 PULTE GROUP INC COMMON 2016-02-16 2018-04-25 25000 GEORGE WASHINGTON UNIVERSITY DTD 08/25/2011 3 576% 2013-11-04 2018-04-27 09/15/2021 15000 APACHE CORP DTD 04/09/2012 CALLABLE 3 25 2015-02-03 2018-05-08 2670 FORD MOTOR COMPANY 2018-05-31 2018-05-31 250 MYRIAD GENETICS INC COM 30000 HILLSBOROUGH CNTY FL SCH BRD COPS MASTER LEASE PROG-SER A 2016-10-17 2018-07-01 DTD 0 15000 ENERGY N W WA ELEC REVENUE TXBL COLUMBIA GENERATING DTD 2013-08-27 2018-07-02 8/23201 275 GILEAD SCIENCES INC COM 2016-02-16 2018-07-12 90 HCA HOLDINGS INC 2013-08-05 2018-07-12 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 5,084 3,562 1,522 7,478 3,332 4,146 25,517 25,188 329 14,787 15.064 -277 30.779 26,620 4,159 9,126 6,178 2,948 30,000 30,000 15,000 14,823 177 24,949 -3,647 21,302 9,479 3,561 5,918 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 1,522 3,332 329 -277 4,159 2,948 177 -3,647 5,918

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation 280 NEWELL RUBBERMAID INC 2018-07-12 2015-12-04 100 QUALCOMM INC COMMON 2018-07-12 1000 HCP INC DTD 01/24/2011 CALLABLE 5 375% 0 2017-02-16 2018-07-16 100 HCA HOLDINGS INC 2013-08-05 2018-08-01 100 MYRIAD GENETICS INC COM 2013-02-14 2018-08-01 30000 BNP PARIBAS DTD 12/12/2013 2 4% 12/12/20 2017-09-20 2018-08-02 25000 MICROSOFT CORP DTD 11/03/2015 3 125% 11/ 2015-12-16 2018-08-07 35000 SOUTHERN COMPANY DTD 8/27/2013 2 45% 09/ 2018-09-01 400 QUALCOMM INC COMMON 2013-05-21 2018-09-11 188 NIELSEN HLDGS PLC COMMON 2018-09-11 2018-07-26 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 7,692 12,377 -4,685 5,823 7,129 -1,3061,059 1,060 -1 12,507 3.957 8,550 4,399 2,434 1,965 29,988 30,059 -71 24,592 24,955 -363 35,000 35,000 28,948 26,359 2,589 4,952 4.160 792 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -4,685 -1,306 -1 8,550 1,965 -71 -363 2,589 792

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 974 NIELSEN HLDGS PLC COMMON 2018-09-11 30000 ANHEUSER-BUSCH INBEV FIN DTD 01/25/2016 2016-01-13 2018-10-02 10000 US TREASURY NOTES DTD 01/31/2014 1 5% 01 2018-04-23 2018-10-05 25000 APPLE INC DTD 05/13/2015 2% 05/06/2020 2017-06-15 2018-10-11 82 APPLE COMPUTER COM 2010-05-26 2018-10-12 130 CBRE GROUP INC COMMON 2013-11-20 2018-10-12 90 HCA HOLDINGS INC 2013-08-05 2018-10-12 50 INTUIT INC COMMON 2011-08-23 2018-10-12 221 LIVE NATION COMMON 2016-01-29 2018-10-12 50 RYMAN HOSPITALITY PROPERTIES INC COMMON 2018-10-12 2016-02-16 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 25,654 34,402 -8,748 29,548 29,906 -358 9,975 9,985 -10 24,663 25.087 -424 18,056 2,929 15,127 5,038 2,958 2,080 11,997 3,561 8,436 10,521 2,256 8,265 5,001 11,265 6,264 3,854 2.414 1,440 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -8,748 -358 -10 -424 15,127 2,080 8,436 8,265 6,264 1,440

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 2015-09-09 2018-10-30 15000 FED NATL MTG ASSN 1 625% 11/27/18 667 RESIDEO TECHNOLOGIES INC COMMON 2015-09-02 2018-10-31 211 CISCO SYSTEMS 2011-01-18 2018-11-14 60 HCA HOLDINGS INC 2013-08-05 2018-11-14 50 INTUIT INC COMMON 2011-08-23 2018-11-14 200 ISHARES TR S&P SMALLCAP 600/BARRA GROWTH 2018-11-14 100 MICROSOFT CORPORATION 2002-11-07 2018-11-14 150 VERIZON COMMUNICATIONS INC 2014-02-24 2018-11-14 8313 539 FEDERATED SHORT TERM INC-R6 2014-10-30 2018-11-20 2018-11-26 598 EQT CORP Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 14,992 15.000 -8 5 16 11 9,424 4,487 4,937 8,366 2.374 5,992 10,486 2,256 8,230 35,755 17,227 18,528 10,572 2,813 7,759 8,839 7,217 1,622 70,000 71,330 -1,33015,506 11,154 -4,352 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -8 5 4,937 5,992 8,230 18,528 7,759 1,622 -1,330-4,352

