

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2017
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018**

| | | | |
|--|---|------------|--|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization TRIANGLE COMMUNITY FOUNDATION INC | | D Employer identification number 56-1380796 |
| | Doing business as | | E Telephone number 919-474-8370 |
| | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | G Gross receipts \$ 168,062,108. |
| | PO BOX 12729 | | H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| | City or town, state or province, country, and ZIP or foreign postal code DURHAM, NC 27709-2729 | | H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| F Name and address of principal officer: LORI O'KEEFE SAME AS C ABOVE | | | If "No," attach a list. (see instructions) |
| I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | | |
| J Website: WWW.TRIANGLECF.ORG | | | |
| K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other | | | L Year of formation: 1983 |
| | | | M State of legal domicile: NC |

Part I Summary

| | | | |
|---|--|---|-----------------------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O | | |
| | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | |
| | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 | 17 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 17 |
| | 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) | 5 | 20 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 29 |
| | 7a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | -40,266. |
| b Net unrelated business taxable income from Form 990-T, line 34 | 7b | -40,266. | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year 26,719,543. | Current Year 35,713,296. |
| | 9 Program service revenue (Part VIII, line 2g) | 0. | 0. |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 6,295,122. | 9,533,014. |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 352,684. | 288,642. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 33,367,349. | 45,534,952. |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 25,745,043. | 25,460,559. |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 0. | 0. |
| | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 1,712,058. | 1,956,527. |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 0. | 0. |
| | b Total fundraising expenses (Part IX, column (D), line 25) | 399,577. | |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 1,787,084. | 1,993,326. |
| | 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 29,244,185. | 29,410,412. |
| 19 Revenue less expenses. Subtract line 18 from line 12 | 4,123,164. | 16,124,540. | |
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) | Beginning of Current Year 224,962,417. | End of Year 243,987,009. |
| | 21 Total liabilities (Part X, line 26) | 19,295,974. | 17,513,642. |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 205,666,443. | 226,473,367. |

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

| | | | | | |
|---|--|---|------------------------|---|-------------------|
| Sign Here | Signature of officer | Date | | | |
| | TUCKER BARTLETT, TREASURER Type or print name and title | | | | |
| Paid Preparer Use Only | Print/Type preparer's name YONG ZHANG, CPA | Preparer's signature <i>Yong Zhang</i> | Date 05/02/19 | Check if self-employed <input type="checkbox"/> | PTIN P01249785 |
| | Firm's name RSM US LLP | Firm's EIN 42-0714325 | Phone no. 703-336-6400 | | |
| Firm's address 1861 INTERNATIONAL DRIVE, SUITE 400 MCLEAN, VA 22102 | | | | | |

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission: TO ENHANCE THE LIVES OF ALL RESIDENTS OF THE TRIANGLE NOW AND FOR FUTURE GENERATIONS BY BUILDING PHILANTHROPIC ASSETS, CONNECTING RESOURCES WITH NEEDS, AND PROVIDING LEADERSHIP ON KEY COMMUNITY ISSUES AND OPPORTUNITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 25,591,246. including grants of \$ 25,460,559.) (Revenue \$) TRIANGLE COMMUNITY FOUNDATION CONNECTS PHILANTHROPIC RESOURCES WITH COMMUNITY NEEDS, CREATES OPPORTUNITY FOR ENLIGHTENED CHANGE AND ENCOURAGES PHILANTHROPY AS A WAY OF LIFE.

4b (Code:) (Expenses \$ 881,866. including grants of \$) (Revenue \$) SPECIAL SERVICES - SERVICES TO AREA NON-PROFITS INCLUDE: MEETINGS WITH THE FOUNDATION'S PRESIDENT; NON-PROFIT CAPACITY BUILDING; NETWORKING; AND TRAININGS.

4c (Code:) (Expenses \$ 695,624. including grants of \$) (Revenue \$) PHILANTHROPIC EVENTS - PHILANTHROPIC EVENTS INCLUDE: DONOR EDUCATION FORUMS; CAPACITY BUILDINGS WORKSHOPS FOR NONPROFITS.

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 27,168,736.

Part IV Checklist of Required Schedules

| | Yes | No |
|---|-----|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> | X | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? | X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | | X |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | | X |
| 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i> | | X |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> | X | |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | | X |
| 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | X | |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | X | |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> | X | |
| b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i> | X | |
| c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> | | X |
| d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> | X | |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | | X |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | X | |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | | X |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> | X | |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> | X | |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> | | X |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> | | X |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | | X |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | | X |

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|--|-----|----|
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | | X |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |
| 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | X | |
| 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | | X |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | X | |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> | | X |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | |
| 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | | X |
| b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | | X |
| 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> | | X |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | | X |
| 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | |
| a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | X | |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | | X |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | | X |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | | X |
| 34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | X | |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | X | |
| b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | X | |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | X |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | | X |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | X | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with columns for question numbers (1a-14b), descriptions, and Yes/No columns. Includes sub-questions for backup withholding, employee reporting, foreign accounts, and charitable contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (17), 1b (17), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NONE
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: ROBERT NAYLOR - 919-474-8370 PO BOX 12729, DURHAM, NC 27709-2729

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|----------------------------------|---|--|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) PAT NATHAN CHAIR | 0.50 | X | | X | | | 0. | 0. | 0. | |
| (2) FARAD ALI CHAIR ELECT | 0.50 | X | | X | | | 0. | 0. | 0. | |
| (3) TUCKER BARTLETT TREASURER | 0.50 | X | | X | | | 0. | 0. | 0. | |
| (4) MARK KUHN SECRETARY | 0.50 | X | | X | | | 0. | 0. | 0. | |
| (5) JAMES STEWART MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (6) DIANNE BIRCH MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (7) ANITA BROWN-GRAHAM MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (8) SHELDON FOX MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (9) EASTER MAYNARD MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (10) STEVEN PEARSON MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (11) LARRY ROCAMORA MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (12) MIKE SCHOENFELD MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (13) JAMES SPEED MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (14) CAROL TRESOLINI MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (15) TIM TROST MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (16) KATHRYN WILLIAMS MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |
| (17) PHAIL WYNN, JR. MEMBER | 0.50 | X | | | | | 0. | 0. | 0. | |

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|---|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (18) LORI O'KEEFE PRESIDENT & CEO | 40.00 | | | X | | | | 179,712. | 0. | 33,436. |
| (19) ROBERT NAYLOR CFO | 40.00 | | | X | | | | 135,716. | 0. | 28,633. |
| (20) ROBIN M BAREFOOT GENERAL COUNSEL | 40.00 | | | | | X | | 120,134. | 0. | 19,515. |
| (21) KENNETH BAROFF VP OF DONOR DEV | 40.00 | | | | | X | | 112,467. | 0. | 8,966. |
| (22) LINDSAY HARRELL CONTROLLER | 40.00 | | | | | X | | 100,721. | 0. | 14,555. |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Sub-total | | | | | | | | 648,750. | 0. | 105,105. |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | 0. | 0. | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 648,750. | 0. | 105,105. |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 5

| | Yes | No |
|--|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | | X |
| 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> | X | |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> | | X |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|--|--------------------------------|---------------------|
| COLONIAL CONSULTING, 750 THIRD AVENUE, 20TH FLOOR, NEW YORK, NY 10017 | INVESTMENT MGMT | 171,769. |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 1

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

| | | | (A) | (B) | (C) | (D) | |
|--|---|---|---------------|------------------------------------|----------------------------|--|--|
| | | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512 - 514 | |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a Federated campaigns | 1a | | | | | |
| | b Membership dues | 1b | | | | | |
| | c Fundraising events | 1c | | | | | |
| | d Related organizations | 1d | 59,108. | | | | |
| | e Government grants (contributions) | 1e | | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 35,654,188. | | | | |
| | g Noncash contributions included in lines 1a-1f: \$ | | 13,368,742. | | | | |
| | h Total. Add lines 1a-1f | | 35,713,296. | | | | |
| Program Service Revenue | 2 a _____ | Business Code | | | | | |
| | b _____ | | | | | | |
| | c _____ | | | | | | |
| | d _____ | | | | | | |
| | e _____ | | | | | | |
| | f All other program service revenue | | | | | | |
| | g Total. Add lines 2a-2f | | | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | 3,579,971. | | -40,266. | 3,620,237. | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | | |
| | 5 Royalties | | | | | | |
| | 6 a Gross rents | (i) Real | (ii) Personal | | | | |
| | | b Less: rental expenses | | | | | |
| | | c Rental income or (loss) | | | | | |
| | | d Net rental income or (loss) | | | | | |
| | 7 a Gross amount from sales of assets other than inventory | (i) Securities | (ii) Other | | | | |
| | | 28,472,518. | 7,681. | | | | |
| | | b Less: cost or other basis and sales expenses | | | | | |
| | | 22,525,129. | 2,027. | | | | |
| | c Gain or (loss) | | | | | | |
| | 5,947,389. | 5,654. | | | | | |
| | d Net gain or (loss) | | | 5,953,043. | | 5,953,043. | |
| | 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | a | | | | | |
| b Less: direct expenses | | b | | | | | |
| c Net income or (loss) from fundraising events | | | | | | | |
| 9 a Gross income from gaming activities. See Part IV, line 19 | a | | | | | | |
| | b Less: direct expenses | b | | | | | |
| | c Net income or (loss) from gaming activities | | | | | | |
| 10 a Gross sales of inventory, less returns and allowances | a | | | | | | |
| | b Less: cost of goods sold | b | | | | | |
| | c Net income or (loss) from sales of inventory | | | | | | |
| Miscellaneous Revenue | | Business Code | | | | | |
| 11 a OTHER INCOME | | 900099 | 288,642. | | | 288,642. | |
| b _____ | | | | | | | |
| c _____ | | | | | | | |
| d All other revenue | | | | | | | |
| e Total. Add lines 11a-11d | | | 288,642. | | | | |
| 12 Total revenue. See instructions. | | | 45,534,952. | 0. | -40,266. | 9,861,922. | |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ... | 25,260,559. | 25,260,559. | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | 200,000. | 200,000. | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 377,688. | 212,223. | 113,420. | 52,045. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 1,221,629. | 686,433. | 366,855. | 168,341. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 62,674. | 35,217. | 18,821. | 8,636. |
| 9 Other employee benefits | 183,420. | 103,064. | 55,081. | 25,275. |
| 10 Payroll taxes | 111,116. | 62,436. | 33,368. | 15,312. |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | 27,466. | | 13,733. | 13,733. |
| c Accounting | 62,994. | | 62,994. | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | 863,325. | | 863,325. | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) | 95,635. | 8,832. | 84,637. | 2,166. |
| 12 Advertising and promotion | 2,490. | | | 2,490. |
| 13 Office expenses | 54,754. | 25,720. | 18,236. | 10,798. |
| 14 Information technology | 97,044. | 54,529. | 29,142. | 13,373. |
| 15 Royalties | | | | |
| 16 Occupancy | 163,969. | 92,134. | 49,240. | 22,595. |
| 17 Travel | 23,682. | 13,307. | 7,112. | 3,263. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 43,563. | 16,853. | 15,792. | 10,918. |
| 20 Interest | | | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 108,914. | 61,199. | 32,707. | 15,008. |
| 23 Insurance | 15,038. | 8,450. | 4,516. | 2,072. |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a OTHER EXPENSES | 237,154. | 148,280. | 60,920. | 27,954. |
| b SERVICE TO FIELD | 156,671. | 156,671. | | |
| c PROFESSIONAL DEVELOP. | 22,701. | 12,756. | 6,817. | 3,128. |
| d DUES | 17,926. | 10,073. | 5,383. | 2,470. |
| e All other expenses | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 29,410,412. | 27,168,736. | 1,842,099. | 399,577. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

| | | (A) Beginning of year | | (B) End of year |
|---|--|--------------------------|--------------|---------------------|
| Assets | 1 Cash - non-interest-bearing | 3,253,331. | 1 | 3,473,185. |
| | 2 Savings and temporary cash investments | | 2 | |
| | 3 Pledges and grants receivable, net | | 3 | |
| | 4 Accounts receivable, net | 54,368. | 4 | 29,343. |
| | 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 50,671. | 9 | 39,262. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 998,179. | | |
| | b Less: accumulated depreciation | 10b 181,864. | 850,552. | 10c 816,315. |
| | 11 Investments - publicly traded securities | 118,903,370. | 11 | 137,178,444. |
| | 12 Investments - other securities. See Part IV, line 11 | 95,320,628. | 12 | 89,109,258. |
| | 13 Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| | 15 Other assets. See Part IV, line 11 | 6,529,497. | 15 | 13,341,202. |
| 16 Total assets. Add lines 1 through 15 (must equal line 34) | 224,962,417. | 16 | 243,987,009. | |
| Liabilities | 17 Accounts payable and accrued expenses | 63,153. | 17 | 73,534. |
| | 18 Grants payable | 790,521. | 18 | 822,671. |
| | 19 Deferred revenue | | 19 | |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | 17,948,216. | 21 | 16,160,332. |
| | 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D | 494,084. | 25 | 457,105. |
| | 26 Total liabilities. Add lines 17 through 25 | 19,295,974. | 26 | 17,513,642. |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | |
| | 27 Unrestricted net assets | 199,136,946. | 27 | 220,042,165. |
| | 28 Temporarily restricted net assets | 6,529,497. | 28 | 6,431,202. |
| | 29 Permanently restricted net assets | | 29 | |
| | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. | | | |
| | 30 Capital stock or trust principal, or current funds | | 30 | |
| | 31 Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| 33 Total net assets or fund balances | 205,666,443. | 33 | 226,473,367. | |
| 34 Total liabilities and net assets/fund balances | 224,962,417. | 34 | 243,987,009. | |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

| | | | |
|-----------|--|-----------|--------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 45,534,952. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 29,410,412. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 16,124,540. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 205,666,443. |
| 5 | Net unrealized gains (losses) on investments | 5 | 4,490,709. |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 191,675. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 226,473,367. |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? _____
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____

| | Yes | No |
|-----------|-----|----|
| 2a | | X |
| 2b | X | |
| 2c | X | |
| 3a | | X |
| 3b | | |

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

| | |
|--|---|
| Name of the organization TRIANGLE COMMUNITY FOUNDATION INC | Employer identification number 56-1380796 |
|--|---|

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the organization listed in your governing document? | | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
|------------------------------------|----------|---|---|----|---|---|
| | | | Yes | No | | |
| | | | | | | |
| | | | | | | |
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| | | | | | | |
| | | | | | | |
| Total | | | | | | |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|--|-------------|-------------|-------------|-------------|-------------|--------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 20,638,524. | 23,008,723. | 32,878,553. | 26,719,543. | 35,713,296. | 138,958,639. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 20,638,524. | 23,008,723. | 32,878,553. | 26,719,543. | 35,713,296. | 138,958,639. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 33,684,766. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 105,273,873. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|--|-------------|-------------|-------------|-------------|-------------|--------------------------|
| 7 Amounts from line 4 | 20,638,524. | 23,008,723. | 32,878,553. | 26,719,543. | 35,713,296. | 138,958,639. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | 2,797,955. | 2,557,585. | 2,404,103. | 3,044,460. | 3,620,237. | 14,424,340. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | 407,881. | 423,910. | 377,965. | 352,684. | 288,642. | 1,851,082. |
| 11 Total support. Add lines 7 through 10 | | | | | | 155,234,061. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|---|-----------|-------------------------------------|
| 14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) | 14 | 67.82 % |
| 15 Public support percentage from 2016 Schedule A, Part II, line 14 | 15 | 69.79 % |
| 16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input checked="" type="checkbox"/> |
| b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| b 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | <input type="checkbox"/> |

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public support. (Subtract line 7c from line 6.) | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ► | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | |

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

| | | |
|--|-----------|---|
| 15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2016 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|---|-----------|---|
| 17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2016 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

| | Yes | No |
|--|-----|----|
| 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i> | | |
| 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i> | | |
| 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i> | | |
| b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i> | | |
| c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i> | | |
| 4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i> | | |
| b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i> | | |
| c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i> | | |
| 5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i> | | |
| b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | | |
| c Substitutions only. Was the substitution the result of an event beyond the organization's control? | | |
| 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> | | |
| 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i> | | |
| 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i> | | |
| 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i> | | |
| b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i> | | |
| c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i> | | |
| 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i> | | |
| b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i> | | |

Part IV Supporting Organizations (continued)

| | Yes | No |
|--|-----|----|
| 11 Has the organization accepted a gift or contribution from any of the following persons? | | |
| a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? | | |
| b A family member of a person described in (a) above? | | |
| c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i> | | |

Section B. Type I Supporting Organizations

| | Yes | No |
|---|-----|----|
| 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i> | | |
| 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i> | | |

Section C. Type II Supporting Organizations

| | Yes | No |
|--|-----|----|
| 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i> | | |

Section D. All Type III Supporting Organizations

| | Yes | No |
|---|-----|----|
| 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | | |
| 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i> | | |
| 3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i> | | |

Section E. Type III Functionally Integrated Supporting Organizations

| | | |
|---|--|--|
| 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). | | |
| a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below. | | |
| b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below. | | |
| c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). | | |
| 2 Activities Test. Answer (a) and (b) below. | | |
| a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i> | | |
| b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i> | | |
| 3 Parent of Supported Organizations. Answer (a) and (b) below. | | |
| a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i> | | |
| b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i> | | |

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

| Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|---------------------------------|--|----------------|-----------------------------|
| 1 | Net short-term capital gain | 1 | |
| 2 | Recoveries of prior-year distributions | 2 | |
| 3 | Other gross income (see instructions) | 3 | |
| 4 | Add lines 1 through 3 | 4 | |
| 5 | Depreciation and depletion | 5 | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | |
| 7 | Other expenses (see instructions) | 7 | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | |

| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|----------------------------------|---|----------------|-----------------------------|
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | | |
| a | Average monthly value of securities | 1a | |
| b | Average monthly cash balances | 1b | |
| c | Fair market value of other non-exempt-use assets | 1c | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | |
| e | Discount claimed for blockage or other factors (explain in detail in Part VI): | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | |
| 4 | Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | |
| 6 | Multiply line 5 by .035 | 6 | |
| 7 | Recoveries of prior-year distributions | 7 | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | |

| Section C - Distributable Amount | | (A) Prior Year | Current Year |
|----------------------------------|---|----------------|--------------|
| 1 | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | |
| 2 | Enter 85% of line 1 | 2 | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | |
| 4 | Enter greater of line 2 or line 3 | 4 | |
| 5 | Income tax imposed in prior year | 5 | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | 6 | |
| 7 | <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). | | |

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

| Section D - Distributions | Current Year |
|---|--------------|
| 1 Amounts paid to supported organizations to accomplish exempt purposes | |
| 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | |
| 3 Administrative expenses paid to accomplish exempt purposes of supported organizations | |
| 4 Amounts paid to acquire exempt-use assets | |
| 5 Qualified set-aside amounts (prior IRS approval required) | |
| 6 Other distributions (describe in Part VI). See instructions. | |
| 7 Total annual distributions. Add lines 1 through 6. | |
| 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. | |
| 9 Distributable amount for 2017 from Section C, line 6 | |
| 10 Line 8 amount divided by line 9 amount | |

| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2017 | (iii) Distributable Amount for 2017 |
|--|-----------------------------|--|---|
| 1 Distributable amount for 2017 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2017 | | | |
| a | | | |
| b From 2013 | | | |
| c From 2014 | | | |
| d From 2015 | | | |
| e From 2016 | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2017 distributable amount | | | |
| i Carryover from 2012 not applied (see instructions) | | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 Distributions for 2017 from Section D, line 7: \$ | | | |
| a Applied to underdistributions of prior years | | | |
| b Applied to 2017 distributable amount | | | |
| c Remainder. Subtract lines 4a and 4b from 4. | | | |
| 5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions. | | | |
| 6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions. | | | |
| 7 Excess distributions carryover to 2018. Add lines 3j and 4c. | | | |
| 8 Breakdown of line 7: | | | |
| a Excess from 2013 | | | |
| b Excess from 2014 | | | |
| c Excess from 2015 | | | |
| d Excess from 2016 | | | |
| e Excess from 2017 | | | |

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
 (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2013 AMOUNT: \$ 407,881.

2014 AMOUNT: \$ 423,910.

2015 AMOUNT: \$ 377,965.

2016 AMOUNT: \$ 352,684.

2017 AMOUNT: \$ 288,642.

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

TRIANGLE COMMUNITY FOUNDATION INC

Employer identification number

56-1380796

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (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 contributions.

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 ▶ \$ _____

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), 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).

