** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

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

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

Department of the Treasury

A For the 2020 calendar year, or tax year beginning JUL 1. 2020 and ending JUN 30, 2021 C Name of organization D Employer identification number Check if applicable Address change TRIANGLE COMMUNITY FOUNDATION INC Name 56-1380796 change Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Final return/ termin-ated PO BOX 12729 919-474-8370 113,443,242. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended DURHAM, NC 27709-2729 H(a) Is this a group return return
Application
pending F Name and address of principal officer: LORI O'KEEFE Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: ► WWW.TRIANGLECF.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1983 M State of legal domicile: NC Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O **Activities & Governance** if the organization discontinued its operations or disposed of more than 25% of its net assets. 17 3 Number of voting members of the governing body (Part VI, line 1a) 3 17 Number of independent voting members of the governing body (Part VI, line 1b) 4 21 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 34 6 -155 404. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Current Year** 17,693,660. 32,664,667. Contributions and grants (Part VIII, line 1h) 8 Revenue Program service revenue (Part VIII, line 2g) 8,013,709 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10,268,124. 10 51,658 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 298,703. 11 40,730,034 28 260 487. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 28,997,952 23,009,785. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,092,937. 1,972,675. 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 1,608,816. 1,735,586. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 32,699,705. 26,718,046. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 8,030,329. 1,542,441. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** Ы 242,383,805 302,593,887. Total assets (Part X, line 16) 16,052,217, 20,517,028. 21 Total liabilities (Part X, line 26) 三年 226,331,588. 282,076,859. Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign TUCKER BARTLETT, TREASURER Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name YONG ZHANG CPA 04/27/22 P01249785 Paid Firm's name RSM US LLP 42-0714325 Preparer Firm's EIN ▶ Firm's address 1861 INTERNATIONAL DRIVE, SUITE 400 Use Only Phone no.703-336-6400 MCLEAN, VA 22102

No

Yes

May the IRS discuss this return with the preparer shown above? See instructions

56-1380796

| | Check if Schedule O contains a response or note to any line in this Part III | |
|--------|--|---|
| 1 | Briefly describe the organization's mission: | |
| | WE INSPIRE AND MOBILIZE GIVING, LEADERSHIP, AND ACTION. | |
| | | |
| | | |
| | | |
| 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 X No |
| _ | If "Yes," describe these new services on Schedule O. | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | Yes X No |
| 4 | If "Yes," describe these changes on Schedule O. | ., .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as measured b Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total of the services are required to report the amount of grants and allocations to others, the total of the services are required to report the amount of grants and allocations to others, the total of the services are required to report the amount of grants and allocations to others, the total of the services are required to report the amount of grants and allocations to others, the total of the services are required to report the amount of grants and allocations to others, the total of the services are required to report the amount of grants and allocations to others, the total of the services are required to report the amount of grants and allocations to others, the total of the services are required to report the amount of grants and allocations to others, the services are required to report the amount of grants are required to report the grants are re | |
| | revenue, if any, for each program service reported. | expenses, and |
| 4а | 02 022 000 | |
| -14 | TRIANGLE COMMUNITY FOUNDATION CONNECTS PHILANTHROPIC RESOURCES WITH | <i>,</i> |
| | COMMUNITY NEEDS, CREATES OPPORTUNITY FOR ENLIGHTENED CHANGE AND | |
| | ENCOURAGES PHILANTHROPY AS A WAY OF LIFE. | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 4b | (Code:) (Expenses \$ 876,970. 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 \$ 537,260. including grants of \$) (Revenue \$) |) |
| | PHILANTHROPIC EVENTS - PHILANTHROPIC EVENTS INCLUDE: DONOR EDUCATION | |
| | FORUMS; CAPACITY BUILDINGS WORKSHOPS FOR NONPROFITS. | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 4 . | Otherway was in a (Describe or Other Le O.) | |
| 4d | | ` |
| 4 - | (Expenses \$ including grants of \$) (Revenue \$ |) |
| 4e | Total program service expenses ▶ 24,647,520. | - 000 (|

Form 990 (2020) TRIANGLE COMMUNITY FOUNDATION INC Part IV Checklist of Required Schedules

| | | | 169 | 140 |
|-----|--|------------|------|-------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A | 1 | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | Х |
| 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? If "Yes," complete Schedule C, Part II | 4 | | Х |
| 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? If "Yes," complete Schedule C, Part III | 5 | | Х |
| 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? If "Yes," complete Schedule D, Part I | 6 | Х | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | |
| | Schedule D, Part III | 8 | | 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? | _ | 77 | |
| | If "Yes," complete Schedule D, Part IV | 9_ | Х | |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | _ | 77 | |
| | or in quasi endowments? If "Yes," complete Schedule D, Part V | 10 | Х | |
| 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. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | v | |
| | Part VI | 11a | Х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total | | Х | |
| _ | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | Λ | |
| С | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total | 445 | | x |
| لم | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | <u> </u> |
| а | 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 | 444 | | x |
| _ | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d 11e | Х | _ A |
| | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 1 ie | - 21 | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | 11f | х | |
| 122 | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i> | - ' '' | | |
| 120 | , , , , , , , , , , , , , , , , , , , | 12a | | x |
| h | Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? | 128 | | |
| D | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | х | |
| 13 | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | х |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | 1 144 | | |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | |
| | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | х | |
| 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? If "Yes," complete Schedule F, Parts II and IV | 15 | | 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? If "Yes," complete Schedule F, Parts III and IV | 16 | | 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? If "Yes," complete Schedule G, Part I | 17 | | 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? If "Yes," complete Schedule G, Part II | 18 | | x |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes." | | | |
| | complete Schedule G, Part III | 19 | | х |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | х |
| | | 20b | | |
| 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? If "Yes." complete Schedule I. Parts I and II | 21 | Х | |
| | | | 200 | |

Form 990 (2020) TRIANGLE COMMUNITY FOUNDATION INC

Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|-------------|--|---------------|-----|----------|
| 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? If "Yes," complete Schedule I, Parts I and III | 22 | Х | |
| 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? If "Yes," complete | | | |
| | | 23 | х | |
| 24.0 | Schedule J | 23 | | <u> </u> |
| 24 a | 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? If "Yes," answer lines 24b through 24d and complete | | | ., |
| | Schedule K. If "No," go to line 25a | 24a | | X |
| | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | |
| | any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 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? If "Yes," complete Schedule L, Part I | 25a | | Х |
| 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? If "Yes." complete | | | |
| | Schedule L. Part I | 25b | | х |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | | | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | x |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, | - | | |
| | creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | | | |
| | entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i> | 27 | | x |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | - |
| 20 | instructions, for applicable filing thresholds, conditions, and exceptions): | | | |
| _ | | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? | 00- | | x |
| | "Yes," complete Schedule L, Part IV | 28a | | X |
| | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | |
| С | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If | | | x |
| | "Yes," complete Schedule L, Part IV | 28c | · · | |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | Х | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | | | l |
| | contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | Х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | Х |
| 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? If "Yes," complete Schedule R, Part I | 33 | | Х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| | Part V, line 1 | 34 | Х | <u> </u> |
| 35 a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | Х | |
| 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)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | Х |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | Х |
| 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? If "Yes," complete Schedule R, Part VI | 37 | | Х |
| 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 | 38 | Х | |
| Pai | t 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 | | | |
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | | |
| | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c | X | |

56-1380796

Form 990 (2020) TRIANGLE COMMUNITY FOUNDATION INC

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

| | | | | | Yes | No | | | |
|--|---|---------|-----------------------|---------------|-----|----|--|--|--|
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | | | | | | |
| | filed for the calendar year ending with or within the year covered by this return | 2a | 21 | | | | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax return | ns? | | 2b | Х | | | | |
| | Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions | s) | | | | | | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | | | 3a | Х | | | | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule | О | | 3b | Х | | | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other a | uthor | ty over, a | | | | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial a | ccour | nt)? | 4a | | Х | | | |
| b | b If "Yes," enter the name of the foreign country | | | | | | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | | | | | | |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | <u>5a</u> | | X | | | |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction. | | | <u>5b</u> | | Х | | | |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | | | 5c | | | | | |
| ьа | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | C - | | х | | | |
| L | any contributions that were not tax deductible as charitable contributions? | | | 6a | | Λ | | | |
| D | If "Yes," did the organization include with every solicitation an express statement that such contributions and the deductible? | | giits | 6h | | | | | |
| 7 | were not tax deductible? Organizations that may receive deductible contributions under section 170(c). | | | 6b | | | | | |
| | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser | vices r | rovided to the navor? | 7a | | Х | | | |
| | TENDE III II I | | rovided to the payor: | 7b | | | | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | | | | | | | |
| | to file Form 8282? | | | 7с | | Х | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co | ontrac | t? | 7e | | Х | | | |
| f | f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | | | | | | |
| g | g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | | | | | | | | |
| h | h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | | | | | | | | |
| 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | | | | | | | |
| | sponsoring organization have excess business holdings at any time during the year? | | | | | | | | |
| 9 | 9 Sponsoring organizations maintaining donor advised funds. | | | | | | | | |
| | Did the sponsoring organization make any taxable distributions under section 4966? | | | 9a | | | | | |
| b | , | | | 9b | | | | | |
| 10 | Section 501(c)(7) organizations. Enter: | 1 | ı | | | | | | |
| | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | | | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | ۔ د د ا | ı | | | | | | |
| | Gross income from members or shareholders | 11a | | | | | | | |
| а | Gross income from other sources (Do not net amounts due or paid to other sources against | 146 | | | | | | | |
| 1 2 2 | amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | 1041 |) ? | 12a | | | | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | . <u>.</u> .a | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | | | 13a | | | | | |
| | Note: See the instructions for additional information the organization must report on Schedule O. | | | | | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | | | | | | |
| | organization is licensed to issue qualified health plans | 13b | | | | | | | |
| С | Enter the amount of reserves on hand | 13c | | | | | | | |
| | Pid the consideration was in a second of the first of the description | | | 14a | | Х | | | |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul | le O | | 14b | | | | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner | | | | | | | | |
| | excess parachute payment(s) during the year? | | | 15 | | Х | | | |
| | If "Yes," see instructions and file Form 4720, Schedule N. | | | | | | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment | incor | ne? | 16 | | Х | | | |
| | If "Yes," complete Form 4720, Schedule O. | | | | | | | | |

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 on Schedule O. See instructions.

| | to mile ea, e.e, e.e, e.e. real section, describe the enternational, proceeded, et entangles en contention et | | | |
|-----------|---|------------|--------|---------|
| | Check if Schedule O contains a response or note to any line in this Part VI | | | Х |
| Sec | tion A. Governing Body and Management | | | |
| | | | Yes | No |
| та | Enter the number of voting members of the governing body at the end of the tax year 1a 17 | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | |
| | body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. Enter the number of voting members included on line 1a, above, who are independent. | | | |
| b | Enter the number of voting members included on line ra, above, who are independent | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | v |
| • | officer, director, trustee, or key employee? | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | v |
| | of officers, directors, trustees, or key employees to a management company or other person? | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | | |
| 7a | | _ | | v |
| | more members of the governing body? | 7a | | Х |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | v |
| _ | persons other than the governing body? | 7b | | Х |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | v | |
| a | | 8a | X | |
| b | , | 8b | Х | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | v |
| 800 | organization's mailing address? f "Yes," provide the names and addresses on Schedule O | 9 | | Х |
| 360 | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) | | ., | |
| 40- | Did the supprinction have lead about up hypothese as officials 0 | 40- | Yes | No X |
| | Did the organization have local chapters, branches, or affiliates? | 10a | | Λ |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 110 | and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Х | |
| ı ıa b | | Ha | | |
| | | 12a | Х | |
| | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe | 120 | | |
| C | | 12c | х | |
| 12 | in Schedule O how this was done | 13 | Х | |
| 13 | Did the organization have a written whistleblower policy? | 14 | Х | |
| 14 15 | Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent | 14 | | |
| 13 | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| • | | 150 | Х | |
| | The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization | 15a 15b | X | |
| b | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | 130 | | |
| 160 | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | |
| 10a | | 16a | | Х |
| h | taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | 10a | | |
| b | | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | 16h | | |
| Sec | exempt status with respect to such arrangements? | 16b | | |
| | | | | |
| 17 10 | List the states with which a copy of this form ode is required to be fined \$\rightarrow\$ | only. | ava:la | hlc |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s | orny) | avalla | ыe |
| | for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O) | | | |
| 40 | | fines | امند | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and | imano | ıdı | |
| 00 | 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.

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

See instructions for the order in which to list the persons above.

| (A) | (B) | (C) | | (D) | (E) | (F) | | | | |
|--------------------------------|------------------------|--------------------------------|--------------------------------------|---------|--------------|---------------------------------|-----------|---------------------------------|-----------------|--------------------------|
| Name and title | Average | (do | Position (do not check more than one | | Reportable | Reportable | Estimated | | | |
| | hours per | box | , unle | ss pei | rson i | s both | n an | compensation | compensation | amount of |
| | week | | cer ar | ia a a | recto | r/irus | tee) | from | from related | other |
| | (list any hours for | irecto | | | | | | the | organizations | compensation from the |
| | related | eord | stee | | | sated | | organization (W-2/1099-MISC) | (W-2/1099-MISC) | organization |
| | organizations | truste | al trus | | yee | mper | | (** 2, 1000 111100) | | and related |
| | below | Individual trustee or director | Institutional trustee | ъ | Key employee | Highest compensated employee | Je. | | | organizations |
| | line) | Indiv | Insti | Officer | Key | High emp | Former | | | |
| (1) LORI O'KEEFE | 40.00 | | | | | | | | | |
| PRESIDENT & CEO | | | | Х | | | | 206,780. | 0. | 26,652. |
| (2) ROBERT NAYLOR | 40.00 | | | | | | | | | |
| CFO | | | | Х | | | | 144,118. | 0. | 23,375. |
| (3) ROBIN BAREFOOT | 40.00 | | | | | | | | | |
| GENERAL COUNSEL (THRU 3/31/21) | | | | | | Х | | 134,475. | 0. | 17,508. |
| (4) JESSICA AYLOR | 40.00 | | | | | | | | | |
| VP COMM ENG (THRU 7/13/20) | | | | | | Х | | 121,369. | 0. | 9,467. |
| (5) LINDSAY HARRELL | 40.00 | | | | | | | | | |
| CONTROLLER | | | | | | Х | | 116,341. | 0. | 13,266. |
| (6) KENNETH BAROFF | 40.00 | | | | | | | | | |
| VP DONOR DEV | | | | | | Х | | 120,919. | 0. | 8,638. |
| (7) FARAD ALI | 0.50 | | | | | | | | | |
| CHAIR | | Х | | Х | | | | 0. | 0. | 0. |
| (8) TUCKER BARTLETT | 0.50 | | | | | | | | | |
| TREASURER | | Х | | Х | | | | 0. | 0. | 0. |
| (9) MICHAEL SCHOENFELD | 0.50 | | | | | | | | | |
| CHAIR ELECT | | Х | | Х | | | | 0. | 0. | 0. |
| (10) LARRY ROCAMORA | 0.50 | | | | | | | | | |
| SECRETARY | | Х | | Х | | | | 0. | 0. | 0. |
| (11) REBECCA BALTER | 0.50 | | | | | | | | | |
| MEMBER | | Х | | | | | | 0. | 0. | 0. |
| (12) ANITA BROWN-GRAHAM | 0.50 | | | | | | | | | |
| MEMBER | | Х | | | | | | 0. | 0. | 0. |
| (13) SHELDON FOX | 0.50 | | | | | | | | | |
| MEMBER | | Х | | | | | | 0. | 0. | 0. |
| (14) MICHAEL GOODMON | 0.50 | | | | | | | | | |
| MEMBER | | Х | | | | | | 0. | 0. | 0. |
| (15) PHIL LAMBERT | 0.50 | | | | | | | | | |
| MEMBER | | Х | | | | | | 0. | 0. | 0. |
| (16) LUIS PASTOR | 0.50 | | | | | | | | | |
| MEMBER | | Х | _ | | | _ | | 0. | 0. | 0. |
| (17) STEVEN PEARSON | 0.50 | | | | | | | | | |
| MEMBER | | Х | | | | | | 0. | 0. | 0. |

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| Part VII Section A. Officers, Directors, Trust | tees, Key Em | oloy | ees, | and | d Hig | ghes | st C | ompensated Employee | s (continued) | | | | |
|--|--|--------------------------------|-------------------------|------------------------------------|-------------------------------|------------------------------|-------------|--|--|------|-----------------|--|----------------|
| (A) Name and title | (B) Average hours per week | (do box | not c | Pos heck i ss per nd a di | C) itior more rson i |) than is botl | one n an | (D) Reportable compensation from | (E) Reportable compensatio from related | | l | (F) Estimated amount o other | |
| | (list any hours for related organizations below line) | Individual trustee or director | In stit utional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC) | organization: (W-2/1099-MIS | S | fr org an | pensa om th anizat d relat anizati | e ion ed |
| (18) CHRIS DEVITA | 0.50 | | | | | | | | | | | | |
| MEMBER | | Х | | | | _ | | 0. | | 0. | | | 0. |
| (19) ALLYSON DUNCAN | 0.50 | - | | | | | | | | _ | | | _ |
| MEMBER | | Х | | | | | | 0. | | 0. | | | 0. |
| (20) CAROL TRESOLINI | 0.50 | . | | | | | | | | | | | _ |
| MEMBER | | Х | _ | | | ├ | | 0. | | 0. | | | 0. |
| (21) TIM TROST | 0.50 | | | | | | | | | | | | _ |
| MEMBER | | Х | | | | ┝ | | 0. | | 0. | | | 0. |
| (22) MELINDA WIGGINS | 0.50 | ł | | | | | | | | • | | | • |
| MEMBER | 0.50 | Х | | | | <u> </u> | | 0. | | 0. | | | 0. |
| (23) RICK GUIRLINGER | 0.50 | | | | | | | | | 0 | | | 0 |
| MEMBER | | Х | _ | | | ┝ | | 0. | | 0. | | | 0. |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 1b Subtotal | l | I | | | | | <u> </u> | 844,002. | | 0. | | 98, | 906. |
| c Total from continuation sheets to Part VII | | | | | | | | 0. | | 0. | | | 0. |
| d Total (add lines 1b and 1c) | | | | | | | | 844,002. | | 0. | | 98, | 906. |
| 2 Total number of individuals (including but no compensation from the organization | | | | | | | io re | eceived more than \$100, | 000 of reportable |) | • | | 6 |
| compensation from the organization | | | | | | | | | | | | Yes | No |
| 3 Did the organization list any former officer, | director trust | ee k | ev e | mnl | ove | e or | · hia | thest compensated emp | lovee on | | | | |
| line 1a? If "Yes," complete Schedule J for su | | | | | | | | most componicated emp | | | 3 | | х |
| 4 For any individual listed on line 1a, is the su | | | | | | | | | | | | | |
| and related organizations greater than \$150 | | | - | | | | | · · · · · · · · · · · · · · · · · · · | - | | 4 | Х | |
| 5 Did any person listed on line 1a receive or a | | | | | | | | | | | | | |
| rendered to the organization? If "Yes." com | | | | | | | | | | | 5 | | х |
| Section B. Independent Contractors | Diete Schedul | 5 | JI SC | <i>i</i> CII į | Jers | OH | | | | | | | |
| Complete this table for your five highest cor | npensated inc | lepe | nde | nt co | ontra | acto | rs th | nat received more than \$ | 3100,000 of comp | ensa | tion fro | om | |
| the organization. Report compensation for t | he calendar ye | ear e | ndir | ng w | ith c | or wi | thin | the organization's tax y | ear. | | | | |
| (A) Name and business | address | | | | | | | (B) Description of s | services | C | | (C) mpensation | |
| CREWCIAL PARTNERS LLC, 810 SEVENTH AV | 7E | | | | | | | | | | | | |
| 32ND FLOOR, NEW YORK, NY 10019 | | | | | | | | INVESTMENT MGMT | | | | 183, | 303. |
| | | | | | | | | | | | | | |

Total number of independent contractors (including but not limited to those listed above) who received more than

Form **990** (2020)

\$100,000 of compensation from the organization

Form 990 (2020) TRIANGLE CO

| | | Check if Schedule O conta | ins a response o | or note to any line | e in this Part VIII | | | |
|--|------|--|-------------------|---------------------|---------------------|-------------------|------------------|------------------------------------|
| | | | - | - | (A) | (B) | (C) | (D) |
| | | | | | Total revenue | Related or exempt | Unrelated | Revenue excluded from tax under |
| | | | | | | function revenue | business revenue | sections 512 - 514 |
| (0, (0 | 1.0 | Endorsted compaigns | 10 | | | | | |
| 밥 | | Federated campaigns | | | | | | |
| يخ وا | | Membership dues | | | | | | |
| ts, An | | Fundraising events | | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | Related organizations | | | | | | |
| ini | е | Government grants (contribution | ons) 1e | | | | | |
| ior | f | All other contributions, gifts, grants | s, and | | | | | |
| h | | similar amounts not included above | e 1f | 17,693,660. | | | | |
| ΞÓ | g | Noncash contributions included in lines 1a | a-1f 1g \$ | 10,096,218. | | | | |
| Sol | h | Total. Add lines 1a-1f | | | 17,693,660. | | | |
| | | | | Business Code | | | | |
| • | 2 a | | | | | | | |
| iğ | | | | | | | | |
| ne ne | b | | | | | | | |
| n en | C | | | | | | | |
| <u>ra</u> | d | | | | | | | |
| Program Service Revenue | е | | | | | | | |
| ۵ | f | All other program service reven | nue | | | | | |
| | g | Total. Add lines 2a-2f | | | | | | |
| | 3 | Investment income (including d | dividends, intere | st, and | | | | |
| | | other similar amounts) | > | 3,052,271. | | -145,552. | 3,197,823. | |
| | 4 | Income from investment of tax- | | | | | | |
| | 5 | Royalties | | | | | | |
| | | | (i) Real | (ii) Personal | | | | |
| | 6 2 | Gross rents 6a | | . , | | | | |
| | | | | | | | | |
| | b | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | С. | Rental income or (loss) 6c | | | | | | |
| | | Net rental income or (loss) | (:\ Citi | (::) Oth an | | | | |
| | 7 a | Gross amount from sales of | (i) Securities | (ii) Other | | | | |
| | | assets other than inventory 7a | 92,396,578. | 2,030. | | | | |
| | b | Less: cost or other basis | | | | | | |
| ne | | and sales expenses | 85,182,755. | 0. | | | | |
| Revenue | С | Gain or (loss) 7c | 7,213,823. | 2,030. | | | | |
| Be | | Net gain or (loss) | | | 7,215,853. | | -9,852. | 7,225,705. |
| ther | 8 a | Gross income from fundraising eve | ents (not | | | | | |
| ₹ | | including \$ | of | | | | | |
| | | contributions reported on line 1 | | | | | | |
| | | Part IV, line 18 | • | | | | | |
| | h | Less: direct expenses | | | | | | |
| | | Net income or (loss) from fundr | | | | | | |
| | | Gross income from gaming act | | | | | | |
| | g d | | I | | | | | |
| | | Part IV, line 19 | I | | | | | |
| | | Less: direct expenses | | | | | | |
| | | Net income or (loss) from gamin | | D | | | | |
| | 10 a | Gross sales of inventory, less re | I | | | | | |
| | | and allowances | 10a | | | | | |
| | b | Less: cost of goods sold | 10b | | | | | |
| | С | Net income or (loss) from sales | of inventory | > | | | | |
| , | | | | Business Code | | | | |
| ous. | 11 a | OTHER INCOME | | 900099 | 298,703. | | | 298,703. |
| in Section | b | | | | | | | |
| Miscellaneous Revenue | c | | | | | | | |
| <u>Š</u> Š | | All other revenue | | | | | | |
| Σ | | Total. Add lines 11a-11d | | | 298,703. | | | |
| | 12 | Total revenue. See instructions | | | 28,260,487. | 0. | -155,404. | 10,722,231. |
| | | | | 🗲 🛚 🖠 | , , , • | - • | , , , , , , , | , , |

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).

| Secu | on 501(c)(3) and 501(c)(4) organizations must comp. Check if Schedule O contains a response | | | іріете соіштіп (А). | |
|------|---|----------------|--------------------------|---------------------------------|------------------------|
| Do i | not include amounts reported on lines 6b, | (A) | (B) | (C) | (D) |
| | 8b, 9b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | • | | |
| | and domestic governments. See Part IV, line 21 | 22,974,774. | 22,974,774. | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | 35,011. | 35,011. | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 411,477. | 250,178. | 127,311. | 33,988. |
| 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 | 1,241,105. | 754,592. | 383,998. | 102,515. |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | 62,182. | 37,807. | 19,239. | 5,136. |
| 9 | Other employee benefits | 145,806. | 88,650. | 45,112. | 12,044. |
| 10 | Payroll taxes | 112,105. | 68,160. | 34,685. | 9,260. |
| 11 | Fees for services (nonemployees): | | | | |
| а | Management | | | | |
| b | Legal | 40,880. | | 20,440. | 20,440. |
| С | Accounting | 73,777. | | 73,777. | |
| | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | 841,047. | | 841,047. | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| | column (A) amount, list line 11g expenses on Sch O.) | 59,997. | 5,006. | 54,311. | 680. |
| 12 | Advertising and promotion | 6,744. | | | 6,744. |
| 13 | Office expenses | 93,788. | 56,979. | 29,032. | 7,777. |
| 14 | Information technology | 95,828. | 58,263. | 29,649. | 7,916. |
| 15 | Royalties | | | | |
| 16 | Occupancy | 165,053. | 100,353. | 51,067. | 13,633. |
| 17 | Travel | 1,469. | 894. | 454. | 121. |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 9,247. | 5,622. | 2,861. | 764. |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | 440.015 | 65.51 | 25 252 | 2.25 |
| 22 | Depreciation, depletion, and amortization | 113,346. | 68,914. | 35,069. | 9,363. |
| 23 | Insurance | 15,861. | 9,643. | 4,908. | 1,310. |
| 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If | | | | |
| | line 24e amount exceeds 10% of line 25, column (A) | | | | |
| | amount, list line 24e expenses on Schedule 0.) | 25.252 | 04 407 | 10.000 | 2 21 2 |
| a | DUES AND SUBSCRIPTIONS | 35,258. | 21,437. | 10,909. | 2,912. |
| b | PROFESSIONAL DEVELOPMEN | 29,504. | 17,938. | 9,129. | 2,437. |
| С | OTHER PROGRAMS | 15,840. | 15,840. | | |
| d | COMMUNITY EVENTS | 2,218. | 2,218. | 50.066 | 10.000 |
| e | All other expenses | 135,729. | 75,241. | 50,266. | 10,222. |
| 25 | Total functional expenses. Add lines 1 through 24e | 26,718,046. | 24,647,520. | 1,823,264. | 247,262. |
| 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) | | | | Form 990 (2020) |

Form 990 (2020) Part X Balance Sheet

| Pal | t X | Balance Sneet | | | | | |
|-----------------------------|-----|---|------------|-----------------------|-----------------------|--------------|-----------------|
| | | Check if Schedule O contains a response or | note to an | y line in this Part X | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | | 10,426,478. | 1 | 13,557,519. |
| | 2 | Savings and temporary cash investments | | | , , | 2 | , , |
| | 3 | Pledges and grants receivable, net | | | | 3 | |
| | 4 | Accounts receivable, net | | | 151,379. | 4 | 123,254. |
| | 5 | Loans and other receivables from any current | | | , | _ | |
| | | trustee, key employee, creator or founder, su | | | | | |
| | | controlled entity or family member of any of t | | | | 5 | |
| | 6 | Loans and other receivables from other disqu | • | | | | |
| | | under section 4958(f)(1)), and persons describ | , | | 6 | | |
| " | 7 | Notes and loans receivable, net | | | | 7 | |
| Assets | 8 | Inventories for sale or use | | | 8 | | |
| Ass | 9 | Duran diel anno anno anno anno al alafanno al ala anno an | | l | 0. | 9 | 17,485. |
| - | | Land, buildings, and equipment: cost or othe | | | | J | |
| | ioa | basis. Complete Part VI of Schedule D | | 1,012,188. | | | |
| | b | | | 492,539. | 602,833. | 10c | 519,649. |
| | 11 | Investments - publicly traded securities | | | 123,298,234. | 11 | 148,613,189. |
| | 12 | Investments - other securities. See Part IV, lir | | 102,180,445. | 12 | 133,319,702. | |
| | 13 | Investments - program-related. See Part IV, lii | | | 13 | | |
| | 14 | Intangible assets | | | 14 | | |
| | 15 | Other assets. See Part IV, line 11 | | | 5,724,436. | 15 | 6,443,089. |
| | 16 | Total assets. Add lines 1 through 15 (must e | | | 242,383,805. | 16 | 302,593,887. |
| | 17 | Accounts payable and accrued expenses | | | 230,363. | 17 | 151,668. |
| | 18 | Grants payable | | | 1,126,049. | 18 | 1,996,910. |
| | 19 | Deferred revenue | , , | 19 | , , | | |
| | 20 | Tax-exempt bond liabilities | | 20 | | | |
| | 21 | Escrow or custodial account liability. Comple | | 1 | 14,327,350. | 21 | 18,051,912. |
| " | 22 | Loans and other payables to any current or for | | | , , | | , , |
| Liabilities | | trustee, key employee, creator or founder, su | | | | | |
| ij | | controlled entity or family member of any of t | | | | 22 | |
| Ë | 23 | Secured mortgages and notes payable to uni | | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrela | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, | | | | | |
| | | parties, and other liabilities not included on li | | | | | |
| | | of Schedule D | | | 368,455. | 25 | 316,538. |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 16,052,217. | 26 | 20,517,028. |
| | | Organizations that follow FASB ASC 958, o | check her | X | | | |
| es | | and complete lines 27, 28, 32, and 33. | | | | | |
| auc | 27 | | | | 220,607,152. | 27 | 275,633,769. |
| Bal | 28 | Net assets with donor restrictions | | | 5,724,436. | 28 | 6,443,090. |
| P | | Organizations that do not follow FASB ASC | | | | | |
| Ξ | | and complete lines 29 through 33. | · | , — I | | | |
| þ | 29 | Capital stock or trust principal, or current fun | nds | | | 29 | |
| šets | 30 | Paid-in or capital surplus, or land, building, or | | | | 30 | |
| Ass | 31 | Retained earnings, endowment, accumulated | | | | 31 | |
| Net Assets or Fund Balances | 32 | Total net assets or fund balances | | | 226,331,588. | 32 | 282,076,859. |
| ~ | 33 | Total liabilities and net assets/fund balances | | | 242,383,805. | 33 | 302,593,887. |