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 478 EQUITRANS MIDSTREAM CORP COMMON 2018-11-26 10 GARRETT MOTION INC COMMON 2015-09-02 2018-11-26 14 LENNAR CORP CLASS B COMMON 2014-06-04 2018-11-26 16 RESIDEO TECHNOLOGIES INC COMMON 2015-09-02 2018-11-26 728 INVESCO LTD 2018-05-31 2018-11-26 911 HALLIBURTON CO 2018-11-28 4 EQUITRANS MIDSTREAM CORP COMMON 2018-09-11 2018-11-30 35000 NORTHWESTERN UNIVERSITY DTD 10/29/2013 1 2013-10-22 2018-12-01 3340 BANCO BILBAO VIZCAYA - SP ADR COMMON 2018-09-11 2018-12-11 50000 NEW JERSEY ST TRANSPRTN TRUSTFUND AUTH TXBL REF TRANSPRTN 2013-09-30 2018-12-15 SYS S Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (q) plus expense of sale (h) (e) plus (f) minus (g) (f) 10,319 13,951 -3,632 123 103 20 485 463 22 320 274 46 15,100 19,898 -4,798 35.866 29,174 -6,6929 11 -2 35,000 35,000 16.686 20,350 -3.66450,000 49.404 596 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -3,632 20 22 46 -4,798 -6,692 -2 -3,664 596

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) Date sold How acquired Date acquired P-Purchase (mo , day, yr) (mo, day, yr) D-Donation 341 COHERENT INC COM 2018-12-18 CAPITAL GAIN DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (h) (e) plus (f) minus (g) (f) (q) plus expense of sale 36 345 49 154 -12 809

	30,343		77,157	12,003						
				524						
Form	Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I									
	Complete only for assets shov	ving gain in column (h) and owned b	y the foundation on 12/31/69	Gains (Col (h) gain minus						
(i) F M V as of 12/31/69		Adjusted basis (j) as of 12/31/69	Excess of col(ı) (k) over col(յ), ıf any	col (k), but not less than -0-) or (I) Losses (from col (h))						
				-12,809						

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances -0-) (b) devoted to position employee benefit plans and deferred compensation ALLAN FUNK Ω PRESIDENT 200 CHERRY STREET GALAX, VA 24333 PAUL H LIVINGSTON JR DIRECTOR PO BOX 21847 GREENSBORO, NC 27420 DIRECTOR CHARLES L MYERS 106 PRESTWICK DRIVE HIGH POINT, NC 27265 TOBY S HAMMER DIRECTOR 2210 MEADOWLARK ROAD HIGH POINT, NC 27262 JUDITH G JOHNSON DIRECTOR PO BOX 717 DAVIDSON, NC 28036 J WILLIAM MCGUINN JR DIRECTOR 1034 SWEETBRIAR ROAD HIGH POINT, NC 27262 HARRIET H PITTS DIRECTOR 1323 QUEENS ROAD 420 CHARLOTTE, NC 28207 BISHOP THOMAS B STOCKTON DIRECTOR 1244 ARBOR ROAD 164 WINSTONSALEM, NC 27104 KENNETH W MCALLISTER DIRECTOR 201 NEAL PLACE

HIGH POINT, NC 27262

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SENIOR RESOURCES OF NONE **EXEMPT** COMMUNITY 15,000 **GUILFORDPO BOX 21993** GREENSBORO, NC 27420

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

HOSPICE OF THE PIEDMONT LESLIE O KALINOWSKI 1801 WESTCHESTER DRIVE HIGH POINT, NC 27262	NONE	EXEMPT	COMMUNITY	19,500
COMMUNITY CLINIC OF HIGH POINT NC	NONE	EXEMPT	COMMUNITY	30,000

Total			▶ 3a	400,000
COMMUNITY CLINIC OF HIGH POINT NC PO BOX 5607 HIGH POINT, NC 27262	NONE	EXEMPT	COMMUNITY	30,000
HIGH POINT, NC 27262				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
MENTAL HEALTH ASSOC OF HIGH POINTPO POX 5693	NONE	EXEMPT	COMMUNITY	35,000

HIGH POINT, NC 27262				
OPEN DOOR MINISTRIES OF HIGH POINTPO BOX 1528 HIGH POINT, NC 27261	NONE	EXEMPT	COMMUNITY	1

OPEN DOOR MINISTRIES OF HIGH POINTPO BOX 1528 HIGH POINT, NC 27261	NONE	EXEMPT	COMMUNITY	80,000
CHILDREN'S HOME SOCIETY OF NC PO BOX 14608 GREENSBORO, NC 27415	NONE	EXEMPT	GENERAL FUNDS	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
WEST END MINISTRIESPO BOX 2163	NONE	EXEMPT	GENERAL FUNDS	42,000