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 TRIANGLE COMMUNITY FOUNDATION INC | Employer identification number 56-1380796 |
|--|---|

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|-----------------------------------|----------------------------|--|
| 1 | <hr/> <hr/> <hr/> | \$ 12,500,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 2 | <hr/> <hr/> <hr/> | \$ 3,586,429. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 3 | <hr/> <hr/> <hr/> | \$ 2,302,613. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| 4 | <hr/> <hr/> <hr/> | \$ 2,195,998. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| 5 | <hr/> <hr/> <hr/> | \$ 1,741,169. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |
| 6 | <hr/> <hr/> <hr/> | \$ 1,065,439. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|--|---|
| Name of organization TRIANGLE COMMUNITY FOUNDATION INC | Employer identification number 56-1380796 |
|--|---|

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|-------------------------|-----------------------------------|----------------------------|---|
| 7 | <hr/> <hr/> <hr/> | \$ <u>1,000,000.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| 8 | <hr/> <hr/> <hr/> | \$ <u>932,262.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| <hr/> <hr/> <hr/> | <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| <hr/> <hr/> <hr/> | <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| <hr/> <hr/> <hr/> | <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |
| <hr/> <hr/> <hr/> | <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.) |

| | |
|---|--|
| Name of organization TRIANGLE COMMUNITY FOUNDATION INC | Employer identification number 56-1380796 |
|---|--|

Part II Noncash Property (see instructions). Use duplicate copies of Part 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 |
|------------------------------|---|---|----------------------|
| 3 | SECURITIES - PUBLICLY TRADED _____ _____ _____ | \$ 1,979,713. | 12/28/17 |
| 4 | SECURITIES - PUBLICLY TRADED _____ _____ _____ | \$ 2,195,998. | 04/25/18 |
| 5 | PRIVATE SECURITIES _____ _____ _____ | \$ 1,741,169. | 01/10/18 |
| 6 | SECURITIES - PUBLICLY TRADED _____ _____ _____ | \$ 1,065,439. | 11/01/17 |
| | _____ _____ _____ | \$ _____ | _____ |
| | _____ _____ _____ | \$ _____ | _____ |

| | |
|---|--|
| Name of organization TRIANGLE COMMUNITY FOUNDATION INC | Employer identification number 56-1380796 |
|---|--|

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---|---------------------|--|-------------------------------------|
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2017
Open to Public Inspection

Name of the organization TRIANGLE COMMUNITY FOUNDATION INC
Employer identification number 56-1380796

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|---|------------------------------|
| 1 Total number at end of year | 477 | |
| 2 Aggregate value of contributions to (during year) | 33,299,833. | |
| 3 Aggregate value of grants from (during year) | 22,353,988. | |
| 4 Aggregate value at end of year | 156,625,785. | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

| | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | 106,809,705. | 100,685,128. | 107,723,715. | 108,571,916. | 92,670,899. |
| b Contributions | 1,594,428. | 368,635. | 961,669. | 3,533,326. | 7,621,877. |
| c Net investment earnings, gains, and losses | 8,536,493. | 12,873,220. | -3,059,670. | 746,383. | 13,254,028. |
| d Grants or scholarships | 4,642,407. | 4,619,208. | 3,993,938. | 3,641,220. | 3,606,888. |
| e Other expenditures for facilities and programs | | | | 1,486,690. | 1,368,000. |
| f Administrative expenses | 780,114. | 2,498,070. | 946,648. | | |
| g End of year balance | 111,518,105. | 106,809,705. | 100,685,128. | 107,723,715. | 108,571,916. |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 100.00 %
- b Permanent endowment %
- c Temporarily restricted endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

| | Yes | No |
|--------|-----|----|
| 3a(i) | | X |
| 3a(ii) | | X |
| 3b | | |

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|--|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | | | |
| d Equipment | | | | |
| e Other | | 998,179. | 181,864. | 816,315. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) | | | | 816,315. |

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) CASH EQUIVALENTS | 10,199,443. | END-OF-YEAR MARKET VALUE |
| (B) CERTIFICATES OF DEPOSIT | 2,319,635. | END-OF-YEAR MARKET VALUE |
| (C) ALTERNATIVE INVESTMENTS | 76,476,177. | END-OF-YEAR MARKET VALUE |
| (D) CASH SURRENDER VALUE OF LIFE | | |
| (E) INSURANCE POLICY | 114,003. | END-OF-YEAR MARKET VALUE |
| (F) | | |
| (G) | | |
| (H) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | 89,109,258. | |

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | |

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|----------------|
| (1) BENEFICIAL INTEREST IN SPLIT-INTEREST AGREEMENTS | 6,431,202. |
| (2) LOANS RECEIVABLE | 6,910,000. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) | 13,341,202. |

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---|----------------|
| (1) Federal income taxes | |
| (2) DEFERRED RENT LIABILITY | 457,105. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | 457,105. |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | |
|----------|--|----------------------|-----------|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 49,555,702. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains (losses) on investments | 2a 4,490,709. | | |
| b | Donated services and use of facilities | 2b | | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d 387,956. | | |
| e | Add lines 2a through 2d | | 2e | 4,878,665. |
| 3 | Subtract line 2e from line 1 | | 3 | 44,677,037. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a 857,915. | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | 857,915. |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.) | | 5 | 45,534,952. |

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

| | | | | |
|----------|---|--------------------|-----------|-------------|
| 1 | Total expenses and losses per audited financial statements | | 1 | 28,707,954. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d 155,457. | | |
| e | Add lines 2a through 2d | | 2e | 155,457. |
| 3 | Subtract line 2e from line 1 | | 3 | 28,552,497. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a 857,915. | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | | 4c | 857,915. |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | | 5 | 29,410,412. |

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART IV, LINE 2B:

AGENCY FUNDS ARE CREATED BY A NONPROFIT AGENCY TO BENEFIT THAT AGENCY.

THAT IS, THE AGENCY IS BOTH DONOR AND BENEFICIARY. THE AGENCY FUND IS

ESTABLISHED SO THAT THE DONOR/BENEFICIARY CAN UTILIZE THE INVESTMENT AND

ADMINISTRATIVE SERVICES OF THE FOUNDATION IN EXCHANGE FOR PAYING THE

NORMAL 1% ADMINISTRATIVE AND OTHER INVESTMENT MANAGEMENT FEES.

PART V, LINE 4:

THE ENDOWED FUNDS CAN MAKE GRANTS TO ANY US 501(C)(3) IN GOOD STANDING.

PART X, LINE 2:

MANAGEMENT EVALUATED THE TAX POSITIONS OF THE FOUNDATION AND ITS

Part XIII Supplemental Information *(continued)*

AFFILIATED SUPPORTING ORGANIZATIONS AND CONCLUDED THAT THE FOUNDATION AND
ITS AFFILIATED SUPPORTING ORGANIZATIONS HAD TAKEN NO UNCERTAIN TAX
POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY
WITH THE PROVISIONS OF THE INCOME TAXES TOPIC OF THE FASB ASC. THE
FOUNDATION FILES A FORM 990-T IN ACCORDANCE WITH APPLICABLE U.S. FEDERAL
REGULATIONS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS 191,673.

DURHAM ARTS COUNCIL REVENUE INCLUDED IN CONSOLIDATED

FINANCIALS 56,983.

TCF REAL ESTATE FOUNDATION REVENUE INCLUDED IN CONSOLIDATED

FINANCIALS 139,300.

TOTAL TO SCHEDULE D, PART XI, LINE 2D 387,956.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

DURHAM ARTS COUNCIL EXPENSES INCLUDED IN CONSOLIDATED

FINANCIALS 23,633.

TCF REAL ESTATE FOUNDATION EXPENSES INCLUDED IN

CONSOLIDATED FINANCIALS 131,824.

TOTAL TO SCHEDULE D, PART XII, LINE 2D 155,457.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

| | |
|--|---|
| Name of the organization TRIANGLE COMMUNITY FOUNDATION INC | Employer identification number 56-1380796 |
|--|---|

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

| (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in the region | (d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in the region | (f) Total expenditures for and investments in the region |
|---|-------------------------------------|--|--|--|--|
| CENTRAL AMERICA AND THE CARIBBEAN | 0 | 0 | INVESTMENTS | | 21,181,621. |
| EUROPE (INCLUDING ICELAND & GREENLAND) | 0 | 0 | INVESTMENTS | | 772,195. |
| NORTH AMERICA | 0 | 0 | GRANTS TO RECIPIENTS | | 200,000. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 3 a Sub-total | 0 | 0 | | | 22,153,816. |
| b Total from continuation sheets to Part I | 0 | 0 | | | 0. |
| c Totals (add lines 3a and 3b) | 0 | 0 | | | 22,153,816. |

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of noncash assistance | (h) Description of noncash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|-------------------------------|--|---------------|---|--------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
| | | NORTH AMERICA | COMPLETION OF DICTIONARY OF OLD ENGLISH | 200,000. | WIRE | 0. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **0**

3 Enter total number of other organizations or entities **1**

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

ORGANIZATION OBTAINS SIGNED GRANT AGREEMENTS FROM THE DONEE ORGANIZATIONS. THE DONEE ORGANIZATIONS THEN PROVIDE TCF WITH FINANCIAL REPORTS AND PROJECT UPDATES.

PART I, LINE 3:

THE ORGANIZATION USES GAAP TO REPORT EXPENDITURES IN FOREIGN REGIONS.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2017

**Open to Public
Inspection**

Name of the organization **TRIANGLE COMMUNITY FOUNDATION INC** Employer identification number **56-1380796**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|--|----------------|--|---------------------------------|--|--|--|---|
| 5190 ROBOBOOSTERS, INC. PO BOX 5371 CARY, NC 27512 | 47-1919615 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| A HELPING HAND 1502 W. NC HWY 54 DURHAM, NC 27707 | 56-1923835 | 501(C)(3) | 43,500. | 0. | | | GENERAL PURPOSE |
| A PLACE AT THE TABLE EBENEZER ALLEY, SUITE C RALEIGH, NC 27611 | 47-2959935 | 501(C)(3) | 28,000. | 0. | | | GENERAL PURPOSE |
| ABILENE CHRISTIAN UNIVERSITY ACU BOX 29132 ABILENE, TX 79699 | 75-0851900 | | 500,000. | 0. | | | GENERAL PURPOSE |
| ACHIEVEMENT ACADEMY OF DURHAM 2614 CREST STREET DURHAM, NC 27705 | 41-2167219 | | 36,300. | 0. | | | GENERAL PURPOSE |
| ACKLAND ART MUSEUM CB #3400 CHAPEL HILL, NC 27599-3400 | | | 17,750. | 0. | | | GENERAL PURPOSE |

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **581.**
- 3** Enter total number of other organizations listed in the line 1 table **0.**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2017)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| AFFORDABLE COMMUNITY RESIDENCE ASSOCIATION - PO BOX 25265 - DURHAM, NC 27702-5265 | 56-1609845 | | 23,005. | 0. | | | GENERAL PURPOSE |
| ALICE AYCOCK POE CENTER FOR HEALTH EDUCATION - 224 SUNNYBROOK ROAD - RALEIGH, NC 27610 | 56-1500678 | | 12,926. | 0. | | | GENERAL PURPOSE |
| ALLEGHANY MEMORIAL HOSPITAL 233 DOCTORS ST. SPARTA, NC 28675 | 56-0525657 | | 35,000. | 0. | | | GENERAL PURPOSE |
| ALLIANCE FOR CLIMATE EDUCATION 4696 BROADWAY BOULDER, CO 80304 | 26-3106566 | 501(C)(3) | 100,000. | 0. | | | GENERAL PURPOSE |
| ALLIANCE MEDICAL MINISTRY 101 DONALD ROSS DR. RALEIGH, NC 27610 | 56-2168673 | | 28,550. | 0. | | | GENERAL PURPOSE |
| ALPHA TAU OMEGA FOUNDATION 32 . WASHINGTON STREET INDIANAPOLIS, IN 46204 | 23-7154214 | | 19,242. | 0. | | | GENERAL PURPOSE |
| ALS THERAPY DEVELOPMENT FOUNDATION INC. - 300 TECHNOLOGY SQUARE - CAMBRIDGE, MA 02139 | 04-3462719 | 501(C)(3) | 12,700. | 0. | | | GENERAL PURPOSE |
| ALZHEIMER'S ASSOCIATION 225 N. MICHIGAN AVE. CHICAGO, IL 60601-7633 | 13-3039601 | | 10,700. | 0. | | | GENERAL PURPOSE |
| AMERICAN CHEMICAL SOCIETY - NORTH CAROLINA SECTION - 101 LONGWOOD PLACE - CHAPEL HILL, NC 27514 | 56-6049892 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| AMERICAN CIVIL LIBERTIES UNION OF NC LEGAL FOUNDATION - PO BOX 28004 - RALEIGH, NC 27611 | 56-1019644 | | 27,000. | 0. | | | GENERAL PURPOSE |
| AMERICAN DIABETES ASSOCIATION - CHARLOTTE - 1300 BAXTER STREET - CHARLOTTE, NC 28204 | 13-1623888 | | 17,863. | 0. | | | GENERAL PURPOSE |
| AMERICAN HEART ASSOCIATION, NC COUNCIL - 3131 RDU CENTER DR. - MORRISVILLE, NC 27560-7687 | 13-5613797 | | 14,029. | 0. | | | GENERAL PURPOSE |
| AMERICAN LUNG ASSOCIATION IN NORTH CAROLINA - 514 DANIELS STREET - RALEIGH, NC 27605 | 13-1632524 | | 7,807. | 0. | | | GENERAL PURPOSE |
| AMERICAN RED CROSS PO BOX 37839 BOONE, IA 50037-0839 | 53-0196605 | | 71,772. | 0. | | | GENERAL PURPOSE |
| AMERICAN RED CROSS, GREATER HOUSTON AREA CHAPTER - 2700 SOUTHWEST FREEWAY - HOUSTON, TX 77098 | 74-1109757 | | 13,910. | 0. | | | GENERAL PURPOSE |
| AMERICAN SOCIETY FOR THE PREVENTION OF CRUELTY TO ANIMALS - PO BOX 96929 - WASHINGTON, DC 20090-6929 | 13-1623829 | | 22,593. | 0. | | | GENERAL PURPOSE |
| AMERICAN SUPPORT FOR ISRAEL PO BOX 3263 WASHINGTON, DC 20010-0263 | 26-3383926 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| AMERICARES FOUNDATION 88 HAMILTON AVE. STAMFORD, CT 06902 | 06-1008595 | | 5,550. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ANDREW JACKSON'S HERMITAGE 4580 RACHEL'S LANE NASHVILLE, TN 37076 | 62-0478087 | | 15,500. | 0. | | | GENERAL PURPOSE |
| ANIMAL PROTECTION SOCIETY OF DURHAM - 2117 EAST CLUB BLVD. - DURHAM, NC 27704 | 56-1047100 | | 6,300. | 0. | | | GENERAL PURPOSE |
| APPALACHIAN STATE UNIVERSITY FOUNDATION - ADVANCEMENT SERVICES - BOONE, NC 28608 | 23-7099379 | | 53,250. | 0. | | | GENERAL PURPOSE |
| ARROWMONT SCHOOL OF ARTS AND CRAFTS - 556 PARKWAY - GATLINBURG, TN 37738 | 58-2007394 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| ARTSCENTER 300-G E. MAIN ST. CARRBORO, NC 27510 | 51-0198497 | | 6,200. | 0. | | | GENERAL PURPOSE |
| ARTSPACE, INC. 201 E. DAVIE ST. RALEIGH, NC 27601 | 58-1450132 | | 5,000. | 0. | | | GENERAL PURPOSE |
| ARTSPLOSURE P.O. BOX 391 RALEIGH, NC 27602-0391 | 58-1387567 | | 7,850. | 0. | | | GENERAL PURPOSE |
| ASSOCIATION FOR THE PRESERVATION OF THE ENO RIVER VALLEY, INC. - 4404 GUESS ROAD - DURHAM, NC 27712 | 56-1134204 | | 31,685. | 0. | | | GENERAL PURPOSE |
| ASTRAEA LESBIAN FOUNDATION FOR JUSTICE - 116 EAST 16TH STREET - NEW YORK, NY 10003 | 13-2992977 | 501(C)(3) | 7,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ASTRONAUT SCHOLARSHIP FOUNDATION INC. - 651 DANVILLE DRIVE, SUITE 101 - ORLANDO, FL 32825 | 59-2448775 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| AUGUSTINE PROJECT (HOLY FAMILY EPISCOPAL CHURCH) - 200 HAYES ROAD - CHAPEL HILL, NC 27517 | 56-0786760 | | 7,000. | 0. | | | GENERAL PURPOSE |
| AUTHORS IN MOORE SCHOOLS PROGRAM 55 SHADOW LANE WHISPERING PINES, NC 28327 | 82-3976920 | 501(C)(3) | 20,000. | 0. | | | GENERAL PURPOSE |
| AUTISM SOCIETY OF NC 5121 KINGDOM WAY RALEIGH, NC 27607 | 23-7087887 | | 13,500. | 0. | | | GENERAL PURPOSE |
| AZIZ AND GWEN SANCAR FOUNDATION 311 WEST UNIVERSITY DRIVE CHAPEL HILL, NC 27516 | 26-0871109 | | 7,750. | 0. | | | GENERAL PURPOSE |
| BALD HEAD ISLAND CONSERVANCY INC. PO BOX 3109 BALD HEAD ISLAND, NC 28461 | 58-1574496 | | 84,000. | 0. | | | GENERAL PURPOSE |
| BAND TOGETHER PO BOX 6445 RALEIGH, NC 27628-6445 | 56-2273756 | | 5,000. | 0. | | | GENERAL PURPOSE |
| BARNABAS INTERNATIONAL PO BOX 11211 ROCKFORD, IL 61126 | 36-3535053 | 501(C)(3) | 6,000. | 0. | | | GENERAL PURPOSE |
| BELL CAROLINAS 601 E. 5TH STREET, SUITE 460 CHARLOTTE, NC 28202 | 04-3182053 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| BETH-EL SYNAGOGUE 1004 WATTS ST. DURHAM, NC 27701 | 56-0629337 | | 100,448. | 0. | | | GENERAL PURPOSE |
| BIG BROTHERS BIG SISTERS MOUNTAIN REGION - 1229 S ST FRANCIS DR STE C - SANTA FE, NM 87505 | 85-0276498 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| BIG BROTHERS BIG SISTERS OF THE TRIANGLE, INC. - 808 AVIATION PARKWAY - MORRISVILLE, NC 27560 | 56-2109717 | | 63,350. | 0. | | | GENERAL PURPOSE |
| BLACKNALL MEMORIAL PRESBYTERIAN CHURCH - 1902 PERRY ST. - DURHAM, NC 27705 | 23-7093809 | | 5,000. | 0. | | | GENERAL PURPOSE |
| BLUE HILL COMMUNITY DEVELOPMENT PO BOX 438 BLUE HILL, ME 04614 | 82-0663285 | 501(C)(3) | 6,000. | 0. | | | GENERAL PURPOSE |
| BOOK HARVEST 2501 UNIVERSITY DRIVE DURHAM, NC 27707 | 45-2610533 | 501(C)(3) | 38,024. | 0. | | | GENERAL PURPOSE |
| BOOMERANG YOUTH, INC 825-A NORTH ESTES DRIVE CHAPEL HILL, NC 27514 | 47-4660452 | 501(C)(3) | 33,000. | 0. | | | GENERAL PURPOSE |
| BOTANICAL GARDEN FOUNDATION, INC. UNC AT CHAPEL HILL CHAPEL HILL, NC 27599-3375 | 56-6076622 | | 23,800. | 0. | | | GENERAL PURPOSE |
| BOY SCOUTS OF AMERICA, OCCONEECHEE COUNCIL - 3231 ATLANTIC AVENUE - RALEIGH, NC 27604-1675 | 56-0529984 | | 64,790. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| BOYS & GIRLS CLUBS OF DURHAM AND ORANGE COUNTIES - PO BOX 446 - DURHAM, NC 27702-0446 | 56-6001906 | | 14,504. | 0. | | | GENERAL PURPOSE |
| BOYS AND GIRLS CLUB OF WAKE COUNTY 701 N RALEIGH BLVD RALEIGH, NC 27610 | 56-0863051 | | 117,725. | 0. | | | GENERAL PURPOSE |
| BOYS AND GIRLS CLUBS OF CENTRAL CAROLINA, INC. - 1013 CARTHAGE STREET - SANFORD, NC 27330 | 56-1923703 | | 15,000. | 0. | | | GENERAL PURPOSE |
| BOYS AND GIRLS CLUBS OF NORTH CENTRAL NORTH CAROLINA - P.O. BOX 176 - OXFORD, NC 27565 | 56-2525793 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| BRAIN & BEHAVIOR RESEARCH FOUNDATION - 90 PARK AVENUE - NEW YORK, NY 10016-1301 | 31-1020010 | | 9,100. | 0. | | | GENERAL PURPOSE |
| BRIDGE II SPORTS 3729 MURPHY SCHOOL ROAD DURHAM, NC 27705-8009 | 20-8577055 | 501(C)(3) | 35,000. | 0. | | | GENERAL PURPOSE |
| BRIDGE TO TURKIYE 100 FOX BRIAR LANE CARY, NC 27518 | 58-2678580 | | 12,550. | 0. | | | GENERAL PURPOSE |
| BROOKS AVENUE CHURCH OF CHRIST 700 BROOKS AVE. RALEIGH, NC 27607 | 56-6085964 | | 300,000. | 0. | | | GENERAL PURPOSE |
| BURBANK FREEWILL BAPTIST CHURCH 147 HEATON RIDGE ROAD ROAN MOUNTAIN, TN 37687 | 10-0006486 | | 6,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| BURNING COAL THEATRE COMPANY 224 POLK ST RALEIGH, NC 27675 | 56-1910148 | | 5,000. | 0. | | | GENERAL PURPOSE |
| CAMP CORRAL 801 N. WEST STREET RALEIGH, NC 27603 | 45-3555807 | 501(C)(3) | 65,250. | 0. | | | GENERAL PURPOSE |
| CAMPAIGN4CHANGE PO BOX 3355 DURHAM, NC 27713 | 26-0096724 | | 25,000. | 0. | | | GENERAL PURPOSE |
| CAMPBELL UNIVERSITY DIVINITY SCHOOL - P.O. BOX 4050 - BUIES CREEK, NC 27506 | | 501(C)(3) | 8,248. | 0. | | | GENERAL PURPOSE |
| CAMPBELL UNIVERSITY LAW SCHOOL 225 HILLSBOROUGH STREET, SUTE 401 RALEIGH, NC 27603 | 56-0529940 | 501(C)(3) | 250,000. | 0. | | | GENERAL PURPOSE |
| CAMPUS CRUSADE FOR CHRIST INC. PO BOX 628222 ORLANDO, FL 32862-8222 | 95-6006173 | 501(C)(3) | 6,000. | 0. | | | GENERAL PURPOSE |
| CARDINAL HAYES HIGH SCHOOL OFFICE OF DEVELOPMENT AND ALUMNI RE BRONX, NY 10451 | 27-0670928 | 501(C)(3) | 25,000. | 0. | | | GENERAL PURPOSE |
| CARE - CHILD ABUSE RESOURCE AND EDUCATION - P.O. BOX 1541 - LITTLETON, NC 27850 | 56-2108200 | | 120,000. | 0. | | | GENERAL PURPOSE |
| CARING COMMUNITY FOUNDATION PO BOX 1364 CARY, NC 27512 | 20-0036976 | | 8,377. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CAROLINA BALLET, INC. 3401 ATLANTIC AVE. RALEIGH, NC 27604 | 56-1445383 | | 58,000. | 0. | | | GENERAL PURPOSE |
| CAROLINA FARM STEWARDSHIP ASSOCIATION - P.O. BOX 448 - PITTSBORO, NC 27312 | 24-0040340 | | 12,500. | 0. | | | GENERAL PURPOSE |
| CAROLINA FRIENDS SCHOOL 4809 FRIENDS SCHOOL ROAD DURHAM, NC 27705 | 56-0812560 | | 18,250. | 0. | | | GENERAL PURPOSE |
| CAROLINA PERFORMING ARTS - UNC- CHAPEL HILL - 134 EAST FRANKLIN STREET - CHAPEL HILL, NC 27599-3233 | 56-6001393 | | 9,350. | 0. | | | GENERAL PURPOSE |
| CAROLINA TIGER RESCUE 1940 HANKS CHAPEL RD PITTSBORO, NC 27312 | 56-1522499 | | 10,500. | 0. | | | GENERAL PURPOSE |
| CAROLINAS GOLF ASSOCIATION 140 RIDGE ROAD SOUTHERN PINES, NC 28387 | 56-0509290 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| CARTERET COUNTY DOMESTIC VIOLENCE PROGRAM INC. - PO BOX 2279 - MOREHEAD CITY, NC 28557 | 56-1702953 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| CARY ACADEMY 1500 N. HARRISON AVE. CARY, NC 27513 | 56-1934619 | | 33,133. | 0. | | | GENERAL PURPOSE |
| CATAWBA COLLEGE - DEVELOPMENT OFFICE - 2300 W INNES ST. - SALISBURY, NC 28144 | 56-0530251 | | 20,000. | 0. | | | GENERAL PURPOSE |