Form **990** (2020)

56-1380796

| Pa | TEXT RECONCILIATION OF NET ASSETS | | | | | | |
|---|--|----------|------|-------|--------|--|--|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | Х | | |
| | | | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | ,260, | | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 26 | 718, | 046. | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 1 | ,542, | 441. | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 226 | ,331, | 588. | | |
| 5 | Net unrealized gains (losses) on investments | 5 | 53 | ,190, | 707. | | |
| 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 on Schedule O) | 9 | 1, | 012, | 123. | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | | | | | | |
| | column (B)) | 10 | 282 | 076, | 859. | | |
| Pa | rt XII Financial Statements and Reporting | | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | Х | | |
| | | | | Yes | No | | |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | | | | | |
| 2a | 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? | | 2b | Х | | | |
| | 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 X Consolidated basis Both consolidated and separate basis | | | | | | |
| С | 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? | | 2c | Х | | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on Sche | edule 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? | | За | | Х | | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require | | | | | | |
| | or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | 3b | | | | |
| | | · | Form | 990 | (2020) | | |

032012 12-23-20

SCHEDULE A

Department of the Treasury Internal Revenue Service

<u>Total</u>

(Form 990 or 990-EZ)

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

2020

Open to Public Inspection

Name of the organization

TRIANGLE COMMUNITY FOUNDATION INC

Employer identification number 56-1380796

| Pa | rt I | Reason for Public C | Charity Status. (| (All organizations must c | omplete th | nis part.) S | ee instructions. | | | | | |
|-----|--------|---|-------------------------|--|-------------------------------------|-----------------|--|----------------------------|--|--|--|--|
| The | organ | ization is not a private found | | | | | | | | | | |
| 1 | Ŏ. | A church, convention of chu | | | | | VAVi). | | | | | |
| 2 | H | A school described in secti | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | |
| _ | H | | | | | | :\ | | | | | |
| 3 | H | A hospital or a cooperative | | | | | | the beenitel's name | | | | |
| 4 | ш | A medical research organiza | ation operated in cor | ijunction with a nospital | described | III Sectio | II 170(D)(I)(A)(III). Enter | the nospital s hame, | | | | |
| _ | | city, and state: | | | | | | | | | | |
| 5 | Ш | 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 | Ш | A federal, state, or local gov | vernment or governm | nental unit described in | section 17 | 70(b)(1)(A) | (v). | | | | | |
| 7 | X | An organization that normal | lly receives a substar | ntial part of its support fr | om a gove | ernmental ı | unit or from the general | public described in | | | | |
| | | section 170(b)(1)(A)(vi). (C | omplete Part II.) | | | | | | | | | |
| 8 | | A community trust describe | ed in section 170(b)(| 1)(A)(vi). (Complete Part | t II.) | | | | | | | |
| 9 | | An agricultural research org | anization described | in section 170(b)(1)(A)(i | ix) operate | ed in conju | nction with a land-grant | college | | | | |
| | | or university or a non-land-g | rant college of agricu | ulture (see instructions). | Enter the i | name, city, | and state of the college | e or | | | | |
| | | university: | | | | | _ | | | | | |
| 10 | | An organization that normal | Ilv receives (1) more t | than 33 1/3% of its supp | ort from c | ontribution | s. membership fees. an | d gross receipts from | | | | |
| | | activities related to its exem | | | | | | | | | | |
| | | income and unrelated busin | | · | . , | | • • | · · | | | | |
| | | See section 509(a)(2). (Cor | | (1000 000tion of 1 tax) no | | occ acquii | od by the organization t | artor durio do, roro. | | | | |
| 11 | \Box | An organization organized a | • | volv to tost for public sat | ioty Soo | saction FC |)O(a)(A) | | | | | |
| | H | - | • | | • | | | nurnacea of ano ar | | | | |
| 12 | ш | An organization organized a | • | • | - | | • | | | | | |
| | | more publicly supported org | - | | | | | Sheck the box in | | | | |
| | | lines 12a through 12d that o | * * | | | | | | | | | |
| а | | Type I. A supporting orga | • | | • | _ | | | | | | |
| | | the supported organization | | | majority o | of the direc | tors or trustees of the s | upporting | | | | |
| | | organization. You must c | complete Part IV, Se | ections A and B. | | | | | | | | |
| b | | ■ Type II. A supporting organization. | anization supervised | or controlled in connect | ion with it | s supporte | d organization(s), by hav | /ing | | | | |
| | | control or management of | f the supporting orga | anization vested in the sa | ame perso | ns that cor | ntrol or manage the sup | ported | | | | |
| | | organization(s). You mus | t complete Part IV, | Sections A and C. | | | | | | | | |
| С | | | grated. A supporting | g organization operated | in connect | tion with, a | and functionally integrate | ed with, | | | | |
| | | its supported organization | n(s) (see instructions) | . You must complete F | Part IV, Se | ctions A, | D, and E. | | | | | |
| d | | Type III non-functionally | integrated. A supp | orting organization oper | ated in co | nnection w | rith its supported organi | zation(s) | | | | |
| | | that is not functionally into | egrated. The organiz | ation generally must sati | isfy a distr | ibution req | uirement and an attenti | veness | | | | |
| | | requirement (see instructi | ions). You must con | nplete Part IV, Sections | A and D, | and Part | V. | | | | | |
| е | | Check this box if the orga | · | - | | | | | | | | |
| | | functionally integrated, or | | | | | 31 / 31 / 31 | | | | | |
| f | Ente | er the number of supported o | * * | , 5 | 5 5 | | | | | | | |
| | | ride the following information | | d organization(s) | | | | | | | | |
| | | i) Name of supported | (ii) EIN | (iii) Type of organization | (iv) Is the orga in your governi | nization listed | (v) Amount of monetary | (vi) Amount of other | | | | |
| | | organization | | (described on lines 1-10 above (see instructions)) | Yes | No | support (see instructions) | support (see instructions) | | | | |
| | | | | above (see instructions)) | | | | | | | | |
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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.)

| Sec | tion A. Public Support | | | | | | |
|------|--|-----------------------|-----------------------|-----------------------|---------------------------|---------------------|--------------|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 26,719,543. | 35,713,296. | 12,909,722. | 32,664,667. | 17,693,660. | 125,700,888. |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization'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 | 26,719,543. | 35,713,296. | 12,909,722. | 32,664,667. | 17,693,660. | 125,700,888. |
| 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) | | | | | | 34,772,761. |
| 6 | Public support. Subtract line 5 from line 4. | | | | | | 90,928,127. |
| Sec | ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| 7 | Amounts from line 4 | 26,719,543. | 35,713,296. | 12,909,722. | 32,664,667. | 17,693,660. | 125,700,888. |
| 8 | Gross income from interest, | | | | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties, | | | | | | |
| | and income from similar sources | 3,044,460. | 3,620,237. | 3,951,507. | 3,729,557. | 3,197,823. | 17,543,584. |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the | | | | | | |
| | business is regularly carried on | 0. | 0. | 0. | 0. | 0. | |
| 10 | Other income. Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI.) | 352,684. | 288,642. | 133,271. | 51,658. | 142,665. | 968,920. |
| 11 | Total support. Add lines 7 through 10 | | | | | | 144,213,392. |
| 12 | Gross receipts from related activities, | etc. (see instruction | ons) | | | 12 | |
| 13 | First 5 years. If the Form 990 is for th | e organization's fir | rst, second, third, f | ourth, or fifth tax y | ear as a section 5 | 01(c)(3) | |
| | organization, check this box and stop | here | | | | | > |
| Sec | ction C. Computation of Public | c Support Per | centage | | | | |
| 14 | Public support percentage for 2020 (li | ne 6, column (f), d | ivided by line 11, c | olumn (f)) | | 14 | 63.05 % |
| 15 | Public support percentage from 2019 | Schedule A, Part | II, line 14 | | | 15 | 61.00 % |
| 16a | 33 1/3% support test - 2020. If the o | organization did no | t check the box or | line 13, and line 1 | 14 is 33 1/3% or m | ore, check this box | x and |
| | stop here. The organization qualifies | as a publicly suppo | orted organization | | | | X |
| b | 33 1/3% support test - 2019. If the c | organization did no | t check a box on li | ne 13 or 16a, and | line 15 is 33 1/3% | or more, check thi | is box |
| | and stop here. The organization quali | fies as a publicly s | supported organiza | tion | | | |
| 17a | 10% -facts-and-circumstances test | | | | | | |
| | and if the organization meets the facts | s-and-circumstance | es test, check this | box and stop her | re. Explain in Part | VI how the organiz | ation |
| | meets the facts-and-circumstances te | st. The organizatio | n qualifies as a pul | blicly supported or | ganization | | |
| b | 10% -facts-and-circumstances test | - 2019. If the org | anization did not c | heck a box on line | 13, 16a, 16b, or 1 | 7a, and line 15 is | 10% or |
| | more, and if the organization meets th | e facts-and-circum | nstances test, chec | k this box and st | op here. Explain i | n Part VI how the | |
| | organization meets the facts-and-circu | ımstances test. Th | e organization qua | lifies as a publicly | supported organiz | ation | > |
| 18 | 8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | | | | | |

Page 3

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 | siow, picase comp | nete i art ii.j | | | | |
|--|--------------------------|----------------------------|-----------------------|--|--|-------------|
| Calendar year (or fiscal year beginning in) | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (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 per- | | | | | | |
| formed, 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 bus- | | | | | | |
| iness under section 513 | | | | | | |
| 4 Tax revenues levied for the organ- | | | | | | |
| ization'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 | | T | | | | |
| Calendar year (or fiscal year beginning in) | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (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 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 5 years. If the Form 990 is for the form 11 to 12 to 15 t | e organization's fi | ret eacond third | fourth or fifth toy | Vear as a section 5 | 1 (01(c)(3) organization | l |
| check this box and stop here | • | | | • | | · — |
| Section C. Computation of Publi | c Support Per | centage | | | | |
| 15 Public support percentage for 2020 (I | | | column (f)) | | 15 | % |
| 16 Public support percentage from 2019 | | . | | | 16 | % |
| Section D. Computation of Inves | tment Income | e Percentage | | | | |
| 17 Investment income percentage for 20 | 120 (line 10c, colu | mn (f), divided by li | ine 13, column (f)) | | 17 | % |
| 18 Investment income percentage from | 2019 Schedule A, | Part III, line 17 | | | 18 | % |
| 19a 33 1/3% support tests - 2020. If the | | | | | 3 1/3%, and line 1 | 7 is not |
| more than 33 1/3%, check this box ar | nd stop here. The | organization quali | ifies as a publicly s | supported organiza | ition | ▶□ |
| b 33 1/3% support tests - 2019. If the | organization did r | not check a box or | line 14 or line 19a | a, and line 16 is mo | ore than 33 1/3%, a | nd |
| line 18 is not more than 33 1/3%, che | ck this box and st | t op here. The orga | anization qualifies a | as a publicly suppo | orted organization | |
| 20 Private foundation. If the organization | n did not check a | box on line 14, 19 | a, or 19b, check th | nis box and see ins | structions | > |

Page 4

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer lines 3b and 3c below.
- 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)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? |f "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c 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).
- 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? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes." complete Part I of Schedule L (Form 990 or 990-EZ).
- 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))? If "Yes," provide detail in Part VI.
- 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? If "Yes." provide detail in Part VI.
- 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? If "Yes." provide detail in Part VI.
- 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)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

| | Yes | No |
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| Pa | rt IV | Supporting Organizations (continued) | | | |
|-----|---------|--|----------|-----|----|
| | | · · · · · · · · · · · · · · · · · · · | | Yes | No |
| 11 | Has th | he organization accepted a gift or contribution from any of the following persons? | | | |
| а | A pers | son who directly or indirectly controls, either alone or together with persons described in lines 11b and | | | |
| | 11c b | elow, the governing body of a supported organization? | 11a | | |
| b | A fam | nily member of a person described in line 11a above? | 11b | | |
| С | A 35% | 6 controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide | | | |
| | detail | in Part VI. | 11c | | |
| Sec | tion E | 3. Type I Supporting Organizations | | | |
| | | · | | Yes | No |
| 1 | | ne governing body, members of the governing body, officers acting in their official capacity, or membership of one or | | | |
| | | supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, cors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) | | | |
| | | ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported | | | |
| | | ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the | | | |
| | | orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | | ne organization operate for the benefit of any supported organization other than the supported | | | |
| | | ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | | how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | |
| 800 | super | vised, or controlled the supporting organization. C. Type II Supporting Organizations | 2 | | |
| Sec | tion | 5. Type ii Supporting Organizations | | 1 | |
| | | | | Yes | No |
| 1 | | a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | |
| | | stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | | nagement of the supporting organization was vested in the same persons that controlled or managed | 4 | | |
| Sec | the su | upported organization(s). D. All Type III Supporting Organizations | 1 | | |
| | | | | Yes | No |
| 1 | Did th | ne organization provide to each of its supported organizations, by the last day of the fifth month of the | | 163 | NO |
| • | | ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | | | |
| | - | (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | | | |
| | | ization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | - | any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | - | | |
| | | ization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how | | | |
| | | ganization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | | ason of the relationship described in line 2, above, did the organization's supported organizations have a | | | |
| | - | icant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | - | ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | sagus | orted organizations played in this regard. | 3 | | |
| Sec | tion E | E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Check | k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). | | | |
| а | | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | Щ | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| С | | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins | truction | s). | |
| 2 | Activit | ties Test. Answer lines 2a and 2b below. | | Yes | No |
| а | | ubstantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | | upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | | e supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | | he organization was responsive to those supported organizations, and how the organization determined | | | |
| | | hese activities constituted substantially all of its activities. | 2a | | |
| b | | ne activities described in line 2a, above, constitute activities that, but for the organization's involvement, | | | |
| | | r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in | | | |
| | | the reasons for the organization's position that its supported organization(s) would have engaged in | 2h | | |
| 2 | | activities but for the organization's involvement. | 2b | | |
| 3 | | nt of Supported Organizations. Answer lines 3a and 3b below. | | | |
| а | | ne organization have the power to regularly appoint or elect a majority of the officers, directors, or ees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI. | 3a | | |
| b | | ne organization exercise a substantial degree of direction over the policies, programs, and activities of each | Ja | | |
| J | | supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. | 3b | | |

| Pa | t V Type III Non-Functionally Integrated 509(a)(3) Supporti | ing Orgai | nizations | |
|------|--|---------------|-----------------------------|--------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualify | ing trust on | Nov. 20, 1970 (explain in | Part VI). See instructions. |
| | All other Type III non-functionally integrated supporting organizations mu | st complete | e Sections A through E. | |
| Sect | ion 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 | | |
| Sect | ion 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): | | | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| с | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| е | 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 0.015 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 0.035. | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | ion C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | | |
| 2 | Enter 0.85 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 | Check here if the current year is the organization's first as a non-function | ally integrat | ed Type III supporting orga | nization (see |
| | instructions). | | | |

Schedule A (Form 990 or 990-EZ) 2020

| | Type in item i unouonany integrated cook | aj(o, capporting crga | inzations (continu | <i>ieu)</i> | |
|-------|--|------------------------------|---------------------------------------|-------------|---|
| Secti | on D - Distributions | | | | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exer | npt purposes | | 1 | |
| 2 | Amounts paid to perform activity that directly furthers exemp | t purposes of supported | | | |
| | organizations, in excess of income from activity | | | 2 | |
| 3 | Administrative expenses paid to accomplish exempt purpose | s of supported organizations | 3 | 3 | |
| 4 | Amounts paid to acquire exempt-use assets | | | 4 | |
| 5 | Qualified set-aside amounts (prior IRS approval required - pro | ovide details in Part VI) | | 5 | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | 6 | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | 7 | |
| 8 | Distributions to attentive supported organizations to which th | e organization is responsive | | | |
| | (provide details in Part VI). See instructions. | | | 8 | |
| 9 | Distributable amount for 2020 from Section C, line 6 | | | 9 | |
| 10 | Line 8 amount divided by line 9 amount | | | 10 | |
| Secti | on E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributior Pre-2020 | าร | (iii) Distributable Amount for 2020 |
| 1 | Distributable amount for 2020 from Section C, line 6 | | | | |
| 2 | Underdistributions, if any, for years prior to 2020 (reason- | | | | |
| | able cause required - explain in Part VI). See instructions. | | | | |
| 3 | Excess distributions carryover, if any, to 2020 | | | | |
| а | From 2015 | | | | |
| b | From 2016 | | | | |
| С | From 2017 | | | | |
| d | From 2018 | | | | |
| е | From 2019 | | | | |
| f | Total of lines 3a through 3e | | | | |
| g | Applied to underdistributions of prior years | | | | |
| h | Applied to 2020 distributable amount | | | | |
| i | Carryover from 2015 not applied (see instructions) | | | | |
| j | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | | |
| 4 | Distributions for 2020 from Section D, | | | | |
| | line 7: \$ | | | | |
| а | Applied to underdistributions of prior years | | | | |
| b | Applied to 2020 distributable amount | | | | |
| С | Remainder. Subtract lines 4a and 4b from line 4. | | | | |
| 5 | Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h | | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | | |
| | Part VI. See instructions. | | | | |
| 7 | Excess distributions carryover to 2021. Add lines 3j | | | | |
| | and 4c. | | | | |
| 8 | Breakdown of line 7: | | | | |
| а | Excess from 2016 | | | | |
| b | Excess from 2017 | | | | |
| С | Excess from 2018 | | | | |
| d | Excess from 2019 | | | | |
| е | Excess from 2020 | | | | |

Schedule A (Form 990 or 990-EZ) 2020

| 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 |
| 2016 AMOUNT: \$ 352,684. |
| 2017 AMOUNT: \$ 288,642. |
| 2018 AMOUNT: \$ 133,271. |
| 2019 AMOUNT: \$ 51,658. |
| 2020 AMOUNT: \$ 142,665. |
| |
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Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

| | TRIANGLE COMMUNITY FOUNDATION INC | 56-1380796 | | | | | | |
|--------------------------------------|---|---|--|--|--|--|--|--|
| Organization type (check one): | | | | | | | | |
| Filers of: | Section: | | | | | | | |
| Form 990 or 99 | 0-EZ X 501(c)(3) (enter number) organization | X 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 | | | | | | | | |
| - | rganization is covered by the General Rule or a Special Rule . oction 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru | le. 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 | | | | | | | | |
| section any o | 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. | | | | | | | |
| contri literar | 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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III. | | | | | | | |
| year, is che purpo | 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 \ \rightarrow \ \sigma_{\text{organization}} \ \rightarrow \ \rightarrow \ \sigma_{\text{organization}} \ \rightarrow \rightarrow \ \rightarrow \ \rightar | | | | | | | |
| but it must ans | religious, charitable, etc., contributions totaling \$5,000 or more during the year Eaution: 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), ut 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 ertify 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.

| | <u> </u> |
|-----------------------------------|--------------------------------|
| Name of organization | Employer identification number |
| TRIANGLE COMMUNITY FOUNDATION INC | 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) (d) Total contributions Type of contribution | | | | |
| 1 | Name, address, and ZIF + + | Person Payroll Noncash X (Complete Part II for noncash contributions.) | | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) (d) Total contributions Type of contribution | | | | |
| 2 | | Person Payroll Noncash X (Complete Part II for noncash contributions.) | | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) (d) Total contributions Type of contribution | | | | |
| 3 | | \$ 375,990. Person Payroll Noncash X (Complete Part II for noncash contributions.) | | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) (d) Total contributions Type of contribution | | | | |
| 4 | Hame, dadieco, and zin T T | Person X Payroll Noncash (Complete Part II for noncash contributions.) | | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) (d) Total contributions Type of contribution | | | | |
| 5 | | Person X Payroll Noncash (Complete Part II for noncash contributions.) | | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) (d) Total contributions Type of contribution | | | | |
| 6 | | Person X Payroll Noncash (Complete Part II for noncash contributions.) | | | | |

Name of organization

Employer identification number

TRIANGLE COMMUNITY FOUNDATION INC

56-1380796

| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | onal space is needed. | |
|------------|---|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 7 | | \$1,221,287 | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Occupation (Complete Part II for noncash contributions.) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Total contributions - \$ | Person Payroll Complete Part II for noncash contributions. |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 140. | Name, audiess, and ZIF + + | - \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 140. | Name, aud 655, and Air 44 | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

TRIANGLE COMMUNITY FOUNDATION INC

56-1380796

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I PUBLIC SECURITY 1 614,356. 03/09/21 (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I PUBLIC SECURITY 2 2,271,045. 04/16/21 (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I PUBLIC SECURITY 3 375,990. 07/29/20 (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I PUBLIC SECURITY 7 1,127,865. 11/04/20 (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I \$

| Name of or | rganization | | | Employer identification number | | | |
|---------------------------|---|--|----------------------------|---------------------------------|--|--|--|
| TRIANGLE | COMMUNITY FOUNDATION INC | | | 56-1380796 | | | |
| Part III | Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional | through (e) and the following line charitable, etc., contributions of \$1,00 | e entry. For organizations | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) | Description of how gift is held | | | |
| | | | | | | | |
| | | (e) Transfer o | f gift | | | | |
| - | Transferee's name, address, ar | nd ZIP + 4 | Relationship o | of transferor to transferee | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) | Description of how gift is held | | | |
| | | | | | | | |
| | (e) Transfer of gift | | | | | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relationship o | of transferor to transferee | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) | Description of how gift is held | | | |
| | | | | | | | |
| | (e) Transfer of gift | | | | | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship o | of transferor to transferee | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) | Description of how gift is held | | | |
| | | | | | | | |
| ļ | (e) Transfer of gift | | | | | | |
| - | Transferee's name, address, ar | nd ZIP + 4 | Relationship o | 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 Open to Public Inspection

Name of the organization

TRIANGLE COMMUNITY FOUNDATION INC.

Employer identification number 56-1380796

| Pa | rt I Organizations Maintaining Donor Advised | | Accou | nts. Complete if the |
|-----|--|--|---------------|---------------------------------|
| | organization answered "Yes" on Form 990, Part IV, line | | | |
| | , , | (a) Donor advised funds | (b) Fu | nds and other accounts |
| 1 | Total number at end of year | 468 | | |
| 2 | Aggregate value of contributions to (during year) | 14,226,624. | | |
| 3 | Aggregate value of grants from (during year) | 18,782,554. | | |
| 4 | Aggregate value at end of year | 199,166,770. | | |
| 5 | Did the organization inform all donors and donor advisors in w | | funds | |
| | are the organization's property, subject to the organization's e | _ | | X Yes No |
| 6 | Did the organization inform all grantees, donors, and donor ad | | | |
| | for charitable purposes and not for the benefit of the donor or | | | |
| | | | • | X Yes No |
| Pa | rt II Conservation Easements. Complete if the org | | | |
| 1 | Purpose(s) of conservation easements held by the organization | on (check all that apply). | | |
| | Preservation of land for public use (for example, recreat | tion or education) Preservation of a h | nistorically | / important land area |
| | Protection of natural habitat | Preservation of a c | ertified h | istoric structure |
| | Preservation of open space | | | |
| 2 | Complete lines 2a through 2d if the organization held a qualifi | ed conservation contribution in the form of a | conserva | ation easement on the last |
| | day of the tax year. | | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a | |
| b | Total acreage restricted by conservation easements | | 2b | |
| С | Number of conservation easements on a certified historic stru | ucture included in (a) | 2c | |
| d | Number of conservation easements included in (c) acquired a | fter 7/25/06, and not on a historic structure | | |
| | listed in the National Register | | 2d | |
| 3 | Number of conservation easements modified, transferred, rele | | | during the tax |
| | year ▶ | | | |
| 4 | Number of states where property subject to conservation eas | ement is located | | |
| 5 | Does the organization have a written policy regarding the peri | odic monitoring, inspection, handling of | | |
| | violations, and enforcement of the conservation easements it | holds? | | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, h | handling of violations, and enforcing conserv | ation eas | ements during the year |
| | — | | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, handle | ling of violations, and enforcing conservation | easemer | nts during the year |
| | > \$ | | | |
| 8 | Does each conservation easement reported on line 2(d) above | e satisfy the requirements of section 170(h)(4 |)(B)(i) | |
| _ | | | | |
| 9 | In Part XIII, describe how the organization reports conservation | | | |
| | balance sheet, and include, if applicable, the text of the footness. | ote to the organization's financial statements | s that des | cribes the |
| Pa | organization's accounting for conservation easements. rt III Organizations Maintaining Collections of | Art Historical Treasures or Othe | r Simila | ar Assats |
| · u | Complete if the organization answered "Yes" on Form | | . Оппп | ii Addeto. |
| 10 | If the organization elected, as permitted under FASB ASC 958 | | halanaa a | boot works |
| Ia | of art, historical treasures, or other similar assets held for pub | • | | |
| | service, provide in Part XIII the text of the footnote to its finan | | erance or | public |
| h | If the organization elected, as permitted under FASB ASC 958 | | nco shoo | t works of |
| b | art, historical treasures, or other similar assets held for public | · · · · · · · · | | |
| | provide the following amounts relating to these items: | exhibition, education, of research in furthers | ince or pu | iblic service, |
| | | | | c |
| | (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 trea | | | |
| _ | the following amounts required to be reported under FASB AS | , | , provid | • |
| а | Revenue included on Form 990, Part VIII, line 1 | - | | \$ |
| | Assets included in Form 990, Part X | | | |
| | | | | |

| Pai | rt III ∣ Organizations Maintaining C | ollections of Ar | t, Historical Tre | asures, or Othe | r Simi | ar Assets | (contin | ued) | | | |
|-----|---|-------------------------|--------------------------|------------------------|------------|---------------|----------|-------|------|--|--|
| 3 | Using the organization's acquisition, accession | on, and other records | s, check any of the f | ollowing that make s | significar | nt use of its | | | | | |
| | collection items (check all that apply): | | | | | | | | | | |
| а | Public exhibition | d | Loan or exc | hange program | | | | | | | |
| b | Scholarly research | е | Other | | | | | | | | |
| С | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explain | how they further th | e organization's exe | mpt pur | oose in Part | XIII. | | | | |
| 5 | During the year, did the organization solicit o | r receive donations o | of art, historical treas | sures, or other simila | r assets | | | | | | |
| | to be sold to raise funds rather than to be ma | aintained as part of th | ne organization's co | llection? | | | Yes | | No | | |
| Pai | 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, custodi | an or other intermed | iary for contributions | s or other assets not | included | d | | | | | |
| | on Form 990, Part X? | | | | | | Yes | X | No | | |
| b | If "Yes," explain the arrangement in Part XIII | | | | | | | | | | |
| | | | | | | | Amount | | | | |
| С | Beginning balance | | | | 10 | ; | | | | | |
| d | Additions during the year | | | | | i | | | | | |
| е | Distributions during the year | | | | | , | | | | | |
| f | Ending balance | | | | | 1 | | | | | |
| 2a | Did the organization include an amount on Fo | | | | | X | Yes | | No | | |
| b | If "Yes," explain the arrangement in Part XIII. | Check here if the ex | planation has been | provided on Part XIII | | | | X | | | |
| Pai | rt V Endowment Funds. Complete i | f the organization an | swered "Yes" on Fo | rm 990, Part IV, line | 10. | | | | | | |
| | | (a) Current year | (b) Prior year | (c) Two years back | (d) Thre | e years back | (e) Four | years | back | | |
| 1a | 1a Beginning of year balance 103,929,300. 107,805,115. 111,518,105. 106,809,705. | | | | | | | | 128. | | |
| b | Contributions | 132,639. | 326,071. | 729,914. | 1 | ,594,428. | | 368, | 635. | | |
| С | | | | | | | | 873, | 220. | | |
| d | Grants or scholarships | 4,469,537. | 3,645,126. | 6,005,359. | 4 | ,642,407. | 4, | 619, | 208. | | |
| е | Other expenditures for facilities | | | | | | | | | | |
| | and programs | 2,419,492. | 1,908,227. | 3,223,712. | | 780,114. | 2, | 498, | 070. | | |
| f | Administrative expenses | | | | | | | | | | |
| g | End of year balance | 130,956,602. | 103,929,300. | 107,805,115. | 111 | ,518,105. | 106, | 809, | 705. | | |
| 2 | Provide the estimated percentage of the curr | ent year end balance | e (line 1g, column (a) |) held as: | | | | | | | |
| а | Board designated or quasi-endowment | 100 | % | | | | | | | | |
| b | Permanent endowment | % | _ | | | | | | | | |
| С | Term endowment | % | | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | uld equal 100%. | | | | | | | | | |
| За | Are there endowment funds not in the posse | ssion of the organiza | tion that are held ar | nd administered for t | he orgar | ization | _ | | | | |
| | by: | | | | | | | Yes | No | | |
| | (i) Unrelated organizations | | | | | | 3a(i) | | Х | | |
| | (ii) Related organizations | | | | | | 3a(ii) | | Х | | |
| b | If "Yes" on line 3a(ii), are the related organiza | tions listed as requir | ed on Schedule R? | | | | 3b | | | | |
| 4 | Describe in Part XIII the intended uses of the | organization's endo | wment funds. | | | | | | | | |
| Pai | rt VI Land, Buildings, and Equipm | ent. | | | | | | | | | |
| | Complete if the organization answere | d "Yes" on Form 990 | , Part IV, line 11a. S | ee Form 990, Part X | , line 10. | | | | | | |
| | Description of property | (a) Cost or o | ther (b) Cost | or other (c) A | Accumul | ated | (d) Book | value | Э | | |
| | · | basis (investn | nent) basis | (other) de | epreciati | on | | | | | |
| 1a | Land | | | | | | | | | | |
| | Buildings | | | | | | | | | | |
| | Leasehold improvements | | | | | | | | | | |
| | Equipment | I | | | | | | | | | |
| | Other | I | 1 | ,012,188. | 49 | 2,539. | | 519, | 649. | | |
| | I. Add lines 1a through 1e. (Column (d) must e | | X. column (B). line 1 | Oc.) | | 🕨 | | 519, | 649. | | |
| | | • | | | | | | 0001 | | | |

| Schedule D (Form 990) 2020 TRIANGLE COMMUNIT | Y FOUNDATION INC | 5 | 6-1380796 | Page 3 |
|---|------------------------------|--|------------------|----------|
| Part VII Investments - Other Securities. | | | | |
| Complete if the organization answered "Yes" of | on Form 990, Part IV, line 1 | | | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end | d-of-year market | value |
| (1) Financial derivatives | | | | |
| (2) Closely held equity interests | | | | |
| (3) Other | | | | |
| (A) CASH EQUIVALENTS | 10,322,450. | END-OF-YEAR MARKET VALUE | | |
| (B) CERTIFICATES OF DEPOSIT | 2,407,841. | END-OF-YEAR MARKET VALUE | | |
| (C) ALTERNATIVE INVESTMENTS | 120,589,411. | END-OF-YEAR MARKET VALUE | | |
| (D) | | | | |
| (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| (H) | 122 210 702 | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | 133,319,702. | | | |
| | F 000 B-+ IV I' 4 | 1 - O - Franco 000 Bart V Bara 10 | | |
| Complete if the organization answered "Yes" (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end | d-of-vear market | value |
| | (b) DOOK value | (c) Method of Valuation. Cost of end | 1-01-year market | value |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| <u>(4)</u> (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" of | on Form 990, Part IV, line 1 | 1d. See Form 990, Part X, line 15. | | |
| | Description | | (b) Book \ | /alue |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line | 15.) | _ | | |
| Part X Other Liabilities. | | | | |
| Complete if the organization answered "Yes" of | on Form 990, Part IV, line 1 | 1e or 11f. See Form 990, Part X, line 25 | | |
| 1. (a) Description of liability | | | (b) Book \ | /alue |
| (1) Federal income taxes | | | | |
| (2) DEFERRED RENT LIABILITY | | | | 316,538. |
| (3) | | | | |
| (4) | | | ļ | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

316,538.