THE ARC OF HIGH POINT 153 EAST BELLEVUE DRIVE HIGH POINT, NC 27265	NONE	EXEMPT	GENERAL FUNDS
·	·		

or substantial contributor

THE ARC OF HIGH POINT 153 EAST BELLEVUE DRIVE HIGH POINT, NC 27265	NONE	EXEMPT	GENERAL FUNDS	11,000
MACEDONIA FAMILY RESOURCE	NONE	EXEMPT	MATH AND SCIENCE GRANT	15,000

HIGH POINT, NC 27265				
MACEDONIA FAMILY RESOURCE CENTER 401 LAKE AVENUE HIGH POINT NC 27260	NONE	EXEMPT	MATH AND SCIENCE GRANT	15,000

HIGH POINT, NC 27265				
MACEDONIA FAMILY RESOURCE CENTER 401 LAKE AVENUE HIGH POINT, NC 27260	NONE	EXEMPT	MATH AND SCIENCE GRANT	15,0

11201110111171110 27200				
MACEDONIA FAMILY RESOURCE CENTER 401 LAKE AVENUE HIGH POINT, NC 27260	NONE	EXEMPT	MATH AND SCIENCE GRANT	15,000
Total			> 3a	400,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
BOYS & GIRLS CLUBS OF GREATER HIGH POINTPO BOX 2834 HIGH POINT, NC 27261	NONE	EXEMPT	GENERAL FUNDS	10,000

recipient

,				
HIGH POINT UNIVERSITY 833 MONTLIEU AVE HIGH POINT, NC 27262	NONE	EXEMPT	SCHOLARSHIP FOR	10,000
THE ADA JENKINS CENTER	NONE	EXEMPT	GENERAL FUNDS	2,500

833 MONTLIEU AVE HIGH POINT, NC 27262		2/(2/11/1		10,000
THE ADA JENKINS CENTER 212 GAMBLE STREET DAVISON, NC 28036	NONE	EXEMPT	GENERAL FUNDS	2,500

Recipient If recipient is an individual, show any relationship to status of recontribution Paid During the Year or Approved for Future Payment

Recipient If recipient is an individual, show any relationship to status of recontribution Amount

recipient

400,000

any foundation manager

Name and address (home or business)

301 W GREEN DRIVE HIGH POINT, NC 27260

Total .

L Traine and address (nome or pasiness)	or substantial contributor			
a Paid during the year				
LINDLEY PARK BAPTIST CHURCH 4010 WALKER AVENUE GREENSBORO, NC 27403	NONE	EXEMPT	GENERAL FUNDS	11,000
COMMUNITIES IN SCHOOLS OF HIGH POINT NCPO BOX 6735 HIGH POINT, NC 27262	NONE	EXEMPT	GENERAL FUNDS	8,500
THE SALVATION ARMY OF HIGH POINT	NONE	EXEMPT	GENERAL FUNDS	30,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

FAMILY SERVICE OF THE PIEDMONT INC 902 BONNER DRIVE JAMESTOWN, NC 27282	NONE	EXEMPT	GENERAL FUNDS	19,000
NEPAL ORPHANS HOMEPO BOX 1254	NONE	EXEMPT	GENERAL FUNDS	5,000

NEPAL ORPHANS HOMEPO BOX 1254 DAVIDSON, NC 28036	NONE	EXEMPT	GENERAL FUNDS	5,000
UNITED WAY OF GREATER HIGH POINT 201 CHURCH AVENUE HIGH POINT, NC 27262	NONE	EXEMPT	GENERAL FUNDS	15,000

DAVIDSON, NC 20030				
UNITED WAY OF GREATER HIGH POINT 201 CHURCH AVENUE HIGH POINT, NC 27262	NONE	EXEMPT	GENERAL FUNDS	15,000
Total			▶ 3a	400,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ADULT CENTER FOR ENRICHMENT INC NONE **EXEMPT GENERAL FUNDS** 10,000 11 OAK BRANCH DRIVE SUITE B

GREENSBURU, NC 2/40/				
ARBOR ACRES UNITED METHODIST RETIREMENT COMMUNITY 1240 ARBOR ROAD WINSTONSALEM, NC 27104	NONE	EXEMPT	GENERAL FUNDS	10,000
NAAMAN'S RECOVERY VILLAGE INC	NONE	EXEMPT	GENERAL FUNDS	12,500

3217 DERBY CIRCLE	1240 ARBOR ROAD WINSTONSALEM, NC 27104				
The Treatment of the Tr		NONE	EXEMPT	GENERAL FUNDS	12,500

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

DUIVE CANCED INCTITUTE	NONE	EVENADE	MEDICAL RECEARCH	1 000
a Paid during the year				
Name and address (home or business)	or substantial contributor	recipient		

_ ,				
DUKE CANCER INSTITUTE	NONE	EXEMPT	MEDICAL RESEARCH	4,000
20 DUKE MEDICINE CIR				
DURHAM, NC 27710				

Total			▶ 3a	400,000
20 DUKE MEDICINE CIR DURHAM, NC 27710				,,,,,
I DUKE CANCER INSTITUTE	INONE	LEXEMPI	I MEDICAL RESEARCH	1 4,000

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