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CATHOLIC CHARITIES OF THE DIOCESE OF RALEIGH - 7200 STONEHENGE DRIVE - RALEIGH, NC 27613 | 56-0529943 | | 12,000. | 0. | | | GENERAL PURPOSE |
| CATHOLIC DIOCESE OF RALEIGH 7200 STONEHENGE DRIVE RALEIGH, NC 27613 | 56-0591293 | | 10,000. | 0. | | | GENERAL PURPOSE |
| CENTER FOR CHILD AND FAMILY HEALTH NC - 1121 W. CHAPEL HILL STREET - DURHAM, NC 27701 | 58-1446309 | | 21,926. | 0. | | | GENERAL PURPOSE |
| CENTER FOR DEATH PENALTY LITIGATION - 123 W. MAIN STREET - DURHAM, NC 27701 | 56-1939274 | | 5,500. | 0. | | | GENERAL PURPOSE |
| CENTER FOR DOCUMENTARY STUDIES 1317 W. PETTIGREW ST. DURHAM, NC 27705 | 56-1655039 | | 5,000. | 0. | | | GENERAL PURPOSE |
| CENTER FOR HUMAN-EARTH RESTORATION 6814 FAYETTEVILLE RD RALEIGH, NC 27603 | 45-4460204 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| CENTER FOR VOLUNTEER CAREGIVING 1150 SOUTHEAST MAYNARD ROAD CARY, NC 27511 | 58-2067482 | | 25,500. | 0. | | | GENERAL PURPOSE |
| CENTRAL CAROLINA COMMUNITY COLLEGE FOUNDATION - 1105 KELLY DR. - SANFORD, NC 27330 | 56-1644218 | | 5,000. | 0. | | | GENERAL PURPOSE |
| CEO ROUNDTABLE ON CANCER INC. 100 SAS CAMPUS DR CARY, NC 27513 | 65-1230448 | 501(C)(3) | 40,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CHABAD OF CARY 4104 GRACE PARK DRIVE MORRISVILLE, NC 27560 | 27-0018061 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| CHAMBER ORCHESTRA OF THE TRIANGLE 1213 E. FRANKLIN STREET CHAPEL HILL, NC 27514 | 56-1610461 | | 4,300. | 0. | | | GENERAL PURPOSE |
| CHAPEL HILL - CARRBORO HUMAN RIGHTS CENTER, INC. - PO BOX 461 - CARRBORO, NC 27510-2078 | 26-3608741 | | 18,000. | 0. | | | GENERAL PURPOSE |
| CHAPEL HILL - CARRBORO MEALS ON WHEELS - PO BOX 2102 - CHAPEL HILL, NC 27514 | 59-1721954 | | 19,300. | 0. | | | GENERAL PURPOSE |
| CHAPEL HILL-CARRBORO PUBLIC SCHOOL FOUNDATION - PO BOX 877 - CARRBORO, NC 27510 | 56-1421977 | | 38,050. | 0. | | | GENERAL PURPOSE |
| CHAPEL OF THE CROSS 304 E. FRANKLIN STREET CHAPEL HILL, NC 27514 | 56-0623934 | | 3,676. | 0. | | | GENERAL PURPOSE |
| CHARLES HOUSE ASSOCIATION 7511 SUNRISE RD CHAPEL HILL, NC 27514 | 58-1582881 | | 15,500. | 0. | | | GENERAL PURPOSE |
| CHARLOTTE RESCUE MISSION PO BOX 33000 CHARLOTTE, NC 28233-3000 | 56-0571223 | | 5,000. | 0. | | | GENERAL PURPOSE |
| CHATHAM CARES COMMUNITY PHARMACY 127 E. RALEIGH ST. SILER CITY, NC 27344 | 41-2170926 | | 10,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CHATHAM CO. ARTS COUNCIL PO BOX 418 PITTSBORO, NC 27312 | 56-1621611 | | 12,500. | 0. | | | GENERAL PURPOSE |
| CHATHAM CO. COUNCIL ON AGING PO BOX 715 PITTSBORO, NC 27312 | 56-1084260 | | 22,264. | 0. | | | GENERAL PURPOSE |
| CHATHAM COUNTY LITERACY COUNCIL INC. - PO BOX 1696 - PITTSBORO, NC 27312 | 58-1870076 | | 15,500. | 0. | | | GENERAL PURPOSE |
| CHATHAM EDUCATION FOUNDATION PO BOX 1518 PITTSBORO, NC 27312 | 56-1796990 | | 2,250. | 0. | | | GENERAL PURPOSE |
| CHATHAM HABITAT FOR HUMANITY PO BOX 883 PITTSBORO, NC 27312 | 56-1689599 | | 14,263. | 0. | | | GENERAL PURPOSE |
| CHAUTAUQUA FOUNDATION INC. P.O. BOX 28 CHAUTAUQUA, NY 14722 | 16-6028421 | 501(C)(3) | 6,000. | 0. | | | GENERAL PURPOSE |
| CHEYENNE FOUNDATION 9401 GLENWOOD AVE. RALEIGH, NC 27617 | 56-2096192 | | 10,000. | 0. | | | GENERAL PURPOSE |
| CHILDREN'S CRANIOFACIAL ASSOCIATION - 13140 COIT ROAD - DALLAS, TX 75240 | 75-2265649 | | 31,200. | 0. | | | GENERAL PURPOSE |
| CHILDREN'S HOME SOCIETY OF NC PO BOX 14608 GREENSBORO, NC 27415 | 56-0529946 | | 26,800. | 0. | | | GENERAL PURPOSE |

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CHRIST BAPTIST CHURCH 400 NEWTON RD. RALEIGH, NC 27615 | | | 6,000. | 0. | | | GENERAL PURPOSE |
| CHRIST CHURCH 120 EAST EDENTON STREET RALEIGH, NC 27601 | 56-0530247 | | 11,300. | 0. | | | GENERAL PURPOSE |
| CHRISTIAN CHILDREN OF THE WORLD 5665 MEADOWS RD LAKE OSWEGO, OR 97035 | 93-1098358 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| CHRISTIAN COMMUNITY IN ACTION, DBA - DORCAS MINISTRIES - 187 HIGH HOUSE RD. - CARY, NC 27511 | 56-0953873 | | 25,500. | 0. | | | GENERAL PURPOSE |
| CHRISTIAN MEDICAL AND DENTAL ASSOCIATIONS - PO BOX 7500 - BRISTOL, TN 37621-7500 | 36-2284267 | | 10,000. | 0. | | | GENERAL PURPOSE |
| CHRISTIAN UNITED OUTREACH CENTER OF LEE COUNTY - PO BOX 2217 - SANFORD, NC 27331-2217 | 83-0397205 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| CHURCH OF THE HOLY FAMILY 200 HAYES ROAD CHAPEL HILL, NC 27517 | 58-1488733 | | 18,000. | 0. | | | GENERAL PURPOSE |
| CIVIL WAR TRUST 1156 15 STREET NW WASHINGTON, DC 20005 | 54-1426643 | | 15,000. | 0. | | | GENERAL PURPOSE |
| CLASSIC STAGE COMPANY 136 E 13TH ST NEW YORK, NY 10003 | 23-7025308 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CLUB NOVA COMMUNITY INC. 103 D WEST MAIN STREET CARRBORO, NC 27510 | 27-0103430 | | 34,189. | 0. | | | GENERAL PURPOSE |
| COMMUNITIES IN SCHOOLS OF DURHAM 3412 WESTGATE DRIVE DURHAM, NC 27707 | 56-1791366 | | 5,000. | 0. | | | GENERAL PURPOSE |
| COMMUNITIES IN SCHOOLS OF WAKE COUNTY - 971 HARP STREET - RALEIGH, NC 27604 | 56-1704570 | | 36,750. | 0. | | | GENERAL PURPOSE |
| COMMUNITY ALLIANCE DEDICATED TO REIMAGINING EDUCATION - 5799 RITTENHOUSE SHORE DRIVE - AUSTIN, TX 78734 | 47-4412984 | 501(C)(3) | 6,000. | 0. | | | GENERAL PURPOSE |
| COMMUNITY ALTERNATIVES FOR SUPPORTIVE ABODES (CASA) - PO BOX 12545 - RALEIGH, NC 27605 | 56-1778714 | | 13,000. | 0. | | | GENERAL PURPOSE |
| COMMUNITY EMPOWERMENT FUND 208 N. COLUMBIA STREET STE. 100 CHAPEL HILL, NC 27514 | 27-0428981 | 501(C)(3) | 31,250. | 0. | | | GENERAL PURPOSE |
| COMMUNITY FOUNDATION BOULDER COUNTY - 1123 SPRUCE STREET - BOULDER, CO 80302 | 84-1171836 | 501(C)(3) | 164,441. | 0. | | | GENERAL PURPOSE |
| COMMUNITY FOUNDATION OF GREATER GREENSBORO - 330 S. GREEN ST, SUITE 100 - GREENSBORO, NC 27401 | 56-1380249 | | 6,000. | 0. | | | GENERAL PURPOSE |
| COMMUNITY HEALTH COALITION PO BOX 15176 DURHAM, NC 27704 | 56-2269385 | | 14,620. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| COMMUNITY HOME TRUST PO BOX 2315 CHAPEL HILL, NC 27515 | 56-2141179 | | 14,000. | 0. | | | GENERAL PURPOSE |
| COMMUNITY SUCCESS INITIATIVE, INC. P.O. BOX 61114 RALEIGH, NC 27661 | 16-1702165 | | 20,250. | 0. | | | GENERAL PURPOSE |
| COMPASS CENTER FOR WOMEN AND FAMILIES - PO BOX 1057 - CHAPEL HILL, NC 27514 | 56-1271474 | | 9,600. | 0. | | | GENERAL PURPOSE |
| COMPASSION AND CHOICES GIFT PROCESSING CENTER ETNA, NH 03750-0485 | 84-1328829 | | 5,250. | 0. | | | GENERAL PURPOSE |
| CONGO INITIATIVE PO BOX 246 GERMANTOWN, WI 53022 | 20-3467419 | 501(C)(3) | 15,000. | 0. | | | GENERAL PURPOSE |
| CONSERVATION INTERNATIONAL FOUNDATION - 2011 CRYSTAL DRIVE - ARLINGTON, VA 22202 | 52-1497470 | | 1,605,000. | 0. | | | GENERAL PURPOSE |
| CONSERVATION TRUST FOR NC 1028 WASHINGTON STREET RALEIGH, NC 27605 | 58-1552188 | | 88,500. | 0. | | | GENERAL PURPOSE |
| CONVERSE COLLEGE OFFICE OF INSTITUTIONAL ADVANCEMENT - SPARTANBURG, SC 29302-0006 | 57-0314380 | | 26,000. | 0. | | | GENERAL PURPOSE |
| COPTIC ORPHANS PO BOX 2881 MERRIFIELD, VA 22116 | 54-1637257 | 501(C)(3) | 6,000. | 0. | | | GENERAL PURPOSE |

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| CORNELL UNIVERSITY 130 E. SENECA STREET, SUITE 400 ITHACA, NY 14850 | 15-0532082 | | 10,378. | 0. | | | GENERAL PURPOSE |
| CORRAL RIDING ACADEMY 3620 KILDAIRE FARM ROAD CARY, NC 27518 | 26-3122904 | | 10,000. | 0. | | | GENERAL PURPOSE |
| COURT APPOINTED SPECIAL ADVOCATES FIRST JUDICIAL DISTRICT - 466 WEST SAN FRANCISCO STREET - SANTA FE, NM 87501 | 85-0432642 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| CROOK'S CORNER BOOK PRIZE FOUNDATION - 515 SENLAC ROAD - CHAPEL HILL, NC 27514 | 46-1256568 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| CROSSROADS FELLOWSHIP 2721 E. MILLBROOK ROAD RALEIGH, NC 27604 | 56-2223603 | | 11,175. | 0. | | | GENERAL PURPOSE |
| CURE ALZHEIMER'S FUND 34 WASHINGTON STREET WELLESLEY, MA 02481 | 52-2396428 | 501(C)(3) | 100,000. | 0. | | | GENERAL PURPOSE |
| CYSTIC FIBROSIS FOUNDATION, CAROLINAS CHAPTER - 7101 CREEDMOOR ROAD - RALEIGH, NC 27613 | 13-1930701 | | 7,500. | 0. | | | GENERAL PURPOSE |
| DAVID H MURDOCK RESEARCH INSTITUTE 150 RESEARCH CAMPUS DRIVE KANNAPOLIS, NC 28081 | 20-8730759 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| DAVIDSON COLLEGE BOX 7170 DAVIDSON, NC 28035-7174 | 56-0529961 | | 26,500. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| DC CENTRAL KITCHEN INC. PO BOX 417406 BOSTON, MA 02241-7406 | 52-1584936 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| DELTA GAMMA FOUNDATION 3250 RIVERSIDE DRIVE COLUMBUS, OH 43221 | 31-6034001 | 501(C)(3) | 50,000. | 0. | | | GENERAL PURPOSE |
| DEMOCRACY NC 1821 GREEN STREET DURHAM, NC 27705 | 56-2271150 | | 31,000. | 0. | | | GENERAL PURPOSE |
| DOCTORS WITHOUT BORDERS USA INC. PO BOX 5030 HAGERSTOWN, MD 21741-5030 | 13-3433452 | | 33,250. | 0. | | | GENERAL PURPOSE |
| DOOR INTERNATIONAL DEPARTMENT 9012 LANSING, MI 48909-8016 | 56-2151149 | | 22,500. | 0. | | | GENERAL PURPOSE |
| DOROTHEA DIX PARK CONSERVATORY PO BOX 28575 RALEIGH, NC 27611 | 20-8421281 | | 16,000. | 0. | | | GENERAL PURPOSE |
| DRESS FOR SUCCESS TRIANGLE NC 1812 TILLERY PLACE RALEIGH, NC 27604 | 26-2229898 | | 30,450. | 0. | | | GENERAL PURPOSE |
| DUKE ALUMNI AND DEVELOPMENT RECORDS - DUKE UNIVERSITY - DURHAM, NC 27708-0581 | 56-0532129 | | 233,500. | 0. | | | GENERAL PURPOSE |
| DUKE CHILDREN'S HOSPITAL AND HEALTH CENTER - DUKE CHILDREN'S DEVELOPMENT OFFICE - DURHAM, NC 27701-3973 | 56-2070036 | | 5,920. | 0. | | | GENERAL PURPOSE |