(8) (9)

56-1380796

| Complete if the organization answered "Yes" on Form 990, Part IV, lin | | | 4 | 81,948,311. |
|---|---------------|----------------|---------------|-------------|
| | | | 1 | 01,940,311 |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: | ا م ا | 53 190 707 | | |
| Net unrealized gains (losses) on investments Denoted gardings and use of facilities. | | 53,190,707. | | |
| b Donated services and use of facilities | | | | |
| Recoveries of prior year grants Other (Describe in Part XIII.) | | 1,338,164. | | |
| | | | 2e | 54,528,871, |
| e Add lines 2a through 2d 3 Subtract line 2e from line 1 | | | 3 | 27,419,440. |
| 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 | 841,047. | | |
| b Other (Describe in Part XIII.) | | , | | |
| A 1 1 17 | | | 4c | 841,047 |
| Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12. | | | 5 | 28,260,487 |
| Part XII Reconciliation of Expenses per Audited Financial Sta | atements With | Expenses per F | | |
| Complete if the organization answered "Yes" on Form 990, Part IV, lin | | | | |
| Total expenses and losses per audited financial statements | | | 1 | 26,067,953. |
| 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 | | | | |
| c Other losses | | | | |
| d Other (Describe in Part XIII.) | | 190,954. | | |
| e Add lines 2a through 2d | | • | 2e | 190,954 |
| 3 Subtract line 2e from line 1 | | | 3 | 25,876,999. |
| 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 | 841,047. | | |
| b Other (Describe in Part XIII.) | | | | |
| c Add lines 4a and 4b | | | 4c | 841,047 |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 1 | | | 5 | 26,718,046. |
| Part XIII Supplemental Information. | • | | | |
| Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and a lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a PART IV, LINE 2B: | | | , , , , , , , | |
| AGENCY FUNDS ARE CREATED BY A NONPROFIT AGENCY TO BENEFIT THA | AT AGENCY. | | | |
| THAT IS, THE AGENCY IS BOTH DONOR AND BENEFICIARY. THE AGENC | CY FUND IS | | | |
| ESTABLISHED SO THAT THE DONOR/BENEFICIARY CAN UTILIZE THE INV | VESTMENT AND | | | |
| ADMINISTRATIVE SERVICES OF THE FOUNDATION IN EXCHANGE FOR PA | YING THE | | | |
| NORMAL 1% ADMINISTRATIVE AND OTHER INVESTMENT MANAGEMENT FEE: | | | | |
| TO THE TAXABLE TO THE TAXABLE THE TAXABLE THE TAXABLE | · | | | |
| DADE W. LIND 4 | | | | |
| PART V, LINE 4: | | | | |
| THE ENDOWED FUNDS CAN MAKE GRANTS TO ANY US 501(C)(3) IN GOOD | D STANDING. | | | |
| | | | | |
| PART X, LINE 2: | | | | |
| | | | | |

SCHEDULE F (Form 990)

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.

2020
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Employer identification number

| Name of the organization | | | | | Linployer identi | ilication number |
|---|---------------------|-------------------------|---|------------------|--------------------------------------|-------------------------|
| TRIANGLE COMMUNITY FOU | NDATION INC | | | | 56-1380796 | |
| Part I General Info | rmation on A | ctivities Out | side the United States. Comple | ete if the organ | ization answered " | Yes" on |
| Form 990, Part IV | /, line 14b. | | | | | |
| - | - | | ds to substantiate the amount of its gra | | | |
| the grantees' eligibility for | or the grants or a | assistance, and t | the selection criteria used to award the | grants or assis | stance? | Yes No |
| O Fan aventmelsene Door | wibe in Dout \/ the | o organization's | are and transfer manifesting the transfit | aranta and at | har assistance aut | oida tha |
| 2 For grantmakers. Description United States. | mbe in Part V trie | e organization s | procedures for monitoring the use of its | grants and ot | ner assistance out | side tile |
| | he following Part | I. line 3 table ca | an be duplicated if additional space is n | eeded.) | | |
| (a) Region | (b) Number of | (c) Number of | (d) Activities conducted in the region | (e) If acti | vity listed in (d) | (f) Total |
| | offices | employees, agents, and | (by type) (such as, fundraising, pro- | | gram service, | expenditures for and |
| | in the region | independent contractors | gram services, investments, grants to recipients located in the region) | | e specific type (s) in the region | investments |
| | | in the region | resipiente lecatea in the regiony | 01 001 1100 | (c) iii iiio rogion | in the region |
| | | | | | | |
| CENTRAL AMERICA AND | | | | | | |
| THE CARIBBEAN | 0 | 0 | INVESTMENTS | | | 24,040,711. |
| | | | | | | |
| | | | | | | |
| EUROPE (INCLUDING | | | | | | |
| ICELAND & GREENLAND) | 0 | 0 | INVESTMENTS | | | 1,933,459. |
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| • | | | | | | 25 074 170 |
| 3 a Subtotal | 0 | 0 | | | | 25,974,170. |
| b Total from continuation sheets to Part I | 0 | 0 | | | | 0. |
| c Totals (add lines 3a | | | | | | |

25,974,170.

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) |
|--|---|------------|---------------------------------|--------------------------|---------------------------------|----------------------------------|---------------------------------------|---|
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| | | | ecognized as charities by the f | | | _ | | |
| exempt 501(c)(3) orga 3 Enter total number of | | | or counsel has provided a sect | ion 501(c)(3) equ | uivalency letter | | | |

| Part III | | | | ites. Complete i | f the organization answered "Yes' | on Form 990, Part | IV, line 16. | |
|------------------|---------------------------------|-------------------------------------|--------------------------|--------------------------|-----------------------------------|----------------------------------|---------------------------------------|--|
| (a) ¹ | Part III can be duplicated if a | dditional space is needd (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of noncash assistance | (g) Description of noncash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
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Page 4

Schedule F (Form 990) 2020 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) | X 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 | X 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) | X 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) | X 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) | X 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 | X No |

Schedule F (Form 990) 2020

| Schedule F | (Form 990) 2020 TRIANGLE COMMONITY FOUNDATION INC | 56-1380/96 | Page 5 |
|------------|--|-------------------------|--------|
| Part V | Supplemental Information | | |
| | Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting n | nethod; amounts of | |
| | investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and | nd Part III, column (c) | |
| | (estimated number of recipients), as applicable. Also complete this part to provide any additional information | n. See instructions. | |
| PART I, I | LINE 3: | | |
| | | | |
| THE ORGAN | NIZATION USES GAAP TO REPORT EXPENDITURES IN FOREIGN REGIONS. | | |
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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.