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| DUKE GLOBAL HEALTH INSTITUTE ATTN: DEVELOPMENT DURHAM, NC 27708 | | | 50,000. | 0. | | | GENERAL PURPOSE |
| DUKE HOMECARE AND HOSPICE 4321 MEDICAL PARK DR. DURHAM, NC 27704-2175 | 56-2070036 | | 16,680. | 0. | | | GENERAL PURPOSE |
| DUKE LAW SCHOOL, ALUMNI & DEVELOPMENT - 210 SCIENCE DRIVE - DURHAM, NC 27708 | | | 5,300. | 0. | | | GENERAL PURPOSE |
| DUKE MEMORIAL UNITED METHODIST CHURCH - 504 WEST CHAPEL HILL ST. - DURHAM, NC 27701 | 56-0685370 | | 53,000. | 0. | | | GENERAL PURPOSE |
| DUKE PERFORMANCES 2010 CAMPUS DRIVE, BOX 9075 DURHAM, NC 27708-0757 | | | 5,000. | 0. | | | GENERAL PURPOSE |
| DUKE UNIV. ANNUAL FUND ALUMNI & DEVELOPMENT RECORDS - 2127 CAMPUS DRIVE - DURHAM, NC 27706 | | | 10,161. | 0. | | | GENERAL PURPOSE |
| DUKE UNIVERSITY - DEPARTMENT OF BIOCHEMISTRY - BOX 3711, DUMC - DURHAM, NC 27710 | | | 84,635. | 0. | | | GENERAL PURPOSE |
| DUKE UNIVERSITY, DUKE-DURHAM CAMPAIGN - OFFICE OF DURHAM AND REGIONAL AFFAIRS - DURHAM, NC 27708 | | | 5,500. | 0. | | | GENERAL PURPOSE |
| DURHAM ACADEMY 3601 RIDGE ROAD DURHAM, NC 27705-5599 | 56-0538019 | | 85,400. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| DURHAM ART GUILD 120 MORRIS ST. DURHAM, NC 27701 | 56-0798002 | | 7,000. | 0. | | | GENERAL PURPOSE |
| DURHAM ARTS COUNCIL 120 MORRIS ST. DURHAM, NC 27701 | 56-0599829 | | 56,384. | 0. | | | GENERAL PURPOSE |
| DURHAM CAN 4907 GARRETT ROAD DURHAM, NC 27707 | 31-1661463 | | 14,620. | 0. | | | GENERAL PURPOSE |
| DURHAM CENTER FOR SENIOR LIFE 406 RIGSBEE AVE. DURHAM, NC 27701 | 56-0886647 | | 14,620. | 0. | | | GENERAL PURPOSE |
| DURHAM CENTRAL PARK PO BOX 1526 DURHAM, NC 27702 | 58-2222977 | | 6,500. | 0. | | | GENERAL PURPOSE |
| DURHAM COLORED LIBRARY INC. PO BOX 2736 DURHAM, NC 27715-2736 | 56-6001420 | 501(C)(3) | 9,556. | 0. | | | GENERAL PURPOSE |
| DURHAM CONGREGATIONS IN ACTION 504 W. CHAPEL HILL ST. DURHAM, NC 27701-3102 | 23-7208424 | | 6,000. | 0. | | | GENERAL PURPOSE |
| DURHAM JAZZ WORKSHOP 4608 L INDUSTRY LANE DURHAM, NC 27713 | 45-4956498 | 501(C)(3) | 1,000. | 0. | | | GENERAL PURPOSE |
| DURHAM KIWANIS CLUB FOUNDATION PO BOX 52299 DURHAM, NC 27717 | 23-7103107 | | 6,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| DURHAM LIBRARY FOUNDATION PO BOX 25246 DURHAM, NC 27702-3809 | 56-2189129 | | 9,750. | 0. | | | GENERAL PURPOSE |
| DURHAM LITERACY CENTER INC. P.O. BOX 52209 DURHAM, NC 27717 | 56-1479534 | | 5,000. | 0. | | | GENERAL PURPOSE |
| DURHAM NATIVITY SCHOOL PO BOX 3537 DURHAM, NC 27702 | 56-2274228 | | 78,900. | 0. | | | GENERAL PURPOSE |
| DURHAM PROUD PROGRAM P.O. BOX 1605 DURHAM, NC 27701 | 56-2075720 | | 17,500. | 0. | | | GENERAL PURPOSE |
| DURHAM RESCUE MISSION PO BOX 11858 DURHAM, NC 27703 | 58-1482590 | | 40,054. | 0. | | | GENERAL PURPOSE |
| DURHAM SCHOOL OF THE ARTS 400 N DUKE STREET DURHAM, NC 27701 | | | 7,600. | 0. | | | GENERAL PURPOSE |
| DURHAM SYMPHONY PO BOX 1993 DURHAM, NC 27702 | 56-1162641 | | 3,700. | 0. | | | GENERAL PURPOSE |
| DURHAM TECHNICAL COMMUNITY COLLEGE FOUNDATION - 1637 E LAWSON STREET - DURHAM, NC 27703 | 56-1423848 | | 6,250. | 0. | | | GENERAL PURPOSE |
| DURHAM TRIPLE PLAY LEAGUES PO BOX 15942 DURHAM, NC 27704 | 46-1448762 | 501(C)(3) | 7,500. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| DURHAM-CHAPEL HILL JEWISH FEDERATION - 1937 WEST CORNWALLIS ROAD - DURHAM, NC 27705 | 58-1384316 | | 7,300. | 0. | | | GENERAL PURPOSE |
| E.O. WILSON BIODIVERSITY FOUNDATION - ENVIRONMENT HALL, 9 CIRCUIT DRIVE - DURHAM, NC 27708 | 20-4547380 | 501(C)(3) | 25,000. | 0. | | | GENERAL PURPOSE |
| EARTHJUSTICE 50 CALIFORNIA ST. SAN FRANCISCO, CA 94111 | 94-1730465 | | 8,500. | 0. | | | GENERAL PURPOSE |
| EARTHSHARE NORTH CAROLINA PO BOX 196 DURHAM, NC 27702 | 56-1775025 | | 30,300. | 0. | | | GENERAL PURPOSE |
| EAST CAROLINA UNIVERSITY MEDICAL & HEALTH SCIENCES FOUNDATION INC - 525 MOYE BOULEVARD - GREENVILLE, NC 27834 | 23-7138921 | | 5,000. | 0. | | | GENERAL PURPOSE |
| EAST CHAPEL HILL ROTARY CLUB FOUNDATION - PO BOX 2254 - CHAPEL HILL, NC 27515 | 56-2161324 | | 27,000. | 0. | | | GENERAL PURPOSE |
| EAST DURHAM CHILDREN'S INITIATIVE 2101 ANGIER AVENUE DURHAM, NC 27703 | 32-0263133 | 501(C)(3) | 80,500. | 0. | | | GENERAL PURPOSE |
| EDENTON ST. UNITED METHODIST CHURCH - 228 W. EDENTON ST. - RALEIGH, NC 27603 | 56-0547492 | | 42,000. | 0. | | | GENERAL PURPOSE |
| EL CENTRO HISPANO 2000 CHAPEL HILL ROAD DURHAM, NC 27707 | 56-2011661 | | 29,120. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| EL FUTURO, INC. 2020 CHAPEL HILL ROAD, SUITE 23 DURHAM, NC 27707 | 80-0122334 | | 60,075. | 0. | | | GENERAL PURPOSE |
| EL PUEBLO, INC. 2321 CRABTREE BOULEVARD STE 105 RALEIGH, NC 27604 | 56-1934310 | | 20,500. | 0. | | | GENERAL PURPOSE |
| ELLERBE CREEK WATERSHED ASSOCIATION - PO BOX 2679 - DURHAM, NC 27715 | 56-2123874 | | 45,087. | 0. | | | GENERAL PURPOSE |
| EMILY KRZYZEWSKI FAMILY LIFE CENTER - 904 W. CHAPEL HILL STREET - DURHAM, NC 27701-2812 | 56-2230469 | | 20,250. | 0. | | | GENERAL PURPOSE |
| EMMANUEL INTERNATIONAL MINISTRIES PO BOX 5277 WHEATON, IL 60189 | 36-4379208 | | 22,500. | 0. | | | GENERAL PURPOSE |
| ENO RIVER UNITARIAN UNIVERSALIST FELLOWSHIP - ATTN: BOOKKEEPING - DURHAM, NC 27707 | 51-0151684 | | 13,700. | 0. | | | GENERAL PURPOSE |
| ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH NEW YORK, NY 10010 | 11-6107128 | | 17,750. | 0. | | | GENERAL PURPOSE |
| EXECUTIVE SERVICE CORPS OF THE TRIANGLE INC. - PO BOX 51152 - DURHAM, NC 27717 | 56-1625629 | | 10,750. | 0. | | | GENERAL PURPOSE |
| EXPERIMENTAL AIRCRAFT ASSOCIATION CHAPTER 2 - 429 EAST DUPONT ROAD, #183 - FORT WAYNE, IN 46825 | 35-2123807 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| EXTRA TERRESTRIAL PROJECTS 514 DANIELS STREET #277 RALEIGH, NC 27605 | 47-3204519 | 501(C)(3) | 9,000. | 0. | | | GENERAL PURPOSE |
| EYES EARS NOSE AND PAWS INC. PO BOX 3443 CHAPEL HILL, NC 27515 | 61-1436221 | | 65,800. | 0. | | | GENERAL PURPOSE |
| FAIRLEIGH DICKINSON UNIVERSITY 1000 RIVER ROAD TEANECK, NJ 07666 | 22-1494434 | | 5,000. | 0. | | | GENERAL PURPOSE |
| FAMILIES MOVING FORWARD PO BOX 25426 DURHAM, NC 27702 | 56-1633998 | | 19,250. | 0. | | | GENERAL PURPOSE |
| FAMILY FOCUS INC. 310 SOUTH PEORIA STE 301 CHICAGO, IL 60607 | 36-2884042 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| FAMILY HEALTH MINISTRIES PO BOX 16783 CHAPEL HILL, NC 27516-6783 | 56-2206165 | | 6,250. | 0. | | | GENERAL PURPOSE |
| FAMILY PROMISE OF LEE COUNTY PO BOX 2862 SANFORD, NC 27331 | 27-4404629 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| FARMER FOODSHARE PO BOX 2873 CHAPEL HILL, NC 27515 | 27-3717889 | 501(C)(3) | 12,750. | 0. | | | GENERAL PURPOSE |
| FCNL EDUCATION FUND 245 2ND ST NE WASHINGTON, DC 20002 | 52-1254489 | 501(C)(3) | 20,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FEARRINGTON CARES 2020 FEARRINGTON POST PITTSBORO, NC 27312 | 56-1702206 | | 42,550. | 0. | | | GENERAL PURPOSE |
| FEEDING AMERICA 35 EAST WACKER DRIVE, SUITE 2000 CHICAGO, IL 60601 | 36-3673599 | | 5,000. | 0. | | | GENERAL PURPOSE |
| FELLOWSHIP HOME OF RALEIGH, INC. 506 CUTLER ST. RALEIGH, NC 27603 | 56-6063092 | | 5,000. | 0. | | | GENERAL PURPOSE |
| FIDELITY CHARITABLE GIFT FUND P.O. BOX 770001 CINCINNATI, OH 45277-0053 | 11-0303001 | | 35,505. | 0. | | | GENERAL PURPOSE |
| FILL YOUR BUCKET LIST FOUNDATION PO BOX 806 CARY, NC 27512 | 47-1925872 | 501(C)(3) | 25,000. | 0. | | | GENERAL PURPOSE |
| FIRST BAPTIST CHURCH 501 W. FIFTH ST. WINSTON-SALEM, NC 27101 | | | 35,000. | 0. | | | GENERAL PURPOSE |
| FIRST FLIGHT VENTURE CENTER INC. PO BOX 13169 RESEARCH TRIANGLE PARK, NC 27709 | 56-1752731 | 501(C)(3) | 62,500. | 0. | | | GENERAL PURPOSE |
| FIRST IN FAMILIES OF NC 3109 UNIVERSITY DRIVE SUITE 100 DURHAM, NC 27707 | 46-0471896 | | 19,000. | 0. | | | GENERAL PURPOSE |
| FIRST PRESBYTERIAN CHURCH 305 E. MAIN ST. DURHAM, NC 27701 | 56-0563131 | | 34,800. | 0. | | | GENERAL PURPOSE |

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FOOD BANK OF CENTRAL & EASTERN NC 1924 CAPITAL BLVD. RALEIGH, NC 27604 | 56-1283426 | | 90,350. | 0. | | | GENERAL PURPOSE |
| FOOD DEPOT 1222 A SILER ROAD SANTA FE, NM 87507 | 85-0416803 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| FOUNDATION FOR HEALTH LEADERSHIP & INNOVATION - 2401 WESTON PARKWAY - CARY, NC 27513 | 58-1461316 | | 10,000. | 0. | | | GENERAL PURPOSE |
| FOUNDATION FOR SHAMANIC STUDIES PO BOX 1939 MILL VALLEY, CA 94942 | 06-1131090 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| FOUNDATION FOR THE CAROLINAS 220 NORTH TRYON STREET CHARLOTTE, NC 28202 | 56-6047886 | | 5,000. | 0. | | | GENERAL PURPOSE |
| FRANKIE LEMMON FOUNDATION 3101 POPULARWOOD COURT RALEIGH, NC 27604 | 56-1572087 | | 14,250. | 0. | | | GENERAL PURPOSE |
| FREEDOM HOUSE RECOVERY CENTER, INC. - 104 NEW STATESIDE DRIVE - CHAPEL HILL, NC 27516 | 56-1082674 | | 16,000. | 0. | | | GENERAL PURPOSE |
| FRIENDS OF CANADIAN EDUCATION 19 CONNELL DRIVE WEST ORANGE, NJ 07052 | 56-1776997 | | 100,000. | 0. | | | GENERAL PURPOSE |
| FRIENDS OF MOUNTAIN RESCUE PO BOX 1094 EDWARDS, CO 81632 | 26-1883719 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| FRIENDS OF STATE PARKS PO BOX 37655 RALEIGH, NC 27627 | 58-1634155 | | 26,000. | 0. | | | GENERAL PURPOSE |
| FRIENDS OF THE NC LIBRARY FOR THE BLIND AND PHYSICALLY HANDICAPPED - 1841 CAPITAL BLVD - RALEIGH, NC 27604 | 58-1973202 | | 26,007. | 0. | | | GENERAL PURPOSE |
| FRIENDS OF THE NCSU LIBRARY PO BOX 7111 RALEIGH, NC 27695-7111 | | | 51,500. | 0. | | | GENERAL PURPOSE |
| FROM HOUSES TO HOMES - GUATEMALA, INC. - PO BOX 85 - MT. TABOR, NJ 07878-0085 | 20-1682549 | | 7,000. | 0. | | | GENERAL PURPOSE |
| FULL FRAME DOCUMENTARY FILM FESTIVAL - 320 BLACKWELL STREET - DURHAM, NC 27701 | 56-1655039 | | 40,000. | 0. | | | GENERAL PURPOSE |
| FUND FOR HUMAN POSSIBILITY PO BOX 331 CHAPEL HILL, NC 27514-0331 | 56-1868691 | | 7,000. | 0. | | | GENERAL PURPOSE |
| FUQUAY VARINA EMERGENCY FOOD PANTRY - P.O. BOX 1463 - FUQUAY-VARINA, NC 27526 | 56-2270632 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| GARNER ROAD COMMUNITY CENTER 2235 GARNER ROAD RALEIGH, NC 27610 | 56-0556747 | | 10,109. | 0. | | | GENERAL PURPOSE |
| GASPARD&DANCERS INC. 106 PATHWOOD LN DURHAM, NC 27705 | 46-4652567 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| GEORGE MARK CHILDREN'S FUND 2121 GEORGE MARK LANE SAN LEANDRO, CA 94578 | 94-3255845 | | 7,500. | 0. | | | GENERAL PURPOSE |
| GEORGE WATTS MONTESSORI MAGNET SCHOOL - 700 WATTS ST. - DURHAM, NC 27701 | | | 5,457. | 0. | | | GENERAL PURPOSE |
| GIRL SCOUTS - NORTH CAROLINA COASTAL PINES, INC. - 6901 PINECREST ROAD - RALEIGH, NC 27613 | 56-0791500 | | 28,750. | 0. | | | GENERAL PURPOSE |
| GIRLS ON THE RUN OF THE TRIANGLE, INC. - 1415 WEST HIGHWAY 54 - DURHAM, NC 27707-5597 | 56-2228790 | | 9,000. | 0. | | | GENERAL PURPOSE |
| GLOBAL TRAINING NETWORK INC. PO BOX 6507 PEORIA, AZ 85385 | 68-0586399 | 501(C)(3) | 5,250. | 0. | | | GENERAL PURPOSE |
| GLOBALIZATION OF PHARMACEUTICS EDUCATION NETWORK, INC. - 201A SIMONS RESEARCH LABORATORIES - LAWRENCE, KS 66047-3729 | 48-1209067 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| GO GLOBAL 68 T.W. ALEXANDER DRIVE RESEARCH TRIANGLE PARK, NC 27709 | 56-1751280 | | 85,000. | 0. | | | GENERAL PURPOSE |
| GRANVILLE CO. HISTORICAL SOCIETY INC. - P. O. BOX 1433 - OXFORD, NC 27565 | 56-6075581 | | 10,000. | 0. | | | GENERAL PURPOSE |
| GRASSROOTS LEADERSHIP INC. PO BOX 36006 CHARLOTTE, NC 28236-6006 | 58-1581743 | | 20,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| GREATER HOUSTON COMMUNITY FOUNDATION - 5120 WOODWAY DRIVE, SUITE 6000 - HOUSTON, TX 77056 | 23-7160400 | | 21,250. | 0. | | | GENERAL PURPOSE |
| GREENSBORO COLLEGE FOUNDATION 815 W. MARKET ST. GREENSBORO, NC 27401 | 56-2077641 | | 23,900. | 0. | | | GENERAL PURPOSE |
| GUIDING LIGHTS CAREGIVER SUPPORT CENTER - 3739 NATIONAL DR. - RALEIGH, NC 27612 | 80-0555761 | | 30,000. | 0. | | | GENERAL PURPOSE |
| HABITAT FOR HUMANITY INTERNATIONAL 121 HABITAT STREET AMERICUS, GA 31709-3498 | 91-1914868 | | 80,500. | 0. | | | GENERAL PURPOSE |
| HABITAT FOR HUMANITY OF DURHAM COUNTY - 215 N. CHURCH STREET - DURHAM, NC 27701 | 58-1674794 | | 68,950. | 0. | | | GENERAL PURPOSE |
| HABITAT FOR HUMANITY OF NORTH CAROLINA - PO BOX 12996 - RALEIGH, NC 27605 | 27-1296717 | 501(C)(3) | 33,000. | 0. | | | GENERAL PURPOSE |
| HABITAT FOR HUMANITY OF ORANGE COUNTY - 88 VILCOM CENTER DR - CHAPEL HILL, NC 27514 | 58-1603427 | | 14,400. | 0. | | | GENERAL PURPOSE |
| HABITAT FOR HUMANITY OF WAKE COUNTY - 2420 NORTH RALEIGH BLVD - RALEIGH, NC 27604 | 56-1492703 | 501(C)(3) | 17,500. | 0. | | | GENERAL PURPOSE |
| HAITI REFORESTATION PARTNERSHIP PO BOX 99165 RALEIGH, NC 27624 | 58-1933713 | | 5,000. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| HAMPTON FIRST BAPTIST CHURCH 142 MOUNTAIN VIEW CIRCLE HAMPTON, TN 37658 | 83-0370697 | 501(C)(3) | 20,000. | 0. | | | GENERAL PURPOSE |
| HARDING UNIVERSITY PO BOX 12238 SEARCY, AR 72149 | 71-0236896 | | 500,000. | 0. | | | GENERAL PURPOSE |
| HAVEN HOUSE INC. 600 W. CABARRUS STREET RALEIGH, NC 27603 | 56-1073632 | | 33,000. | 0. | | | GENERAL PURPOSE |
| HAYES BARTON UNITED METHODIST CHURCH - 2209 FAIRVIEW ROAD - RALEIGH, NC 27608 | | | 10,850. | 0. | | | GENERAL PURPOSE |
| HEALING TRANSITIONS 1251 GOODE STREET RALEIGH, NC 27603-2261 | 56-2135246 | | 11,000. | 0. | | | GENERAL PURPOSE |
| HEATON CHRISTIAN CHURCH PO BOX 117 ELK PARK, NC 28622 | 56-1369746 | 501(C)(3) | 13,000. | 0. | | | GENERAL PURPOSE |
| HIGHER EDUCATION WORKS FOUNDATION PO BOX 10463 RALEIGH, NC 27605 | 46-4360789 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| HILL CENTER 3200 PICKETT ROAD DURHAM, NC 27705 | 56-2089788 | | 29,900. | 0. | | | GENERAL PURPOSE |
| HILLSDALE COLLEGE 33 E. COLLEGE ST. HILLSDALE, MI 49242-9989 | 38-1374230 | | 20,000. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| HISPANIC FEDERATION UNIDOS DISASTER RELIEF FUND NEW YORK, NY 10005 | 13-3573852 | 501(C)(3) | 26,500. | 0. | | | GENERAL PURPOSE |
| HISPANIC LIAISON 200 N. CHATHAM AVENUE SILER CITY, NC 27344 | 56-1974043 | | 10,000. | 0. | | | GENERAL PURPOSE |
| HISPANICS IN PHILANTHROPY 414 13TH STREET OAKLAND, CA 94612-2603 | 94-3040607 | | 12,300. | 0. | | | GENERAL PURPOSE |
| HOLLY SPRINGS BAPTIST CHURCH PO BOX 366 HOLLY SPRINGS, NC 27540 | | 501(C)(3) | 25,000. | 0. | | | GENERAL PURPOSE |
| HOLLY SPRINGS UNITED METHODIST CHURCH - PO BOX 68 - HOLLY SPRINGS, NC 27540 | 56-1401676 | 501(C)(3) | 25,000. | 0. | | | GENERAL PURPOSE |
| HOLY TRINITY CHURCH OF RALEIGH 549 NORTH BLOUNT STREET RALEIGH, NC 27604 | 20-1534970 | | 5,370. | 0. | | | GENERAL PURPOSE |
| HOPE CENTER AT PULLEN 1801 HILLSBOROUGH ST. RALEIGH, NC 27605 | 61-1570567 | | 50,370. | 0. | | | GENERAL PURPOSE |
| HOPE CHARTER LEADERSHIP ACADEMY 1116 N. BLOUNT ST. RALEIGH, NC 27604 | 56-2096530 | | 26,000. | 0. | | | GENERAL PURPOSE |
| HOPE INTERNATIONAL 227 GRANITE RUN DRIVE LANCASTER, PA 17601 | 23-2836648 | 501(C)(3) | 5,250. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| HOPE MISSION OF CARTERET COUNTY INC - PO BOX 1438 - MOREHEAD CITY, NC 28557 | 56-1757998 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| HOPE REINS 8420 WAKE FOREST HIGHWAY RALEIGH, NC 27613 | 27-1074966 | | 15,000. | 0. | | | GENERAL PURPOSE |
| HOPKINS SCHOOL INCORPORATED 986 FOREST ROAD NEW HAVEN, CT 06515 | 06-0646674 | | 5,000. | 0. | | | GENERAL PURPOSE |
| HORSE & BUDDY P. O. BOX 675 APEX, NC 27502 | 03-0516522 | | 5,000. | 0. | | | GENERAL PURPOSE |
| HOUSING FOR NEW HOPE 18 WEST COLONY PLACE DURHAM, NC 27705 | 58-2089068 | | 23,250. | 0. | | | GENERAL PURPOSE |
| HOUSTON METHODIST HOSPITAL FOUNDATION - 1707 SUNSET BLVD - HOUSTON, TX 77005 | 76-0094743 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| ILASS - INSTITUTE OF LANDSCAPE, ART AND SUSTAINABLE SPACES - 2409 EAST WEAVER ST. - DURHAM, NC 27707 | 35-2355979 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| IMAGINE NORTH CAROLINA FIRST PO BOX 428 RALEIGH, NC 27602 | 46-4006055 | 501(C)(3) | 1,040,000. | 0. | | | GENERAL PURPOSE |
| IMMACULATE CONCEPTION CATHOLIC CHURCH - 901-A W. CHAPEL HILL STREET - DURHAM, NC 27701 | 56-0651260 | | 7,500. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| INDEPENDENT ANIMAL RESCUE, INC. PO BOX 14232 DURHAM, NC 27709-4232 | 56-1951483 | | 14,450. | 0. | | | GENERAL PURPOSE |
| INNER CITY COMPUTER STARS FOUNDATION - 415 N. DEARBORN, 3RD FLOOR - CHICAGO, IL 60654 | 36-4253411 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| INREACH 4530 PARK RD - SUITE 300 CHARLOTTE, NC 28209 | 52-1084075 | 501(C)(3) | 15,000. | 0. | | | GENERAL PURPOSE |
| INSTITUTE FOR RESPONSIBLE CITIZENSHIP - 1227 25TH STREET, NW, SIXTH FL - WASHINGTON, DC 20037 | 54-2034070 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| INSTITUTE OF ART THERAPY INC. 200 NORTH GREENSBORO STREET CARRBORO, NC 27510 | 26-3447555 | | 10,000. | 0. | | | GENERAL PURPOSE |
| INTEGRATIVE STRATEGIES FORUM PO BOX 7458 SILVER SPRINGS, MD 20907 | 52-2200029 | | 176,979. | 0. | | | GENERAL PURPOSE |
| INTERACT 1012 OBERLIN ROAD RALEIGH, NC 27605 | 58-1320613 | | 17,254. | 0. | | | GENERAL PURPOSE |
| INTER-FAITH COUNCIL FOR SOCIAL SERVICE - 110 W. MAIN ST. - CARRBORO, NC 27510 | 59-1224041 | | 33,335. | 0. | | | GENERAL PURPOSE |
| INTER-FAITH FOOD SHUTTLE 1001 BLAIR DRIVE RALEIGH, NC 27603 | 56-1753180 | | 582,086. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| INTERNATIONAL RESCUE COMMITTEE 122 E. 42ND ST. NEW YORK, NY 10168-1289 | 13-5660870 | | 15,000. | 0. | | | GENERAL PURPOSE |
| JAMIE KIRK HAHN FOUNDATION 1053 E. WHITAKER ROAD, SUITE 115 RALEIGH, NC 27604 | 46-3306563 | 501(C)(3) | 5,250. | 0. | | | GENERAL PURPOSE |
| JOHNSON SERVICE CORPS PO BOX 71 CHAPEL HILL, NC 27514 | 20-2000965 | 501(C)(3) | 14,620. | 0. | | | GENERAL PURPOSE |
| JOSH'S HOPE FOUNDATION 200 CARDINAL DRIVE HILLSBOROUGH, NC 27278 | 27-2474758 | 501(C)(3) | 30,000. | 0. | | | GENERAL PURPOSE |
| JUDEA REFORM CONGREGATION 1933 WEST CORNWALLIS ROAD DURHAM, NC 27705 | 56-1337018 | | 16,622. | 0. | | | GENERAL PURPOSE |
| JUVENILE DIABETES FOUNDATION 26 BROADWAY NEW YORK, NY 10004 | 23-1907729 | | 72,000. | 0. | | | GENERAL PURPOSE |
| KAY YOW CANCER FUND 5121 KINGDOM WAY, STE 305 RALEIGH, NC 27607 | 26-1789695 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| KEEP DURHAM BEAUTIFUL INC. 2011 FAY STREET DURHAM, NC 27704 | 02-0735076 | | 25,000. | 0. | | | GENERAL PURPOSE |
| KENAN-FLAGLER BUSINESS SCHOOL FOUNDATION - MCCOLL BLDG CB #3490 - CHAPEL HILL, NC 27599-3490 | 56-0771850 | | 35,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| KIDZNOTES PO BOX 200 DURHAM, NC 27702 | 27-0446845 | | 41,450. | 0. | | | GENERAL PURPOSE |
| LAKE JUNALUSKA ASSEMBLY INC THE OFFICE OF DEVELOPMENT LAKE JUNALUSKA, NC 28745 | 56-0547461 | 501(C)(3) | 50,000. | 0. | | | GENERAL PURPOSE |
| LATINX EDUCATION CENTER 301 PITTSBORO STREET, SUITE 300 CHAPEL HILL, NC 27599 | 82-4014210 | 501(C)(3) | 24,900. | 0. | | | GENERAL PURPOSE |
| LEADERSHIP TRIANGLE 334 BLACKWELL STREET DURHAM, NC 27702 | 56-1852726 | | 41,727. | 0. | | | GENERAL PURPOSE |
| LEAF COMMUNITY ARTS 377 LAKE EDEN RD BLACK MOUNTAIN, NC 28711 | 54-2123478 | 501(C)(3) | 20,000. | 0. | | | GENERAL PURPOSE |
| LEARNING OUTSIDE INC. PO BOX 718 CARRBORO, NC 27510 | 45-2686552 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| LEARNING TOGETHER 568 EAST LENOIR ST RALEIGH, NC 27601 | 51-0161593 | | 5,000. | 0. | | | GENERAL PURPOSE |
| LEARNING TRAIL INC. POST OFFICE BOX 3061 CHAPEL HILL, NC 27515 | 47-1642083 | 501(C)(3) | 12,700. | 0. | | | GENERAL PURPOSE |
| LEE COUNTY SCHOOLS PO BOX 1010 SANFORD, NC 27330 | 56-6001062 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| LEGAL AID OF NC, INC. PO BOX 28741 RALEIGH, NC 27611 | 31-1784161 | | 11,250. | 0. | | | GENERAL PURPOSE |
| LEUKEMIA & LYMPHOMA SOCIETY, NC EASTERN CHAPTER - 401 HARRISON OAKS BLVD - CARY, NC 27513 | 13-5644916 | | 15,000. | 0. | | | GENERAL PURPOSE |
| LIFE EXPERIENCES INC 260 TOWERVIEW COURT CARY, NC 27513 | 56-1201695 | | 11,500. | 0. | | | GENERAL PURPOSE |
| LIFE SKILLS FOUNDATION PO BOX 51129 DURHAM, NC 27717 | 20-3676000 | | 21,000. | 0. | | | GENERAL PURPOSE |
| LINCOLN COMMUNITY HEALTH CENTER 1301 FAYETTEVILLE ST. DURHAM, NC 27707-2119 | 56-1031244 | | 5,000. | 0. | | | GENERAL PURPOSE |
| LITTLETON BAPTIST CHURCH PO BOX 216 LITTLETON, NC 27850 | | | 10,000. | 0. | | | GENERAL PURPOSE |
| LOAVES AND FISHES, INC. 648 GRIFFITH ROAD CHARLOTTE, NC 28217 | 56-1398498 | 501(C)(3) | 7,900. | 0. | | | GENERAL PURPOSE |
| LUCY DANIELS CENTER FOR EARLY CHILDHOOD - 9003 WESTON PKWY. - CARY, NC 27513 | 58-1863104 | | 11,659. | 0. | | | GENERAL PURPOSE |
| MABOPANE FOUNDATION 3913 US HWY 64 W APEX, NC 27523 | 86-1085341 | | 83,500. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MADE IN DURHAM 359 BLACKWELL STREET STE 200 DURHAM, NC 27701 | 47-2262963 | 501(C)(3) | 61,000. | 0. | | | GENERAL PURPOSE |
| MAG AMERICA INC 1776 K STREET NW WASHINGTON, DC 20006 | 52-2302253 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| MAKE-A-WISH FOUNDATION OF EASTERN NC - 3809 COMPUTER DRIVE - RALEIGH, NC 27609 | 58-1792140 | | 18,743. | 0. | | | GENERAL PURPOSE |
| MALLARME CHAMBER PLAYERS 120 MORRIS STREET DURHAM, NC 27701 | 58-1711177 | | 9,250. | 0. | | | GENERAL PURPOSE |
| MARBLER KIDS MUSEUM 201 E. HARGETT ST. RALEIGH, NC 27601-1437 | 58-1647538 | | 10,000. | 0. | | | GENERAL PURPOSE |
| MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 510 WEST ROSEMARY ST. - CHAPEL HILL, NC 27516 | 46-1988511 | 501(C)(3) | 15,000. | 0. | | | GENERAL PURPOSE |
| MASONIC HOME FOR CHILDREN AT OXFORD - 600 COLLEGE STREET - OXFORD, NC 27565 | 56-0603924 | | 6,652. | 0. | | | GENERAL PURPOSE |
| MASSACHUSETTS GENERAL HOSPITAL DEVELOPMENT OFFICE BOSTON, MA 02114-2206 | 04-1564655 | | 15,500. | 0. | | | GENERAL PURPOSE |
| MAYO CLINIC DEPARTMENT OF DEVELOPMENT ROCHESTER, MN 55905 | 41-6011702 | 501(C)(3) | 40,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MDC 307 WEST MAIN STREET DURHAM, NC 27701-3215 | 56-0894222 | | 14,700. | 0. | | | GENERAL PURPOSE |
| MEALS ON WHEELS OF DURHAM 2522 ROSS ROAD DURHAM, NC 27703 | 56-1729111 | | 19,570. | 0. | | | GENERAL PURPOSE |
| MEALS ON WHEELS OF WAKE COUNTY 1001 BLAIR DRIVE, SUITE 100 RALEIGH, NC 27603-2030 | 56-1061085 | | 23,250. | 0. | | | GENERAL PURPOSE |
| MEDICAL FOUNDATION OF NC, INC. 123 W FRANKLIN STREET STE 510 CHAPEL HILL, NC 27516 | 56-6057494 | | 74,977. | 0. | | | GENERAL PURPOSE |
| MERCY SHIPS P.O. BOX 1930 LINDALE, TX 75771 | 26-2414132 | 501(C)(3) | 5,500. | 0. | | | GENERAL PURPOSE |
| MEREDITH COLLEGE 3800 HILLSBOROUGH ST. RALEIGH, NC 27607-5298 | 56-0530242 | | 345,143. | 0. | | | GENERAL PURPOSE |
| MONTGOMERY BELL ACADEMY 4001 HARDING ROAD NASHVILLE, TN 37205 | 62-0513741 | | 15,500. | 0. | | | GENERAL PURPOSE |
| MONTREAT COLLEGE P.O. BOX 1267 MONTREAT, NC 28757 | 56-0543261 | | 13,304. | 0. | | | GENERAL PURPOSE |
| MOTHEREAD INC. 3803-B COMPUTER DRIVE RALEIGH, NC 27609 | 58-1811261 | | 25,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| MUSEUM OF DURHAM HISTORY PO BOX 362 DURHAM, NC 27702 | 94-3455685 | | 28,600. | 0. | | | GENERAL PURPOSE |
| MUSEUM OF LIFE AND SCIENCE 433 W MURRAY AVENUE DURHAM, NC 27704 | 56-0938434 | | 21,935. | 0. | | | GENERAL PURPOSE |
| NAB EDUCATION FOUNDATION 1771 N STREET NW WASHINGTON, DC 20036 | 52-1866840 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| NATIONAL ACADEMY OF SCIENCES NAS OFFICE OF DEVELOPMENT ATLANTA, GA 31193-6135 | 53-0196932 | | 12,500. | 0. | | | GENERAL PURPOSE |
| NATIONAL ASSOCIATION OF CORPORATE DIRECTORS - RESEARCH TRIANGLE CHAPTER - 4242 SIX FORKS ROAD - RALEIGH, NC 27609 | 80-0411627 | | 5,000. | 0. | | | GENERAL PURPOSE |
| NATIONAL ASSOCIATION OF CORPORATE DIRECTORS - RESEARCH TRIANGLE CHAPTER - 4242 SIX FORKS ROAD - RALEIGH, NC 27609 | 80-0411627 | | 4,000. | 0. | | | GENERAL PURPOSE |
| NATIONAL HUMANITIES CENTER 7 T.W. ALEXANDER DR. RES. TRIANGLE PARK, NC 27709 | 59-1735367 | | 5,000. | 0. | | | GENERAL PURPOSE |
| NATIONAL JEWISH HEALTH 1400 JACKSON STREET DENVER, CO 80206-2761 | 74-2044647 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| NATIONAL MULTIPLE SCLEROSIS SOCIETY - GREATER CAROLINAS CHAPTER - 3101 INDUSTRIAL DRIVE - RALEIGH, NC 27609 | 56-0899381 | | 47,250. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| NATIONAL RESTAURANT ASSOC. EDUCATIONAL FOUNDATION - 2055 L ST. NW, SUITE 700 - WASHINGTON, DC 20036 | 36-6103388 | | 10,000. | 0. | | | GENERAL PURPOSE |
| NATIONAL TRUST FOR HISTORIC PRESERVATION IN THE UNITED STATES - THE WATERGATE OFFICE BUILDING - WASHINGTON, DC 20037 | 53-0210807 | | 20,750. | 0. | | | GENERAL PURPOSE |
| NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET 11TH FLOOR NEW YORK, NY 10011 | 13-2654926 | | 11,500. | 0. | | | GENERAL PURPOSE |
| NATURAL SCIENCE CENTER OF GREENSBORO INC. - 4301 LAWDALE DR - GREENSBORO, NC 27455 | 56-0885727 | 501(C)(3) | 6,250. | 0. | | | GENERAL PURPOSE |
| NATURESERVE 4600 N FAIRFAX DRIVE ARLINGTON, VA 22203 | 52-1884438 | 501(C)(3) | 13,500. | 0. | | | GENERAL PURPOSE |
| NC AMATEUR SPORTS 406 BLACKWELL ST. DURHAM, NC 27701 | 58-1527276 | | 40,105. | 0. | | | GENERAL PURPOSE |
| NC ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 | 20-3029784 | | 7,750. | 0. | | | GENERAL PURPOSE |
| NC CENTER FOR NONPROFITS 5800 FARINGDON PLACE RALEIGH, NC 27609 | 56-1729407 | | 7,500. | 0. | | | GENERAL PURPOSE |
| NC COMMUNITY DEVELOPMENT INITIATIVE - PO BOX 98148 - RALEIGH, NC 27624 | 56-1845590 | | 51,000. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| NC COMMUNITY FOUNDATION 3737 GLENWOOD AVENUE RALEIGH, NC 27612 | 58-1661700 | | 37,200. | 0. | | | GENERAL PURPOSE |
| NC CONSERVATION NETWORK 234 FAYETTEVILLE STREET, 5TH FLOOR RALEIGH, NC 27601 | 58-2504713 | | 90,000. | 0. | | | GENERAL PURPOSE |
| NC COOPERATIVE EXTENSION CHATHAM CO. CENTER - 1192 US HIGHWAY 64 W BUSINESS SUITE 400 - PITTSBORO, NC 27312 | 56-6000284 | | 8,000. | 0. | | | GENERAL PURPOSE |
| NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 | 11-6107128 | | 11,000. | 0. | | | GENERAL PURPOSE |
| NC HILLEL 210 W. CAMERON AVE. CHAPEL HILL, NC 27516-2751 | 56-6094521 | | 12,500. | 0. | | | GENERAL PURPOSE |
| NC LEAGUE OF CONSERVATION VOTERS FOUNDATION INC. - PO BOX 12671 - RALEIGH, NC 27605-2671 | 23-7206810 | | 6,000. | 0. | | | GENERAL PURPOSE |
| NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 | 23-7071511 | | 19,250. | 0. | | | GENERAL PURPOSE |
| NC MUSEUM OF HISTORY ASSOCIATES, INC. - PO BOX 25937 - RALEIGH, NC 27611-5937 | 56-1178432 | | 8,500. | 0. | | | GENERAL PURPOSE |
| NC MUSEUM OF HISTORY FOUNDATION 5 EAST EDENTON ST. RALEIGH, NC 27601-1011 | 20-0988951 | | 110,500. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| NC OPERA 612 WADE AVENUE, STE 100 RALEIGH, NC 27605 | 31-1486222 | | 13,710. | 0. | | | GENERAL PURPOSE |
| NC PARTNERSHIP FOR CHILDREN INC. 1100 WAKE FOREST ROAD RALEIGH, NC 27604 | 56-1850485 | | 5,300. | 0. | | | GENERAL PURPOSE |
| NC STATE UNIVERSITY DEVELOPMENT GIFTS AND RECORDS MANAGEMENT RALEIGH, NC 27695-7474 | | 501(C)(3) | 28,000. | 0. | | | GENERAL PURPOSE |
| NC SYMPHONY SOCIETY, INC. 3700 GLENWOOD AVENUE RALEIGH, NC 27612 | 56-0556755 | | 83,050. | 0. | | | GENERAL PURPOSE |
| NC THEATRE ONE EAST SOUTH STREET RALEIGH, NC 27601 | 56-1072874 | | 42,000. | 0. | | | GENERAL PURPOSE |
| NC WASTE AWARENESS AND REDUCTION NETWORK - P.O. BOX 61051 - DURHAM, NC 27715-1051 | 56-1734433 | | 42,050. | 0. | | | GENERAL PURPOSE |
| NC WESLEYAN COLLEGE OFFICE OF ADVANCEMENT ROCKY MOUNT, NC 27804 | 56-0686603 | | 4,000. | 0. | | | GENERAL PURPOSE |
| NC ZOOLOGICAL SOCIETY 4403 ZOO PKWY ASHEBORO, NC 27205 | 56-0990900 | | 35,031. | 0. | | | GENERAL PURPOSE |
| NCSU FOUNDATION INC. CAMPUS BOX 7004 RALEIGH, NC 27695-7004 | 56-6049503 | | 9,000. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| NCSU OFFICE OF CONTRACTS AND GRANTS - CAMPUS BOX 7214 - RALEIGH, NC 27695-7214 | | | 69,953. | 0. | | | GENERAL PURPOSE |
| NESSIE FOUNDATION, INC. 4500 PARRISH MANOR DRIVE GARNER, NC 27529 | 20-5119431 | | 5,000. | 0. | | | GENERAL PURPOSE |
| NEUSE RIVER VALLEY MODEL RAILROAD CLUB, INC. - 1615 OLD LOUISBURG ROAD - RALEIGH, NC 27604 | 56-1510834 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| NEW VOICES FOUNDATION PO BOX 12343 RESEARCH TRIANGLE PARK, NC 27709-2343 | 65-1292930 | | 13,000. | 0. | | | GENERAL PURPOSE |
| NEXT GENERATION MENTORING FOUNDATION - 3782 ROCK IVY TRAIL NE - ROSWELL, GA 30075 | 58-1867150 | 501(C)(3) | 25,000. | 0. | | | GENERAL PURPOSE |
| NORTH CAROLINA BUSINESS LEADERS FOR EDUCATION - 100 SAS CAMPUS DR - CARY, NC 27513 | 46-2988453 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| NORTH CAROLINA STATE BAR FOUNDATION INC. - PO BOX 3688 - CARY, NC 27519 | 56-0767805 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| NORTHERN VIRGINIA FAMILY SERVICE 10455 WHITE GRANITE DRIVE OAKTON, VA 22124 | 54-0791977 | | 1,762. | 0. | | | GENERAL PURPOSE |
| NOTE IN THE POCKET 9650 STRICKLAND RD. RALEIGH, NC 27615 | 46-2574332 | 501(C)(3) | 7,500. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| NOVA SOUTHEASTERN UNIVERSITY 3301 COLLEGE AVENUE FT. LAUDERDALE, FL 33314 | 59-1083502 | 501(C)(3) | 400,000. | 0. | | | GENERAL PURPOSE |
| OBERLIN COLLEGE DEVELOPMENT OFFICE OBERLIN, OH 44074 | 34-0714363 | | 11,800. | 0. | | | GENERAL PURPOSE |
| OCEAN REEF COMMUNITY FOUNDATION 35 OCEAN REEF DR., STE. 148 KEY LARGO, FL 33037 | 65-0509255 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| OLDFIELDS SCHOOL 1500 GLENCOE RD SPARKS GLENCOE, MD 21152 | 52-0591645 | | 70,000. | 0. | | | GENERAL PURPOSE |
| OPPORTUNITY INTERNATIONAL 550 WEST VAN BUREN, STE 200 CHICAGO, IL 60607 | 54-0907624 | | 7,000. | 0. | | | GENERAL PURPOSE |
| ORANGE CONGREGATIONS IN MISSION 300 MILLSTONE DR. HILLSBOROUGH, NC 27278 | 58-1563438 | | 250. | 0. | | | GENERAL PURPOSE |
| ORANGE COUNTY'S UNITED WAY 18012 MITCHELL AVENUE SOUTH IRVINE, CA 92614 | 33-0047994 | 501(C)(3) | 20,000. | 0. | | | GENERAL PURPOSE |
| OUR LADY OF LOURDES 2718 OVERBROOK DR. RALEIGH, NC 27608 | 56-0603909 | | 5,000. | 0. | | | GENERAL PURPOSE |
| OVERTURE OUTREACH INTERNATIONAL 2205 EASTCHESTER DRIVE, SUITE 105 HIGH POINT, NC 27265 | 82-0747699 | 501(C)(3) | 15,250. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| OXFAM AMERICA 226 CAUSEWAY STREET BOSTON, MA 02114-2206 | 23-7069110 | | 23,000. | 0. | | | GENERAL PURPOSE |
| PARTNERS FOR YOUTH OPPORTUNITY 1309 HALLEY STREET DURHAM, NC 27707 | 35-2206640 | | 14,750. | 0. | | | GENERAL PURPOSE |
| PARTNERS IN HEALTH PO BOX 996 FREDERICK, MD 21705-9942 | 04-3567502 | | 7,250. | 0. | | | GENERAL PURPOSE |
| PEOPLE'S ALLIANCE FUND 1011 MINERVA AVE DURHAM, NC 27701 | 58-1429955 | | 15,250. | 0. | | | GENERAL PURPOSE |
| PIEDMONT COMMUNITY COLLEGE FOUNDATION - POST OFFICE BOX 1101 - ROXBORO, NC 27573-1192 | 56-1374039 | | 250. | 0. | | | GENERAL PURPOSE |
| PIEDMONT CONSERVATION COUNCIL 721 FOSTER ST DURHAM, NC 27701 | 58-1798988 | 501(C)(3) | 25,250. | 0. | | | GENERAL PURPOSE |
| PLANNED PARENTHOOD SOUTH ATLANTIC, INC. - 100 S. BOYLAN AVE. - RALEIGH, NC 27603 | 56-1282557 | | 70,016. | 0. | | | GENERAL PURPOSE |
| PLAYMAKERS REPERTORY COMPANY UNC-CH - CENTER FOR DRAMATIC ART - CHAPEL HILL, NC 27599-3235 | | | 11,000. | 0. | | | GENERAL PURPOSE |
| PLAYWORKS EDUCATION ENERGIZED - DURHAM - PO BOX 51729 - DURHAM, NC 27717 | 94-3251867 | 501(C)(3) | 25,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| PRESERVATION NORTH CAROLINA PO BOX 27644 RALEIGH, NC 27611-7644 | 56-1145386 | | 26,250. | 0. | | | GENERAL PURPOSE |
| PROJECT ORBIS INTERNATIONAL, INC. 520 8TH AVENUE, 12TH FLOOR NEW YORK, NY 10018 | 23-7297651 | | 5,250. | 0. | | | GENERAL PURPOSE |
| PROJECT UPLIFT USA, INC. 7431-319 SIX FORKS ROAD RALEIGH, NC 27615 | 81-3471352 | 501(C)(3) | 15,000. | 0. | | | GENERAL PURPOSE |
| PUBLIC SCHOOL FORUM OF NC 3725 NATIONAL DRIVE STE 101 RALEIGH, NC 27612 | 58-1654064 | | 6,000. | 0. | | | GENERAL PURPOSE |
| PUBLIC SCHOOLS FIRST NC INC. PO BOX 37832 RALEIGH, NC 27627 | 46-1510531 | 501(C)(3) | 30,000. | 0. | | | GENERAL PURPOSE |
| PULLEN MEMORIAL BAPTIST CHURCH 1801 HILLSBOROUGH ST. RALEIGH, NC 27605 | | | 6,000. | 0. | | | GENERAL PURPOSE |
| QUEENS UNIVERSITY OF CHARLOTTE 1900 SELWYN AVE. CHARLOTTE, NC 28274 | 56-0530003 | | 1,500. | 0. | | | GENERAL PURPOSE |
| RACHEL'S NETWORK INC. 1200 18TH STREET, NW WASHINGTON, DC 20036 | 31-1644905 | | 19,500. | 0. | | | GENERAL PURPOSE |
| RALEIGH LITTLE THEATRE 301 POGUE STREET RALEIGH, NC 27607 | 56-0662726 | | 27,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| RALEIGH RESCUE MISSION PO BOX 27391 RALEIGH, NC 27611 | 56-6024168 | | 9,721. | 0. | | | GENERAL PURPOSE |
| RALEIGH SYMPHONY ORCHESTRA PO BOX 25878 RALEIGH, NC 27611-5878 | 58-1466397 | | 8,000. | 0. | | | GENERAL PURPOSE |
| RALEIGH/WAKE PARTNERSHIP TO END AND PREVENT HOMELESSNESS - PO BOX 18411 - RALEIGH, NC 27619 | 65-1267717 | | 11,000. | 0. | | | GENERAL PURPOSE |
| RALEIGH-CARY JEWISH FEDERATION, INC. - 8210 CREEDMOOR ROAD - RALEIGH, NC 27613 | 56-1553301 | | 29,125. | 0. | | | GENERAL PURPOSE |
| READ AND FEED PO BOX 5865 CARY, NC 27512 | 20-3246207 | | 17,250. | 0. | | | GENERAL PURPOSE |
| REBOUND - ALTERNATIVES FOR YOUTH 811 NINTH STREET DURHAM, NC 27705 | 46-2746995 | 501(C)(3) | 6,500. | 0. | | | GENERAL PURPOSE |
| REBUILDING TOGETHER OF THE TRIANGLE - 150 DONMOOR COURT - GARNER, NC 27529 | 56-1955629 | | 36,620. | 0. | | | GENERAL PURPOSE |
| RECOVERY COMMUNITIES OF NORTH CAROLINA INC. - 5245 CAPITAL BOULEVARD - RALEIGH, NC 24616 | 46-3288242 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| REGENTS SCHOOL OF CHARLOTTESVILLE 200 BOB FINLEY WAY CHARLOTTESVILLE, VA 22903-7045 | 27-3330373 | 501(C)(3) | 8,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| REINVESTMENT PARTNERS PO BOX 1929 DURHAM, NC 27702-1929 | 31-1587628 | | 10,000. | 0. | | | GENERAL PURPOSE |
| RENAISSANCE INTERNATIONAL INC. 1040 BAYVIEW DRIVE FORT LAUDERDALE, FL 33304 | 65-0461740 | | 5,500. | 0. | | | GENERAL PURPOSE |
| REWRITING THE CODE, INC. 2401 CRANFORD ROAD DURHAM, NC 27705 | 81-4978877 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| REX HOSPITAL FOUNDATION, INC. 2500 BLUE RIDGE ROAD RALEIGH, NC 27607 | 56-6052117 | | 104,800. | 0. | | | GENERAL PURPOSE |
| REYNOLDA HOUSE MUSEUM OF AMERICAN ART - P.O. BOX 7287 - WINSTON-SALEM, NC 27109 | 56-0810676 | | 5,000. | 0. | | | GENERAL PURPOSE |
| RIDGECREST BAPTIST CHURCH 1104 MILTON RD. DURHAM, NC 27712 | 56-0949695 | | 5,000. | 0. | | | GENERAL PURPOSE |
| ROCKY MOUNTAIN INSTITUTE 2490 JUNCTION PLACE, SUITE 200 BOULDER, CO 80302 | 74-2244146 | | 54,500. | 0. | | | GENERAL PURPOSE |
| RONALD MCDONALD HOUSE OF CHAPEL HILL INC. - 101 OLD MASON FARM ROAD - CHAPEL HILL, NC 27517 | 56-1413188 | | 5,029. | 0. | | | GENERAL PURPOSE |
| RONALD MCDONALD HOUSE OF DURHAM 506 ALEXANDER AVE. DURHAM, NC 27705 | 56-1220376 | | 10,264. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ROTARY FOUNDATION OF ROTARY INTERNATIONAL - ATTN: GRANTS DEPARTMENT - EVANSTON, IL 60201 | 36-3245072 | | 20,000. | 0. | | | GENERAL PURPOSE |
| SAFECHILD 864 WEST MORGAN STREET RALEIGH, NC 27603 | 56-1817816 | | 21,500. | 0. | | | GENERAL PURPOSE |
| SAINT ANDREWS PRESBYTERIAN CHURCH 7506 FALLS OF THE NEUSE ROAD RALEIGH, NC 27615 | 56-1127278 | | 21,000. | 0. | | | GENERAL PURPOSE |
| SALVATION ARMY - ATLANTA PO BOX 1959 ATLANTA, GA 30301 | 58-0660607 | | 5,000. | 0. | | | GENERAL PURPOSE |
| SALVATION ARMY BOYS AND GIRLS CLUB OF DURHAM - 810 N. ALSTON AVENUE - DURHAM, NC 27701 | 58-0660607 | | 5,250. | 0. | | | GENERAL PURPOSE |
| SALVATION ARMY OF DURHAM, ORANGE, PERSON COUNTIES - PO BOX 1330 - DURHAM, NC 27702-1330 | 58-0660607 | | 29,675. | 0. | | | GENERAL PURPOSE |
| SALVATION ARMY OF WAKE COUNTY PO BOX 27584 RALEIGH, NC 27611 | 58-0660607 | | 47,922. | 0. | | | GENERAL PURPOSE |
| SAMARITAN MINISTRIES 414 E. NORTHWEST BLVD WINSTON-SALEM, NC 27105 | 56-1490019 | | 10,000. | 0. | | | GENERAL PURPOSE |
| SAMARITAN'S FEET INTERNATIONAL PO BOX 78992 CHARLOTTE, NC 28271 | 14-1880905 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| SAMARITAN'S PURSE P.O. BOX 3000 BOONE, NC 28607 | 58-1437002 | | 13,750. | 0. | | | GENERAL PURPOSE |
| SANTA FE MOUNTAIN CENTER INC. PO BOX 449 TESUQUE, NM 87574 | 85-0272388 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| SARAH LAWRENCE COLLEGE 1 MEAD WAY BRONXVILLE, NY 10708-5999 | 23-7223216 | | 5,250. | 0. | | | GENERAL PURPOSE |
| SARAH P. DUKE GARDENS BOX 90341 DURHAM, NC 27708-0341 | | | 13,750. | 0. | | | GENERAL PURPOSE |
| SAVE THE CHILDREN FEDERATION, INC. 501 KINGS HWY E FAIRFIELD, CT 06825 | 06-0726487 | | 10,750. | 0. | | | GENERAL PURPOSE |
| SAVE THE FOX FOUNDATION 410 BROOKGREEN DRIVE CHAPEL HILL, NC 27516 | 81-1645478 | 501(C)(3) | 5,500. | 0. | | | GENERAL PURPOSE |
| SCHOOLHOUSE OF WONDER 5101-B NORTH ROXBORO ROAD DURHAM, NC 27704 | 56-1670472 | | 14,888. | 0. | | | GENERAL PURPOSE |
| SCHWAB CHARITABLE FUND 211 MAIN STREET SAN FRANCISCO, CA 94105 | 31-1640316 | 501(C)(3) | 24,646. | 0. | | | GENERAL PURPOSE |
| SEA EDUCATION ASSOCIATION, INC. P.O. BOX 6 WOODS HOLE, MA 02543 | 04-2702102 | | 5,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| SECU FAMILY HOUSE AT UNC HOSPITALS 123 OLD MASON FARM ROAD CHAPEL HILL, NC 27517-4431 | 91-2108125 | | 17,594. | 0. | | | GENERAL PURPOSE |
| SENIOR PHARMASSIST 406 RIGSBEE AVE. DURHAM, NC 27701-2186 | 56-2084639 | | 80,309. | 0. | | | GENERAL PURPOSE |
| SHRINERS HOSPITAL OF GREENVILLE SC 950 WEST FARIS ROAD GREENVILLE, SC 29605 | 36-2193608 | | 5,000. | 0. | | | GENERAL PURPOSE |
| SICHA 1004 WATTS ST DURHAM, NC 27701 | 27-4599275 | 501(C)(3) | 5,500. | 0. | | | GENERAL PURPOSE |
| SISTER CITIES OF DURHAM PO BOX 767 DURHAM, NC 27702 | 56-1627122 | | 6,279. | 0. | | | GENERAL PURPOSE |
| SISTER COMMUNITIES OF SAN RAMON NICARAGUA - PO BOX 766 - DURHAM, NC 27702 | 56-2161698 | | 26,000. | 0. | | | GENERAL PURPOSE |
| SLEEP TIGHT KIDS, INC 72 BALDWIN ROAD ARDEN, NC 28704 | 26-4410522 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| SMITHSONIAN INSTITUTION - OFFICE OF ADVANCEMENT - SIB 153, MRC 010 - WASHINGTON, DC 20013-7012 | 53-0206027 | | 20,000. | 0. | | | GENERAL PURPOSE |
| SOUTH EASTERN EFFORTS DEVELOPING SUSTAINABLE SPACES INC. - 706 GILBERT ST. - DURHAM, NC 27701 | 56-1876445 | | 34,120. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| SOUTHEAST RALEIGH ASSEMBLY 19 WEST HARGETT STREET RALEIGH, NC 27601 | 80-0484561 | 501(C)(3) | 15,000. | 0. | | | GENERAL PURPOSE |
| SOUTHERN COALITION FOR SOCIAL JUSTICE - 1415 WEST HIGHWAY 54 - DURHAM, NC 27707 | 26-0688375 | | 7,250. | 0. | | | GENERAL PURPOSE |
| SOUTHERN DOCUMENTARY FUND PO BOX 3622 DURHAM, NC 27702 | 75-2993148 | | 28,250. | 0. | | | GENERAL PURPOSE |
| SOUTHERN ENVIRONMENTAL LAW CENTER - HEADQUARTERS - 201 WEST MAIN ST. - CHARLOTTESVILLE, VA 22902-5065 | 52-1436778 | | 156,300. | 0. | | | GENERAL PURPOSE |
| SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE. MONTGOMERY, AL 36104 | 63-0598743 | | 14,530. | 0. | | | GENERAL PURPOSE |
| SOUTHERN VISION ALLIANCE PO BOX 51698 DURHAM, NC 27717 | 61-1639641 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| SPCA OF WAKE CO. 200 PETFINDER LANE RALEIGH, NC 27603 | 56-0891732 | | 9,500. | 0. | | | GENERAL PURPOSE |
| ST. ALBANS EPISCOPAL CHURCH 1501 WASHINGTON AVENUE ALBANY, CA 94706 | | 501(C)(3) | 6,000. | 0. | | | GENERAL PURPOSE |
| ST. ANDREW'S SEWANEE SCHOOL 290 QUINTARD ROAD SEWANEE, TN 37375 | 62-0475694 | | 50,000. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ST. AUGUSTINE'S UNIVERSITY 1315 OAKWOOD AVE. RALEIGH, NC 27610-2298 | 56-0547478 | | 5,250. | 0. | | | GENERAL PURPOSE |
| ST. BALDRICK'S FOUNDATION 1443 E. WASHINGTON BLVD PASADENA, CA 91104-2650 | 20-1173824 | | 6,000. | 0. | | | GENERAL PURPOSE |
| ST. DAVID'S SCHOOL 3400 WHITE OAK RD RALEIGH, NC 27609 | 23-7241145 | | 15,000. | 0. | | | GENERAL PURPOSE |
| ST. FRANCIS BY THE SEA EPISCOPAL CHURCH - 920 SALTER PATH ROAD - SALTER PATH, NC 28575 | 56-1792200 | 501(C)(3) | 6,500. | 0. | | | GENERAL PURPOSE |
| ST. GEORGE'S SCHOOL PO BOX 1910 NEWPORT, RI 02840-0190 | 05-0259009 | 501(C)(3) | 7,198. | 0. | | | GENERAL PURPOSE |
| ST. JOHN COMMUNITY FOUNDATION PO BOX 1020 ST. JOHN, VIRGIN ISLAN, BRITISH VIRGIN ISLANDS 831 | 66-0463145 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105 | 62-0646012 | | 25,680. | 0. | | | GENERAL PURPOSE |
| ST. LUKE'S EPISCOPAL CHURCH 1737 HILLANDALE ROAD DURHAM, NC 27705 | | | 6,058. | 0. | | | GENERAL PURPOSE |
| ST. MARY'S SCHOOL 900 HILLSBOROUGH ST. RALEIGH, NC 27603 | 56-0532314 | | 90,464. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| ST. MICHAEL'S EPISCOPAL CHURCH 1520 CANTERBURY RD. RALEIGH, NC 27608-1106 | 58-1488885 | 501(C)(3) | 9,250. | 0. | | | GENERAL PURPOSE |
| ST. STEPHEN CATHOLIC COMMUNITY 575 TUSKAWILLA ROAD WINTER SPRINGS, FL 32708 | | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| ST. TIMOTHY'S SCHOOL 4523 SIX FORKS ROAD RALEIGH, NC 27609 | | | 6,000. | 0. | | | GENERAL PURPOSE |
| STEPUP MINISTRY - RALEIGH 1701 OBERLIN ROAD RALEIGH, NC 27608 | 56-1655255 | | 55,354. | 0. | | | GENERAL PURPOSE |
| STUDENT ACTION WITH FARMWORKERS 1317 W. PETTIGREW STREET DURHAM, NC 27705 | 56-1789014 | | 19,500. | 0. | | | GENERAL PURPOSE |
| STUDENT U 600 E UMSTEAD STREET DURHAM, NC 27701 | 27-3460491 | | 15,000. | 0. | | | GENERAL PURPOSE |
| SUMMIT CHURCH - HOMESTEAD HEIGHTS BAPTIST CHURCH INC. - 2335-114 PRESIDENTIAL DRIVE - DURHAM, NC 27703 | 83-0398389 | | 49,300. | 0. | | | GENERAL PURPOSE |
| SUNSET INTERNATIONAL BIBLE INSTITUTE INC - 3723 34TH ST. - LUBBOCK, TX 79410 | 75-1853709 | 501(C)(3) | 1,000,000. | 0. | | | GENERAL PURPOSE |
| SUSAN G. KOMEN FOR THE CURE NC TRIANGLE AFFILIATE - 600 AIRPORT BLVD. - MORRISVILLE, NC 27560 | 75-2845066 | | 6,250. | 0. | | | GENERAL PURPOSE |