2020 Open to Public

Inspection

Name of the organization **Employer identification number** 56-1380796 TRIANGLE COMMUNITY FOUNDATION INC Part I **General Information on Grants and Assistance** 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 X Yes criteria used to award the grants or assistance? 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. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) ABUNDANCE NC 220 LORAX LANE BOX 5 PITTSBORO, NC 27312 20-4327530 0 GENERAL PURPOSE 31,446, ACKLAND ART MUSEUM CB #3400 0. GENERAL PURPOSE CHAPEL HILL, NC 27599-3400 8,356 ACTION FOR THE CLIMATE EMERGENCY (ACE) - 4676 BROADWAY, SUITE A -BOULDER, CO 80304 26-3102566 172 000 0 GENERAL PURPOSE ACTIVATE GOOD 1053 E. WHITAKER MILL ROAD, SUITE GENERAL PURPOSE RALEIGH NC 27064 20-3057526 11 500 0. ADVENTURE CYCLING ASSOCIATION 150 E. PINE STREET MISSOULA MT 59802 23-7427629 7 000 GENERAL PURPOSE 0. AFFORDABLE COMMUNITY RESIDENCE ASSOCIATION, INC. - PO BOX 25265 DURHAM NC 27702-5265 56-1609845 28 470 0 GENERAL PURPOSE 678. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| AFRICAN EDUCATION PROGRAM | | | | | | | | | |
| PO BOX 6 | | | | | | | | | |
| WAYNE, PA 19087 | 42-1585011 | | 11,000. | 0. | | | GENERAL PURPOSE | | |
| A HELPING HAND | | | | | | | | | |
| 1502 W. NC HWY 54, SUITE 405 | | | | | | | | | |
| DURHAM, NC 27707 | 56-1923835 | | 34,804. | 0. | | | GENERAL PURPOSE | | |
| ALDERT ROOT ELEMENTARY EDUCATIONAL | | | | | | | | | |
| FOUNDATION - PO BOX 20981 - | 20 2447710 | | F 000 | _ | | | | | |
| RALEIGH, NC 27619 | 20-2447719 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| AL-HUDA ACADEMY | | | | | | | | | |
| 2220 JONES FRANKLIN RD | | | | | | | | | |
| RALEIGH, NC 27606 | 85-2197543 | | 15,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| ALICE AYCOCK POE CENTER FOR HEALTH | | | | | | | | | |
| EDUCATION - 224 SUNNYBROOK ROAD - RALEIGH, NC 27610 | 56-1500678 | | 10,697. | 0. | | | GENERAL PURPOSE | | |
| RABEIGH, NC 27010 | 30-1300078 | | 10,037. | 0. | | | GENERAL FURFUSE | | |
| ALLEGHANY EDUCATIONAL FOUNDATION | | | | | | | | | |
| INC PO BOX 33 - SPARTA, NC | | | | | | | | | |
| 28675 | 58-1955182 | | 8,000. | 0. | | | GENERAL PURPOSE | | |
| ALLEGUANY TINTOD ADDALAGUAN | | | | | | | | | |
| ALLEGHANY JUNIOR APPALACHIAN MUSICIANS - PO BOX 1326 - SPARTA | | | | | | | | | |
| NC 28675 | 81-1618359 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| 10 20075 | 01 1010333 | | 10,000. | •• | | | | | |
| ALLEGHANY MEMORIAL HOSPITAL | | | | | | | | | |
| 233 DOCTORS ST. | | | | | | | | | |
| SPARTA, NC 28675 | 56-0525657 | | 25,000. | 0. | | | GENERAL PURPOSE | | |
| ALLIANCE MEDICAL MINISTRY | | | | | | | | | |
| 101 DONALD ROSS DR. | | | | | | | | | |
| RALEIGH, NC 27610 | 56-2168673 | | 26,250. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| ALPHA DELTA FOUNDATION | | | | | | | | | |
| 434 FAYETTEVILE STREET, 11TH FLOOR | | | | | | | | | |
| RALEIGH, NC 27601 | 84-4755084 | | 390,814. | 0. | | | GENERAL PURPOSE | | |
| , | | | , | | | | | | |
| ALTERNATE ROOTS | | | | | | | | | |
| 1270 CAROLINE STREET STE D120-353 | | | | | | | | | |
| ATLANTA, GA 30307 | 58-1318198 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| WEDT GOVERNMENT GOGT THE | | | | | | | | | |
| AMERICAN CANCER SOCIETY PO BOX 11796 | | | | | | | | | |
| CHARLOTTE, NC 28220 | 13-1788491 | | 8,488. | 0. | | | GENERAL PURPOSE | | |
| CHARDOTTE, NC 20220 | 13 1700431 | | 0,400. | · · | | | GENERAL TORTOGE | | |
| AMERICAN CIVIL LIBERTIES UNION OF | | | | | | | | | |
| NC LEGAL FOUNDATION - PO BOX 28004 | | | | | | | | | |
| - RALEIGH, NC 27611 | 56-1019644 | | 14,250. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| AMERICAN DIABETES ASSOCIATION - | | | | | | | | | |
| CHARLOTTE - P.O. BOX 7023 - | | | | | | | | | |
| MERRIFIELD, VA 22116-7023 | 13-1623888 | | 45,476. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| AMERICAN FRIENDS SERVICE COMMITTEE | | | | | | | | | |
| 1501 CHERRY ST. | 02 1250010 | | 10 750 | | | | | | |
| PHILADELPHIA, PA 19102 | 23-1352010 | | 10,750. | 0. | | | GENERAL PURPOSE | | |
| AMERICAN HEART ASSOCIATION, | | | | | | | | | |
| TRIANGLE - 5001 SOUTH MIAMI BLVD, | | | | | | | | | |
| SUITE 300 - DURHAM, NC 27703 | 13-5613797 | | 29,371. | 0. | | | GENERAL PURPOSE | | |
| , | | | , | | | | | | |
| AMERICAN INDIAN COLLEGE FUND | | | | | | | | | |
| 8333 GREENWOOD BLVD | | | | | | | | | |
| DENVER, CO 80221 | 52-1573446 | | 7,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| AMERICAN LUNG ASSOCIATION IN NORTH | | | | | | | | | |
| CAROLINA - 401 HAWTHORNE LANE STE | | | | | | | | | |
| 110 #298 - CHARLOTTE, NC 28204 | 13-1632524 | | 13,726. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 RED CROSS - DISASTER | | | | | | | | | |
| RELIEF - PO BOX 37839 - BOONE, IA | | | | | | | | | |
| 50037-0839 | 53-0196605 | | 9,926. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| AMERICAN RED CROSS, TRIANGLE | | | | | | | | | |
| CHAPTER - 100 NORTH PEARTREE LANE - RALEIGH, NC 27610 | 53-0196605 | | 25,572. | 0. | | | GENERAL PURPOSE | | |
| - RALEIGH, NC 27010 | 33-0190003 | | 25,572. | 0. | | | GENERAL PURPOSE | | |
| AMERICAN SUPPORT FOR ISRAEL | | | | | | | | | |
| PO BOX 3263 | | | | | | | | | |
| WASHINGTON, DC 20010-0263 | 26-3383926 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| AMERICAN UNIVERSITY - SCHOL | | | | | | | | | |
| 4400 MASSACHUSETTS AVE. NW | | | | | | | | | |
| WASHINGTON, DC 20016 | 53-0196549 | | 9,000. | 0. | | | GENERAL PURPOSE | | |
| 1477 - 614 - 1447 - 774 - 1666 - 1774 | | | | | | | | | |
| AMERICAN VAULTING ASSOCIATION | | | | | | | | | |
| 1443 E. WASHINGTON BLVD #289 PASADENA, CA 91104 | 23-7376089 | | 12,500. | 0. | | | GENERAL PURPOSE | | |
| TABADENA, CA 71104 | 23 7370003 | | 12,300. | · · | | | GENERAL TORTOSE | | |
| AMERICARES | | | | | | | | | |
| 88 HAMILTON AVENUE | | | | | | | | | |
| STAMFORD, CT 06902 | 06-1008595 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| ANDERSON UNIVERSITY, INC. | | | | | | | | | |
| 1100 EAST 5 ST. | | | | | | | | | |
| ANDERSON, IN 46012 | 35-0867954 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| ANDREW JACKSON'S HERMITAGE | | | | | | | | | |
| 4580 RACHEL'S LANE | 62-0478087 | | 30 000 | 0. | | | CEMEDAL DIDDOGE | | |
| NASHVILLE, TN 37076 | 02-04/008/ | | 20,000. | 0. | | | GENERAL PURPOSE | | |
| APEX UNITED METHODIST CHURCH | | | | | | | | | |
| 100 S. HUGHES STREET | | | | | | | | | |
| APEX, NC 27502 | | | 8,750. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| A PLACE AT THE TABLE | | | | | | | | |
| PO BOX 26205 | | | | | | | | |
| RALEIGH, NC 27611 | 47-2959935 | | 74,750. | 0. | | | GENERAL PURPOSE | |
| APPALACHIAN STATE UNIVERSITY FOUNDATION - ASU BOX 32014 - | | | | | | | | |
| BOONE, NC 28608 | 23-7099379 | | 7,500. | 0. | | | GENERAL PURPOSE | |
| APPALACHIAN STATE UNIVERSITY - SCHOL - ASU BOX 32005 - BOONE, NC | | | | | | | | |
| 28608 | 56-1176030 | | 15,000. | 0. | | | GENERAL PURPOSE | |
| ARIZONA CENTER FOR EMPOWERMENT 5716 N.19TH AVE. PHOENIX, AZ 85015-2432 | 27-2366780 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| ARROWMONT SCHOOL OF ARTS AND CRAFTS - 556 PARKWAY - GATLINBURG, | | | , | | | | | |
| TN 37738 | 58-2007394 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| ARTS ACCESS INC. 3900 MERTON DRIVE STE 150 | | | | | | | | |
| RALEIGH, NC 27609 | 58-1678626 | | 8,000. | 0. | | | GENERAL PURPOSE | |
| ART THERAPY INSTITUTE 200 NORTH GREENSBORO STREET STE D- | 5 | | | | | | | |
| CARRBORO, NC 27510 | 26-3447555 | | 12,500. | 0. | | | GENERAL PURPOSE | |
| ASBURY FIRST UNITED METHODIST CHURCH - 1050 EAST AVENUE - | | | | | | | | |
| ROCHESTER, NY 14607 | 16-0755728 | | 10,000. | 0. | | | GENERAL PURPOSE | |
| AUGUSTINE LITERACY PROJECT 3307 WATKINS ROAD STE 179 | | | | | | | | |
| DURHAM, NC 27707 | 47-2832907 | | 59,250. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| AZIZ AND GWEN SANCAR FOUNDATION | | | | | | | | |
| 311 WEST UNIVERSITY DRIVE | | | | | | | | |
| CHAPEL HILL, NC 27516 | 26-0871109 | | 15,000. | 0. | | | GENERAL PURPOSE | |
| · | | | , | | | | | |
| BACKPACK FRIENDS, INC. | | | | | | | | |
| PO BOX 483 | | | | | | | | |
| SWANSBORO, NC 28584 | 83-1653529 | | 6,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| BALD HEAD ISLAND CONSERVANCY INC. | | | | | | | | |
| PO BOX 3109 | 58-1574496 | | 10 000 | 0. | | | GENERAL PURPOSE | |
| BALD HEAD ISLAND, NC 28461 | 38-1374490 | | 10,000. | 0. | | | GENERAL PORPOSE | |
| BANK OF AMERICA CHARITABLE GIFT | | | | | | | | |
| FUND - 100 FEDERAL STREET - | | | | | | | | |
| BOSTON, MA 02110 | 04-6010342 | | 32,738. | 0. | | | GENERAL PURPOSE | |
| | | | , | - | | | | |
| BAPTIST WOMEN IN MINISTRY NORTH | | | | | | | | |
| CAROLINA - 7913 OCOEE COURT - | | | | | | | | |
| RALEIGH, NC 27612 | 58-2053394 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| BARNABAS INTERNATIONAL | | | | | | | | |
| PO BOX 708 | | | | _ | | | | |
| ELKHORN, WI 53121 | 36-3535053 | | 7,000. | 0. | | | GENERAL PURPOSE | |
| BEDS 4 KIDS | | | | | | | | |
| 821 W 11 MILE RD | | | | | | | | |
| ROYAL OAK, MI 48067-2447 | 83-4689017 | | 10,000. | 0. | | | GENERAL PURPOSE | |
| - HOTAL OAK, HI 40007 2447 | 03 4003017 | | 10,000. | · · | | | GENERAL TORTOGE | |
| BENCHMARK MINISTRIES | | | | | | | | |
| 200 THORN HOLLOW DRIVE | | | | | | | | |
| APEX, NC 27523 | 37-1440336 | | 10,250. | 0. | | | GENERAL PURPOSE | |
| | | | , | - | | | | |
| BETH-EL SYNAGOGUE | | | | | | | | |
| 1004 WATTS ST. | | | | | | | | |
| DURHAM, NC 27701 | 56-0629337 | | 76,000. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| BEYOND FENCES | | | | | | | | |
| P.O. BOX 3259 | | | | | | | | |
| DURHAM, NC 27715 | 26-2584285 | | 5,800. | 0. | | | GENERAL PURPOSE | |
| , | | | , | - | | | | |
| BEYU GROUP, INC. | | | | | | | | |
| 6214 CABIN BRANCH DRIVE | | | | | | | | |
| DURHAM, NC 27712 | | | 96,495. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| BIG BROTHERS BIG SISTERS MOUNTAIN | | | | | | | | |
| REGION - 1229 S ST FRANCIS DR STE | 05 0276400 | | 10 000 | | | | ATMEDAL DIEDOGE | |
| C - SANTA FE, NM 87505 BIG BROTHERS BIG SISTERS OF THE | 85-0276498 | | 10,000. | 0. | | | GENERAL PURPOSE | |
| TRIANGLE, INC 808 AVIATION | | | | | | | | |
| PARKWAY STE 900 - MORRISVILLE, NC | | | | | | | | |
| 27560 | 56-2109717 | | 23,500. | 0. | | | GENERAL PURPOSE | |
| 27300 | 30 2103717 | | 23,300. | 0. | | | | |
| BIKE DURHAM | | | | | | | | |
| P.O. BOX 25236 | | | | | | | | |
| DURHAM, NC 27702 | 46-5356944 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| · | | | , | | | | | |
| BLACK FAMILY LAND TRUST INC | | | | | | | | |
| PO BOX 2087 | | | | | | | | |
| DURHAM, NC 27701 | 04-3797149 | | 6,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| BLACKNALL MEMORIAL PRESBYTERIAN | | | | | | | | |
| CHURCH - 1902 PERRY ST DURHAM, | | | | _ | | | | |
| NC 27705 | 23-7093809 | | 36,500. | 0. | | | GENERAL PURPOSE | |
| BLACK VOTERS MATTER CAPACITY | | | | | | | | |
| BUILDING INSTITUTE - 3645 | | | | | | | | |
| MARKETPLACE BLVD SUITE 130-209 - | 82-3835203 | | 26 000 | 0. | | | GENERAL DIRECCE | |
| ATLANTA, GA 30344 | 02-3035203 | | 26,000. | 0. | | | GENERAL PURPOSE | |
| BLEVINS CHAPEL BAPTIST CHURCH | | | | | | | | |
| 8060 HWY 19E | | | | | | | | |
| ROAN MOUNTAIN, TN 37687 | 10-0006628 | | 6,000. | 0. | | | GENERAL PURPOSE | |
| · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · | | L | • | · | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| BLUE HILL COMMUNITY DEVELOPMENT | | | | | | | | |
| PO BOX 438 | | | | | | | | |
| BLUE HILL, ME 04614 | 82-0663285 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| , | | | , | | | | | |
| BLUEPRINT NORTH CAROLINA | | | | | | | | |
| 3125 POPLARWOOD COURT, STE 300 | | | | | | | | |
| RALEIGH, NC 27604 | 27-2459538 | | 47,250. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| BOOK HARVEST | | | | | | | | |
| 2501 UNIVERSITY DRIVE | | | | | | | | |
| DURHAM, NC 27707 | 45-2610533 | | 33,100. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| BOOMERANG YOUTH, INC. | | | | | | | | |
| 825-A NORTH ESTES DRIVE | 45 4660450 | | 05.000 | _ | | | | |
| CHAPEL HILL, NC 27514 | 47-4660452 | | 95,000. | 0. | | | GENERAL PURPOSE | |
| BOUNCING BULLDOGS | | | | | | | | |
| PO BOX 2026 | | | | | | | | |
| CHAPEL HILL, NC 27515 | 56-1855815 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| <u> </u> | | | ,,,,,, | • | | | | |
| BOYS AND GIRLS CLUB OF WAKE COUNTY | | | | | | | | |
| 701 N RALEIGH BLVD | | | | | | | | |
| RALEIGH, NC 27610 | 56-0863051 | | 46,355. | 0. | | | GENERAL PURPOSE | |
| BOYS AND GIRLS CLUBS OF DURHAM AND | | | · | | | | | |
| ORANGE COUNTIES - 1010 MARTIN | | | | | | | | |
| LUTHER KING JR PARKWAY STE 300 - | | | | | | | | |
| DURHAM, NC 27713 | 56-6001906 | | 8,901. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| BOYS AND GIRLS CLUBS OF THE | | | | | | | | |
| COASTAL PLAIN - 621 WEST FIRE | | | | | | | | |
| TOWER ROAD - WINTERVILLE, NC 28590 | 56-0927694 | | 6,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| BOY SCOUTS OF AMERICA, OCCONEECHEE | | | | | | | | |
| COUNCIL - 3231 ATLANTIC AVENUE - | [[[] [] [] [] [] [] [] [] [] | | 00.50- | _ | | | | |
| RALEIGH, NC 27604-1675 | 56-0529984 | | 29,605. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 CLUB OF CENTRAL | | | | | | | | |
| CAROLINA - 1414 BRAGG STREET - | | | | | | | | |
| SANFORD, NC 27330 | 56-1923703 | | 15,000. | 0. | | | GENERAL PURPOSE | |
| BOYS & GIRLS CLUBS OF TUCSON PO BOX 40217 TUCSON, AZ 85717 | 86-0172257 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| 10CDON, AZ 03717 | 00 0172237 | | 3,000. | · · | | | GENERAL TORTOBE | |
| BREAST CANCER RESEARCH FOUNDATION INC 28 WEST 44TH STREET, SUITE 609 - NEW YORK, NY 10036 | 13-3727250 | | 6,738. | 0. | | | GENERAL PURPOSE | |
| 009 - NEW TORK, NT 10050 | 13-3727230 | | 0,738. | 0. | | | GENERAL FORFOSE | |
| BRIDGE TO TURKIYE 100 FOX BRIAR LANE | | | | | | | | |
| CARY, NC 27518 | 58-2678580 | | 10,000. | 0. | | | GENERAL PURPOSE | |
| BROOKLYN COLLEGE FOUNDATION 2900 BEDFORD AVENUE | | | | | | | | |
| BROOKLYN, NY 11210 | 11-1904329 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| BUMP: THE TRIANGLE 504 WEST CHAPEL HILL ST | | | | | | | | |
| DURHAM, NC 27701 | 20-5410127 | | 10,000. | 0. | | | GENERAL PURPOSE | |
| BURBANK FREEWILL BAPTIST CHURCH 282 STOCTON ROAD | | | | | | | | |
| ROAN MOUNTAIN, TN 37687 | 10-0006486 | | 6,000. | 0. | | | GENERAL PURPOSE | |
| BURNING COAL THEATRE COMPANY 224 POLK ST | | | | | | | | |
| RALEIGH, NC 27675 | 56-1910148 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| CAMPAIGN4CHANGE PO BOX 3355 | | | | | | | | |
| DURHAM, NC 27713 | 26-0096724 | | 15,000. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| CAMPBELL UNIVERSITY DIVINITY SCHOOL - PO DRAWER 4050 - BUIES CREEK, NC 27506 | | | 6,290. | 0. | | | GENERAL PURPOSE | |
| CAMP CORRAL 801 N. WEST STREET RALEIGH, NC 27603 | 45-3555807 | | 7,530. | 0. | | | general purpose | |
| CAMPUS CRUSADE FOR CHRIST INTERNATIONAL - PO BOX 628222 - ORLANDO, FL 32832-8222 | 33-0863088 | | 6,250. | 0. | | | GENERAL PURPOSE | |
| CAPE FEAR RIVER WATCH 617 SURRY ST. WILMINGTON, NC 28401 | 58-2121884 | | 10,000. | 0. | | | general purpose | |
| CARE - CHILD ABUSE RESOURCE AND EDUCATION - P.O. BOX 1541 - LITTLETON, NC 27850 | 56-2108200 | | 70,000. | 0. | | | GENERAL PURPOSE | |
| CARE - COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE, INC PO BOX 1870 - MERRIFIELD, VA 22116 | 13-1685039 | | 7,300. | 0. | | | general purpose | |
| CARING COMMUNITY FOUNDATION PO BOX 1364 CARY, NC 27512 | 20-0036976 | | 6,767. | 0. | | | general purpose | |
| CARING HOUSE, INC. 2625 PICKETT ROAD DURHAM, NC 27705 | 56-1647154 | | 22,950. | 0. | | | GENERAL PURPOSE | |
| CAROLINA ABORTION FUND PO BOX 51534 DURHAM, NC 27707 | 45-3810502 | | 5,000. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sche | edule I (Form 990), Pa | rt 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 |
| CAROLINA BALLET, INC. 3401 ATLANTIC AVENUE, SUITE 131 RALEIGH, NC 27604 | 56-1445383 | | 71,745. | 0. | | | general purpose |
| CAROLINA BIBLE CAMP INC., PO BOX 1234 MOCKSVILLE, NC 27028 | 23-7282936 | | 20,000. | 0. | | | GENERAL PURPOSE |
| CAROLINA FRIENDS SCHOOL 4809 FRIENDS SCHOOL ROAD DURHAM, NC 27705 | 56-0812560 | | 160,750. | 0. | | | GENERAL PURPOSE |
| CAROLINA JUSTICE POLICY CENTER PO BOX 309 DURHAM, NC 27702-0309 | 59-1755809 | | 11,000. | 0. | | | general purpose |
| CAROLINA PUBLIC PRESS PO BOX 17595 ASHEVILLE, NC 28816 | 46-0801080 | | 9,750. | 0. | | | GENERAL PURPOSE |
| CAROLINAS COUNCIL OF HOUSING, REDEVELOPMENT, AND CODE OFFICIALS - P O BOX 214 - MARION, SC 29571 | 56-1023426 | | 18,250. | 0. | | | GENERAL PURPOSE |
| CAROLINAS GATEWAY PARTNERSHIP INC. 427 FALLS ROAD ROCKY MOUNT, NC 27804-4808 | 56-1931327 | | 7,500. | 0. | | | GENERAL PURPOSE |
| CAROLINA THEATRE OF DURHAM, INC. 309 W. MORGAN STREET DURHAM, NC 27701-2119 | 56-1759337 | | 19,000. | 0. | | | general purpose |
| CARTERET COUNTY DOMESTIC VIOLENCE PROGRAM INC PO BOX 2279 - MOREHEAD CITY, NC 28557 | 56-1702953 | | 5,250. | 0. | | | general purpose |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| CARY ACADEMY | | | | | | | | | |
| 1500 N. HARRISON AVE. | | | | | | | | | |
| CARY, NC 27513 | 56-1934619 | | 11,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| CASA | | | | | | | | | |
| 624 WEST JONES STREET | | | | | | | | | |
| RALEIGH, NC 27603 | 56-1778714 | | 70,750. | 0. | | | GENERAL PURPOSE | | |
| CATAWBA COLLEGE - DEVELOPMENT | | | | | | | | | |
| OFFICE - 2300 W INNES ST | | | | | | | | | |
| SALISBURY, NC 28144 | 56-0530251 | | 40,000. | 0. | | | GENERAL PURPOSE | | |
| | | | , - | | | | | | |
| CATHOLIC CHARITIES OF THE DIOCESE | | | | | | | | | |
| OF RALEIGH - 7200 STONEHENGE DRIVE | | | | | | | | | |
| - RALEIGH, NC 27613 | 56-0529943 | | 26,500. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| CATHOLIC DIOCESE OF RALEIGH | | | | | | | | | |
| 7200 STONEHENGE DRIVE | | | | | | | | | |
| RALEIGH, NC 27613 | 56-0591293 | | 5,350. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| CENTER FOR ACTION AND | | | | | | | | | |
| CONTEMPLATION - PO BOX 12464 - | 05 0354065 | | 10 500 | 0 | | | GENERAL DURROGE | | |
| ALBURQUERQUE, NM 87195 | 85-0354965 | | 12,500. | 0. | | | GENERAL PURPOSE | | |
| CENTER FOR CHILD AND FAMILY HEALTH | | | | | | | | | |
| NC - 1121 W. CHAPEL HILL STREET | | | | | | | | | |
| STE 100 - DURHAM, NC 27701 | 58-1446309 | | 12,369. | 0. | | | GENERAL PURPOSE | | |
| 222 200 201111121, 110 27702 | 00 111000 | | 12,005. | - | | | | | |
| CENTER FOR VOLUNTEER CAREGIVING | | | | | | | | | |
| 1150 SOUTHEAST MAYNARD ROAD STE 21 | b | | | | | | | | |
| CARY, NC 27511 | 58-2067482 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| CENTRAL CAROLINA COMMUNITY COLLEGE | | | | | | | | | |
| FOUNDATION - SCHOL - 1105 KELLY | | | | | | | | | |
| DR SANFORD, NC 27330 | 56-1644218 | | 11,404. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | ı agı |
|---|-------------------|-------------------------------|--------------------------|-----------------------------------|--|---|------------------------------------|
| (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 |
| CENTRAL ELEMENTARY SCHOOL | | | | | | | |
| 154 HAYES ST. | | | 12,597. | 0. | | | GENERAL PURPOSE |
| HILLSBOROUGH, NC 27278 | | | 12,397. | 0. | | | GENERAL FORFOSE |
| CENTRAL PIEDMONT COMMUNITY ACTION PO BOX 626 | | | | | | | |
| SILER CITY, NC 27344 | 56-0861200 | | 17,446. | 0. | | | GENERAL PURPOSE |
| CENTRE FOR EFFECTIVE ALTRUISM 2054 UNIVERSITY AVE STE 300 | | | | | | | |
| BERKELEY, CA 94704 | 47-1988398 | | 6,000. | 0. | | | GENERAL PURPOSE |
| CENTRO INTERNACIONAL DE RALEIGH (CIR) - 4501 RYEGATE DRIVE - | 00 4000050 | | | | | | |
| RALEIGH, NC 27604 | 20-4892858 | | 8,000. | 0. | | | GENERAL PURPOSE |
| CHAMBER ORCHESTRA OF THE TRIANGLE 1213 E. FRANKLIN STREET | | | | | | | |
| CHAPEL HILL, NC 27514 | 56-1610461 | | 41,628. | 0. | | | GENERAL PURPOSE |
| CHAPEL HILL BIBLE CHURCH 260 ERWIN ROAD | | | | | | | |
| CHAPEL HILL, NC 27514 | 51-0138255 | | 6,000. | 0. | | | GENERAL PURPOSE |
| CHAPEL HILL-CARRBORO MEALS ON WHEELS - PO BOX 2102 - CHAPEL | | | | | | | |
| HILL, NC 27514 | 59-1721954 | | 31,304. | 0. | | | GENERAL PURPOSE |
| CHAPEL HILL-CARRBORO PUBLIC SCHOOL FOUNDATION - PO BOX 877 - | | | | | | | |
| CARRBORO, NC 27510 | 56-1421977 | | 9,300. | 0. | | | GENERAL PURPOSE |
| CHAPEL HILL HISTORICAL SOCIETY PO BOX 9032 | | | | | | | |
| CHAPEL HILL, NC 27515-9032 | 56-6076618 | | 5,250. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| CHAPEL OF THE CROSS | | | | | | | | |
| 304 E. FRANKLIN STREET | | | | | | | | |
| CHAPEL HILL, NC 27514 | 56-0623934 | | 35,000. | 0. | | | GENERAL PURPOSE | |
| CHARLES HAMILTON HOUSTON | | | | | | | | |
| FOUNDATION, INC PO BOX 25138 - | | | | | | | | |
| DURHAM, NC 27702 | 47-4992302 | | 10,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| CHARLES HOUSE ASSOCIATION | | | | | | | | |
| 7511 SUNRISE RD | 58-1582881 | | 22 904 | 0. | | | GENEDAL DUDDOGE | |
| CHAPEL HILL, NC 27514 | 50-1502001 | | 22,804. | ٠. | | | GENERAL PURPOSE | |
| CHARLOTTE RESCUE MISSION | | | | | | | | |
| 907 W. 1ST STREET | | | | | | | | |
| CHARLOTTE, NC 28202 | 56-0571223 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| | | | ,,,,,,, | | | | | |
| CHATHAM ARTS COUNCIL | | | | | | | | |
| PO BOX 418 | | | | | | | | |
| PITTSBORO, NC 27312 | 56-1621611 | | 9,946. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| CHATHAM CARES COMMUNITY PHARMACY | | | | | | | | |
| 127 E. RALEIGH ST. | | | | | | | | |
| SILER CITY, NC 27344 | 41-2170926 | | 11,000. | 0. | | | GENERAL PURPOSE | |
| GUARUAN GOURURY GOURGET ON AGING | | | | | | | | |
| CHATHAM COUNTY COUNCIL ON AGING | | | | | | | | |
| PO BOX 715 | 56-1084260 | | 41,250. | 0. | | | GENERAL PURPOSE | |
| PITTSBORO, NC 27312 | 56-1084260 | | 41,250. | ٠. | | | GENERAL PURPOSE | |
| CHATHAM COUNTY LITERACY COUNCIL | | | | | | | | |
| PO BOX 1696 | | | | | | | | |
| PITTSBORO, NC 27312-1696 | 58-1870076 | | 19,446. | 0. | | | GENERAL PURPOSE | |
| , | | | , , | | | | | |
| CHATHAM EDUCATION FOUNDATION | | | | | | | | |
| P.O. BOX 1518 | | | | | | | | |
| PITTSBORO, NC 27312 | 56-1796990 | | 27,446. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other | | <u> </u> | | | ,,, | <u> </u> | |
|--|----------------|-------------------------------|--------------------------|-----------------------------------|--|--|---------------------------------------|
| (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 |
| CHATHAM HABITAT FOR HUMANITY | | | | | | | |
| РО ВОХ 883 | | | | | | | |
| PITTSBORO, NC 27312 | 56-1689599 | | 29,094. | 0. | | | GENERAL PURPOSE |
| CHATHAM HABITAT FOR HUMANITY | | | | | | | |
| P.O. BOX 883 | | | | | | | |
| PITTSBORO, NC 27312 | 56-1689599 | | 15,000. | 0. | | | GENERAL PURPOSE |
| CHATHAM OUTREACH ALLIANCE (CORA) PO BOX 1326 | | | | | | | |
| PITTSBORO, NC 27312 | 56-1668767 | | 23,700. | 0. | | | GENERAL PURPOSE |
| CHATHAM TRADES | | | | | | | |
| P.O. BOX 511 | | | | | | | |
| SILER CITY, NC 27344 | 56-1272201 | | 8,000. | 0. | | | GENERAL PURPOSE |
| | | | ,,,,,,, | | | | |
| CHESAPEAKE BAY FOUNDATION | | | | | | | |
| 6 HERNDON AVENUE | | | | | | | |
| ANNAPOLIS, MD 21403 | 52-6065757 | | 8,250. | 0. | | | GENERAL PURPOSE |
| CHILDREN'S CRANIOFACIAL | | | | | | | |
| ASSOCIATION - 13140 COIT ROAD STE | | | | | | | |
| 517 - DALLAS, TX 75240 | 75-2265649 | | 11,750. | 0. | | | GENERAL PURPOSE |
| CHILDREN'S HOME SOCIETY OF NC | | | | | | | |
| PO BOX 14608 | | | | | | | |
| GREENSBORO, NC 27415 | 56-0529946 | | 10,250. | 0. | | | GENERAL PURPOSE |
| CHILD'S PLAY | | | | | | | |
| 9660 153RD AVENUE NE | | | | | | | |
| REDMOND, WA 98052 | 20-3584556 | | 5,465. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| CHINOOK FUND | | | | | | | |
| 1031 33RD STREET, SUITE 237 | 84-1076325 | | 10 000 | 0. | | | CENEDAL DIDDOCE |
| DENVER, CO 80205 | 04-10/0325 | | 10,000. | υ. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | r ag |
|--|-------------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| (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 |
| CHORAL SOCIETY OF DURHAM | | | | | | | |
| PO BOX 72182 | | | | | | | |
| DURHAM, NC 27722 | 56-6070665 | | 237,639. | 0. | | | GENERAL PURPOSE |
| Boldmin, No 27722 | 30 0070003 | | 237,033. | 0. | | | CHARAIN TOKTOOL |
| CHRIST EPISCOPAL CHURCH | | | | | | | |
| 120 EAST EDENTON STREET | | | | | | | |
| RALEIGH, NC 27601 | 56-0530247 | | 17,800. | 0. | | | GENERAL PURPOSE |
| | | | , | | | | |
| CHRISTIAN CHILDREN OF THE WORLD | | | | | | | |
| 5665 MEADOWS RD N. 310 | | | | | | | |
| LAKE OSWEGO, OR 97035 | 93-1098358 | | 10,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| CHRISTIAN COMMUNITY ACTION | | | | | | | |
| 200 SOUTH MILL STREET | | | | | | | |
| LEWISVILLE, TX 75057 | 23-7319371 | | 6,450. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| CHRISTIAN MEDICAL AND DENTAL | | | | | | | |
| ASSOCIATIONS - PO BOX 7500 - | | | | | | | |
| BRISTOL, TN 37621-7500 | 36-2284267 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| CHRIST'S HAVEN FOR CHILDREN | | | | | | | |
| 4200 KELLER-HASLET ROAD | 00 7464670 | | | | | | |
| KELLER, TX 76244 | 23-7164673 | | 6,200. | 0. | | | GENERAL PURPOSE |
| CHURCH OF THE GOOD SHEPHERD | | | | | | | |
| 3741 GARRETT ROAD | | | | | | | |
| | 58-1644776 | | 15 000 | 0 | | | GENERAL DURDOGE |
| DURHAM, NC 27713 | 56-1644776 | | 15,000. | 0. | | | GENERAL PURPOSE |
| CHURCH OF THE GOOD SHEPHERD | | | | | | | |
| 126 HILLSBOROUGH ST. | | | | | | | |
| RALEIGH, NC 27601 | 58-1488877 | | 19,600. | 0. | | | GENERAL PURPOSE |
| | 30 1400077 | | 15,000. | 0. | | | PERENTAL FOR FOR |
| CHURCH OF THE HOLY FAMILY | | | | | | | |
| 200 HAYES ROAD | | | | | | | |
| CHAPEL HILL, NC 27517 | 58-1488733 | | 46,250. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| CHURCH ON MORGAN 136 E. MORGAN ST RALEIGH, NC 27601 | | | 48,000. | 0. | | | GENERAL PURPOSE | |
| CITYLIGHT CHURCH 4383 NICHOLAS STREET SUITE 120 OMAHA, NE 68131 | | | 9,361. | 0. | | | general purpose | |
| CLASSIC STAGE COMPANY 136 E 13TH ST NEW YORK, NY 10003 | 23-7025308 | | 10,000. | 0. | | | general purpose | |
| CODE THE DREAM 201 W. MAIN STREET, SUITE 100, PMB DURHAM, NC 27701 |) 26-3275886 | | 10,250. | 0. | | | general purpose | |
| COMMON CAUSE EDUCATION FUND NC 907 GLENWOOD AVE RALEIGH, NC 27605 | 31-1705370 | | 13,500. | 0. | | | GENERAL PURPOSE | |
| COMMUNITIES IN PARTNERSHIP PO BOX 11247 DURHAM, NC 27703-2151 | 47-5567396 | | 41,250. | 0. | | | general purpose | |
| COMMUNITIES IN SCHOOLS OF CHATHAM COUNTY - PO BOX 903 - SILER CITY, NC 27344 | 58-1849144 | | 155,168. | 0. | | | general purpose | |
| COMMUNITIES IN SCHOOLS OF WAKE COUNTY - 971 HARP STREET - RALEIGH, NC 27604 | 56-1704570 | | 62,750. | 0. | | | general purpose | |
| COMMUNITY EMPOWERMENT FUND 208 N. COLUMBIA STREET STE. 100 CHAPEL HILL, NC 27514 | 27-0428981 | | 27,750. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | r age |
|--|-------------------|-------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| (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 |
| COMMUNITY FOOD BANK OF SOUTHERN | | | | | | | |
| ARIZONA - 3003 S. COUNTRY CLUB - | | | | | | | |
| TUCSON, AZ 85713 | 51-0192519 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| COMMUNITY MUSIC SCHOOL | | | | | | | |
| 322 CHAPANOKE ROAD | | | | | | | |
| RALEIGH, NC 27603 | 58-2098168 | | 12,700. | 0. | | | GENERAL PURPOSE |
| COMMUNITY SUCCESS INITIATIVE, INC. | | | | | | | |
| PO BOX 61114 | | | | | | | |
| RALEIGH, NC 27661 | 16-1702165 | | 26,750. | 0. | | | GENERAL PURPOSE |
| , | | | , | | | | |
| COMPASS CENTER FOR WOMEN AND | | | | | | | |
| FAMILIES - 210 HENDERSON ST - | | | | | | | |
| CHAPEL HILL, NC 27514 | 56-1271474 | | 122,746. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| COMPASSION AND CHOICES | | | | | | | |
| PO BOX 85 | | | | | | | |
| ETNA, NH 03750-0485 | 84-1328829 | | 9,000. | 0. | | | GENERAL PURPOSE |
| CONGO INITIATIVE | | | | | | | |
| PO BOX 2323 | | | | | | | |
| DURHAM, NC 27702 | 20-3467419 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | ,,,,,,, | | | | |
| CONGREGATION OF THE SACRED HEARTS | | | | | | | |
| PO BOX 111 | | | | | | | |
| FAIRHAVEN, MA 02719 | 04-2160533 | | 11,500. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| CONSERVATION INTERNATIONAL | | | | | | | |
| FOUNDATION - 2011 CRYSTAL DRIVE | | | | | | | |
| STE 500 - ARLINGTON, VA 22202 | 52-1497470 | | 250,000. | 0. | | | GENERAL PURPOSE |
| GONGERVANTON LEGACY | | | | | | | |
| CONSERVATION LEGACY 701 CAMINO DEL RIO SUITE 101 | | | | | | | |
| | 84-1450808 | | 35 000 | 0. | | | GENERAL PURPOSE |
| DURANGO, CO 81301 | 04-1420000 | | 35,000. | <u> </u> | | | PENERAL FORFOSE |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| CONVERSE COLLEGE | | | | | | | | |
| 580 E. MAIN ST. | | | | | | | | |
| SPARTANBURG, SC 29302-0006 | 57-0314380 | | 25,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| COPTIC ORPHANS | | | | | | | | |
| PO BOX 2881 | | | | | | | | |
| MERRIFIELD, VA 22116 | 54-1637257 | | 6,000. | 0. | | | GENERAL PURPOSE | |
| COURT APPOINTED SPECIAL ADVOCATES | | | | | | | | |