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| SWEET BRIAR COLLEGE PO BOX 1057 SWEET BRIAR, VA 24595 | 54-0534105 | | 51,000. | 0. | | | GENERAL PURPOSE |
| SWINGPALS INC. PO BOX 2994 DURHAM, NC 27715 | 27-4234469 | 501(C)(3) | 5,300. | 0. | | | GENERAL PURPOSE |
| TAMMY LYNN MEMORIAL FOUNDATION 739 CHAPPELL DR. RALEIGH, NC 27606 | 56-0999619 | | 13,000. | 0. | | | GENERAL PURPOSE |
| TEACH FOR AMERICA - EASTERN NC REGION - PO BOX 398540 - SAN FRANCISCO, CA 94139 | 13-3541913 | | 5,000. | 0. | | | GENERAL PURPOSE |
| THE ABUNDANCE FOUNDATION 220 LORAX LANE #5 PITTSBORO, NC 27312 | 20-4327530 | | 32,000. | 0. | | | GENERAL PURPOSE |
| THE CARTER CENTER 453 FREEDOM PARKWAY ATLANTA, GA 30307 | 58-1454716 | | 6,800. | 0. | | | GENERAL PURPOSE |
| THE COLLEGE FOUNDATION OF THE UNIVERSITY OF VIRGINIA - P.O. BOX 400807 - CHARLOTTESVILLE, VA 22904-4807 | 54-2009312 | | 9,378. | 0. | | | GENERAL PURPOSE |
| THE COMMUNITY FOUNDATION OF THE DAN RIVER REGION - 541 LOYAL STREET - DANVILLE, VA 24541 | 54-1823141 | | 5,000. | 0. | | | GENERAL PURPOSE |
| THE CULINARY INSTITUTE OF AMERICA ATTN: ACCOUNTS RECEIVABLE/ADVANCEMENT GIFT PROCESSING - HYDE PARK, NY 12538- | 06-0653264 | 501(C)(3) | 25,000. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| THE FORGE INITIATIVE PO BOX 4798 CARY, NC 27519 | 27-3380977 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| THE FOUNDATION OF HOPE FOR RESEARCH & TREATMENT OF MENTAL ILLNESS - 9401 GLENWOOD AVENUE - RALEIGH, NC 27617 | 56-6246626 | | 13,300. | 0. | | | GENERAL PURPOSE |
| THE GREEN CHAIR PROJECT 1853 CAPITAL BOULEVARD RALEIGH, NC 27604 | 27-2323103 | | 105,350. | 0. | | | GENERAL PURPOSE |
| THE HERITAGE 21 FOUNDATION 1601 JAMES STREET JONESBORO, AR 72401 | 81-2123236 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| THE HISTORIC PRESERVATION FOUNDATION OF NORTH CAROLINA INC. - PO BOX 27644 - RALEIGH, NC 27611-7644 | 56-1145386 | 501(C)(3) | 86,950. | 0. | | | GENERAL PURPOSE |
| THE MADEIRA SCHOOL 8328 GEORGETOWN PIKE MCLEAN, VA 22102 | 54-0505925 | | 10,000. | 0. | | | GENERAL PURPOSE |
| THE METHODIST HOME FOR CHILDREN INC. - 1041 WASHINGTON STREET - RALEIGH, NC 27605 | 56-0547482 | | 17,500. | 0. | | | GENERAL PURPOSE |
| THE MGH INSTITUTE OF HEALTH PROFESSIONS, INC. - 36 1ST AVENUE - BOSTON, MA 02129 | 04-2868893 | | 31,371. | 0. | | | GENERAL PURPOSE |
| THE MIAMI FOUNDATION 40 NW 3RD STREET, SUITE 305 MIAMI, FL 33128 | 65-0350357 | 501(C)(3) | 11,500. | 0. | | | GENERAL PURPOSE |