| FIRST JUDICIAL DISTRICT - 466 WEST | | | | | | | | |
| SAN FRANCISCO STREET - SANTA FE, NM 87501 | 85-0432642 | | 10 000 | 0. | | | GENERAL PURPOSE | |
| NM 67301 | 85-0432042 | | 10,000. | 0. | | | GENERAL FURFUSE | |
| CRISIS ASSISTANCE MINISTRY | | | | | | | | |
| 500-A SPRATT STREET | | | | | | | | |
| CHARLOTTE, NC 28206 | 56-1416719 | | 250,500. | 0. | | | GENERAL PURPOSE | |
| , | | | , - | | | | | |
| CRISIS CONTROL MINISTRY, INC. | | | | | | | | |
| 200 EAST TENTH ST. | | | | | | | | |
| WINSTON-SALEM, NC 27101 | 23-7348168 | | 100,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| CRISTO REY HIGH SCHOOL INC | | | | | | | | |
| 301 FELSPAR WAY | | | | | | | | |
| CARY, NC 27518 | 83-2027747 | | 175,000. | 0. | | | GENERAL PURPOSE | |
| anoganoana en Lowauth | | | | | | | | |
| CROSSROADS FELLOWSHIP | | | | | | | | |
| 2721 E. MILLBROOK ROAD | 56-2223603 | | 14,900. | 0. | | | GENERAL PURPOSE | |
| RALEIGH, NC 27604 | 30-2223003 | | 14,900. | 0. | | | GENERAL FURFUSE | |
| CURE ALZHEIMER'S FUND | | | | | | | | |
| 34 WASHINGTON STREET STE 310 | | | | | | | | |
| WELLESLEY, MA 02481 | 52-2396428 | | 100,250. | 0. | | | GENERAL PURPOSE | |
| | | | , | | | | | |
| CYSTIC FIBROSIS FOUNDATION, | | | | | | | | |
| CAROLINAS CHAPTER - 7101 CREEDMOOR | | | | | | | | |
| ROAD STE 130 - RALEIGH, NC 27613 | 13-1930701 | | 6,000. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| DARTMOUTH COLLEGE - DARTMOUTH COLLEGE FUND - 6066 DEVELOPMENT OFFICE - HANOVER, NH 03755-3555 | 02-0514618 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| DAVIDSON COLLEGE BOX 7170 DAVIDSON, NC 28035-7174 | 56-0529961 | | 13,500. | 0. | | | GENERAL PURPOSE | | |
| DEMOCRACY NORTH CAROLINA 3000 AERIAL CENTER PARKWAY STE 160 MORRISVILLE, NC 27560 | 56-2271150 | | 51,450. | 0. | | | GENERAL PURPOSE | | |
| DHIC, INC.(FORMERLY DOWNTOWN HOUSING IMPROVEMENT CORP.) - 113 S. WILMINGTON ST RALEIGH, NC 27601 | 56-1085131 | | 55,000. | 0. | | | GENERAL PURPOSE | | |
| DIAMANTE ARTS & CULTURAL CENTER PO BOX 5782 CARY, NC 27512-5782 | 56-2103799 | | 7,500. | 0. | | | GENERAL PURPOSE | | |
| DISABILITY RIGHTS NC 3724 NATIONAL DRIVE STE 100 RALEIGH, NC 27612 | 56-1243369 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| DIVERSIFY ARCHITECTURE P.O. BOX 27781 RALEIGH, NC 27611 | 85-3536886 | | 10,000. | 0. | | | general purpose | | |
| DOCTORS WITHOUT BORDERS USA INC. PO BOX 5030 HAGERSTOWN, MD 21741-5030 | 13-3433452 | | 60,850. | 0. | | | GENERAL PURPOSE | | |
| DOOR INTERNATIONAL PO BOX 30516 LANSING, MI 48909-8016 | 56-2151149 | | 30,000. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| DOROTHEA DIX PARK CONSERVANCY | | | | | | | | |
| PO BOX 28575 | | | | | | | | |
| RALEIGH, NC 27611 | 20-8421281 | | 480,250. | 0. | | | GENERAL PURPOSE | |
| 111122011, 110 27022 | | | 100,200. | • | | | | |
| DRESS FOR SUCCESS TRIANGLE NC | | | | | | | | |
| 1812 TILLERY PLACE, SUITE 105 | | | | | | | | |
| RALEIGH, NC 27604 | 26-2229898 | | 121,250. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| DUKE CHILDREN'S HOSPITAL AND | | | | | | | | |
| HEALTH CENTER - 300 W MORGAN | | | | | | | | |
| STREET STE 1200 - DURHAM, NC 27701 | 56-2070036 | | 44,139. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| DUKE HOMECARE AND HOSPICE | | | | | | | | |
| 4321 MEDICAL PARK DRIVE, SUITE 101 | 56 0050006 | | 40.000 | | | | | |
| DURHAM, NC 27704-2175 | 56-2070036 | | 19,822. | 0. | | | GENERAL PURPOSE | |
| DUKE MEMORIAL UNITED METHODIST | | | | | | | | |
| CHURCH - 504 WEST CHAPEL HILL ST. | | | | | | | | |
| - DURHAM, NC 27701 | 56-0685370 | | 70,000. | 0. | | | GENERAL PURPOSE | |
| DUKE UNIVERSITY ALUMNI AND | 30 0003370 | | 70,000. | <u> </u> | | | | |
| DEVELOPMENT RECORDS - DUKE | | | | | | | | |
| UNIVERSITY BOX 90581 - DURHAM, NC | | | | | | | | |
| 27708-0581 | 56-0532129 | | 497,811. | 0. | | | GENERAL PURPOSE | |
| DUKE UNIVERSITY - CASHIERING - | | | · | | | | | |
| SCHOL - 114 SOUTH BUCHANAN | | | | | | | | |
| BOULEVARD, BOX 90759 - DURHAM, NC | | | | | | | | |
| 27708-0759 | 56-0532129 | | 7,375. | 0. | | | GENERAL PURPOSE | |
| DUKE UNIVERSITY SCHOOL OF MEDICINE | | | | | | | | |
| - OFFICE OF RESEARCH | | | | | | | | |
| ADMINISTRATION - BOX NUMBER 104008 | | | | | | | | |
| - DURHAM, NC 27710 | | | 40,000. | 0. | | | GENERAL PURPOSE | |
| D | | | | | | | | |
| DURHAM ACADEMY | | | | | | | | |
| 3601 RIDGE ROAD | E 0 0 2 2 0 0 1 0 | | 1 154 250 | _ | | | GENEDAL DUDDOGE | |
| DURHAM, NC 27705-5599 | 56-0538019 | | 1,154,250. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 INC | | | | | | | | |
| 120 MORRIS ST. | | | | | | | | |
| DURHAM, NC 27701 | 56-0798002 | | 8,350. | 0. | | | GENERAL PURPOSE | |
| DURHAM ARTS COUNCIL | | | | | | | | |
| 120 MORRIS ST. | | | | | | | | |
| DURHAM, NC 27701 | 56-0599829 | | 223,267. | 0. | | | GENERAL PURPOSE | |
| DURHAM CAN | | | | | | | | |
| 732 NINTH STREET #604 | | | | | | | | |
| DURHAM, NC 27705 | 31-1661463 | | 10,500. | 0. | | | GENERAL PURPOSE | |
| • | | | · | | | | | |
| DURHAM CENTRAL PARK | | | | | | | | |
| PO BOX 1526 | | | | | | | | |
| DURHAM, NC 27702 | 58-2222977 | | 17,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| DURHAM CHILDREN'S INITIATIVE | | | | | | | | |
| 2101 ANGIER AVENUE STE 200 | 20.0062122 | | 102.050 | _ | | | | |
| DURHAM, NC 27703 | 32-0263133 | | 193,950. | 0. | | | GENERAL PURPOSE | |
| DURHAM CHURCH | | | | | | | | |
| 2504 N ROXBORO ST | | | | | | | | |
| DURHAM, NC 27704 | | | 5,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| DURHAM COMMUNITY LAND TRUSTEES | | | | | | | | |
| 1208 W. CHAPEL HILL ST. | | | | | | | | |
| DURHAM, NC 27701 | 56-1203878 | | 13,750. | 0. | | | GENERAL PURPOSE | |
| DUDUAM CDICIC DECDONCE CENTED | | | | | | | | |
| DURHAM CRISIS RESPONSE CENTER | | | | | | | | |
| 206 N DILLARD ST | 58-1496427 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| DURHAM, NC 27701 | 30-1430427 | | 5,000. | 0. | | | GENERAL FURFUSE | |
| DURHAM HOUSING AUTHORITY | | | | | | | | |
| PO BOX 1726 | | | | | | | | |
| DURHAM, NC 27702 | | | 22,180. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 JAZZ WORKSHOP | | | | | | | | |
| 4608 L INDUSTRY LANE | | | | | | | | |
| DURHAM, NC 27713 | 45-4956498 | | 12,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| DURHAM KIWANIS CLUB FOUNDATION | | | | | | | | |
| PO BOX 52299 | | | | | | | | |
| DURHAM, NC 27717 | 23-7103107 | | 7,000. | 0. | | | GENERAL PURPOSE | |
| DURHAM LIBRARY FOUNDATION | | | | | | | | |
| PO BOX 25246 | | | | | | | | |
| DURHAM, NC 27702-3809 | 56-2189129 | | 45,450. | 0. | | | GENERAL PURPOSE | |
| , | | | | | | | | |
| DURHAM LITERACY CENTER INC. | | | | | | | | |
| PO BOX 52209 | | | | | | | | |
| DURHAM, NC 27717 | 56-1479534 | | 11,800. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| DURHAM NATIVITY SCHOOL | | | | | | | | |
| PO BOX 3537 | | | | | | | | |
| DURHAM, NC 27702 | 56-2274228 | | 159,800. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| DURHAM PUBLIC SCHOOLS FOUNDATION | | | | | | | | |
| 411 W CHAPEL HILL STREET STE C2 | 00.000464 | | 155.000 | | | | | |
| DURHAM, NC 27701 | 82-2803464 | | 157,069. | 0. | | | GENERAL PURPOSE | |
| DURHAM RESCUE MISSION | | | | | | | | |
| PO BOX 11368 | | | | | | | | |
| DURHAM, NC 27703 | 58-1482590 | | 48,040. | 0. | | | GENERAL PURPOSE | |
| DOMIAM, NC 27703 | 30 1402330 | | 40,040. | · · | | | GENERAL TORTOGE | |
| DURHAM SCHOOL OF THE ARTS | | | | | | | | |
| 400 N DUKE STREET | | | | | | | | |
| DURHAM, NC 27701 | | | 18,055. | 0. | | | GENERAL PURPOSE | |
| , | | | | | | | | |
| DURHAM SYMPHONY | | | | | | | | |
| P.O. BOX 1993 | | | | | | | | |
| DURHAM, NC 27702 | 56-1162641 | | 7,500. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt 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 TECHNICAL COMMUNITY COLLEGE FOUNDATION - 1637 E LAWSON STREET - DURHAM, NC 27703 | 56-1423848 | | 49,784. | 0. | | | GENERAL PURPOSE |
| DURHAM TECHNICAL COMMUNITY COLLEGE - SCHOL - 1637 LAWSON ST DURHAM, NC 27703 | | | 23,462. | 0. | | | GENERAL PURPOSE |
| EAGLEBROOK SCHOOL 271 PINE NOOK ROAD DEERFIELD, MA 01342 | 04-2108341 | | 6,000. | 0. | | | GENERAL PURPOSE |
| EAGLE RANCH INC. P.O. BOX 7200 CHESTNUT MOUNTAIN, GA 30502 | 58-1497408 | | 12,500. | 0. | | | GENERAL PURPOSE |
| EARTHJUSTICE 50 CALIFORNIA STREET STE 500 SAN FRANCISCO, CA 94111 | 94-1730465 | | 8,100. | 0. | | | general purpose |
| EARTHSHARE NORTH CAROLINA PO BOX 196 DURHAM, NC 27702 | 56-1775025 | | 25,300. | 0. | | | general purpose |
| EAST CAROLINA UNIVERSITY FOUNDATION - OFFICE OF UNIVERSITY DEVELOPMENT - GREENVILLE CIRCLE, STE 1100 MAIL - GREENVILLE, NC | 56-6093187 | | 20,000. | 0. | | | GENERAL PURPOSE |
| EAST CAROLINA UNIVERSITY - SCHOL G120F OLD CAFETERIA COMPLEX, MAIL S GREENVILLE, NC 27858 | 5 | | 26,000. | 0. | | | general purpose |
| EASTERN CONNECTICUT STATE UNIVERSITY - SCHOL - 83 WINDHAM STREET - WILLMANTIC, CT 06226 | 23-7111053 | | 12,500. | 0. | | | general purpose |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| EASTERN EUROPEAN MISSION | | | | | | | | | |
| PO BOX 55245 | | | | | | | | | |
| HURST, TX 76054 | 74-2200722 | | 50,000. | 0. | | | GENERAL PURPOSE | | |
| ECO-INSTITUTE AT PICKARDS MOUNTAIN 8519 PICKARDS MEADOW RD | | | | | | | | | |
| CHAPEL HILL, NC 27516 | 82-2032530 | | 61,000. | 0. | | | GENERAL PURPOSE | | |
| ECONOMIC JUSTICE COALITION, INC. P.O. BOX 1225 | | | | | | | | | |
| ATHENS, GA 30603 | 20-1346967 | | 30,000. | 0. | | | GENERAL PURPOSE | | |
| EDUCATION JUSTICE ALLIANCE (FISCALLY SPONSERED BY SOUTHERN COALLITION FOR SOCIAL - 1214 EAST LENOIR STREET - RALEIGH, NC 27610 | 26-0688375 | | 20,500. | 0. | | | GENERAL PURPOSE | | |
| BENOTE STEEL RABBIGH, NC 27010 | 20 0000373 | | 20,300. | · · | | | GENERAL TORTOSE | | |
| EL CENTRO HISPANO 2000 CHAPEL HILL ROAD, SUITE 26A | | | | | | | | | |
| DURHAM, NC 27707 | 56-2011661 | | 20,250. | 0. | | | GENERAL PURPOSE | | |
| EL FUTURO 2020 CHAPEL HILL ROAD, SUITE 23 DURHAM, NC 27707 | 80-0122334 | | 63,500. | 0. | | | GENERAL PURPOSE | | |
| ELLERBE CREEK WATERSHED ASSOCIATION - PO BOX 2679 - | | | | | | | | | |
| DURHAM, NC 27715 | 56-2123874 | | 41,675. | 0. | | | GENERAL PURPOSE | | |
| EL PUEBLO 2321 CRABTREE BOULEVARD STE 105 RALEIGH, NC 27604 | 56-1934310 | | 28,000. | 0. | | | GENERAL PURPOSE | | |
| EMMANUEL INTERNATIONAL MINISTRIES PO BOX 5277 | 30 1334310 | | 20,000. | 0. | | | PERENTI I ONE ODE | | |
| WHEATON, IL 60189 | 36-4379208 | | 30,000. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| ENGAGE MICHIGAN 440 BURROUGHS ST, SUITE 643 | | | | | | | | | |
| DETROIT, MI 48202 | 26-0900874 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| ENO RIVER ASSOCIATION 4404 GUESS ROAD | | | | | | | | | |
| DURHAM, NC 27712 | 56-1134204 | | 38,827. | 0. | | | GENERAL PURPOSE | | |
| ENO RIVER UNITARIAN UNIVERSALIST FELLOWSHIP - 4907 GARRETT ROAD - | F1 01F1C04 | | 22.000 | 0 | | | GENERAL NUMBER | | |
| DURHAM, NC 27707 | 51-0151684 | | 23,000. | 0. | | | GENERAL PURPOSE | | |
| ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH | | | | | | | | | |
| NEW YORK, NY 10010 | 11-6107128 | | 5,500. | 0. | | | GENERAL PURPOSE | | |
| EPISCOPAL DIOCESE OF LOS ANGELES 840 ECHO PARK LAKE AVENUE | | | | | | | | | |
| LOS ANGELES, CA 90026 | 23-7103106 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| EQUALITY NC FOUNDATION PO BOX 28768 | | | | | | | | | |
| RALEIGH, NC 27611 | 58-1374041 | | 11,750. | 0. | | | GENERAL PURPOSE | | |
| EQUAL JUSTICE INITIATIVE 122 COMMERCE ST | | | | | | | | | |
| MONTGOMERY, AL 36104 | 63-1135091 | | 7,000. | 0. | | | GENERAL PURPOSE | | |
| EQUITY BEFORE BIRTH 610 CANAL ST | | | | | | | | | |
| DURHAM, NC 27701 | 85-2675630 | | 17,500. | 0. | | | GENERAL PURPOSE | | |
| EXECUTIVE MANSION FUND, INC. 5 EAST EDENTON STREET | | | | | | | | | |
| RALEIGH, NC 27601 | 58-1807958 | | 12,500. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt 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 |
| EXECUTIVE SERVICE CORPS OF THE TRIANGLE INC P.O. BOX 14754 - DURHAM, NC 27709 | 56-1625629 | | 20,000. | 0. | | | general purpose |
| EXTRA TERRESTRIAL PROJECTS 514 DANIELS STREET #129 RALEIGH, NC 27605 | 47-3204519 | | 20,000. | 0. | | | GENERAL PURPOSE |
| EYES EARS NOSE AND PAWS INC. PO BOX 3443 CHAPEL HILL, NC 27515 | 61-1436221 | | 71,450. | 0. | | | general purpose |
| FAIRLEIGH DICKINSON UNIVERSITY 1000 RIVER ROAD TEANECK, NJ 07666 | 22-1494434 | | 5,000. | 0. | | | general purpose |
| FAIRMONT STATE FOUNDATION INC. 1300 LOCUST AVENUE FAIRMONT, WV 26554 | 55-6023559 | | 5,000. | 0. | | | GENERAL PURPOSE |
| FAMILIES MOVING FORWARD PO BOX 25426 DURHAM, NC 27702 | 56-1633998 | | 48,000. | 0. | | | GENERAL PURPOSE |
| FAMILIES TOGETHER 908 PLAINVIEW DRIVE, STE 101 RALEIGH, NC 27610 | 56-1278004 | | 17,140. | 0. | | | GENERAL PURPOSE |
| FAMILY HEALTH MINISTRIES PO BOX 16783 CHAPEL HILL, NC 27516-6783 | 56-2206165 | | 11,000. | 0. | | | general purpose |
| FAMILY PROMISE OF CARTERET COUNTY 1500 ARENDELL STREET MOREHEAD CITY, NC 28557 | 32-0332589 | | 5,000. | 0. | | | general purpose |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt 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 |
| FAYETTEVILLE STATE UNIVERSITY - SCHOL - 1200 MURCHISON ROAD - FAYETTEVILLE, NC 28301-4298 | | | 20,000. | 0. | | | GENERAL PURPOSE |
| FEARRINGTON CARES 2020 FEARRINGTON POST PITTSBORO, NC 27312 | 56-1702206 | | 76,750. | 0. | | | GENERAL PURPOSE |
| FEEDING AMERICA 35 EAST WACKER DRIVE, SUITE 2000 CHICAGO, IL 60601 | 36-3673599 | | 7,000. | 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 | | 75,926. | 0. | | | GENERAL PURPOSE |
| FILM INDEPENDENT INC. 5670 WILSHIRE BLVD, 9TH FLOOR LOS ANGELES, CA 90036 | 95-3943485 | | 5,000. | 0. | | | general purpose |
| FIRST BAPTIST CHURCH 501 W. FIFTH ST. WINSTON-SALEM, NC 27101 | | | 155,000. | 0. | | | general purpose |
| FIRST IN FAMILIES OF NC 3109 UNIVERSITY DRIVE SUITE 100 DURHAM, NC 27707 | 46-0471896 | | 10,440. | 0. | | | general purpose |
| FIRST PRESBYTERIAN CHURCH 305 E. MAIN ST. DURHAM, NC 27701 | 56-0563131 | | 48,520. | 0. | | | general purpose |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | <u> </u> |
|--|-------------------|-------------------------------|--------------------------|---|--|---|---------------------------------------|
| (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 |
| ELDOM MED OF MUD MDIANGLE | | | | | | | |
| FIRST TEE OF THE TRIANGLE | | | | | | | |
| PO BOX 91447 | 56-2266025 | | 108,250. | 0. | | | GENERAL PURPOSE |
| RALEIGH, NC 27675 | 30-2200023 | | 100,230. | 0. | | | GENERAL FURFUSE |
| FLORIDA STATE UNIVERSITY | | | | | | | |
| FOUNDATION - 325 W. COLLEGE AVENUE | FO 61F0100 | | FF 250 | | | | ATMEDA I DIEDOGE |
| - TALLAHASSEE, FL 32301 | 59-6152180 | | 55,250. | 0. | | | GENERAL PURPOSE |
| FOOD BANK OF CENTRAL & EASTERN | | | | | | | |
| NORTH CAROLINA - 1924 CAPITAL | | | | | | | |
| BOULEVARD - RALEIGH, NC 27604 | 56-1283426 | | 242,576. | 0. | | | GENERAL PURPOSE |
| , | | | , | | | | |
| FOOD DEPOT | | | | | | | |
| 1222 A SILER ROAD | | | | | | | |
| SANTA FE, NM 87507 | 85-0416803 | | 10,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| FOODLINK | | | | | | | |
| PO BOX 60766 | | | | | | | |
| ROCHESTER, NY 14616 | 22-2428304 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| FOREST AT DUKE | | | | | | | |
| 2701 PICKETT ROAD | | | | | | | |
| DURHAM, NC 27705 | 56-1630158 | | 8,438. | 0. | | | GENERAL PURPOSE |
| FOUNDATION FOR PERIPHERAL | | | | | | | |
| NEUROPATHY - 485 HALF DAY ROAD, | | | | | | | |
| SUITE 350 - BUFFALO GROVE, IL | | | | | | | |
| 60089 | 26-1195248 | | 5,000. | 0. | | | GENERAL PURPOSE |
| FOUNDATION FOR GUMANIA GRUPINA | | | | | | | |
| FOUNDATION FOR SHAMANIC STUDIES | | | | | | | |
| PO BOX 1939 | 06 1131000 | | E 000 | 0 | | | GENERAL DURDOGE |
| MILL VALLEY, CA 94942 | 06-1131090 | | 5,000. | 0. | | | GENERAL PURPOSE |
| FOUNDATION FOR THE NATIONAL | | | | | | | |
| INSTITUTE OF HEALTH - 11400 | | | | | | | |
| ROCKVILLE PIKE, SUITE 600 - NORTH | 52-1986675 | | 10 000 | 0. | | | CENEDAL DIDDOGE |
| BETHESDA, MD 20852 | 27-13000/2 | | 10,000. | U. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| FOUR PAWS AND A WAKE UP-NC | | | | | | | | | |
| PO BOX 12544 | | | | | | | | | |
| WILMINGTON, NC 28405 | 84-2287904 | | 8,000. | 0. | | | GENERAL PURPOSE | | |
| FREEDOM HOUSE RECOVERY CENTER, | | | | | | | | | |
| INC 104 NEW STATESIDE DRIVE - | | | | | | | | | |
| CHAPEL HILL, NC 27516 | 56-1082674 | | 11,000. | 0. | | | GENERAL PURPOSE | | |
| FRIENDS OF BONOBOS | | | | | | | | | |
| PO BOX 2652 | | | | | | | | | |
| DURHAM, NC 27715 | 20-0347301 | | 5,250. | 0. | | | GENERAL PURPOSE | | |
| FRIENDS OF THE NC LIBRARY FOR THE BLIND AND PHYSICALLY HANDICAPPED - | | | | | | | | | |
| 1841 CAPITAL BLVD - RALEIGH, NC | | | | | | | | | |
| 27635 | 58-1973202 | | 32,028. | 0. | | | GENERAL PURPOSE | | |
| FRIENDS OF THE NC MUSEUM OF | | | | | | | | | |
| NATURAL SCIENCES - PO BOX 26928 - | | | | | | | | | |
| RALEIGH, NC 27611-6928 | 56-1240806 | | 28,000. | 0. | | | GENERAL PURPOSE | | |
| FULL FRAME DOCUMENTARY FILM | | | | | | | | | |
| FESTIVAL - 320 BLACKWELL STREET | | | | | | | | | |
| STE 101 - DURHAM, NC 27701 | 56-1655039 | | 12,100. | 0. | | | GENERAL PURPOSE | | |
| FUND FOR HUMAN POSSIBILITY | | | | | | | | | |
| PO BOX 331 | | | | | | | | | |
| CHAPEL HILL, NC 27514-0331 | 56-1868691 | | 6,500. | 0. | | | GENERAL PURPOSE | | |
| CARNED DOAD COMMINITED THE | | | | | | | | | |
| GARNER ROAD COMMUNITY CENTER, INC. 2235 GARNER ROAD | | | | | | | | | |
| RALEIGH, NC 27610 | 56-0556747 | | 14,032. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| GASPARD & DANCERS INC. | | | | | | | | | |
| 106 PATHWOOD LN | | | | | | | | | |
| DURHAM, NC 27705 | 46-4652567 | | 5,000. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | | | |
|--|--|-------------------------------|--------------------------|---|--|---|------------------------------------|--|--|
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| GEEX, INC. 2326 E. MIFFLIN ST. MADISON, WI 53704 | 85-2283764 | | 24,000. | 0. | | | GENERAL PURPOSE | | |
| GEORGE MARK CHILDREN'S FUND 2121 GEORGE MARK LANE SAN LEANDRO, CA 94578 | 94-3255845 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| GEORGIA MUSLIM VOTER PROJECT 5680 OAKBROOK PARKWAY SUITE 145 NORCROSS, GA 30093 | 81-1446781 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| GIRLS ON THE RUN OF THE TRIANGLE, INC 1415 WEST NC HIGHWAY 54, SUITE 211 - DURHAM, NC 27707-5597 | 56-2228790 | | 14,750. | 0. | | | GENERAL PURPOSE | | |
| GLOBAL TRAINING NETWORK INC. PO BOX 6507 PEORIA, AZ 85385 | 68-0586399 | | 7,000. | 0. | | | general purpose | | |
| GO GLOBAL NC PO BOX 2162 WAKE FOREST, NC 27588 | 56-1751280 | | 51,189. | 0. | | | general purpose | | |
| GRACE BAPTIST CHURCH 1114 BROAD STREET ELIZABETHTON, TN 37643 | | | 22,000. | 0. | | | general purpose | | |
| GRANVILLE COUNTY HISTORICAL SOCIETY INCORPORATED - P. O. BOX 1433 - OXFORD, NC 27565 | 56-6075581 | | 5,000. | 0. | | | general purpose | | |
| GREEN AMERICA 1612 K ST. NW STE 600 WASHINGTON, DC 20006 | 52-1660746 | | 8,250. | 0. | | | general purpose | | |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sche | edule I (Form 990), Pa | rt 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 |
| GREENSBORO COLLEGE FOUNDATION 815 W. MARKET ST. | 56 00000644 | | 00 215 | | | | |
| GREENSBORO, NC 27401 | 56-2077641 | | 29,317. | 0. | | | GENERAL PURPOSE |
| GUIDEPOSTS FOUNDATION INC. 100 RESERVE ROAD STE E200 DANBURY, CT 06810-5212 | 20-3779200 | | 10,000. | 0. | | | GENERAL PURPOSE |
| GUILFORD COLLEGE 5800 WEST FRIENDLY AVE. GREENSBORO, NC 27410 | 56-0529982 | | 68,000. | 0. | | | GENERAL PURPOSE |
| HABITAT FOR HUMANITY OF DURHAM COUNTY - 215 N. CHURCH STREET - DURHAM, NC 27701 | 58-1674794 | | 74,350. | 0. | | | GENERAL PURPOSE |
| HABITAT FOR HUMANITY OF ORANGE COUNTY - 88 VILCOM CENTER DRIVE, SUITE L110 - CHAPEL HILL, NC 27514 | 58-1603427 | | 225,900. | 0. | | | GENERAL PURPOSE |
| HABITAT FOR HUMANITY OF WAKE COUNTY - 2420 NORTH RALEIGH BLVD - RALEIGH, NC 27604 | 56-1492703 | | 6,250. | 0. | | | GENERAL PURPOSE |
| HAVEN HOUSE SERVICES 1008 BULLARD COURT RALEIGH, NC 27615 | 56-1073632 | | 62,000. | 0. | | | GENERAL PURPOSE |
| HAW RIVER ASSEMBLY, INC. PO BOX 187 BYNUM, NC 27228 | 58-1510282 | | 20,000. | 0. | | | GENERAL PURPOSE |
| HAYES BARTON UNITED METHODIST CHURCH - 2209 FAIRVIEW ROAD - RALEIGH, NC 27608 | | | 10,000. | 0. | | | general purpose |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | rugo |
|---|-------------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| (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 |
| HEALING JUSTICE | | | | | | | |
| 1800 HALLS MILL ROAD | | | | | | | |
| HILLSBOROUGH, NC 27278 | 47-3424404 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| HEALING TRANSITIONS | | | | | | | |
| 1251 GOODE STREET | 56-2135246 | | 52,260. | 0. | | | GENERAL PURPOSE |
| RALEIGH, NC 27603-2261 | 36-2135246 | | 52,260. | ٠. | | | GENERAL PURPOSE |
| HEALTH ALLIANCE FOR AUSTIN | | | | | | | |
| MUSICIANS (HAAM) - 3010 S LAMAR | | | | | | | |
| BLVD #200 - AUSTIN, TX 78704 | 80-0147620 | | 6,000. | 0. | | | GENERAL PURPOSE |
| , | | | , | | | | |
| HEALTH NETWORK FOUNDATION | | | | | | | |
| 33 RIVER STREET | | | | | | | |
| CHAGRIN FALLS, OH 44022 | 04-3804600 | | 10,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| HEARTS AND HANDS FOR HAITI | | | | | | | |
| 6612 CREEDMOOR ROAD | | | | | | | |
| RALEIGH, NC 27613 | 11-3763605 | | 10,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| HEARTS (HELPING EACH ADOLESCENT | | | | | | | |
| MOTHER REACH THEIR SPARK) - 112 BROADWAY ST - DURHAM, NC 27701 | 47-5563762 | | 22,525. | , | | | CEMEDAL DIDDOGE |
| BROADWAI SI - DORHAM, NC 2//01 | 47-3303702 | | 22,323. | 0. | | | GENERAL PURPOSE |
| HEARTWORKS | | | | | | | |
| PO BOX 365 | | | | | | | |
| BAYBORO, NC 28515 | 41-2075011 | | 10,000. | 0. | | | GENERAL PURPOSE |
| | | | , | | | | |
| HEATON CHRISTIAN CHURCH | | | | | | | |
| PO BOX 117 | | | | | | | |
| ELK PARK, NC 28622 | 56-1369746 | | 22,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| HELPING HORSE THERAPEUTIC RIDING | | | | | | | |
| PROGRAM - PO BOX 99609 - RALEIGH, | | | | | | | |
| NC 27613 | 58-1852114 | | 10,000. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Scho | edule I (Form 990), Pa | t II.) | T age |
|---|-------------------|-------------------------------|--------------------------|---|--|--|---------------------------------------|
| (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 |
| HIDDEN POND FARM EQUINE RESCUE | | | | | | | |
| 250 SOUTH ROAD | | | | | | | |
| BRENTWOOD, NH 03833 | 47-5424832 | | 6,000. | 0. | | | GENERAL PURPOSE |
| HIGHER EDUCATION WORKS FOUNDATION PO BOX 10463 | | | | | | | |
| RALEIGH, NC 27605 | 46-4360789 | | 15,000. | 0. | | | GENERAL PURPOSE |
| HIGH HOPES THERAPEUTIC RIDING, INC 36 TOWN WOODS ROAD - OLD | 06.000 | | | | | | |
| LYME, CT 06371 | 06-0987749 | | 20,000. | 0. | | | GENERAL PURPOSE |
| HIGHLANDER RESEARCH AND EDUCATION CENTER - 1959 HIGHLANDER WAY - NEW MARKET, TN 37820 | 62-0646373 | | 10,000. | 0. | | | GENERAL PURPOSE |
| HILL LEARNING CENTER 3200 PICKETT ROAD | | | | | | | |
| DURHAM, NC 27705 | 56-2089788 | | 76,100. | 0. | | | GENERAL PURPOSE |
| HISPANIC LIAISON OF CHATHAM COUNTY 200 N. CHATHAM AVENUE | 56-1974043 | | 27 506 | 0 | | | GENERAL DURDOGE |
| SILER CITY, NC 27344 | 56-1974045 | | 37,596. | 0. | | | GENERAL PURPOSE |
| HOLLY SPRINGS UNITED METHODIST CHURCH - PO BOX 68 - HOLLY | | | | | | | |
| SPRINGS, NC 27540 | 56-1401676 | | 30,069. | 0. | | | GENERAL PURPOSE |
| HOLY TRINITY CHURCH OF RALEIGH 549 NORTH BLOUNT STREET | 20 1524070 | | 6 500 | 0 | | | GENERAL DURDOGE |
| RALEIGH, NC 27604 | 20-1534970 | | 6,500. | 0. | | | GENERAL PURPOSE |
| HOPE INTERNATIONAL 227 GRANITE RUN DRIVE STE 250 | 02.0025545 | | | _ | | | |
| LANCASTER, PA 17601 | 23-2836648 | | 6,500. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | overnments (Scho | edule I (Form 990), Pa | rt II.) | , ago |
|--|-------------------|-------------------------------|--------------------------|---|--|---|------------------------------------|
| (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 |
| HOPE MISSION OF CARTERET COUNTY | | | | | | | |
| INC - PO BOX 1438 - MOREHEAD CITY, | | | | | | | |
| NC 28557 | 56-1757998 | | 5,000. | 0. | | | GENERAL PURPOSE |
| HOPE REINS | | | | | | | |
| 8420 WAKE FOREST HIGHWAY | | | | | | | |
| RALEIGH, NC 27613 | 27-1074966 | | 16,500. | 0. | | | GENERAL PURPOSE |
| HOPE RENOVATIONS | | | | | | | |
| 205 LLOYD ST. SUITE 211 | | | | | | | |
| CARRBORO, NC 27510 | 82-3675207 | | 5,000. | 0. | | | GENERAL PURPOSE |
| , | | | , | | | | |
| HOPKINS SCHOOL INCORPORATED | | | | | | | |
| 986 FOREST ROAD | | | | | | | |
| NEW HAVEN, CT 06515 | 06-0646674 | | 6,000. | 0. | | | GENERAL PURPOSE |
| HOUSING FOR NEW HOPE | | | | | | | |
| 18 WEST COLONY PLACE STE 250 | | | | | | | |
| DURHAM, NC 27705 | 58-2089068 | | 25,950. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| HUMANITY & HOPE UNITED FOUNDATION | | | | | | | |
| PO BOX 1594 | 05 4004340 | | 10.000 | | | | GENERAL DURDOGE |
| WARSAW, IN 46581-1594 | 27-4084348 | | 10,000. | 0. | | | GENERAL PURPOSE |
| HUMMINGBIRD FARM | | | | | | | |
| P.O. BOX 1603 | | | | | | | |
| PITTSBORO, NC 27312 | 56-2099676 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| IGLESIA PRESBITERIANA EMANUEL | | | | | | | |
| 2504 N ROXBORO STREET | | | | _ | | | |
| DURHAM, NC 27704 | | | 8,000. | 0. | | | GENERAL PURPOSE |
| IMAGINE NORTH CAROLINA FIRST | | | | | | | |
| PO BOX 428 | | | | | | | |
| RALEIGH, NC 27602 | 46-4006055 | | 65,000. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt 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 | | 15,000. | 0. | | | GENERAL PURPOSE |
| INSTITUTE FOR RESPONSIBLE | | | 22,333 | | | | |
| CITIZENSHIP - 1227 25TH STREET, | | | | | | | |
| NW, SIXTH FL - WASHINGTON, DC | | | | | | | |
| 20037 | 54-2034070 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| INTEGRATIVE STRATEGIES FORUM, INC. | | | | | | | |
| 1806 GRACE CHURCH ROAD | | | | | | | |
| SILVER SPRING, MD 20910-2111 | 52-2200029 | | 426,103. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| INTERACT | | | | | | | |
| 1012 OBERLIN ROAD STE 100 | | | | _ | | | |
| RALEIGH, NC 27605 | 58-1320613 | | 32,439. | 0. | | | GENERAL PURPOSE |
| TAMBER BATHU GOUNGIL BOR GOGIAL | | | | | | | |
| INTER-FAITH COUNCIL FOR SOCIAL | | | | | | | |
| SERVICE - 110 W. MAIN STREET, SUITE D - CARRBORO, NC 27510 | 59-1224041 | | 46,801. | 0. | | | GENERAL PURPOSE |
| SUITE D - CARRBORO, NC 27510 | 39-1224041 | | 40,801. | 0. | | | GENERAL FURFUSE |
| INTER-FAITH FOOD SHUTTLE | | | | | | | |
| 1001 BLAIR DRIVE, SUITE 120 | | | | | | | |
| RALEIGH, NC 27603 | 56-1753180 | | 56,865. | 0. | | | GENERAL PURPOSE |
| | | | , | | | | |
| INTERFAITH PRISON MINISTRY FOR | | | | | | | |
| WOMEN - 112 S SALISBURY STREET - | | | | | | | |
| RALEIGH, NC 27601 | 27-0088330 | | 7,500. | 0. | | | GENERAL PURPOSE |
| | | | , | | | | |
| INTERNATIONAL BLUEGRASS MUSIC | | | | | | | |
| ASSOCIATION - 4206 GALLATIN PIKE - | | | | | | | |
| NASHVILLE, TN 37216 | 38-3764317 | | 20,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| INTERNATIONAL RESCUE COMMITTEE | | | | | | | |
| 122 E. 42ND ST. | | | | | | | |
| NEW YORK, NY 10168-1289 | 13-5660870 | | 11,750. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| JAIN STUDY CENTER OF NC | | | | | | | | | |
| 509 CARRIAGE WOOD CIRCLE | | | | | | | | | |
| CARY, NC 27513 | 56-1305715 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| <u> </u> | 30 1303713 | | 3,000. | • | | | | | |
| JEWISH FOR GOOD | | | | | | | | | |
| 1937 W. CORNWALLIS ROAD | | | | | | | | | |
| DURHAM, NC 27705 | 58-1384316 | | 8,000. | 0. | | | GENERAL PURPOSE | | |
| , | | | , - | | | | | | |
| JOSH'S HOPE FOUNDATION | | | | | | | | | |
| PO BOX 71749 | | | | | | | | | |
| DURHAM, NC 27722 | 27-2474758 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| JOURNEY TO DREAM | | | | | | | | | |
| 1960 ARCHER AVENUE | | | | | | | | | |
| LEWISVILE, TX 75077 | 20-1209865 | | 7,500. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| JUDEA REFORM CONGREGATION | | | | | | | | | |
| 1933 WEST CORNWALLIS ROAD | | | | | | | | | |
| DURHAM, NC 27705 | 56-1337018 | | 11,615. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| JUSTICEMATTERS INC. | | | | | | | | | |
| PO BOX 199 | | | | | | | | | |
| DURHAM, NC 27702 | 27-1378558 | | 15,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| JUSTICE THROUGH MUSIC PROJECT | | | | | | | | | |
| 8100 BEECH TREE ROAD | | | | | | | | | |
| BETHESDA, MD 20817 | 27-0051467 | | 7,500. | 0. | | | GENERAL PURPOSE | | |
| JUVENILE DIABETES FOUNDATION - | | | | | | | | | |
| PIEDMONT TRIAD CHAPTER - 216 W. | | | | | | | | | |
| MARKET STREET, STE B - GREENSBORO, | | | | | | | | | |
| NC 27401 | 23-1907729 | | 25,000. | 0. | | | GENERAL PURPOSE | | |
| JUVENILE DIABETES RESEARCH | | | | | | | | | |
| FOUNDATION TRIANGLE-EASTERN NC | | | | | | | | | |
| CHAPTER - 105 WESTPARK DRIVE #415 | | | | | | | | | |
| - BRENTWOOD, TN 37027 | 23-1907729 | | 53,900. | 0. | | | GENERAL PURPOSE | | |