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|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| THE MIRACLE LEAGUE OF THE TRIANGLE, INC. - PO BOX 4193 - CARY, NC 27519 | 20-2696836 | | 32,750. | 0. | | | GENERAL PURPOSE |
| THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET - DURHAM, NC 27701-2394 | 53-0242652 | | 26,000. | 0. | | | GENERAL PURPOSE |
| THE NORTH CAROLINA PUBLIC TELEVISION FOUNDATION - 10 TW ALEXANDER DRIVE - RESEARCH TRIANGLE PARK, NC 27709-4900 | 58-1720178 | | 13,000. | 0. | | | GENERAL PURPOSE |
| THE SCHOOL OF JOURNALISM AND MASS COMMUNICATIONS FOUNDATION OF NC - CB #3365 - CHAPEL HILL, NC 27599-3365 | 56-6034739 | | 5,000. | 0. | | | GENERAL PURPOSE |
| THE SEEING EYE PO BOX 375 MORRISTOWN, NJ 07963-0375 | 22-1539721 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| THE TRANSFORMING CENTER 209 S NAPERVILLE ROAD WHEATON, IL 60187 | 32-0041715 | | 75,000. | 0. | | | GENERAL PURPOSE |
| THE TRIANGLE MARTIN LUTHER KING JR. COMMITTEE - P.O. BOX 25866 - RALEIGH, NC 27611 | 46-2290293 | 501(C)(3) | 40,000. | 0. | | | GENERAL PURPOSE |
| THE VESTRY OR WARDENS OF TRINITY EPISCOPAL CHURCH - 1305 MAIN STREET - SCOTLAND NECK, NC 27874 | | 501(C)(3) | 10,719. | 0. | | | GENERAL PURPOSE |
| THEGIFTED ARTS, INC 103 WEST MAIN STREET GARNER, NC 27529 | 45-2650004 | 501(C)(3) | 5,500. | 0. | | | GENERAL PURPOSE |

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|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| THRESHOLD PO BOX 11706 DURHAM, NC 27703 | 56-1458745 | | 17,370. | 0. | | | GENERAL PURPOSE |
| TIDES CENTER P.O. BOX 29907 SAN FRANCISCO, CA 94129-0907 | 94-3213100 | | 30,250. | 0. | | | GENERAL PURPOSE |
| TIDES FOUNDATION PO BOX 29903 SAN FRANCISCO, CA 94129-0903 | 51-0198509 | | 5,000. | 0. | | | GENERAL PURPOSE |
| TRANSITIONS LIFECARE 250 HOSPICE CIRCLE RALEIGH, NC 27607 | 56-1228779 | | 25,750. | 0. | | | GENERAL PURPOSE |
| TRIANGLE BIKEWORKS 117 W MAIN STREET CARRBORO, NC 27510 | 46-1229632 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| TRIANGLE DAY SCHOOL 4911 NEAL ROAD DURHAM, NC 27705-2359 | 56-1736992 | | 25,000. | 0. | | | GENERAL PURPOSE |
| TRIANGLE FAMILY SERVICES 3937 WESTERN BLVD RALEIGH, NC 27606 | 56-0547491 | | 32,366. | 0. | | | GENERAL PURPOSE |
| TRIANGLE LAND CONSERVANCY 514 SOUTH DUKE STREET DURHAM, NC 27701 | 58-1514406 | | 410,711. | 0. | | | GENERAL PURPOSE |
| TRIANGLE RADIO READING SERVICE 211 E. SIX FORKS ROAD RALEIGH, NC 27609 | 58-1528968 | | 28,007. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| TRINITY ACADEMY 10224 BAILEYWICK ROAD RALEIGH, NC 27613 | 56-1913131 | | 7,000. | 0. | | | GENERAL PURPOSE |
| TRINITY COLLEGE DEVELOPMENT OFFICE HARTFORD, CT 06106-3100 | 06-0646927 | | 25,000. | 0. | | | GENERAL PURPOSE |
| TRINITY SCHOOL OF DURHAM & CHAPEL HILL - 4011 PICKETT ROAD - DURHAM, NC 27705 | 56-1926923 | | 32,800. | 0. | | | GENERAL PURPOSE |
| TRINITY UNITED METHODIST CHURCH 215 N. CHURCH ST. DURHAM, NC 27701 | | | 12,111. | 0. | | | GENERAL PURPOSE |
| TROSА 1820 JAMES ST. DURHAM, NC 27707 | 56-1861158 | | 30,083. | 0. | | | GENERAL PURPOSE |
| TRUSTEES OF DARTMOUTH COLLEGE TUCK ANNUAL GIVING HANOVER, NH 03755-9000 | 02-0222111 | | 10,000. | 0. | | | GENERAL PURPOSE |
| UNC - CHAPEL HILL OFFICE OF UNIVERSITY DEVELOPMENT - PO BOX 309 - CHAPEL HILL, NC 27514-0309 | 56-6001393 | 501(C)(3) | 493,008. | 0. | | | GENERAL PURPOSE |
| UNC CENTER FOR PUBLIC TELEVISION PO BOX 14900 RESEARCH TRIANGLE PARK, NC 27709-4900 | 56-6172047 | | 62,615. | 0. | | | GENERAL PURPOSE |
| UNC CHAPEL HILL PO BOX 309 CHAPEL HILL, NC 27514 | 56-6001393 | 501(C)(3) | 35,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| UNC CHAPEL HILL PO BOX 309 CHAPEL HILL, NC 27514 | 56-6001393 | | 305,495. | 0. | | | GENERAL PURPOSE |
| UNC CHAPEL HILL PUBLIC HEALTH FOUNDATION, INC. - PO BOX 899 - CHAPEL HILL, NC 27514-0309 | 56-1717285 | | 6,000. | 0. | | | GENERAL PURPOSE |
| UNC CHILDREN'S OFFICE OF EXTERNAL AFFAIRS - CAMPUS BOX #7237 - CHAPEL HILL, NC 27599-7237 | 56-6057494 | | 11,000. | 0. | | | GENERAL PURPOSE |
| UNC LINEBERGER COMPREHENSIVE CANCER CENTER - EXTERNAL AFFAIRS OFFICE - CHAPEL HILL, NC 27599 | 56-6057494 | | 10,800. | 0. | | | GENERAL PURPOSE |
| UNC PRESS 116 S. BOUNDARY STREET CHAPEL HILL, NC 27514 | 56-6001394 | | 41,000. | 0. | | | GENERAL PURPOSE |
| UNC SCHOOL OF EDUCATION 103 PEABODY HALL CHAPEL HILL, NC 27599-3500 | 56-6001393 | | 45,595. | 0. | | | GENERAL PURPOSE |
| UNC SCHOOL OF THE ARTS FOUNDATION 1533 S. MAIN ST. WINSTON-SALEM, NC 27127-2188 | 56-6064850 | | 13,863. | 0. | | | GENERAL PURPOSE |
| UNION OF CONCERNED SCIENTISTS TWO BRATTLE SQUARE CAMBRIDGE, MA 02138-9105 | 04-2535767 | | 10,500. | 0. | | | GENERAL PURPOSE |
| UNITED ARTS COUNCIL OF RALEIGH AND WAKE CO. - 410 GLENWOOD AVENUE - RALEIGH, NC 27603 | 56-0770175 | | 51,820. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| UNITED STATES FUND FOR UNICEF 125 MAIDEN LANE NEW YORK, NY 10038 | 13-1760110 | | 13,250. | 0. | | | GENERAL PURPOSE |
| UNITED WAY OF CHATHAM COUNTY PO BOX 1066 PITTSBORO, NC 27312 | 58-1897275 | | 5,250. | 0. | | | GENERAL PURPOSE |
| UNITED WAY OF FORSYTH COUNTY 301 NORTH MAIN STREET WINSTON-SALEM, NC 27101-2805 | 23-7357234 | | 150,000. | 0. | | | GENERAL PURPOSE |
| UNITED WAY OF METRO NASHVILLE 250 VENTURE CIRCLE NASHVILLE, TN 37228-1604 | 62-0533104 | | 10,000. | 0. | | | GENERAL PURPOSE |
| UNITED WAY OF THE GREATER TRIANGLE PO BOX 110583 DURHAM, NC 27709-0962 | 56-1949103 | | 127,469. | 0. | | | GENERAL PURPOSE |
| UNITED WAY WORLDWIDE 701 N. FAIRFAX STREET ALEXANDRIA, VA 22314 | 13-1635294 | 501(C)(3) | 110,281. | 0. | | | GENERAL PURPOSE |
| UNIVERSITY UNITED METHODIST CHURCH PO BOX 728 CHAPEL HILL, NC 27514 | 56-0898043 | | 35,000. | 0. | | | GENERAL PURPOSE |
| URBAN MINISTRIES OF DURHAM PO BOX 249 DURHAM, NC 27702 | 58-1505891 | | 60,142. | 0. | | | GENERAL PURPOSE |
| URBAN MINISTRIES OF WAKE COUNTY PO BOX 26476 RALEIGH, NC 27611 | 58-1422700 | | 11,500. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| US NAVAL ACADEMY FOUNDATION, INC. 291 WOOD ROAD - BEACH HALL ANNAPOLIS, MD 21402 | 23-7003516 | | 10,000. | 0. | | | GENERAL PURPOSE |
| USA FIELD HOCKEY ASSOCIATION INC. 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909 | 23-6299893 | | 7,000. | 0. | | | GENERAL PURPOSE |
| USO OF NORTH CAROLINA, INC. 600 AIRPORT BOULEVARD STE 200 MORRISVILLE, NC 27560 | 56-0532315 | | 5,925. | 0. | | | GENERAL PURPOSE |
| UT SOUTHWESTERN MEDICAL CENTER OFFICE OF DEVELOPMENT & ALUMNIRELATIONS - DALLAS, TX 75391-0888 | 75-0945939 | 501(C)(3) | 52,000. | 0. | | | GENERAL PURPOSE |
| VAAD HANOCHOS HATMIMIM, DBA THE MEANINGFUL LIFE CENTER - 788 EASTERN PKWY RM 303 - BROOKLYN, NY 11213 | 11-2633052 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| VANGUARD CHARITABLE ENDOWMENT PROGRAM - PO BOX 9509 - WARWICK, RI 02889-9509 | 23-2888152 | | 689,453. | 0. | | | GENERAL PURPOSE |
| VIRGINIA EPISCOPAL SCHOOL 400 VES ROAD LYNCHBURG, VA 24503 | 54-0506431 | | 42,000. | 0. | | | GENERAL PURPOSE |
| VOICES TOGETHER 5007 SOUTHPARK DR. DURHAM, NC 27713 | 20-4612388 | | 23,000. | 0. | | | GENERAL PURPOSE |
| WAKE COUNTY SMARTSTART 4901 WATERS EDGE DRIVE, SUITE 101 RALEIGH, NC 27606 | 56-1949415 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| WAKE EDUCATION PARTNERSHIP 706 HILLSBOROUGH ST. RALEIGH, NC 27603 | 58-1518182 | | 20,000. | 0. | | | GENERAL PURPOSE |
| WAKE FOREST UNIVERSITY OFFICE OF UNIVERSITY ADVANCEMENT WINSTON-SALEM, NC 27109 | 56-0532138 | | 1,007,000. | 0. | | | GENERAL PURPOSE |
| WAKE TECHNICAL COMMUNITY COLLEGE FOUNDATION INC. - 9101 FAYETTEVILLE ROAD - RALEIGH, NC 27603 | 23-7017752 | | 10,250. | 0. | | | GENERAL PURPOSE |
| WAKEMED FOUNDATION 3000 NEW BERN AVE. RALEIGH, NC 27610 | 56-6017737 | | 10,000. | 0. | | | GENERAL PURPOSE |
| WAKEUP WAKE COUNTY P.O. BOX 6484 RALEIGH, NC 27628-6484 | 86-1172522 | | 50,000. | 0. | | | GENERAL PURPOSE |
| WALKING CLASSROOM INSTITUTE 1414 RALEIGH ROAD CHAPEL HILL, NC 27517 | 27-4477692 | 501(C)(3) | 28,750. | 0. | | | GENERAL PURPOSE |
| WALLTOWN CHILDREN'S THEATRE 1225 BERKELEY ST. DURHAM, NC 27705 | 56-2214825 | | 13,000. | 0. | | | GENERAL PURPOSE |
| WASHINGTON AND LEE UNIVERSITY DEVELOPMENT BUILDING LEXINGTON, VA 24450 | 54-0505977 | | 6,000. | 0. | | | GENERAL PURPOSE |
| WATTS STREET BAPTIST CHURCH 800 WATTS ST. DURHAM, NC 27701 | | | 5,500. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| WCPE RADIO - EDUCATIONAL INFORMATION CORPORATION - PO BOX 897 - WAKE FOREST, NC 27588 | 56-1061859 | | 12,300. | 0. | | | GENERAL PURPOSE |
| WESLEY FOUNDATION OF GREENVILLE N C PO BOX 3192 GREENVILLE, NC 27836 | 56-0768118 | | 25,000. | 0. | | | GENERAL PURPOSE |
| WEST CHATHAM FOOD PANTRY 126 VILLAGE LAKE ROAD SILER CITY, NC 27344 | 51-0634273 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| WEST SPRINGFIELD HIGH SCHOOL 26 CENTRAL STREET WEST SPRINGFIELD, MA 01089 | | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| WESTERN WAKE CRISIS MINISTRY 1600 OLIVE CHAPEL ROAD APEX, NC 27502 | 56-1585440 | | 15,000. | 0. | | | GENERAL PURPOSE |
| WESTMINSTER PRESBYTERIAN CHURCH 3639 OLD CHAPEL HILL ROAD DURHAM, NC 27707 | 56-0893567 | | 4,000. | 0. | | | GENERAL PURPOSE |
| WHITE MEMORIAL PRESBYTERIAN CHURCH 1704 OBERLIN ROAD RALEIGH, NC 27608 | | | 538,733. | 0. | | | GENERAL PURPOSE |
| WHITE OAK FOUNDATION, INC. 1621 WHITE OAK CHURCH ROAD APEX, NC 27523 | 56-2093795 | | 17,620. | 0. | | | GENERAL PURPOSE |
| WHITE PLAINS UNITED METHODIST CHURCH - 313 S.E. MAYNARD RD - CARY, NC 27511-4511 | 56-1031475 | | 11,000. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| WHITMORE PARK DISTRICT 5603 ARROWHEAD CT. DECATUR, IL 62521 | 06-1750555 | | 10,000. | 0. | | | GENERAL PURPOSE |
| WIDERNET PROJECT 1906 EAST NC HIGHWAY 54 STE 100F DURHAM, NC 27713 | 46-1028799 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| WINSTON-SALEM FOUNDATION 751 WEST FORTH STREET WINSTON-SALEM, NC 27101-2702 | 56-6037615 | | 5,500. | 0. | | | GENERAL PURPOSE |
| WISDOM FOR THE HEART INC. PO BOX 5729 CARY, NC 27512 | 56-2244684 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| WOMEN IN NEED INC. 115 W 31ST ST NEW YORK, NY 10001 | 13-3164477 | 501(C)(3) | 10,000. | 0. | | | GENERAL PURPOSE |
| WOMENNC PO BOX 3021 CARY, NC 27519-3021 | 27-2134751 | 501(C)(3) | 21,000. | 0. | | | GENERAL PURPOSE |
| WOMEN'S CENTER OF WAKE CO. 112 COX AVENUE RALEIGH, NC 27601 | 58-1316004 | | 14,870. | 0. | | | GENERAL PURPOSE |
| WOODBERRY FOREST SCHOOL 402 WOODBERRY STATION WOODBERRY FOREST, VA 22989 | 54-0519590 | | 8,700. | 0. | | | GENERAL PURPOSE |
| WORLD WILDLIFE FUND, INC. 1250 24TH ST. NW WASHINGTON, DC 20090-7180 | 52-1693387 | | 7,340. | 0. | | | GENERAL PURPOSE |

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| WOUNDED WARRIOR PROJECT INC. 4899 BELFORT ROAD SUITE 300 JACKSONVILLE, FL 32256 | 20-2370934 | 501(C)(3) | 8,250. | 0. | | | GENERAL PURPOSE |
| WUNC - NORTH CAROLINA PUBLIC RADIO 120 FRIDAY CENTER DR. CHAPEL HILL, NC 27517 | 56-6001393 | | 50,365. | 0. | | | GENERAL PURPOSE |
| YMCA OF THE TRIANGLE AREA FINANCIAL DEVELOPMENT OFFICE RALEIGH, NC 27607-5073 | 56-0591307 | | 279,898. | 0. | | | GENERAL PURPOSE |
| YNPN TRIANGLE NC PO BOX 732 MORRISVILLE, NC 27560 | 45-3633429 | | 30,250. | 0. | | | GENERAL PURPOSE |
| YORK COLLEGE OF PENNSYLVANIA 441 COUNTRY CLUB ROAD YORK, PA 17403-3651 | 23-1352698 | | 5,000. | 0. | | | GENERAL PURPOSE |
| YOUNG LIFE P.O. BOX 70065 PRESCOTT, AZ 86304-7065 | 84-0385934 | | 36,000. | 0. | | | GENERAL PURPOSE |
| YOUTH VILLAGES, INC. 1822 E. NC HWY 54, SUITE 300 DURHAM, NC 27713 | 58-1716970 | 501(C)(3) | 5,000. | 0. | | | GENERAL PURPOSE |
| ZOE MINISTRY 700 WATERFIELD RIDGE PLACE GARNER, NC 27529 | 45-4671349 | | 24,000. | 0. | | | GENERAL PURPOSE |

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|---------------------------------------|
| | | | | | |
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| | | | | | |
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| | | | | | |
| | | | | | |

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

GRANTS COORDINATOR RECEIVES GRANT RECOMMENDATIONS, PERFORMS DUE DILIGENCE

ON GRANTEE. RECORDS ON GRANTS AND GRANTEES ARE MAINTAINED IN DATABASE.

DONOR SERVICES REVIEWS AND SIGNS GRANT LETTERS. FINANCE REVIEWS GRANTS,

REVIEWS AND SIGNS GRANT CHECKS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

| | |
|--|---|
| Name of the organization TRIANGLE COMMUNITY FOUNDATION INC | Employer identification number 56-1380796 |
|--|---|

Part I Questions Regarding Compensation

| | Yes | No |
|---|-----------|----|
| 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) | | |
| b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | 1b | |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? | 2 | |
| 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee | | |
| 4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: | | |
| a Receive a severance payment or change-of-control payment? | 4a | X |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | 4b | X |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | X |
| If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | |
| Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | |
| 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: | | |
| a The organization? | 5a | X |
| b Any related organization? | 5b | X |
| If "Yes" on line 5a or 5b, describe in Part III. | | |
| 6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: | | |
| a The organization? | 6a | X |
| b Any related organization? | 6b | X |
| If "Yes" on line 6a or 6b, describe in Part III. | | |
| 7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III | 7 | X |
| 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | 8 | X |
| 9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? | 9 | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) reported as deferred on prior Form 990 |
|-------------------------------------|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| (1) LORI O'KEEFE PRESIDENT & CEO | (i) | 179,712. | 0. | 0. | 11,144. | 22,292. | 213,148. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) ROBERT NAYLOR CFO | (i) | 135,716. | 0. | 0. | 8,381. | 20,252. | 164,349. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2017

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization **TRIANGLE COMMUNITY FOUNDATION INC** Employer identification number **56-1380796**

Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|--|----------------------------|---|--|---|
| 1 Art - Works of art | | | | |
| 2 Art - Historical treasures | | | | |
| 3 Art - Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities - Publicly traded | X | 85 | 11,552,350. | FAIR MARKET VALUE |
| 10 Securities - Closely held stock | | | | |
| 11 Securities - Partnership, LLC, or trust interests | | | | |
| 12 Securities - Miscellaneous | X | 3 | 1,816,392. | FAIR MARKET VALUE |
| 13 Qualified conservation contribution - Historic structures | | | | |
| 14 Qualified conservation contribution - Other | | | | |
| 15 Real estate - Residential | | | | |
| 16 Real estate - Commercial | | | | |
| 17 Real estate - Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | | | | |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other () | | | | |
| 26 Other () | | | | |
| 27 Other () | | | | |
| 28 Other () | | | | |

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 1

| | Yes | No |
|---|-----|----|
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? | | X |
| b If "Yes," describe the arrangement in Part II. | | |
| 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? | X | |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | X | |
| b If "Yes," describe in Part II. | | |
| 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2017

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

THE ORGANIZATION USES TCF REAL ESTATE FOUNDATION, A RELATED ORGANIZATION, TO PROCESS GIFTS OF REAL PROPERTY.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization

TRIANGLE COMMUNITY FOUNDATION INC

Employer identification number

56-1380796

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TRIANGLE COMMUNITY FOUNDATION CONNECTS PHILANTHROPIC RESOURCES WITH

COMMUNITY NEEDS, CREATES OPPORTUNITY FOR ENLIGHTENED CHANGES AND

ENCOURAGES PHILANTHROPY AS A WAY OF LIFE.