Schedule I (Form 990)

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| KARL STIRNER ARTS TRAIL INC | | | | | | | | |
| 123 S 3RD STREET | | | | | | | | |
| EASTON, PA 18042 | 81-4283487 | | 20,000. | 0. | | | GENERAL PURPOSE | |
| KENAN-FLAGLER BUSINESS SCHOOL | | | | | | | | |
| FOUNDATION - MCCOLL BLDG CB #3490 | | | | | | | | |
| - CHAPEL HILL, NC 27599-3490 | 56-0771850 | | 10,000. | 0. | | | GENERAL PURPOSE | |
| KENNETT LIBRARY | | | | | | | | |
| PO BOX 730 | | | | | | | | |
| KENNETT SQUARE, PA 19348-0730 | 23-1547585 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| WITH THE THE THE THE THE THE THE THE THE T | | | | | | | | |
| KIDZNOTES | | | | | | | | |
| PO BOX 200 | 27-0446845 | | 7 202 | 0 | | | GENEDAL DUDDOGE | |
| DURHAM, NC 27702 | 27-0446845 | | 7,392. | 0. | | | GENERAL PURPOSE | |
| KIDZU CHILDREN'S MUSEUM | | | | | | | | |
| 201 S. ESTES DRIVE, STE A9 | | | | | | | | |
| CHAPEL HILL, NC 27514 | 20-2058235 | | 26,000. | 0. | | | GENERAL PURPOSE | |
| ZIDAN ING | | | | | | | | |
| KIRAN, INC. 1012 OBERLIN ROAD | | | | | | | | |
| RALEIGH, NC 27605 | 56-2203528 | | 15,000. | 0. | | | GENERAL PURPOSE | |
| | | | 22,222 | | | | | |
| KRAMDEN INSTITUTE | | | | | | | | |
| 5010 NC HWY 55 | | | | | | | | |
| DURHAM, NC 27713 | 74-3108814 | | 9,000. | 0. | | | GENERAL PURPOSE | |
| LATINX EDUCATION CENTER | | | | | | | | |
| 205 PEABODY HALL | | | | | | | | |
| CHAPEL HILL, NC 27599 | 82-4014210 | | 10,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| LEADERSHIP TRIANGLE | | | | | | | | |
| 907 GLENWOOD AVENUE | E6 1052706 | | 12.020 | • | | | GENERAL DURDOGE | |
| RALEIGH, NC 27605 | 56-1852726 | | 12,029. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| LEARNING OUTSIDE INC. | | | | | | | | |
| PO BOX 718 | | | | | | | | |
| CARRBORO, NC 27510 | 45-2686552 | | 7,500. | 0. | | | GENERAL PURPOSE | |
| - | | | , | | | | | |
| LEARNING TOGETHER, INC. | | | | | | | | |
| 568 EAST LENOIR ST STE 204 | | | | | | | | |
| RALEIGH, NC 27601 | 51-0161593 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| LEGAL AID OF NORTH CAROLINA, INC. | | | | | | | | |
| PO BOX 28741 | | | | _ | | | | |
| RALEIGH, NC 27611 | 31-1784161 | | 54,750. | 0. | | | GENERAL PURPOSE | |
| LEUKEMIA & LYMPHOMA SOCIETY, NC | | | | | | | | |
| EASTERN CHAPTER - 401 HARRISON OAKS BLVD, SUITE 200 - CARY, NC | | | | | | | | |
| 27513 | 13-5644916 | | 15,300. | 0. | | | GENERAL PURPOSE | |
| 27313 | 13 3044310 | | 13,300. | ٠. | | | BENERAL TORTOSE | |
| LIFE EXPERIENCES INC | | | | | | | | |
| 260 TOWERVIEW COURT | | | | | | | | |
| CARY, NC 27513 | 56-1201695 | | 163,250. | 0. | | | GENERAL PURPOSE | |
| • | | | , | | | | | |
| LIFE SKILLS FOUNDATION | | | | | | | | |
| PO BOX 51129 | | | | | | | | |
| DURHAM, NC 27717 | 20-3676000 | | 16,000. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| LIFE-WAY OF LINCOLN CO | | | | | | | | |
| 270A COUNTRY CLUB DRIVE | 16 5060400 | | | | | | | |
| RUIDOSO, NM 88345 | 46-5262490 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| LILLIAN'S LIST FOUNDATION | | | | | | | | |
| 3117 POPLARWOOD COURT, SUITE 130 | | | | | | | | |
| RALEIGH, NC 27603 | 85-3038203 | | 50,000. | 0. | | | GENERAL PURPOSE | |
| | 33 3332203 | | 30,000. | · · | | | | |
| LINCOLN COMMUNITY HEALTH CENTER | | | | | | | | |
| INCORPORATED - 1301 FAYETTEVILLE | | | | | | | | |
| ST DURHAM, NC 27707-2119 | 56-1031244 | | 13,442. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| LITTLETON BAPTIST CHURCH PO BOX 216 LITTLETON, NC 27850 | | | 10,000. | 0. | | | GENERAL PURPOSE | |
| LOAVES AND FISHES, INC. 648 GRIFFITH ROAD STE B | | | 10,000. | 0. | | | SENERAL TONTOOL | |
| CHARLOTTE, NC 28217 | 56-1398498 | | 14,500. | 0. | | | GENERAL PURPOSE | |
| LOAVES AND FISHES MINISTRY, INC. PO BOX 14596 RALEIGH, NC 27620 | 56-1433563 | | 25,250. | 0. | | | GENERAL PURPOSE | |
| LOVE OUT LOUD PO BOX 20912 WINSTON-SALEM, NC 27120-0912 | 47-4085418 | | 10,000. | 0. | | | GENERAL PURPOSE | |
| LUCY DANIELS CENTER FOR EARLY CHILDHOOD - 9003 WESTON PKWY CARY, NC 27513 | 58-1863104 | | 11,000. | 0. | | | GENERAL PURPOSE | |
| LYMPHATIC EDUCATION & RESEARCH NETWORK - 40 GARVIES POINT ROAD, STE D - GLEN COVE, NY 11542 | 58-2404527 | | 5,750. | 0. | | | GENERAL PURPOSE | |
| MADE IN DURHAM 359 BLACKWELL STREET STE 200 DURHAM, NC 27701 | 47-2262963 | | 26,000. | 0. | | | general purpose | |
| MAG AMERICA INC 1776 K STREET NW, SUITE 700 WASHINGTON, DC 20006 | 52-2302253 | | 5,000. | 0. | | | general purpose | |
| MAINE PEOPLE'S RESOURCE CENTER 565 CONGRESS ST #200 PORTLAND, ME 04101 | 22-2586108 | | 25,000. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | r ag |
|---|-------------------|-------------------------------|--------------------------|---|--|--|------------------------------------|
| (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 |
| MAKE-A-WISH FOUNDATION OF EASTERN | | | | | | | |
| NORTH CAROLINA - 3809 COMPUTER | | | | | | | |
| DRIVE STE 201 - RALEIGH, NC 27609 | 58-1792140 | | 13,806. | 0. | | | GENERAL PURPOSE |
| MALLARME CHAMBER PLAYERS | | | | | | | |
| 120 MORRIS STREET | | | | | | | |
| DURHAM, NC 27701 | 58-1711177 | | 14,000. | 0. | | | GENERAL PURPOSE |
| MANBITES DOG THEATER COMPANY | | | | | | | |
| P.O. BOX 402 | | | | | | | |
| DURHAM, NC 27702 | 56-1593114 | | 101,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| MARY BALDWIN UNIVERSITY | | | | | | | |
| PO BOX 1500 | 54-0506319 | | 27 000 | 0. | | | GENERAL PURPOSE |
| STAUNTON, VA 24402-1500 | 34-0300319 | | 37,089. | 0. | | | GENERAL PURPOSE |
| MASONIC HOME FOR CHILDREN AT | | | | | | | |
| OXFORD - 600 COLLEGE STREET - | | | | | | | |
| OXFORD, NC 27565 | 56-0603924 | | 8,159. | 0. | | | GENERAL PURPOSE |
| MAGGAGUUGEMMG GENEDAL HOGDIMAL | | | | | | | |
| MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA STREET, SUITE 540 | | | | | | | |
| BOSTON, MA 02114 | 04-1564655 | | 50,000. | 0. | | | GENERAL PURPOSE |
| BOSTON, MI UZII4 | 04 1304033 | | 30,000. | 0. | | | CHARITIE I GRI ODE |
| MAYO CLINIC | | | | | | | |
| 200 FIRST STREET SW | | | | | | | |
| ROCHESTER, MN 55905 | 41-6011702 | | 5,000. | 0. | | | GENERAL PURPOSE |
| NGGI NEGUL TOURNIN TOU THE THE | | | | | | | |
| MCCLATCHY JOURNALISM INSTITUTE | | | | | | | |
| 1731 HOWE AVE STE 242 SACRAMENTO, CA 95825-2209 | 84-2968843 | | 50,000. | 0. | | | GENERAL PURPOSE |
| DACKAMENTO, CA 93023-2209 | 04-2300043 | | 30,000. | 0. | | | GENERAL LOVIOSE |
| MEALS ON WHEELS OF DURHAM INC. | | | | | | | |
| 2522 ROSS ROAD | | | | | | | |
| DURHAM, NC 27703 | 56-1729111 | | 8,450. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | | |
| MEALS ON WHEELS OF WAKE COUNTY | | | | | | | | | | |
| 1001 BLAIR DRIVE, SUITE 100 | | | | | | | | | | |
| RALEIGH, NC 27603-2030 | 56-1061085 | | 30,000. | 0. | | | GENERAL PURPOSE | | | |
| ME FINE FOUNDATION, INC. | | | | | | | | | | |
| 318 BLACKWELL STREET | | | | | | | | | | |
| DURHAM, NC 27701 | 20-1819368 | | 13,000. | 0. | | | GENERAL PURPOSE | | | |
| MERCY SHIPS | | | | | | | | | | |
| PO BOX 1930 | | | | | | | | | | |
| LINDALE, TX 75771 | 26-2414132 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| - | | | , - | | | | | | | |
| MEREDITH COLLEGE - SCHOL | | | | | | | | | | |
| 140 JOHNSON3800 HILLSBOROUGH ST. H | | | | | | | | | | |
| RALEIGH, NC 27607 | 56-0530242 | | 107,000. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| MI CASA INTERNATIONAL | | | | | | | | | | |
| 5665 MEADOWS RD, SUITE 310 LAKE OSWEGO, OR 97035 | 93-1098358 | | 7,500. | 0. | | | GENERAL PURPOSE | | | |
| HARE OSWEGO, OR 97033 | 93-1090330 | | 7,300. | 0. | | | GENERAL FORFOSE | | | |
| MIJENTE SUPPORT COMMITTEE | | | | | | | | | | |
| 734 W POLK STREET | | | | | | | | | | |
| PHOENIX, AZ 85007-2539 | 82-1711382 | | 21,000. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| MISSION EMANUEL | | | | | | | | | | |
| P.O. BOX 25246 | 46 2014250 | | 10.000 | | | | | | | |
| WINSTON-SALEM, NC 27114 | 46-3214379 | | 10,000. | 0. | | | GENERAL PURPOSE | | | |
| MOJOAA PERFORMING ARTS COMPANY | | | | | | | | | | |
| P.O. BOX 40413 | | | | | | | | | | |
| RALEIGH, NC 27629 | 47-1671009 | | 7,500. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| MONTREAT COLLEGE | | | | | | | | | | |
| P.O. BOX 1267 | E6 0E42261 | | 16 310 | • | | | GENERAL DURDOGE | | | |
| MONTREAT, NC 28757 | 56-0543261 | | 16,319. | 0. | | | GENERAL PURPOSE | | | |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | | |
| MORGAN STANLEY GLOBAL IMPACT | | | | | | | | | | |
| FUNDING TRUST INC - 150 CLOVE ROAD | | | | | | | | | | |
| - LITTLE FALLS, NJ 07424 | 52-7082731 | | 14,884. | 0. | | | GENERAL PURPOSE | | | |
| · | | | · | | | | | | | |
| MOVEMENT ALLIANCE PROJECT | | | | | | | | | | |
| 924 CHERRY STREET, 5TH FLOOR | | | | | | | | | | |
| PHILADELPHIA, PA 19107 | 26-0307123 | | 25,000. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| MUSEUM OF DURHAM HISTORY | | | | | | | | | | |
| PO BOX 362 | 04 3455605 | | 11 000 | | | | anvent pupped | | | |
| DURHAM, NC 27702-0362 | 94-3455685 | | 11,000. | 0. | | | GENERAL PURPOSE | | | |
| MUSEUM OF LIFE AND SCIENCE | | | | | | | | | | |
| 433 W MURRAY AVENUE | | | | | | | | | | |
| DURHAM, NC 27704 | 56-0938434 | | 22,176. | 0. | | | GENERAL PURPOSE | | | |
| , | | | , - | - | | | | | | |
| MUSIC MAKER RELIEF FOUNDATION | | | | | | | | | | |
| PO BOX 1358 | | | | | | | | | | |
| HILLSBOROUGH, NC 27278 | 13-3782018 | | 11,250. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| MY KID'S CLUB | | | | | | | | | | |
| PO BOX 784 | | | | _ | | | | | | |
| SELMA, NC 27576 | 83-2337004 | | 12,500. | 0. | | | GENERAL PURPOSE | | | |
| NAACP LEGAL DEFENSE AND | | | | | | | | | | |
| EDUCATIONAL FUND, INC 40 RECTOR | | | | | | | | | | |
| ST - NEW YORK, NY 10006 | 13-1655255 | | 8,250. | 0. | | | GENERAL PURPOSE | | | |
| NEW TORK, NI 10000 | 13 1033233 | | 0,230. | 0. | | | DENEMENT FOR ODE | | | |
| NAMI OF WAKE CO. | | | | | | | | | | |
| PO BOX 12562 | | | | | | | | | | |
| RALEIGH, NC 27605 | 56-1552949 | | 8,760. | 0. | | | GENERAL PURPOSE | | | |
| | | | · | | | | | | | |
| NASHVILLE SYMPHONY ASSOCIATION | | | | | | | | | | |
| ONE SYMPHONY PLACE | | | | | | | | | | |
| NASHVILLE, TN 37201 | 62-0550979 | | 10,000. | 0. | | | GENERAL PURPOSE | | | |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | ı ayı |
|--|-------------------|-------------------------------|--------------------------|---|--|--|------------------------------------|
| (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 |
| NASSAU PRESBYTERIAN CHURCH | | | | | | | |
| 61 NASSAU STREET | | | | | | | |
| PRINCETON, NJ 08542 | | | 25,000. | 0. | | | GENERAL PURPOSE |
| NATIONAL JEWISH HEALTH 1400 JACKSON STREET DENVER, CO 80206-2761 | 74-2044647 | | 10,000. | 0. | | | GENERAL PURPOSE |
| DENVER, CO 00200 2701 | 74 2044047 | | 10,000. | 0. | | | GENERAL TORTOGE |
| NATIONAL PUBLIC HOUSING MUSEUM 625 N. KINGSBURY STREET CHICAGO, IL 60654 | 51-0649843 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | 2,222 | | | | |
| NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET 11TH FLOOR | | | | | | | |
| NEW YORK, NY 10011 | 13-2654926 | | 20,500. | 0. | | | GENERAL PURPOSE |
| NC AGRICULTURAL FOUNDATION BOX 7645 | | | | | | | |
| RALEIGH, NC 27695-7645 | 56-6049304 | | 8,500. | 0. | | | GENERAL PURPOSE |
| NC AIDS ACTION NETWORK (NCAAN) PO BOX 25044 | | | | | | | |
| RALEIGH, NC 27611-5044 | 32-0323779 | | 5,000. | 0. | | | GENERAL PURPOSE |
| NC A&T STATE UNIVERSITY - SCHOL 1601 E MARKET STREET | | | | | | | |
| GREENSBORO, NC 27411 | | | 32,200. | 0. | | | GENERAL PURPOSE |
| NC AWWA - WEA 2841 PLAZA PLACE STE 130 | | | | | | | |
| RALEIGH, NC 27612 | 56-6045934 | | 13,750. | 0. | | | GENERAL PURPOSE |
| NC BLACK ALLIANCE | | | , . | | | | |
| P.O. BOX 27886 | F. 0010571 | | 10.000 | _ | | | |
| RALEIGH, NC 27611 | 56-2210571 | | 10,000. | 0. | | | GENERAL PURPOSE |

| (a) Name and address of organization or government (b) EIN (c) IRC section of applicable (d) Amount of cash grant on organization or government (l) Method of validation on cash assistance | Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | | | | |
|--|--|--|--|---------|----------|--------------------------|--|------------------|--|--|--|
| 5800 PARINDON PLACE RALBIEH, NC 27609 56-1729407 67,500. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. | | (b) EIN | | | non-cash | valuation (book, FMV, | | | | | |
| 5800 PARINDON PLACE RALBIEH, NC 27609 56-1729407 67,500. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. | NG CENTED FOR NONDROFTES | | | | | | | | | | |
| RALEIGH, NC 27609 56-1729407 67,500. 0. DENERAL PURPOSE NC CHILD - THE VOICE FOR NORTH CAROLINA'S CHILDREN - 3101 POPLASMOOD COURT STE 300 - RALEIGH, NC 27604 58-1534066 16,250. 0. DENERAL PURPOSE NC COASTAL FEDERATION 3609 NC 24 NEWPORT, NC 28570 58-1494098 11,250. 0. DENERAL PURPOSE NCCU FOUNDATION PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. DENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. DENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. DENERAL PURPOSE NC MUSEUM OF ART POUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. DENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | | | | | | | | | | |
| NC CHILD - THE VOICE FOR NORTH CAROLINA'S CHILDREN - 3101 POPCHARMOOD COURT STE 300 - RALEIGH, NC 27604 58-1534066 16,250. 0. SENERAL PURPOSE NC COASTAL FEDERATION 3609 NC 24 NEWPORT, NC 28570 58-1494098 11,250. 0. SENERAL PURPOSE NCCU FOUNDATION PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. SENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. SENERAL PURPOSE NC FREEDOM MONUMENT PROJECT FO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. SENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. SENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | 56-1729407 | | 67 500 | 0 | | | GENERAI, PURPOSE | | | |
| CAROLINA'S CHILDREN - 3101 POPLARMOOD COURT STE 300 - RALEIGH, NC 27604 58-1534066 16,250. 0. SENERAL PURPOSE NC COASTAL FEDERATION 3609 NC 24 NEWPORT, NC 28570 58-1494098 11,250. 0. SENERAL PURPOSE NCCU FOUNDATION PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. SENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. SENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. SENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. SENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | 30 1723107 | | 07,300. | • | | | | | | |
| POPLARWOOD COURT STE 300 - RALEIGH, NC 27604 58-1534066 16,250. 0. SENERAL PURPOSE NC COASTAL FEDERATION 3609 NC 24 NEWFORT, NC 28570 58-1494098 11,250. 0. SENERAL PURPOSE NECU FOUNDATION PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. SENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. SENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. SENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. SENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | | | | | | | | | | |
| RALEIGH, NC 27604 58-1534066 16,250. 0. SENERAL PURPOSE NC COASTAL FEDERATION 3609 NC 24 NEWPORT, NC 28570 58-1494098 11,250. 0. SENERAL PURPOSE NCCU FOUNDATION PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. SENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. SENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. SENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. SENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | | | | | | | | | | |
| 3609 NC 24 NEWPORT, NC 28570 58-1494098 11,250. 0. 3ENERAL PURPOSE NCCU FOUNDATION PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. 3ENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. 3ENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. 3ENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. 3ENERAL PURPOSE | | 58-1534066 | | 16,250. | 0. | | | GENERAL PURPOSE | | | |
| 3609 NC 24 NEWPORT, NC 28570 58-1494098 11,250. 0. 3ENERAL PURPOSE NCCU FOUNDATION PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. 3ENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. 3ENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. 3ENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. 3ENERAL PURPOSE | | | | | | | | | | | |
| NEWPORT, NC 28570 58-1494098 11,250. 0. SENERAL PURPOSE NCCU FOUNDATION PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. SENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. SENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. SENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. SENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC FO BOX 25937 - RALEIGH, NC | | | | | | | | | | | |
| NCCU FOUNDATION PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. GENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. GENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | | | | | | | | | | |
| PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. SENERAL PURPOSE NC ENVIRONMENTAL DEPENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. SENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. GENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. SENERAL PURPOSE | NEWPORT, NC 28570 | 58-1494098 | | 11,250. | 0. | | | GENERAL PURPOSE | | | |
| PO BOX 19363 DURHAM, NC 27707 23-7410301 12,669. 0. SENERAL PURPOSE NC ENVIRONMENTAL DEPENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. SENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. GENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. SENERAL PURPOSE | NGGU FOUNDAMION | | | | | | | | | | |
| DURHAM, NC 27707 23-7410301 12,669. 0. SENERAL PURPOSE NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. SENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. SENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | | | | | | | | | | |
| NC ENVIRONMENTAL DEFENSE FUND 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. GENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. GENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | 23_7/10301 | | 12 669 | 0 | | | GENEDAL DIIDDOGE | | | |
| 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. GENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. GENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | DOMIAH, NC 27707 | 23 7410301 | | 12,005. | · · | | | BENERAL TORTOSE | | | |
| 4000 WESTCHASE BOULEVARD STE 510 RALEIGH, NC 27607 11-6107128 35,000. 0. GENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. GENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | NC ENVIRONMENTAL DEFENSE FUND | | | | | | | | | | |
| RALEIGH, NC 27607 11-6107128 35,000. 0. GENERAL PURPOSE NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. GENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | | | | | | | | | | |
| NC FREEDOM MONUMENT PROJECT PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. GENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | 11-6107128 | | 35,000. | 0. | | | GENERAL PURPOSE | | | |
| PO BOX 146 RALEIGH, NC 27602 02-0733001 10,250. 0. GENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | , | | | , | | | | | | | |
| RALEIGH, NC 27602 02-0733001 10,250. 0. GENERAL PURPOSE NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | NC FREEDOM MONUMENT PROJECT | | | | | | | | | | |
| NC MUSEUM OF ART FOUNDATION 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | PO BOX 146 | | | | | | | | | | |
| 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | RALEIGH, NC 27602 | 02-0733001 | | 10,250. | 0. | | | GENERAL PURPOSE | | | |
| 4630 MAIL SERVICE CENTER RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | | | | | | | | | | |
| RALEIGH, NC 27699-4630 23-7071511 26,830. 0. GENERAL PURPOSE NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | | | | | | | | | | |
| NC MUSEUM OF HISTORY ASSOCIATES, INC PO BOX 25937 - RALEIGH, NC | | | | | _ | | | | | | |
| INC PO BOX 25937 - RALEIGH, NC | RALEIGH, NC 27699-4630 | 23-7071511 | | 26,830. | 0. | | | GENERAL PURPOSE | | | |
| INC PO BOX 25937 - RALEIGH, NC | NO MIGRIM OF HIGHORY AGGOSTANCE | | | | | | | | | | |
| | | | | | | | | | | | |
| 2/011 3537 30 1170432 3,250. 0. ORALIMI TORTOOL | • | 56-1178432 | | 5 250 | 0 | | | GENERAI, PURPOSE | | | |
| | 2,011 3,37 | 30 11/0432 | | 3,230. | <u> </u> | | | DENERTE TORTODE | | | |
| NC MUSEUM OF HISTORY FOUNDATION | NC MUSEUM OF HISTORY FOUNDATION | | | | | | | | | | |
| 5 EAST EDENTON ST. | | | | | | | | | | | |
| RALEIGH, NC 27601-1011 20-0988951 12,500. 0. GENERAL PURPOSE | | 20-0988951 | | 12,500. | 0. | | | GENERAL PURPOSE | | | |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | | |
| NC OUTWARD BOUND | | | | | | | | | | |
| 2582 RICEVILLE ROAD | | | | | | | | | | |
| ASHEVILLE, NC 28805 | 56-0857708 | | 5,250. | 0. | | | GENERAL PURPOSE | | | |
| NC RESTAURANT AND LODGING | | | -, | | | | | | | |
| ASSOCIATION FOUNDATION - 222 N | | | | | | | | | | |
| PEARSON STREET STE 210 - RALEIGH, | | | | | | | | | | |
| NC 27601 | 81-0618683 | | 25,500. | 0. | | | GENERAL PURPOSE | | | |
| No constitution of the con | | | | | | | | | | |
| NC SCHOLARS' LATINO INITIATIVE (NC | | | | | | | | | | |
| SLI) - 208 WEST FRANKLIN STREET - CHAPEL HILL, NC 27516 | 56-6001393 | | 10,000. | 0. | | | GENERAL PURPOSE | | | |
| CHAFEL HILL, NC 2/310 | 30-0001393 | | 10,000. | 0. | | | GENERAL FURFUSE | | | |
| NC STATE UNIVERSITY DEVELOPMENT | | | | | | | | | | |
| CAMPUS BOX 7474 | | | | | | | | | | |
| RALEIGH, NC 27695-7474 | | | 77,500. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| NC STATE UNIVERSITY - SCHOL | | | | | | | | | | |
| 2016 HARRIS HALL BOX 7302 | | | | | | | | | | |
| RALEIGH, NC 27695 | | | 33,600. | 0. | | | GENERAL PURPOSE | | | |
| NCSU OFFICE OF CONTRACTS AND | | | | | | | | | | |
| GRANTS - CAMPUS BOX 7214 - | | | | | | | | | | |
| RALEIGH, NC 27695-7214 | 56-6000756 | | 76,189. | 0. | | | GENERAL PURPOSE | | | |
| MILLION, NO 27033 7214 | 30 0000730 | | 70,103. | •• | | | | | | |
| NC SYMPHONY FOUNDATION | | | | | | | | | | |
| 3700 GLENWOOD AVENUE STE 130 | | | | | | | | | | |
| RALEIGH, NC 27612 | 58-1495066 | | 6,250. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| NC SYMPHONY SOCIETY, INC. | | | | | | | | | | |
| 3700 GLENWOOD AVENUE, SUITE 130 | | | | | | | | | | |
| RALEIGH, NC 27612 | 56-0556755 | | 39,000. | 0. | | | GENERAL PURPOSE | | | |
| NC THEATRE | | | | | | | | | | |
| ONE EAST SOUTH STREET | | | | | | | | | | |
| RALEIGH, NC 27601 | 56-1072874 | | 20,000. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | 1 | 1 | l | | | |