FORM 990, PART VI, SECTION B, LINE 11B:

FINANCE STAFF REVIEWS AND SUPPLIES WORKSHEETS TO AID REVIEW BY BOARD BEFORE

FILING THE FORM TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ON AN ANNUAL BASIS, THE BOARD MEMBERS AND EMPLOYEES REVIEW THE CONFLICT OF

INTEREST POLICY AND ANNUALLY ATTEST THAT THEY HAD NO CONFLICTS, OR DOCUMENT

POTENTIAL CONFLICTS. THEY ALSO SIGN THE WHISTLEBLOWER POLICY ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15:

THE REVIEW OF THE PRESIDENT'S PERFORMANCE IS DONE ANNUALLY. THE EXECUTIVE

COMMITTEE IS IN CHARGE OF THE REVIEW PROCESS. INDUSTRY SURVEY DATA IS

USED TO ENSURE THAT SALARY IS COMPETITIVE AMONG PEERS. THE BOARD ANNUALLY

APPROVES THE PRESIDENT'S SALARY.

FORM 990, PART VI, SECTION C, LINE 19:

OUR ANNUAL AUDIT REPORT, FORM 990, WHISTLEBLOWER POLICY AND DETERMINATION

LETTER ARE MADE PUBLIC THROUGH OUR WEBSITE. ALL OTHER DOCUMENTS OPEN TO

PUBLIC INSPECTION ARE AVAILABLE UPON REQUEST FOR THE SAME PERIOD OF

DISCLOSURE AS SET FORTH IN SECTION 6104(D).

| | |
|---|--|
| Name of the organization TRIANGLE COMMUNITY FOUNDATION INC | Employer identification number 56-1380796 |
|---|--|

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

| | |
|--|----------|
| CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS | 191,675. |
|--|----------|

FORM 990, PART XII, LINE 2C:

THE PROCESS FOR OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND
SELECTION OF AN INDEPENDENT ACCOUNTANT THAT AUDITED THE FINANCIAL
STATEMENTS HAS BEEN CONSISTENT WITH PRIOR YEARS.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization **TRIANGLE COMMUNITY FOUNDATION INC** Employer identification number **56-1380796**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

| (a) Name, address, and EIN (if applicable) of disregarded entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Total income | (e) End-of-year assets | (f) Direct controlling entity |
|--|-------------------------|---|---------------------|---------------------------|-------------------------------------|
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Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Exempt Code section | (e) Public charity status (if section 501(c)(3)) | (f) Direct controlling entity | (g) Section 512(b)(13) controlled entity? | |
|---|--|---|-------------------------------|---|-------------------------------------|--|----|
| | | | | | | Yes | No |
| DURHAM ARTS COUNCIL ENDOWMENT FUND - 56-1826969, PO BOX 12729, DURHAM, NC 27709 | TO PROVIDE A PERMANENT ENDOWMENT OF SUPPORT FOR LOCAL ARTS ORGANIZATIONS | NORTH CAROLINA | 501(C)(3) | LINE 12A, I | TRIANGLE COMMUNITY FOUNDATION | X | |
| TRIANGLE COMMUNITY FOUNDATION REAL ESTATE FOUNDATION - 20-1398786, PO BOX 12729, DURHAM, NC 27709 | RECEIVES, MANAGES, AND SELLS REAL ESTATE, GRANTS TO TCF | NORTH CAROLINA | 501(C)(3) | LINE 12A, I | TRIANGLE COMMUNITY FOUNDATION | X | |
| | | | | | | | |
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Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income | (g) Share of end-of-year assets | (h) Disproportionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General or managing partner? | | (k) Percentage ownership |
|--|-------------------------|---|-------------------------------------|---|---------------------------------|--|---|----|---|---|----|--------------------------------|
| | | | | | | | Yes | No | | Yes | No | |
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a) Name, address, and EIN of related organization | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Type of entity (C corp, S corp, or trust) | (f) Share of total income | (g) Share of end-of-year assets | (h) Percentage ownership | (i) Section 512(b)(13) controlled entity? | |
|--|-------------------------|---|-------------------------------------|--|---------------------------------|--|--------------------------------|---|----|
| | | | | | | | | Yes | No |
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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

| | Yes | No |
|--|-----|----|
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | | X |
| b Gift, grant, or capital contribution to related organization(s) | | X |
| c Gift, grant, or capital contribution from related organization(s) | X | |
| d Loans or loan guarantees to or for related organization(s) | | X |
| e Loans or loan guarantees by related organization(s) | | X |
| f Dividends from related organization(s) | | X |
| g Sale of assets to related organization(s) | | X |
| h Purchase of assets from related organization(s) | | X |
| i Exchange of assets with related organization(s) | | X |
| j Lease of facilities, equipment, or other assets to related organization(s) | | X |
| k Lease of facilities, equipment, or other assets from related organization(s) | | X |
| l Performance of services or membership or fundraising solicitations for related organization(s) | | X |
| m Performance of services or membership or fundraising solicitations by related organization(s) | | X |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | X | |
| o Sharing of paid employees with related organization(s) | X | |
| p Reimbursement paid to related organization(s) for expenses | | X |
| q Reimbursement paid by related organization(s) for expenses | | X |
| r Other transfer of cash or property to related organization(s) | | X |
| s Other transfer of cash or property from related organization(s) | | X |

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

| (a) Name of related organization | (b) Transaction type (a-s) | (c) Amount involved | (d) Method of determining amount involved |
|--------------------------------------|-------------------------------|------------------------|--|
| (1) TCF REAL ESTATE FOUNDATION, INC. | C | 59,108. | CASH VALUE |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2017

For calendar year 2017 or other tax year beginning JUL 1, 2017, and ending JUN 30, 2018

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue Service

Open to Public Inspection for
501(c)(3) Organizations Only

| | | | |
|---|------------------------------|---|---|
| A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) | Print or Type | Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) TRIANGLE COMMUNITY FOUNDATION INC Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 12729 City or town, state or province, country, and ZIP or foreign postal code DURHAM, NC 27709-2729 | D Employer identification number (Employees' trust, see instructions.) 56-1380796 E Unrelated business activity codes (See instructions.) 900099 |
|---|------------------------------|---|---|

| | |
|---|---|
| C Book value of all assets at end of year 243,987,009. | F Group exemption number (See instructions.) ▶ G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust |
|---|---|

H Describe the organization's primary unrelated business activity. ▶ **RECIPIENT OF UBTI FROM ALTERNATIVE INVESTMENTS**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
 If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **ROBERT NAYLOR** Telephone number ▶ **919-474-8370**

| Part I Unrelated Trade or Business Income | (A) Income | (B) Expenses | (C) Net |
|---|--------------------|--------------|----------|
| 1a Gross receipts or sales | | | |
| b Less returns and allowances | | | |
| c Balance | 1c | | |
| 2 Cost of goods sold (Schedule A, line 7) | 2 | | |
| 3 Gross profit. Subtract line 2 from line 1c | 3 | | |
| 4a Capital gain net income (attach Schedule D) | 4a 15,455. | | 15,455. |
| b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) | 4b | | |
| c Capital loss deduction for trusts | 4c | | |
| 5 Income (loss) from partnerships and S corporations (attach statement) | 5 -55,721. | | -55,721. |
| 6 Rent income (Schedule C) | 6 | | |
| 7 Unrelated debt-financed income (Schedule E) | 7 | | |
| 8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F) ... | 8 | | |
| 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) | 9 | | |
| 10 Exploited exempt activity income (Schedule I) | 10 | | |
| 11 Advertising income (Schedule J) | 11 | | |
| 12 Other income (See instructions; attach schedule) | 12 | | |
| 13 Total. Combine lines 3 through 12 | 13 -40,266. | | -40,266. |

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
 (Except for contributions, deductions must be directly connected with the unrelated business income.)

| | | |
|--|------------|------------|
| 14 Compensation of officers, directors, and trustees (Schedule K) | 14 | |
| 15 Salaries and wages | 15 | |
| 16 Repairs and maintenance | 16 | |
| 17 Bad debts | 17 | |
| 18 Interest (attach schedule) | 18 | |
| 19 Taxes and licenses | 19 | |
| 20 Charitable contributions (See instructions for limitation rules) | 20 | |
| 21 Depreciation (attach Form 4562) | 21 | |
| 22 Less depreciation claimed on Schedule A and elsewhere on return | 22a | 22b |
| 23 Depletion | 23 | |
| 24 Contributions to deferred compensation plans | 24 | |
| 25 Employee benefit programs | 25 | |
| 26 Excess exempt expenses (Schedule I) | 26 | |
| 27 Excess readership costs (Schedule J) | 27 | |
| 28 Other deductions (attach schedule) | 28 | |
| 29 Total deductions. Add lines 14 through 28 | 29 | 0. |
| 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 | 30 | -40,266. |
| 31 Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 1 | 31 | |
| 32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 | 32 | -40,266. |
| 33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) | 33 | 1,000. |
| 34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32 | 34 | -40,266. |

Part III Tax Computation

| | | | |
|---|--|------------|----|
| 35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and: | | | |
| a | Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____ | | |
| b | Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____ | | |
| c | Income tax on the amount on line 34 | 35c | 0. |
| 36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) | | 36 | |
| 37 Proxy tax. See instructions | | 37 | |
| 38 Alternative minimum tax | | 38 | |
| 39 Tax on Non-Compliant Facility Income. See instructions | | 39 | |
| 40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies | | 40 | 0. |

Part IV Tax and Payments

| | | | |
|------------|--|------------|----|
| 41a | Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) | 41a | |
| b | Other credits (see instructions) | 41b | |
| c | General business credit. Attach Form 3800 | 41c | |
| d | Credit for prior year minimum tax (attach Form 8801 or 8827) | 41d | |
| e | Total credits. Add lines 41a through 41d | 41e | |
| 42 | Subtract line 41e from line 40 | 42 | 0. |
| 43 | Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule) | 43 | |
| 44 | Total tax. Add lines 42 and 43 | 44 | 0. |
| 45a | Payments: A 2016 overpayment credited to 2017 | 45a | |
| b | 2017 estimated tax payments | 45b | |
| c | Tax deposited with Form 8868 | 45c | |
| d | Foreign organizations: Tax paid or withheld at source (see instructions) | 45d | |
| e | Backup withholding (see instructions) | 45e | |
| f | Credit for small employer health insurance premiums (Attach Form 8941) | 45f | |
| g | Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total | 45g | |
| 46 | Total payments. Add lines 45a through 45g | 46 | |
| 47 | Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> | 47 | |
| 48 | Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed | 48 | 0. |
| 49 | Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid | 49 | 0. |
| 50 | Enter the amount of line 49 you want: Credited to 2018 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/> | 50 | |

Part V Statements Regarding Certain Activities and Other Information (see instructions)

| | | | |
|-----------|--|-----|----|
| 51 | At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here | Yes | No |
| 52 | During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. | | X |
| 53 | Enter the amount of tax-exempt interest received or accrued during the tax year \$ | | |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer _____ Date _____
 _____ Title _____
 TREASURER
 May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only
 Print/Type preparer's name: YONG ZHANG, CPA
 Preparer's signature: _____
 Date: _____
 Check if self-employed
 PTIN: P01249785
 Firm's name: RSM US LLP
 Firm's EIN: 42-0714325
 Firm's address: 1861 INTERNATIONAL DRIVE, SUITE 400
 MCLEAN, VA 22102
 Phone no. 703-336-6400

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶ N/A

| | | | | | | | |
|--|-----------|--|--|----------|--|-----|----|
| 1 Inventory at beginning of year | 1 | | 6 Inventory at end of year | 6 | | | |
| 2 Purchases | 2 | | 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2 | 7 | | | |
| 3 Cost of labor | 3 | | | | | | |
| 4a Additional section 263A costs (attach schedule) | 4a | | | | | | |
| b Other costs (attach schedule) | 4b | | 8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? | | | Yes | No |
| 5 Total. Add lines 1 through 4b | 5 | | | | | | |

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

| |
|-----|
| (1) |
| (2) |
| (3) |
| (4) |

2. Rent received or accrued

| (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) | (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) | 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) |
|--|--|--|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| Total | 0. | Total 0. |

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶ 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

| 1. Description of debt-financed property | 2. Gross income from or allocable to debt-financed property | 3. Deductions directly connected with or allocable to debt-financed property | | |
|---|---|--|---|---|
| | | (a) Straight line depreciation (attach schedule) | (b) Other deductions (attach schedule) | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) | 6. Column 4 divided by column 5 | 7. Gross income reportable (column 2 x column 6) | 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b)) |
| (1) | | % | | |
| (2) | | % | | |
| (3) | | % | | |
| (4) | | % | | |
| Totals | | | Enter here and on page 1, Part I, line 7, column (A). 0. | Enter here and on page 1, Part I, line 7, column (B). 0. |
| Total dividends-received deductions included in column 8 | | | | 0. |

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations | | | |
|------------------------------------|-----------------------------------|---|-------------------------------------|---|--|
| | | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made | 5. Part of column 4 that is included in the controlling organization's gross income | 6. Deductions directly connected with income in column 5 |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |

Nonexempt Controlled Organizations

| 7. Taxable income | 8. Net unrelated income (loss) (see instructions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 |
|---------------------|---|-------------------------------------|--|--|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| | | | Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). | Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). |
| Totals | | | 0. | 0. |

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

| 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach schedule) | 4. Set-asides (attach schedule) | 5. Total deductions and set-asides (col. 3 plus col. 4) |
|--------------------------|---------------------|---|---------------------------------|---|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| | | Enter here and on page 1, Part I, line 9, column (A). | | Enter here and on page 1, Part I, line 9, column (B). |
| Totals | | 0. | | 0. |

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | 3. Expenses directly connected with production of unrelated business income | 4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7. | 5. Gross income from activity that is not unrelated business income | 6. Expenses attributable to column 5 | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4). |
|--------------------------------------|---|---|--|---|--------------------------------------|--|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| | Enter here and on page 1, Part I, line 10, col. (A). | Enter here and on page 1, Part I, line 10, col. (B). | | | | Enter here and on page 1, Part II, line 26. |
| Totals | 0. | 0. | | | | 0. |

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4). |
|--|-----------------------------|-----------------------------|--|-----------------------|---------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals (carry to Part II, line (5)) | 0. | 0. | | | | 0. |

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4). |
|--|-----------------------------|-----------------------------|--|-----------------------|---------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I | 0. | 0. | | | | 0. |
| Totals, Part II (lines 1-5) | 0. | 0. | | | | 0. |

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percent of time devoted to business | 4. Compensation attributable to unrelated business |
|--|----------|--|--|
| (1) | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total. Enter here and on page 1, Part II, line 14 | | | 0. |

FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT 1

| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
|-----------------------------------|----------------|-------------------------|----------------|---------------------|
| 06/30/14 | 85,096. | 58,296. | 26,800. | 26,800. |
| 06/30/15 | 188,298. | 0. | 188,298. | 188,298. |
| 06/30/17 | 70,541. | 0. | 70,541. | 70,541. |
| NOL CARRYOVER AVAILABLE THIS YEAR | | | 285,639. | 285,639. |

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS STATEMENT 2

| PARTNERSHIP NAME | GROSS INCOME | DEDUCTIONS | NET INCOME OR (LOSS) |
|---|--------------|------------|----------------------|
| AETHER REAL ASSETS III, LP (46-3402754) | -6,009. | 2,199. | -8,208. |
| BLUE HERON REAL ESTATE OPPORTUNITY FUND II LP (61-1756010) | -7,086. | 0. | -7,086. |
| CROSSHARBOR INST PARTNERS (27-4335021) | -17,875. | 0. | -17,875. |
| DENHAM COMMODITY PARTNERS (45-2484628) | 31,741. | 59,252. | -27,511. |
| GEM REALTY FUND (46-1696235) | 7,434. | 162. | 7,272. |
| MONTAUK TRIGUARD FUND VI, LP (46-5301209) | -3,260. | 0. | -3,260. |
| NORTHGATE IV, LP (26-1902666) | 3,152. | 0. | 3,152. |
| PERENNIAL REAL ESTATE FUND II, LP (27-0749535) | 6,337. | 953. | 5,384. |
| STEPSTONE PIONEER CAPITAL III LP (26-0668106) | 1,180. | 2,436. | -1,256. |
| TIFF PRIVATE EQUITY PARTNERS (26-3319245) | -5,649. | 684. | -6,333. |
| TOTAL TO FORM 990-T, PAGE 1, LINE 5 | 9,965. | 65,686. | -55,721. |

Capital Gains and Losses
 ▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L,
 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.
 ▶ Go to www.irs.gov/Form1120 for instructions and the latest information.

2017

| | |
|---|--|
| Name TRIANGLE COMMUNITY FOUNDATION INC | Employer identification number 56-1380796 |
|---|--|

| Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less | | | | |
|--|----------------------------------|---------------------------------|---|--|
| See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. | (d) Proceeds (sales price) | (e) Cost (or other basis) | (g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g) | (h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g) |
| 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b | | | | |
| 1b Totals for all transactions reported on Form(s) 8949 with Box A checked | | | | |
| 2 Totals for all transactions reported on Form(s) 8949 with Box B checked | | | | |
| 3 Totals for all transactions reported on Form(s) 8949 with Box C checked | | | | |
| 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 | | | | 4 |
| 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 | | | | 5 |
| 6 Unused capital loss carryover (attach computation) | | | | 6 () |
| 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h | | | | 7 |

| Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year | | | | |
|---|----------------------------------|---------------------------------|--|--|
| See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. | (d) Proceeds (sales price) | (e) Cost (or other basis) | (g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g) | (h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g) |
| 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b | | | | |
| 8b Totals for all transactions reported on Form(s) 8949 with Box D checked | 15,455. | | | 15,455. |
| 9 Totals for all transactions reported on Form(s) 8949 with Box E checked | | | | |
| 10 Totals for all transactions reported on Form(s) 8949 with Box F checked | | | | |
| 11 Enter gain from Form 4797, line 7 or 9 | | | | 11 |
| 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37 | | | | 12 |
| 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 | | | | 13 |
| 14 Capital gain distributions | | | | 14 |
| 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h | | | | 15 15,455. |

| Part III Summary of Parts I and II | | | | |
|--|--|--|--|-------------------|
| 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) | | | | 16 |
| 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) | | | | 17 15,455. |
| 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns. If the corporation has qualified timber gain, also complete Part IV | | | | 18 15,455. |

Note: If losses exceed gains, see **Capital losses** in the instructions.

Part IV Alternative Tax for Corporations with Qualified Timber Gain. Complete Part IV only if the corporation has

qualified timber gain under section 1201(b). Skip this part if you are filing Form 1120-RIC. See instructions.

| | | | |
|--|-----------|--|--|
| 19 Enter qualified timber gain (as defined in section 1201(b)(2)) | 19 | | |
| 20 Enter taxable income from Form 1120, page 1, line 30, or the applicable line of your tax return | 20 | | |
| 21 Enter the smallest of: (a) the amount on line 19; (b) the amount on line 20; or (c) the amount on Part III, line 17 | 21 | | |
| 22 Multiply line 21 by 23.8% (0.238) | 22 | | |
| 23 Subtract line 17 from line 20. If zero or less, enter -0- | 23 | | |
| 24 Enter the tax on line 23, figured using the Tax Rate Schedule (or applicable tax rate) appropriate for the return with which Schedule D (Form 1120) is being filed | 24 | | |
| 25 Add lines 21 and 23 | 25 | | |
| 26 Subtract line 25 from line 20. If zero or less, enter -0- | 26 | | |
| 27 Multiply line 26 by 35% (0.35) | 27 | | |
| 28 Add lines 22, 24, and 27 | 28 | | |
| 29 Enter the tax on line 20, figured using the Tax Rate Schedule (or applicable tax rate) appropriate for the return with which Schedule D (Form 1120) is being filed | 29 | | |
| 30 Enter the smaller of line 28 or line 29. Also enter this amount on Form 1120, Schedule J, line 2, or the applicable line of your tax return | 30 | | |

Schedule D (Form 1120) 2017

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

TRIANGLE COMMUNITY FOUNDATION INC

56-1380796

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- X (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
(F) Long-term transactions not reported to you on Form 1099-B

Table with 8 columns: (a) Description of property, (b) Date acquired, (c) Date sold or disposed of, (d) Proceeds (sales price), (e) Cost or other basis, (f) Adjustment code(s), (g) Amount of adjustment, (h) Gain or (loss). Rows include AETHER REAL ASSETS III, LP, DENHAM COMMODITY PARTNERS FUND VI, LP, MONTAUK TRIGUARD FUND VI, LP, PERENNIAL REAL ESTATE FUND II, LP, and STEPSTONE PIONEER CAPITAL III, LP. Total row shows 15,455.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.