| (a) Name and address of organization or government (b) EIN (c) IRC section (cash grant cash grant organization or government (cash grant organization or government (cash grant organization or government (cash grant organization or government organization or government (cash grant organization or government organization or government organization or government (cash grant organization or government organization organiz | Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | r ug |
|--|--|-------------------|----------------------|-----------------|----------------|--------------------------|---------|-----------------|
| 1060 WILLIAM MOORE DRIVE RALEIGH, NC 27607 58-1344473 16,000. 0. DENERAL PURPOSE NC WASTE AWARENESS AND REDUCTION NC WASTE AWARENESS AND REDUCTION NC WASTE AWARENESS AND REDUCTION DURHAM, NC 27715-1051 56-1734433 8,000. 0. BENERAL PURPOSE NEIGHBOR TO NEIGHBOR MINISTRIES FO BOX 25628 REIGHBOR TO NEIGHBOR MINISTRIES FO BOX 25628 REALEIGH, NC 27611 56-2016457 10,250. 0. BENERAL PURPOSE NEW BERN-CRAVEN COUNTY YMCA INC 100 YMCA LANE NEW BERN, NC 28560 58-1402035 6,000. 0. DENERAL PURPOSE NEW HOPE AUDUBON SOCIETY P.O. BOX 2693 CHAPEL HILL, NC 27515 51-0174934 15,000. 0. BENERAL PURPOSE NEWMAN CATHOLIC STUDENT CENTER PARIEH - 218 PITTSBORO STREET - CHAPEL HILL, NC 27516-2738 56-0929282 8,000. 0. BENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST, STE 120 - DURHAM, NC 27701 58-152726 43,213. 0. BENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION FO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. BENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN NORTH CAROLINA BOTANICAL GARDEN DURHAM, NC 27717 20-3029784 24,750. 0. BENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN NORTH CAROLINA BOTANICAL GARDEN DURHAM, NC 27717 20-3029784 24,750. 0. BENERAL PURPOSE | | (b) EIN | | | non-cash | valuation (book, FMV, | | |
| RALEIGH, NC 27507 58-1344473 16,000. 0. DENERAL PURPOSE NC WASTE AWARENESS AND REDUCTION NETWORK (NC WARN) - PO BOX 61051 - DURHAM, NC 27715-1051 56-1734433 8,000. 0. DENERAL PURPOSE NEIGHBOR TO NEIGHBOR MINISTRIES PO BOX 25628 RALEIGH, NC 27611 56-2016457 10,250. 0. DENERAL PURPOSE NEW BERN-CRAVEN COUNTY YMCA INC 100 YMCA LANE 100 Y | NC VETERINARY MEDICAL FOUNDATION | | | | | | | |
| NC WASTE AWARENESS AND REDUCTION NETWORK (NC WARN) - PO BOX 61051 - DURHAM, NC 27715-1051 56-1734433 8,000. 0. SENERAL PURPOSE NEIGHBOR TO NEIGHBOR MINISTRIES PO BOX 25628 REALEIGH, NC 27511 56-2016457 10,250. 0. SENERAL PURPOSE NEW BERN-CRAVEN COUNTY YMCA INC 100 YMCA LANE NEW BERN, NC 28560 58-1402035 6,000. 0. SENERAL PURPOSE NEW HOPE AUDUBON SOCIETY P.O. BOX 2693 CHAPEL HILL, NC 27515 51-0174934 15,000. 0. SENERAL PURPOSE NEWMAN CATHOLIC STUDENT CENTER PARISH - 218 PITTSBORO STREET - CHAPEL HILL, NC 27516-2738 56-0929282 8,000. 0. SENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. SENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. SENERAL PURPOSE SENERAL PURPOSE ON SENERAL PURPOSE SENERAL PURPOSE ON SENERAL PURPOSE SENERAL PURPOSE ODERIAM, NC 27717 58-1527276 43,213. 0. SENERAL PURPOSE ON SENERAL PURPOSE | 1060 WILLIAM MOORE DRIVE | | | | | | | |
| NETWORK (NC WARN) - PO BOX 61051 - DURHAM, NC 27715-1051 56-1734433 8,000. 0. SENERAL PURPOSE NEIGHBOR TO NEIGHBOR MINISTRIES PO BOX 25628 RALEIGH, NC 27611 56-2016457 10,250. 0. SENERAL PURPOSE NEW BERN-CRAVEN COUNTY YNCA INC 100 YMCA LANE NEW BERN, NC 28560 58-1402035 6,000. 0. SENERAL PURPOSE NEW HOPE AUDUBON SOCIETY P.O. BOX 2693 CLAFEL PURPOSE NEW HOPE AUDUBON SOCIETY P.O. BOX 2693 CLAFEL PURPOSE NEWHAN CATHOLIC STUDENT CENTER PARISH - 218 PITTSBORG STREET - CHAPEL HILL, NC 27516-2738 56-092982 8,000. 0. SENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. SENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27707 20-3029784 24,750. 0. SENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN PODUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA BAT ENDERS HILL - | RALEIGH, NC 27607 | 58-1344473 | | 16,000. | 0. | | | GENERAL PURPOSE |
| NEIGHBOR TO NEIGHBOR MINISTRIES PO BOX 25528 RALEIGH, NC 27611 56-2016457 10,250. 0. GENERAL PURPOSE NEW BERN-CRAVEN COUNTY YMCA INC 100 YMCA LANE NEW BERN, NC 28560 58-1402035 6,000. 0. GENERAL PURPOSE NEW HOPE AUDUBON SOCIETY P.O. BOX 2693 51-0174934 15,000. 0. SENERAL PURPOSE NEWMAN CATHOLIC STUDENT CENTER PARISH - 218 PITTSBORD STREET - CHAPEL HILL, NC 27516-2738 56-0929282 8,000. 0. GENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. GENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. GENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL GARDEN FOUNDATION, INC 7TE UNIVERSITY OF NORTH CAROLINA ACTIONAL A | NETWORK (NC WARN) - PO BOX 61051 - | | | | | | | |
| PO BOX 25628 RALEIGH, NC 27611 56-2016457 10,250. 0. SENERAL PURPOSE NEW BERN-CRAVEN COUNTY YMCA INC 100 YMCA LANE NEW BERN, NC 28560 58-1402035 6,000. 0. SENERAL PURPOSE NEW HOPE AUDUBON SOCIETY P, O. BOX 2693 CHAPEL HILL, NC 27515 51-0174934 15,000. 0. SENERAL PURPOSE NEWMAN CATHOLIC STUDENT CENTER PARISH - 218 PITTSBORO STREET - CHAPEL HILL, NC 27516-2738 56-0929282 8,000. 0. SENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. SENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. SENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. SENERAL PURPOSE | DURHAM, NC 27715-1051 | 56-1734433 | | 8,000. | 0. | | | GENERAL PURPOSE |
| NEW BERN-CRAVEN COUNTY YMCA INC 100 YMCA LANE NEW BERN, NC 28560 58-1402035 6,000. 0. SENERAL PURPOSE NEW HOPE AUDUBON SOCIETY P.O. BOX 2693 CHAPEL HILL, NC 27515 51-0174934 15,000. 0. SENERAL PURPOSE NEWMAN CATHOLIC STUDENT CENTER PARISH - 218 PITTSBORD STREET - CHAPEL HILL, NC 27516-2738 56-0929282 8,000. 0. SENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. SENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. SENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN POUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | PO BOX 25628 | | | | | | | |
| 100 YMCA LANE NEW BERN, NC 28560 58-1402035 6,000. 0. SENERAL PURPOSE NEW HOPE AUDUBON SOCIETY P.O. BOX 2693 CHAPPEL HILL, NC 27515 51-0174934 15,000. 0. SENERAL PURPOSE NEWMAN CATHOLIC STUDENT CENTER PARISH - 218 PITTSBORO STREET - CHAPPEL HILL, NC 27516-2738 56-0929282 8,000. 0. SENERAL PURPOSE NORTH CARCLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 100 JENERAL PURPOSE NORTH CARCLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 DURHAM | RALEIGH, NC 27611 | 56-2016457 | | 10,250. | 0. | | | GENERAL PURPOSE |
| NEW HOPE AUDUBON SOCIETY P.O. BOX 2693 CHAPEL HILL, NC 27515 51-0174934 15,000. 0. GENERAL PURPOSE NEWMAN CATHOLIC STUDENT CENTER PARISH - 218 PITTSBORO STREET - CHAPEL HILL, NC 27516-2738 56-0929282 8,000. 0. GENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. GENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. GENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN FOUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | 100 YMCA LANE | 58-1402035 | | 6 000. | 0. | | | GENERAL PURPOSE |
| P.O. BOX 2693 CHAPEL HILL, NC 27515 51-0174934 15,000. 0. GENERAL PURPOSE NEWMAN CATHOLIC STUDENT CENTER PARISH - 218 PITTSBORO STREET - CHAPEL HILL, NC 27516-2738 56-0929282 8,000. 0. GENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 DOURHAM, NC | , | | | ,,,,,,, | | | | |
| NEWMAN CATHOLIC STUDENT CENTER PARISH - 218 PITTSBORO STREET - CHAPEL HILL, NC 27516-2738 56-0929282 8,000. 0. GENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. GENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. GENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN FOUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | | | | | | | | |
| PARISH - 218 PITTSBORO STREET - CHAPEL HILL, NC 27516-2738 56-0929282 8,000. 0. GENERAL PURPOSE NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. GENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. GENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN FOUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | CHAPEL HILL, NC 27515 | 51-0174934 | | 15,000. | 0. | | | GENERAL PURPOSE |
| NORTH CAROLINA AMATEUR SPORTS, INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. GENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. GENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN FOUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | | | | | | | | |
| INC 406 BLACKWELL ST. STE 120 - DURHAM, NC 27701 58-1527276 43,213. 0. GENERAL PURPOSE NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. GENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN FOUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | CHAPEL HILL, NC 27516-2738 | 56-0929282 | | 8,000. | 0. | | | GENERAL PURPOSE |
| NORTH CAROLINA ARTS IN ACTION PO BOX 51277 DURHAM, NC 27717 NORTH CAROLINA BOTANICAL GARDEN FOUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | · | | | | | | | |
| PO BOX 51277 DURHAM, NC 27717 20-3029784 24,750. 0. GENERAL PURPOSE NORTH CAROLINA BOTANICAL GARDEN FOUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | DURHAM, NC 27701 | 58-1527276 | | 43,213. | 0. | | | GENERAL PURPOSE |
| NORTH CAROLINA BOTANICAL GARDEN FOUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | | | | | | | | |
| FOUNDATION, INC THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - | DURHAM, NC 27717 | 20-3029784 | | 24,750. | 0. | | | GENERAL PURPOSE |
| | FOUNDATION, INC THE UNIVERSITY | | | | | | | |
| CHAPEL HILL NC 27599-3375 1 56-6076622 24 050 | CHAPEL HILL, NC 27599-3375 | 56-6076622 | | 24,050. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | r ug |
|--|-------------------|-------------------------------|--------------------------|---|--|---|------------------------------------|
| (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 |
| NORTH CAROLINA BUSINESS COUNCIL | | | | | | | |
| 6113 AMBER BLUFFS CRESCENT | | | | | | | |
| RALEIGH, NC 27616 | 47-2174617 | | 15,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| NORTH CAROLINA CENTRAL UNIVERSITY | | | | | | | |
| - SCHOL - P.O. BOX 19713 - DURHAM, | | | | _ | | | |
| NC 27707 | | | 55,000. | 0. | | | GENERAL PURPOSE |
| NORTH CAROLINA COALITION FOR ALTERNATIVES TO THE DEATH PENALTY | | | | | | | |
| - 123 WEST MAIN ST., SUITE 700 - | | | | | | | |
| DURHAM, NC 27701 | 45-4288573 | | 20,000. | 0. | | | GENERAL PURPOSE |
| zemmi, ne z//er | 13 1200373 | | 20,000. | • | | | |
| NORTH CAROLINA COASTAL LAND TRUST | | | | | | | |
| 3 PINE VALLEY DRIVE | | | | | | | |
| WILMINGTON, NC 28412 | 56-1791849 | | 10,300. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| NORTH CAROLINA COMMUNITY | | | | | | | |
| FOUNDATION - 3737 GLENWOOD AVENUE | | | | | | | |
| STE 460 - RALEIGH, NC 27612 | 58-1661700 | | 62,500. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| NORTH CAROLINA CONSERVATION | | | | | | | |
| NETWORK - 234 FAYETTEVILLE STREET, | 50 0504513 | | 160 000 | | | | |
| 5TH FLOOR - RALEIGH, NC 27601 | 58-2504713 | | 160,000. | 0. | | | GENERAL PURPOSE |
| NORTH CAROLINA EARLY CHILDHOOD | | | | | | | |
| FOUNDATION - 514 DANIELS STREET | | | | | | | |
| #173 - RALEIGH, NC 27605 | 45-3971534 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | ,,,,,,, | - • | | | |
| NORTH CAROLINA GRASSROOTS SCIENCE | | | | | | | |
| MUSEUMS COLLABORATIVE - PO BOX | | | | | | | |
| 16443 - CHARLOTTE, NC 28297 | 56-2203984 | | 34,350. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| NORTH CAROLINA JUSTICE CENTER | | | | | | | |
| PO BOX 28068 | | | | | | | |
| RALEIGH, NC 27611 | 56-1348186 | | 140,500. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| NORTH CAROLINA LEAGUE OF | | | | | | | | | |
| CONSERVATION VOTERS FOUNDATION | | | | | | | | | |
| INC PO BOX 12671 - RALEIGH, NC | | | | _ | | | | | |
| 27605-2671 | 23-7206810 | | 70,000. | 0. | | | GENERAL PURPOSE | | |
| NORTH CAROLINA OPERA, INC. 612 WADE AVENUE, STE 100 | | | | | | | | | |
| RALEIGH, NC 27605 | 31-1486222 | | 10,683. | 0. | | | GENERAL PURPOSE | | |
| NORTH CAROLINA PUBLIC RADIO - WUNC | 56 6004000 | | | | | | | | |
| CHAPEL HILL, NC 27517 | 56-6001393 | | 62,825. | 0. | | | GENERAL PURPOSE | | |
| NORTH CAROLINA READING SERVICE 211 E. SIX FORKS ROAD STE 103 RALEIGH, NC 27609 | 58-1528968 | | 33,978. | 0. | | | GENERAL PURPOSE | | |
| NORTH CAROLINA SCHOOL OF SCIENCE & MATHEMATICS FOUNDATION - PO BOX | | | | | | | | | |
| 2733 - DURHAM, NC 27715-2733 | 56-1250756 | | 7,500. | 0. | | | GENERAL PURPOSE | | |
| NORTH CAROLINA STATE ENGINEERING FOUNDATION, INC CAMPUS BOX 7901 - RALEIGH, NC 27695 | 56-6046987 | | 21,605. | 0. | | | GENERAL PURPOSE | | |
| NORTH CAROLINA ZOOLOGICAL SOCIETY 4403 ZOO PKWY | | | , | | | | | | |
| ASHEBORO, NC 27205 | 56-0990900 | | 46,611. | 0. | | | GENERAL PURPOSE | | |
| NORTH CAROLINIANA SOCIETY WILSON LIBRARY, UNC CB #3930 | 56-1119848 | | 15 000 | 0. | | | CENEDAL DIDEOGE | | |
| CHAPEL HILL, NC 27514-8890 | 20-1113048 | | 15,000. | 0. | | | GENERAL PURPOSE | | |
| NORTH CAROLINIANS AGAINST GUN VIOLENCE EDUCATION FUND INC PO | F.C. 1007075 | | | | | | | | |
| BOX 51565 - DURHAM, NC 27717 | 56-1897050 | | 7,000. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | | |
| NORTHERN VIRGINIA FAMILY SERVICE | | | | | | | | | | |
| 10455 WHITE GRANITE DRIVE STE 100 | | | | | | | | | | |
| OAKTON, VA 22124 | 54-0791977 | | 13,476. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| NORTHSTAR CHURCH OF THE ARTS | | | | | | | | | | |
| 220 WEST GEER STREET | | | | | | | | | | |
| DURHAM, NC 27701 | 83-0663909 | | 7,500. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| NOVA SOUTHEASTERN UNIVERSITY | | | | | | | | | | |
| PO BOX 2217 | | | | | | | | | | |
| FT. LAUDERDALE, FL 33303 | 59-1083502 | | 200,000. | 0. | | | GENERAL PURPOSE | | | |
| 014 4444 5544 6444 6444 6544 6544 6544 | | | | | | | | | | |
| OAK HILL FELLOWSHIP CENTER DBA | | | | | | | | | | |
| CAMP OAK HILL - 3824 BARRETT DR. | F.C. 110000F | | 5 000 | _ | | | | | | |
| STE 303 - RALEIGH, NC 27609 | 56-1108825 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| OBERLIN COLLEGE | | | | | | | | | | |
| PO BOX 72110 | | | | | | | | | | |
| CLEVELAND, OH 44192 | 34-0714363 | | 11,800. | 0. | | | GENERAL PURPOSE | | | |
| <u></u> | 01 0/11000 | | 12,000. | • | | | | | | |
| OCCONEECHEE COUNCIL BOY SCOUTS OF | | | | | | | | | | |
| AMERICA - 3231 ATLANTIC AVENUE - | | | | | | | | | | |
| RALEIGH, NC 27604 | 56-1788551 | | 37,500. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| OLDFIELDS SCHOOL | | | | | | | | | | |
| 1500 GLENCOE RD | | | | | | | | | | |
| SPARKS GLENCOE, MD 21152 | 52-0591645 | | 10,000. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| OLDS ELEMENTARY SCHOOL | | | | | | | | | | |
| 204 DIXIE TRAIL | | | | _ | | | | | | |
| RALEIGH, NC 27607 | | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| ONE ADTRONA | | | | | | | | | | |
| ONE ARIZONA | | | | | | | | | | |
| 530 E. MCDOWELL ROAD, SUITE 107-44: PHOENIX, AZ 85004 | 37-1782220 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| INCENTA, AL COUCE | 31-1102220 | | 3,000. | <u>. </u> | | | PENEVAL LOVIOSE | | | |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| ORANGE CONGREGATIONS IN MISSION | | | | | | | | | |
| 300 MILLSTONE DR. | | | | | | | | | |
| HILLSBOROUGH, NC 27278 | 58-1563438 | | 11,250. | 0. | | | GENERAL PURPOSE | | |
| ORANGE COUNTY RAPE CRISIS CENTER | | | | | | | | | |
| PO BOX 4722 | | | | | | | | | |
| CHAPEL HILL, NC 27515 | 58-1356356 | | 37,000. | 0. | | | GENERAL PURPOSE | | |
| ORANGE COUNTY'S UNITED WAY | | | | | | | | | |
| 18012 MITCHELL AVENUE SOUTH | | | | | | | | | |
| IRVINE, CA 92614 | 33-0047994 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| ORPHAN OUTREACH | , | | | | | | | | |
| 2001 WEST PLANO PARKWAY, SUITE 3700 | 56-2623813 | | E 500 | 0. | | | GENERAL PURPOSE | | |
| PLANO, TX 75075 | 30-2023613 | | 5,500. | 0. | | | GENERAL PURPOSE | | |
| OUR LADY OF LOURDES | | | | | | | | | |
| 2718 OVERBROOK DR. | | | | | | | | | |
| RALEIGH, NC 27608 | 56-0603909 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| OVERDEL ONLING. VINNEG. TNG | | | | | | | | | |
| OVERFLOWING HANDS, INC. 1500 BRIARWOOD PLACE | | | | | | | | | |
| RALEIGH, NC 27619 | 27-5154645 | | 15,000. | 0. | | | GENERAL PURPOSE | | |
| | 27 0101010 | | 20,000. | • | | | | | |
| OVERTURE OUTREACH INTERNATIONAL | | | | | | | | | |
| 2205 EASTCHESTER DRIVE, SUITE 105 | | | | | | | | | |
| HIGH POINT, NC 27265 | 82-0747699 | | 15,000. | 0. | | | GENERAL PURPOSE | | |
| | | | | | | | | | |
| PARKWOOD ELEMENTARY SCHOOL | | | | | | | | | |
| 5207 REVERE RD | | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| DURHAM, NC 27713 | | | 3,000. | 0. | | | GENERAL FURFUSE | | |
| PARTNERS FOR ENVIRONMENTAL JUSTICE | | | | | | | | | |
| 813 DARBY ST. | | | | | | | | | |
| RALEIGH, NC 27610 | 71-0879549 | | 15,000. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | Га |
|--|-------------------|-------------------------------|--------------------------|-----------------------------------|--|--|---------------------------------------|
| (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 |
| PARTNERS IN HEALTH | | | | | | | |
| PO BOX 996 | | | | | | | |
| FREDERICK, MD 21705-9942 | 04-3567502 | | 5,250. | 0. | | | GENERAL PURPOSE |
| PEOPLE'S ALLIANCE FUND | | | | | | | |
| 1011 MINERVA AVE | | | | | | | |
| DURHAM, NC 27701 | 58-1429955 | | 13,100. | 0. | | | GENERAL PURPOSE |
| PHARMACY FOUNDATION OF NC | | | | | | | |
| 194 FINLEY GOLF COURSE ROAD, SUITE | | | | | | | |
| CHAPEL HILL, NC 27517 | 56-6037918 | | 110,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| PHILADELPHIA ORCHESTRA | | | | | | | |
| ONE SOUTH BROAD STREET | 02 125000 | | | | | | |
| PHILADELPHIA, PA 19107 | 23-1352289 | | 5,000. | 0. | | | GENERAL PURPOSE |
| PIEDMONT COMMUNITY COLLEGE | | | | | | | |
| P. O. BOX 1197 | | | | | | | |
| ROXBORO, NC 27573 | 56-1374039 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| PIEDMONT CONSERVATION COUNCIL | | | | | | | |
| 201 E MAIN STREET 5TH FLOOR | | | | | | | |
| DURHAM, NC 27701 | 58-1798988 | | 20,000. | 0. | | | GENERAL PURPOSE |
| PILGRIM UNITED CHURCH OF CHRIST | | | | | | | |
| 3011 ACADEMY RD | | | | | | | |
| DURHAM, NC 27707 | | | 6,000. | 0. | | | GENERAL PURPOSE |
| , | | | ,,,,,,, | | | | |
| PLANNED PARENTHOOD SOUTH ATLANTIC, | | | | | | | |
| INC 100 S. BOYLAN AVE | | | | | | | |
| RALEIGH, NC 27603 | 56-1282557 | | 106,033. | 0. | | | GENERAL PURPOSE |
| DI OHCHCUADEC EIND TMC | | | | | | | |
| PLOUGHSHARES FUND INC. 315 BAY STREET STE 400 | | | | | | | |
| SAN FRANCISCO, CA 94133 | 94-2764520 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | ,01020 | | 1 3,000. | · · | | | |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | | |
| PROJECT HOPE | | | | | | | | | | |
| PO BOX 5029 | | | | | | | | | | |
| HAGERSTOWN, MD 21741-5029 | 53-0242962 | | 25,000. | 0. | | | GENERAL PURPOSE | | | |
| PROJECT MERCY | | | | | | | | | | |
| 7011 ARDMORE AVENUE | | | | | | | | | | |
| FORT WAYNE, IN 46809 | 35-1410753 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| PROJECT ORBIS INTERNATIONAL, INC. 520 8TH AVENUE, 12TH FLOOR | | | | | | | | | | |
| NEW YORK, NY 10018 | 23-7297651 | | 5,250. | 0. | | | GENERAL PURPOSE | | | |
| PSYCHOANALYTIC CENTER OF THE CAROLINAS - 101 CLOISTER COURT STE A - CHAPEL HILL, NC 27514 | 56-1258644 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| · | | | , | | | | | | | |
| PUBLIC SCHOOL FORUM OF NC 3725 NATIONAL DRIVE STE 101 | | | | | | | | | | |
| RALEIGH, NC 27612 | 58-1654064 | | 25,250. | 0. | | | GENERAL PURPOSE | | | |
| PUBLIC SCHOOLS FIRST NC INC. PO BOX 37832 | | | | | | | | | | |
| RALEIGH, NC 27627 | 46-1510531 | | 26,000. | 0. | | | GENERAL PURPOSE | | | |
| QUEENS UNIVERSITY OF CHARLOTTE 1900 SELWYN AVE. | | | | | | | | | | |
| CHARLOTTE, NC 28274 | 56-0530003 | | 11,250. | 0. | | | GENERAL PURPOSE | | | |
| RACHEL'S NETWORK INC. 1200 18TH STREET, NW STE 910 | | | | | | | | | | |
| WASHINGTON, DC 20036 | 31-1644905 | | 6,500. | 0. | | | GENERAL PURPOSE | | | |
| RADICAL MENTORING 1151 HAMMOND DRIVE NE | | | | | | | | | | |
| ATLANTA, GA 30346 | 58-1867150 | | 10,000. | 0. | | | GENERAL PURPOSE | | | |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sche | edule I (Form 990), Pa | rt II.) | <u> </u> |
|---|-------------------|-------------------------------|--------------------------|-----------------------------------|--|---|---------------------------------------|
| (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 |
| RALEIGH-CARY JEWISH FEDERATION, INC 8210 CREEDMOOR ROAD, SUITE 104 - RALEIGH, NC 27613 | 56-1553301 | | 19,581. | 0. | | | GENERAL PURPOSE |
| RALEIGH IMMIGRANT COMMUNITY INC. 1001 NAVAHO DR STE 206 RALEIGH, NC 27609 | 81-2561163 | | 15,000. | 0. | | | GENERAL PURPOSE |
| RALEIGH LITTLE THEATRE 301 POGUE STREET RALEIGH, NC 27607 | 56-0662726 | | 6,000. | 0. | | | GENERAL PURPOSE |
| RALEIGH RESCUE MISSION INC. PO BOX 27391 RALEIGH, NC 27611 | 56-6024168 | | 20,948. | 0. | | | GENERAL PURPOSE |
| RALEIGH SYMPHONY ORCHESTRA PO BOX 25878 RALEIGH, NC 27611-5878 | 58-1466397 | | 13,415. | 0. | | | GENERAL PURPOSE |
| RALEIGH/WAKE PARTNERSHIP TO END AND PREVENT HOMELESSNESS - PO BOX 12044 - RALEIGH, NC 27605 | 65-1267717 | | 13,000. | 0. | | | GENERAL PURPOSE |
| RAVENSCROFT SCHOOL 7409 FALLS OF THE NEUSE ROAD RALEIGH, NC 27615 | 56-6001583 | | 26,250. | 0. | | | general purpose |
| READ AND FEED PO BOX 5865 CARY, NC 27512 | 20-3246207 | | 47,500. | 0. | | | general purpose |
| REALITY MINISTRIES PO BOX 242 DURHAM, NC 27702 | 26-1514118 | | 14,000. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| REBUILDING TOGETHER OF THE TRIANGLE - 200 TRANS AIR DRIVE #200 - MORRISVILLE, NC 27560 | 56-1955629 | | 52,446. | 0. | | | general purpose | | |
| RECOVERY COMMUNITIES OF NORTH CAROLINA INC 824 N BLOODWORTH STREET - RALEIGH, NC 27604 | 46-3288242 | | 5,000. | 0. | | | general purpose | | |
| REFUGEE COMMUNITY PARTNERSHIP 110 WEST MAIN STREET CARRBORO, NC 27510 | 26-3608741 | | 8,000. | 0. | | | general purpose | | |
| REGISTER2VOTE FUND PO BOX 15845 WASHINGTON, DC 20003 | 84-2487707 | | 5,000. | 0. | | | general purpose | | |
| RELIGIOUS COALITION FOR A NONVIOLENT DURHAM INC PO BOX 52303 - DURHAM, NC 27717 | 20-1356454 | | 20,000. | 0. | | | GENERAL PURPOSE | | |
| RESOURCE CENTER FOR WOMEN AND MINISTRY IN THE SOUTH - 1202 WATTS STREET - DURHAM, NC 27701-1539 | 59-1766535 | | 25,250. | 0. | | | GENERAL PURPOSE | | |
| RESOURCE GENERATION 1216 BROADWAY, 2ND FLOOR NEW YORK, NY 10001 | 27-1847561 | | 10,000. | 0. | | | general purpose | | |
| RISE SE RALEIGH 3420 IDLEWOOD VILLAGE DRIVE RALEIGH, NC 27610 | 46-4215646 | | 50,000. | 0. | | | general purpose | | |
| RISING ABOVE THE STORMS PO BOX 2532 BRENTWOOD, TN 37024 | 45-4808527 | | 7,800. | 0. | | | general purpose | | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | |
| ROBERT C. PARKER SCHOOL | | | | | | | | |
| 4254 NEW YORK ROUTE 43 | | | | | | | | |
| WYNANTSKILL, NY 12198 | 14-1729589 | | 5,210. | 0. | | | GENERAL PURPOSE | |
| ROMAN CATHOLIC DIOCESE OF RALEIGH | | | | | | | | |
| 715 NAZARETH STREET | | | | | | | | |
| RALEIGH, NC 27606-2187 | | | 10,000. | 0. | | | GENERAL PURPOSE | |
| RONALD MCDONALD HOUSE OF CHAPEL | | | | | | | | |
| HILL INC 101 OLD MASON FARM | | | | | | | | |
| ROAD - CHAPEL HILL, NC 27517 | 56-1413188 | | 6,988. | 0. | | | GENERAL PURPOSE | |
| | | | | - | | | | |
| RONALD MCDONALD HOUSE OF DURHAM | | | | | | | | |
| 506 ALEXANDER AVE. | | | | | | | | |
| DURHAM, NC 27705 | 56-1220376 | | 15,714. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| ROTARY FOUNDATION OF ROTARY | | | | | | | | |
| INTERNATIONAL - 1560 SHERMAN | 36-3245072 | | 8 000 | 0. | | | GENERAL PURPOSE | |
| AVENUE - EVANSTON, IL 60201 | 36-3245072 | | 8,000. | 0. | | | GENERAL PURPOSE | |
| SAFECHILD | | | | | | | | |
| 864 WEST MORGAN STREET | | | | | | | | |
| RALEIGH, NC 27603 | 56-1817816 | | 13,019. | 0. | | | GENERAL PURPOSE | |
| | | | | | | | | |
| SAFE HAVEN FOR CATS | | | | | | | | |
| 8431-137 GARVEY DRIVE | FC 1016620 | | 7 250 | | | | GUNUDAL DUDDOGU | |
| RALEIGH, NC 27616 | 56-1916620 | | 7,250. | 0. | | | GENERAL PURPOSE | |
| SAINT ANDREWS PRESBYTERIAN CHURCH | | | | | | | | |
| 7506 FALLS OF THE NEUSE ROAD | | | | | | | | |
| RALEIGH, NC 27615 | 56-1127278 | | 11,000. | 0. | | | GENERAL PURPOSE | |
| · | | | , , | | | | | |
| SALEM ACADEMY & COLLEGE | | | | | | | | |
| 601 S. CHURCH STREET | | | | | | | | |
| WINSTON-SALEM, NC 27101 | 56-0530005 | | 6,500. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| SALVATION ARMY BOYS AND GIRLS CLUB OF DURHAM - 810 N. ALSTON AVENUE - DURHAM, NC 27701 | | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| SALVATION ARMY OF DURHAM, ORANGE, PERSON COUNTIES - PO BOX 1330 - DURHAM, NC 27702-1330 | 58-0660607 | | 39,331. | 0. | | | GENERAL PURPOSE | | |
| SALVATION ARMY OF WAKE CO. PO BOX 27584 RALEIGH, NC 27611 | 58-0660607 | | 59,128. | 0. | | | GENERAL PURPOSE | | |
| SAMARITAN'S FEET INTERNATIONAL 1836 CENTER PARK DR. CHARLOTTE, NC 28271 | 14-1880905 | | 100,000. | 0. | | | general purpose | | |
| SANDHILLS COMMUNITY COLLEGE - SCHOL - 3395 AIRPORT RD PINEHURST, NC 28374 | | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| SANTA FE MOUNTAIN CENTER INC. PO BOX 449 TESUQUE, NM 87574 | 85-0272388 | | 10,000. | 0. | | | general purpose | | |
| SARAH LAWRENCE COLLEGE 1 MEAD WAY BRONXVILLE, NY 10708-5999 | 23-7223216 | | 6,250. | 0. | | | general purpose | | |
| SARAH P. DUKE GARDENS BOX 90341 DURHAM, NC 27708-0341 | | | 11,000. | 0. | | | general purpose | | |
| SAVING GRACE ANIMALS FOR ADOPTION INC PO BOX 1649 - WAKE FOREST, NC 27588 | 92-0186555 | | 5,000. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other A | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt 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 |
| SCHOOL OF THE ARTS FOR BOYS | | | | | | | |
| ACADEMY - PO BOX 1721 - | | | | | | | |
| PITTSBORO, NC 27312 | 85-0819740 | | 15,000. | 0. | | | GENERAL PURPOSE |
| SCHWAB CHARITABLE FUND | | | | | | | |
| PO BOX 628298 | | | | | | | |
| ORLANDO, FL 32862 | 31-1640316 | | 273,637. | 0. | | | GENERAL PURPOSE |
| SEALKIDS | | | | | | | |
| 516 D RIVER HWY STE 305 | | | | | | | |
| MOORESVILLE, NC 28117 | 45-4961791 | | 20,000. | 0. | | | GENERAL PURPOSE |
| SECOND HARVEST FOOD BANK OF | | | , | | | | |
| NORTHWEST NORTH CAROLINA INC | | | | | | | |
| 3655 REED STREET - WINSTON-SALEM, | | | | | | | |
| NC 27107 | 58-1457912 | | 110,750. | 0. | | | GENERAL PURPOSE |
| SEEDS | | | | | | | |
| 706 GILBERT ST. | | | | | | | |
| DURHAM, NC 27701 | 56-1876445 | | 12,750. | 0. | | | GENERAL PURPOSE |
| , | | | , | | | | |
| SELF DISCOVERY TRANSITIONAL LIVING | | | | | | | |
| PROGRAM - PO BOX 3257 - DURHAM, NC | | | | | | | |
| 27715 | 85-0991570 | | 15,000. | 0. | | | GENERAL PURPOSE |
| SENIOR PHARMASSIST INC. | | | | | | | |
| 406 RIGSBEE AVENUE, SUITE 201 | | | | | | | |
| DURHAM, NC 27701-2186 | 56-2084639 | | 39,280. | 0. | | | GENERAL PURPOSE |
| | | | , | - | | | |
| SETON HILL UNIVERSITY | | | | | | | |
| 1 SETON HILL DR. | | | | | | | |
| GREENSBURG, PA 15601 | 25-0965557 | | 5,600. | 0. | | | GENERAL PURPOSE |
| SHAW UNIVERSITY | | | | | | | |
| 118 E. SOUTH STREET | | | | | | | |
| RALEIGH, NC 27601 | 56-0530235 | | 5,000. | 0. | | | GENERAL PURPOSE |
| | | | , , , , | | 1 | L | L |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| SHAW UNIVERSITY - SCHOL | | | | | | | | | |
| 118 E. SOUTH ST. | | | | | | | | | |
| RALEIGH, NC 27601 | | | 16,000. | 0. | | | GENERAL PURPOSE | | |
| SHEPHERDS CARE MEDICAL CLINIC 304-B PONY ROAD | | | | | | | | | |
| ZEBULON, NC 27597 | 26-2757593 | | 15,000. | 0. | | | GENERAL PURPOSE | | |
| SHEPHERD'S TABLE SOUP KITCHEN 121 HILLSBOROUGH ST RALEIGH, NC 27603-1762 | 56-1423190 | | 10,079. | 0. | | | GENERAL PURPOSE | | |
| | 00 2120250 | | 20,075. | · · | | | | | |
| SHINING LIGHT MINISTRIES 1600 N STATE RTE 934 ANNVILLE, PA 17003 | 25-1847018 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| | 23 1047010 | | 3,000. | •• | | | CHARREN TORTOOL | | |
| SISTER CITIES OF DURHAM PO BOX 767 | | | | | | | | | |
| DURHAM, NC 27702 | 56-1627122 | | 5,863. | 0. | | | GENERAL PURPOSE | | |
| SMILE TRAIN INC. 633 THIRD AVENUE, 9TH FLOOR | | | | | | | | | |
| NEW YORK, NY 10017 | 13-3661416 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| SMITHSONIAN INSTITUTION - OFFICE OF ADVANCEMENT - PO BOX 37012 - | | | | | | | | | |
| WASHINGTON, DC 20013-7012 | 53-0206027 | | 22,000. | 0. | | | GENERAL PURPOSE | | |
| SOUND RIVERS, INC PO BOX 15451 | | | | | | | | | |
| NEW BERN, NC 28561 | 58-1475258 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| SOUTHERN DOCUMENTARY FUND PO BOX 3622 | | | | | | | | | |
| DURHAM, NC 27702 | 75-2993148 | | 5,000. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | <u> </u> |
|---|-------------------|-------------------------------|--------------------------|---|--|---|---------------------------------------|
| (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 |
| SOUTHERN ENVIRONMENTAL LAW CENTER | | | | | | | |
| - HEADQUARTERS - 201 WEST MAIN | | | | | | | |
| STREET, SUITE 14 - | | | | | | | |
| CHARLOTTESVILLE, VA 22902-5065 | 52-1436778 | | 106,500. | 0. | | | GENERAL PURPOSE |
| SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE. | | | | | | | |
| MONTGOMERY, AL 36104 | 63-0598743 | | 7,440. | 0. | | | GENERAL PURPOSE |
| SOUTHERN VISION ALLIANCE PO BOX 51698 | 61-1639641 | | 15,000. | 0. | | | GENERAL PURPOSE |
| DURHAM, NC 27717 | 01-1039041 | | 13,000. | 0. | | | GENERAL FORFOSE |
| SPCA OF WAKE COUNTY 200 PETFINDER LANE RALEIGH, NC 27603 | 56-0891732 | | 12,750. | 0. | | | GENERAL PURPOSE |
| , | | | | | | | |
| SPECIAL OLYMPICS NORTH CAROLINA 2200 GATEWAY CENTRE BLVD. STE 201 | | | | _ | | | |
| MORRISVILLE, NC 27560 | 56-1149607 | | 10,500. | 0. | | | GENERAL PURPOSE |
| SSN 777 CLUB 2512 SEVIER STREET DURHAM, NC 27705 | 81-3503324 | | 5,000. | 0. | | | GENERAL PURPOSE |
| DOMIAM, NC 27703 | 01 3303324 | | 3,000. | · · | | | GENERAL TORTOGE |
| ST. ALBANS EPISCOPAL CHURCH 1501 WASHINGTON AVENUE | | | | | | | |
| ALBANY, CA 94706 | | | 6,000. | 0. | | | GENERAL PURPOSE |
| ST. ANDREWS PRESBYTERIAN CHURCH 5422 ST. ANDREWS CHURCH ROAD | | | | | | | |
| SANFORD, NC 27330-8192 | 56-6056270 | | 25,922. | 0. | | | GENERAL PURPOSE |
| ST. ANDREW'S SCHOOL OF DELAWARE, INC 350 NOXONTOWN ROAD - | | | | | | | |
| MIDDLETOWN, DE 19709 | 51-0079506 | | 10,000. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | | |
| STANDUP SPEAKOUT OF NC | | | | | | | | | | |
| PO BOX 71532 | | | | | | | | | | |
| DURHAM, NC 27722 | 27-2331305 | | 20,600. | 0. | | | GENERAL PURPOSE | | | |
| ST. AUGUSTINE'S UNIVERSITY - SCHOL 1315 OAKWOOD AVENUE | | | | | | | | | | |
| RALEIGH, NC 27610-2298 | 56-0547478 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| STEPUP DURHAM PO BOX 1955 | | | | | | | | | | |
| DURHAM, NC 27702 | 47-4578727 | | 6,050. | 0. | | | GENERAL PURPOSE | | | |
| STEPUP MINISTRY - RALEIGH 1701 OBERLIN ROAD RALEIGH, NC 27608 | 56-1655255 | | 31,939. | 0. | | | GENERAL PURPOSE | | | |
| ST. FRANCIS OF ASSISI CHURCH 11401 LEESVILLE ROAD | | | | | | | | | | |
| RALEIGH, NC 27613 | | | 7,500. | 0. | | | GENERAL PURPOSE | | | |
| ST. GEORGE'S SCHOOL PO BOX 1910 | | | | | | | | | | |
| NEWPORT, RI 02840-0190 | 05-0259009 | | 7,000. | 0. | | | GENERAL PURPOSE | | | |
| ST. JOHN CHRYSOSTOM EPISCOPAL CHURCH - 30382 VIA CON DIOS - RANCHO SANTA MARGARITA, CA | | | | | | | | | | |
| 92688-1518 | | | 16,000. | 0. | | | GENERAL PURPOSE | | | |
| ST. JOSEPH'S HISTORIC FOUNDATION, INC 804 OLD FAYETTEVILLE STREET | | | | | | | | | | |
| - DURHAM, NC 27701 | 56-1152267 | | 21,500. | 0. | | | GENERAL PURPOSE | | | |
| ST. JOSEPH'S NEIGHBORHOOD CENTER INC - 417 SOUTH AVENUE - | | | | | | | | | | |
| ROCHESTER, NY 14620 | 46-1176792 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |

| Part II Continuation of Grants and Other | · Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa I | rt II.) T | T |
|---|---------------------|-------------------------------|--------------------------|-----------------------------------|--|--|---------------------------------------|
| (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 |
| ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST JUDE PLACE - MEMPHIS, TN 38105 | 62-0646012 | | 28,250. | 0. | | | GENERAL PURPOSE |
| ST. LUKE'S EPISCOPAL CHURCH 1737 HILLANDALE ROAD DURHAM, NC 27705 | | | 59,919. | 0. | | | GENERAL PURPOSE |
| ST. MARK'S AME ZION CHURCH 531 S. ROXBORO STREET DURHAM, NC 27701 | | | 5,000. | 0. | | | GENERAL PURPOSE |
| ST. MARY'S SCHOOL 900 HILLSBOROUGH ST. RALEIGH, NC 27603 | 56-0532314 | | 140,151. | 0. | | | GENERAL PURPOSE |
| ST. MICHAEL'S EPISCOPAL CHURCH 1520 CANTERBURY RD. RALEIGH, NC 27608-1106 | 58-1488885 | | 17,050. | 0. | | | GENERAL PURPOSE |
| STONINGTON HISTORICAL SOCIETY PO BOX 103 STONINGTON, CT 06378 | 06-0966415 | | 50,000. | 0. | | | GENERAL PURPOSE |
| ST PAUL'S EPISCOPAL CHURCH 401 DUVAL ST KEY WEST, FL 33040 | | | 10,000. | 0. | | | GENERAL PURPOSE |
| ST. PAUL'S EPISCOPAL CHURCH 215 ANN STREET BEAUFORT, NC 28516 | | | 5,000. | 0. | | | GENERAL PURPOSE |
| STRONGHER TOGETHER PO BOX 52142 DURHAM, NC 27717 | 82-1595797 | | 11,850. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| ST. STEPHEN'S EPISCOPAL CHURCH 82 KIMBERLY DRIVE | | | | | | | | | |
| DURHAM, NC 27707 | 58-1488773 | | 12,500. | 0. | | | GENERAL PURPOSE | | |
| STUDENT ACTION WITH FARMWORKERS 1317 W. PETTIGREW STREET DURHAM, NC 27705 | 56-1789014 | | 98,196. | 0. | | | GENERAL PURPOSE | | |
| Boldman, Ne 27703 | 30 1703014 | | 30,130. | 0. | | | | | |
| STUDENTS TO SCHOLARS 1117 SOURWOOD DRIVE | 02 2020722 | | F 000 | | | | | | |
| CHAPEL HILL, NC 27517 | 82-2838733 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| STUDENT U 600 E UMSTEAD STREET | | | | _ | | | | | |
| DURHAM, NC 27701 | 27-3460491 | | 60,000. | 0. | | | GENERAL PURPOSE | | |
| SUSTAIN INSPIRE SURVIVE 300 HYLAN DRIVE STE 6 | | | | | | | | | |
| ROCHESTER, NY 14623 | 41-2183783 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| SWINGPALS INC. PO BOX 2994 | | | | | | | | | |
| DURHAM, NC 27715 | 27-4234469 | | 18,500. | 0. | | | GENERAL PURPOSE | | |
| TABLE MINISTRIES INC. 209 E. MAIN STREET | | | | | | | | | |
| CARRBORO, NC 27510 | 26-1471735 | | 19,250. | 0. | | | GENERAL PURPOSE | | |
| TEACH FOR AMERICA - EASTERN NC REGION - PO BOX 398540 - SAN | | | | | | | | | |
| FRANCISCO, CA 94139 | 13-3541913 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| THE AFRICAN AMERICAN CULTURAL | | | - | | | | | | |
| FESTIVAL OF RALEIGH AND WAKE | | | | | | | | | |
| COUNTY, INC 5 WEST HARGETT STREET STE 702 - RALEIGH, NC 27601 | 90-0636941 | | 7,500. | 0. | | | GENERAL PURPOSE | | |
| SIRBEL SIE /UZ - RADELGH, NC 2/001 | 70-0030941 | | 1,300. | U . | | L | PENEKAL FORFOSE | | |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | | |
| THE BRIDGE DOWNEAST | | | | | | | | | | |
| PO BOX 397 | | | | | | | | | | |
| HARKERS ISLAND, NC 28531 | 27-5124242 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| THE CARTER CENTER | | | | | | | | | | |
| 453 FREEDOM PARKWAY | | | | | | | | | | |
| ATLANTA, GA 30307 | 58-1454716 | | 11,300. | 0. | | | GENERAL PURPOSE | | | |
| THE CARYING PLACE | | | | | | | | | | |
| PO BOX 622 | | | | | | | | | | |
| CARY, NC 27512 | 58-2425452 | | 15,300. | 0. | | | GENERAL PURPOSE | | | |
| THE CENTERS FOR EXCEPTIONAL | | | , | | | | | | | |
| CHILDREN - 2315 COLISEUM DRIVE | | | | | | | | | | |
| NORTHWEST - WINSTON-SALEM, NC | | | | | | | | | | |
| 27106-5801 | 56-0615188 | | 10,440. | 0. | | | GENERAL PURPOSE | | | |
| THE CORRAL RIDING ACADEMY | | | | | | | | | | |
| 3620 KILDAIRE FARM ROAD | | | | | | | | | | |
| CARY, NC 27518 | 26-3122904 | | 42,500. | 0. | | | GENERAL PURPOSE | | | |
| · | | | , | | | | | | | |
| THE EMILY K CENTER | | | | | | | | | | |
| 904 W. CHAPEL HILL STREET | | | | | | | | | | |
| DURHAM, NC 27701-2812 | 56-2230469 | | 102,850. | 0. | | | GENERAL PURPOSE | | | |
| THE ENCOURAGING PLACE | | | | | | | | | | |
| 6020 ROCK QUARRY ROAD | | | | | | | | | | |
| RALEIGH, NC 27610 | 83-0476372 | | 6,000. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| THE FISTULA FOUNDATION | | | | | | | | | | |
| 1922 THE ALAMEDA STE 302 | | | | | | | | | | |
| SAN JOSE, CA 95126 | 77-0547201 | | 7,282. | 0. | | | GENERAL PURPOSE | | | |
| THE FOUNDATION OF HOPE FOR | | | | | | | | | | |
| RESEARCH & TREATMENT OF MENTAL | | | | | | | | | | |
| ILLNESS - 9401 GLENWOOD AVENUE - | | | | | | | | | | |
| RALEIGH, NC 27617 | 56-6246626 | | 28,000. | 0. | | | GENERAL PURPOSE | | | |

| (a) Amount of organization or government (b) EN (c) IFC section (d) Amount of orsh grant and address of organization or government (b) Purpose of grant or desh grant (c) Amount of orsh desistance (c) ENERGY (c | Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | | | | | | | | |
|--|--|--|--|-------------|----------|--------------------------|--|--------------------|--|--|
| ### ALBICH, NC 27603 | ` ' | (b) EIN | | ` ' | non-cash | valuation (book, FMV, | | | | |
| ### ALBICH, NC 27603 | MURCIPMED ADMS THE | | | | | | | | | |
| RALEIGH, NC 27603 45-2650004 29,500. 0. SEMERAL PURPOSE THE GREEN CHAIR PROJECT 1853 CARITAL BOULEVARDR RALEIGH, NC 27604 27-2323103 23,000. 0. DENERAL FURPOSE THE HISTORIC PRESERVATION FOUNDATION OF NORTH CAROLINA INC FO BOX 27644 - RALEIGH, NC 27611-7644 56-1145386 8,319. 0. DENERAL FURPOSE THE HOPE CENTER AT PULLEN 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. DENERAL FURPOSE THE LINKS FOUNDATION INC. FO BOX 997 MORRISVILLE, NC 27550 52-1170830 5,000. 0. DENERAL FURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. DENERAL FURPOSE THE METHODIST HOME FOR CHILDREN HICK 1041 MAKINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. DENERAL FURPOSE THE MORRHEAD-CAIN SCHOLARSHIF FUND FOST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. DENERAL FURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKMELL STREET, CHAPTER - 334 BLACKMELL STREET, | , | | | | | | | | | |
| THE GREEN CHAIR PROJECT 1853 CARITAL BOULEVARD RALBIGH, NC 27604 27-2323103 23,000. 0. BENERAL PURPOSE THE HISTORIC PRESERVATION FOUNDATION OF NORTH CAROLINA INC FO BOX 27644 - RALBIGH, NC 25-144-886 8,319. 0. BENERAL PURPOSE THE HOPE CENTER AT PULLEN 112 COX AVENUE STE 100-4 RALBIGH, NC 27505 61-1570567 61,750. 0. BENERAL PURPOSE THE LINKS FOUNDATION INC. FO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. BENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVINA DAIN MAKING HISTORY - 512 W. ROSEMBAY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. BENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALBIGH, NC 27605 56-0547482 15,750. 0. BENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. BENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | 45-2650004 | | 29 500. | 0. | | | GENERAL PURPOSE | | |
| 1853 CAPITAL BOULEVARD RALBIGH, NC 27604 27-2323103 23,000. 0. DENERAL PURPOSE THE HISTORIC PRESERVATION FOUNDATION OF NORTH CAROLINA INC PO BOX 27644 - RALEIGH, NC 27611-7644 56-1145386 8,319. 0. SENERAL PURPOSE THE HOPE CENTER AT FULLEN 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. SENERAL PURPOSE THE LINKS FOUNDATION INC. PO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MARING HISTORY - 512 W. NOSEMBAY STREET - CHAPEL HILL, NC 27515 46-198511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 56-2462593 10,000. 0. GENERAL PURPOSE THE MORTHEN CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | | | | | | | | | |
| RALEIGH, NC 27604 27-2323103 23,000. 0. DENERAL PURPOSE THE HISTORIC PRESERVATION FOUNDATION PORTE CAROLINA INC PO BOX 27644 - RALEIGH, NC 27611-7644 56-1145386 8,319. 0. DENERAL PURPOSE THE HOPE CENTER AT PULLEN 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. DENERAL PURPOSE THE LINKS FOUNDATION INC. PO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. DENERAL PURPOSE THE MARKAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. DENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. DENERAL PURPOSE THE MORRHEAD-CAIN SCHOLARSHIP FUND FOST OFFICE BOX 690 CHAPEL HILL, NC 27516-6500 56-2462593 10,000. 0. DENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 374 BLACKWELL STREET, | THE GREEN CHAIR PROJECT | | | | | | | | | |
| THE HISTORIC PRESERVATION FOUNDATION OF NORTH CARGLINA INC PO BOX 27644 - RALEIGH, NC 27611-7644 56-1145386 8,319. 0. SENERAL PURPOSE THE HOPE CENTER AT PULLEN 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. SENERAL PURPOSE THE LINKS FOUNDATION INC. FO BOX 997 MORRISVILLE, NC 27560 THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-198511 40,750. 0. SENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. SENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. SENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | 1853 CAPITAL BOULEVARD | | | | | | | | | |
| FOUNDATION OF NORTH CAROLINA INC PO BOX 27644 - RALEIGH, NC 27611-7644 56-1145386 8,319. 0. GENERAL PURPOSE THE HOPE CENTER AT FULLEN 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. GENERAL PURPOSE THE LINKS FOUNDATION INC. PO BOX 997 MORRISVILLE, NC 27505 THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 THE MORRHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE | RALEIGH, NC 27604 | 27-2323103 | | 23,000. | 0. | | | GENERAL PURPOSE | | |
| - PO BOX 27644 - RALEIGH, NC 27611-7644 56-1145386 8,319. 0. GENERAL PURPOSE THE HOPE CENTER AT PULLEN 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. GENERAL PURPOSE THE LINKS FOUNDATION INC. PO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE | THE HISTORIC PRESERVATION | | | | | | | | | |
| 27611-7644 56-1145386 8,319. 0. SENERAL PURPOSE THE HOPE CENTER AT PULLEN 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. SENERAL PURPOSE THE LINKS FOUNDATION INC. PO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. SENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. SENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. SENERAL PURPOSE THE MOREIAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. SENERAL PURPOSE | FOUNDATION OF NORTH CAROLINA INC. | | | | | | | | | |
| THE HOPE CENTER AT PULLEN 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. GENERAL PURPOSE THE LINKS FOUNDATION INC. PO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | - PO BOX 27644 - RALEIGH, NC | | | | | | | | | |
| 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. GENERAL PURPOSE THE LINKS FOUNDATION INC. FO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MARING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND FOST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE | 27611-7644 | 56-1145386 | | 8,319. | 0. | | | GENERAL PURPOSE | | |
| 112 COX AVENUE STE 100-4 RALEIGH, NC 27605 61-1570567 61,750. 0. GENERAL PURPOSE THE LINKS FOUNDATION INC. FO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MARING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND FOST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | | | | | | | | | |
| RALEIGH, NC 27605 61-1570567 61,750. 0. GENERAL PURPOSE THE LINKS FOUNDATION INC. PO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE | | | | | | | | | | |
| THE LINKS FOUNDATION INC. PO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | 61 1570567 | | 61 750 | _ | | | ALIMED A DIED DOGE | | |
| PO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | RALEIGH, NC 27605 | 61-15/056/ | | 61,750. | 0. | | | GENERAL PURPOSE | | |
| PO BOX 997 MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | THE LINKS FOUNDATION INC | | | | | | | | | |
| MORRISVILLE, NC 27560 52-1170830 5,000. 0. GENERAL PURPOSE THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | | | | | | | | | |
| THE MARIAN CHEEK JACKSON CENTER FOR SAVING AND MAKING HISTORY - 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | 52-1170830 | | 5 000. | 0. | | | GENERAL PURPOSE | | |
| 512 W. ROSEMARY STREET - CHAPEL HILL, NC 27516 | | | | , , , , , , | | | | | | |
| HILL, NC 27516 46-1988511 40,750. 0. GENERAL PURPOSE THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | FOR SAVING AND MAKING HISTORY - | | | | | | | | | |
| THE METHODIST HOME FOR CHILDREN INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | 512 W. ROSEMARY STREET - CHAPEL | | | | | | | | | |
| INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | HILL, NC 27516 | 46-1988511 | | 40,750. | 0. | | | GENERAL PURPOSE | | |
| INC 1041 WASHINGTON STREET - RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | | | | | | | | | |
| RALEIGH, NC 27605 56-0547482 15,750. 0. GENERAL PURPOSE THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | THE METHODIST HOME FOR CHILDREN | | | | | | | | | |
| THE MOREHEAD-CAIN SCHOLARSHIP FUND POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | | | | | | | | | |
| POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | RALEIGH, NC 27605 | 56-0547482 | | 15,750. | 0. | | | GENERAL PURPOSE | | |
| POST OFFICE BOX 690 CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | | | | | | | | | |
| CHAPEL HILL, NC 27514-0690 56-2462593 10,000. 0. GENERAL PURPOSE THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | | | | | | | | | |
| THE NATURE CONSERVANCY - NC CHAPTER - 334 BLACKWELL STREET, | | E6 2462E02 | | 10 000 | 0 | | | GENERAL DIRROGE | | |
| CHAPTER - 334 BLACKWELL STREET, | CHAFEL HILL, NC 2/314-0090 | 50-2402593 | | 10,000. | · · | | | GENERAL FURFUSE | | |
| CHAPTER - 334 BLACKWELL STREET, | THE NATURE CONSERVANCY - NC | | | | | | | | | |
| | | | | | | | | | | |
| | | 53-0242652 | | 63,250. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| THE NATURE CONSERVANCY - WORLDWIDE 4245 N. FAIRFAX DRIVE, SUITE 100 ARLINGTON, VA 22203 | 53-0242652 | | 7,250. | 0. | | | GENERAL PURPOSE | | |
| THE POINT CHURCH 1503 WALNUT STREET CARY, NC 27511 | | | 30,069. | 0. | | | GENERAL PURPOSE | | |
| THE SALVATION ARMY OF CARTERET COUNTY - PO BOX 399 - MOREHEAD CITY, NC 28557 | 56-0543227 | | 20,000. | 0. | | | GENERAL PURPOSE | | |
| THE SUMMIT CHURCH 2335-114 PRESIDENTIAL DRIVE DURHAM, NC 27703 | 83-0398389 | | 9,650. | 0. | | | GENERAL PURPOSE | | |
| THE TRANSFORMING CENTER 400 W ROOSEVELT ROAD, STE 100 WHEATON, IL 60187 | 32-0041715 | | 10,000. | 0. | | | general purpose | | |
| THE VESTRY OR WARDENS OF TRINITY EPISCOPAL CHURCH - PO BOX 372 - SCOTLAND NECK, NC 27874 | | | 21,162. | 0. | | | GENERAL PURPOSE | | |
| TIDES FOUNDATION PO BOX 399389 SAN FRANCISCO, CA 94139 | 51-0198509 | | 39,250. | 0. | | | GENERAL PURPOSE | | |
| TOXIC FREE NORTH CAROLINA INC. 115 W. MAIN ST. CARRBORO, NC 27510 | 59-1715833 | | 21,000. | 0. | | | GENERAL PURPOSE | | |
| TRANSITIONS LIFECARE 250 HOSPICE CIRCLE RALEIGH, NC 27607 | 56-1228779 | | 58,750. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| TREESDURHAM 112 BROADWAY STREET STE B DURHAM, NC 27701 | 82-4120627 | | 20,500. | 0. | | | GENERAL PURPOSE | | |
| TRIANGLE APHASIA PROJECT 191 HIGH HOUSE ROAD CARY, NC 27511 | 27-1771636 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| TRIANGLE ARTWORKS 3119 BIRNAMWOOD RD. RALEIGH, NC 27607 | 27-2580374 | | 5,000. | 0. | | | GENERAL PURPOSE | | |
| TRIANGLE BIKEWORKS 117 W MAIN STREET CARRBORO, NC 27510 | 46-1229632 | | 15,000. | 0. | | | general purpose | | |
| TRIANGLE FAMILY SERVICES 3937 WESTERN BLVD STE 101 RALEIGH, NC 27606 | 56-0547491 | | 42,193. | 0. | | | GENERAL PURPOSE | | |
| TRIANGLE LAND CONSERVANCY 514 S. DUKE STREET DURHAM, NC 27701 | 58-1514406 | | 131,127. | 0. | | | general purpose | | |
| TRIANGLE LAND CONSERVANCY 514 SOUTH DUKE STREET DURHAM, NC 27701 | 58-1514406 | | 196,262. | 0. | | | GENERAL PURPOSE | | |
| TRIANGLE MARTIN LUTHER KING JR. COMMITTEE - PO BOX 25866 - RALEIGH, NC 27611 | 46-2290293 | | 15,000. | 0. | | | general purpose | | |
| TRINITY ACADEMY 10224 BAILEYWICK ROAD RALEIGH, NC 27613 | 56-1913131 | | 14,479. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa | rt II.) | T 4, |
|--|-------------------|-------------------------------|--------------------------|-----------------------------------|--|--|---------------------------------------|
| (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 COLLEGE | | | | | | | |
| 300 SUMMIT ST. | | | | | | | |
| HARTFORD, CT 06106-3100 | 06-0646927 | | 105,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| TRINITY SCHOOL OF DURHAM & CHAPEL | | | | | | | |
| HILL - 4011 PICKETT ROAD - DURHAM, | | | | | | | |
| NC 27705 | 56-1926923 | | 120,000. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| TRINITY UNITED METHODIST CHURCH | | | | | | | |
| 215 N. CHURCH ST. | | | | | | | |
| DURHAM, NC 27701 | | | 14,791. | 0. | | | GENERAL PURPOSE |
| · | | | , | | | | |
| TROSA | | | | | | | |
| 1820 JAMES ST. | | | | | | | |
| DURHAM, NC 27707 | 56-1861158 | | 98,700. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| TRUSTEES OF DARTMOUTH COLLEGE | | | | | | | |
| 100 TUCK HALL | | | | | | | |
| HANOVER, NH 03755-9000 | 02-0222111 | | 5,000. | 0. | | | GENERAL PURPOSE |
| UNC CENTER FOR PUBLIC TELEVISION | | | | | | | |
| PO BOX 14900 | | | | | | | |
| RESEARCH TRIANGLE PARK, NC | | | | | | | |
| 27709-4900 | 56-6172047 | | 221,440. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| UNC CHAPEL HILL OFFICE OF | | | | | | | |
| UNIVERSITY DEVELOPMENT - PO BOX | | | | | | | |
| 309 - CHAPEL HILL, NC 27514-0309 | 56-6001393 | | 397,385. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| UNC CHAPEL HILL - SCHOL | | | | | | | |
| 450 RIDGE ROAD | | | | | | | |
| CHAPEL HILL, NC 27599-1400 | | | 59,750. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| UNC CHARLOTTE - SCHOL | | | | | | | |
| 9201 UNIVERSITY CITY BLVD. | | | | | | | |
| CHARLOTTE, NC 28223-0001 | | | 23,492. | 0. | | | GENERAL PURPOSE |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 GREENSBORO - SCHOL | | | | | | | | | | |
| PO BOX 26170 | | | | | | | | | | |
| GREENSBORO, NC 27402-6170 | | | 18,900. | 0. | | | GENERAL PURPOSE | | | |
| UNC HEALTH FOUNDATION | | | | | | | | | | |
| 123 W FRANKLIN STREET STE 510 | | | | | | | | | | |
| CHAPEL HILL, NC 27516 | 56-6057494 | | 304,573. | 0. | | | GENERAL PURPOSE | | | |
| UNC LINEBERGER COMPREHENSIVE CANCER CENTER - UNC-CB# 7295 - | | | | | | | | | | |
| CHAPEL HILL, NC 27599 | 56-6057494 | | 16,000. | 0. | | | GENERAL PURPOSE | | | |
| UNC PEMBROKE - SCHOL P.O. BOX 1510 PEMBROKE, NC 28372-1510 | | | 15,000. | 0. | | | GENERAL PURPOSE | | | |
| | | | 20,000. | | | | | | | |
| UNC SCHOOL OF EDUCATION | | | | | | | | | | |
| 103 PEABODY HALL, CAMPUS BOX 3500 CHAPEL HILL, NC 27599-3500 | 56-6001393 | | 55,857. | 0. | | | GENERAL PURPOSE | | | |
| UNC SCHOOL OF THE ARTS FOUNDATION INC 1533 S. MAIN ST | | | | | | | | | | |
| WINSTON-SALEM, NC 27127-2188 | 56-6064850 | | 12,051. | 0. | | | GENERAL PURPOSE | | | |
| UNC WILMINGTON - SCHOL 601 S. COLLEGE ROAD | | | | | | | | | | |
| WILMINGTON, NC 28403-5951 | | | 7,000. | 0. | | | GENERAL PURPOSE | | | |
| UNITED ARTS COUNCIL OF RALEIGH AND WAKE COUNTY - PO BOX 26388 - | | | | | | | | | | |
| RALEIGH, NC 27611 | 56-0770175 | | 46,500. | 0. | | | GENERAL PURPOSE | | | |
| UNITED STATES FUND FOR UNICEF 125 MAIDEN LANE | | | | | | | | | | |
| NEW YORK, NY 10038 | 13-1760110 | | 12,500. | 0. | | | GENERAL PURPOSE | | | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 WAY OF CENTRAL CAROLINAS, INC PO BOX 890685 - CHARLOTTE, NC 28289-0685 | 56-0529948 | | 100,000. | 0. | | | GENERAL PURPOSE | |
| UNITED WAY OF CHATHAM COUNTY PO BOX 1066 PITTSBORO, NC 27312 | 58-1897275 | | 11,113. | 0. | | | GENERAL PURPOSE | |
| UNITED WAY OF FORSYTH COUNTY 301 NORTH MAIN STREET STE 1700 WINSTON-SALEM, NC 27101-2805 | 23-7357234 | | 100,000. | 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 ONSLOW COUNTY 403 N. BAYSHORE BLVD. JACKSONVILLE, NC 28540 | 23-7356577 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| UNITED WAY OF THE GREATER TRIANGLE PO BOX 110583 DURHAM, NC 27709-0962 | 56-1949103 | | 110,243. | 0. | | | GENERAL PURPOSE | |
| UNITED WAY OF THE GREATER TRIANGLE 2400 PERIMETER PARK DRIVE STE 150 MORRISVILLE, NC 27560 | 56-1949103 | | 25,000. | 0. | | | GENERAL PURPOSE | |
| UNITED WAY TAR RIVER REGION 2501 SUNSET AVENUE ROCKY MOUNT, NC 27804-2534 | 56-0611545 | | 5,000. | 0. | | | GENERAL PURPOSE | |
| UNITED WORLD MISSION PO BOX 602002 CHARLOTTE, NC 28260-2002 | 59-6045867 | | 5,000. | 0. | | | GENERAL PURPOSE | |

| Part II Continuation of Grants and Other A | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | |
| UNIVERSITY OF ARIZONA FOUNDATION 1111 N. CHERRY AVE. TUCSON, AZ 85721-0109 | 86-6050388 | | 50,000. | 0. | | | GENERAL PURPOSE | | |
| UNIVERSITY OF FLORIDA FOUNDATION, INC PO BOX 14425 - GAINESVILLE, FL 32604 | 59-0974739 | | 10,000. | 0. | | | general purpose | | |
| UNIVERSITY OF PENNSYLVANIA - SCHOL 3451 WALNUT STREET PHILADELPHIA, PA 19104-6270 | 23-1352685 | | 76,000. | 0. | | | general purpose | | |
| UNIVERSITY SCHOOL FOR BOYS 2785 SOM CENTER ROAD CHAGRIN FALLS, OH 44022 | 34-0714720 | | 5,000. | 0. | | | general purpose | | |
| UNIVERSITY UNITED METHODIST CHURCH 150 EAST FRANKLIN STREET CHAPEL HILL, NC 27514 | 56-0898043 | | 34,750. | 0. | | | GENERAL PURPOSE | | |
| UPPER AMAZON CONSERVANCY 405 14TH STREET, SUITE 164 OAKLAND, CA 94612 | 91-2166435 | | 8,000. | 0. | | | GENERAL PURPOSE | | |
| URBAN COMMUNITY AGRINOMICS CATAWBA TRAIL FARM - 2080 SAWMILL CREEK PARKWAY - DURHAM, NC 27712 | 81-0691944 | | 20,000. | 0. | | | GENERAL PURPOSE | | |
| URBAN MINISTRIES OF DURHAM PO BOX 249 DURHAM, NC 27702 | 58-1505891 | | 43,350. | 0. | | | general purpose | | |
| URBAN MINISTRIES OF WAKE COUNTY PO BOX 26476 RALEIGH, NC 27611 | 58-1422700 | | 23,750. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other | Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 | | | |
| URBAN MINISTRY CENTER | | | | | | | | | | |
| PO BOX 31335 | | | | | | | | | | |
| CHARLOTTE, NC 28231 | 56-1837620 | | 7,500. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| URSULINE SISTERS OF CLEVELAND | | | | | | | | | | |
| 2600 LANDER ROAD | | | | _ | | | | | | |
| PEPPER PIKE, OH 44124 | 34-0832279 | | 7,500. | 0. | | | GENERAL PURPOSE | | | |
| U.S. NAVAL ACADEMY FOUNDATION, | | | | | | | | | | |
| INC 291 WOOD ROAD - BEACH HALL | | | | | | | | | | |
| - ANNAPOLIS, MD 21402 | 23-7003516 | | 10,250. | 0. | | | GENERAL PURPOSE | | | |
| U S SPACE & ROCKET CENTER | | | , - | | | | | | | |
| EDUCATION FOUNDATION - 1 | | | | | | | | | | |
| TRANQUILITY BASE - HUNTSVILLE, AL | | | | | | | | | | |
| 35805 | 63-1265839 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| VAAD HANOCHOS HATMIMIM, DBA THE | | | 1,111 | | | | | | | |
| MEANINGFUL LIFE CENTER - 788 | | | | | | | | | | |
| EASTERN PKWY RM 303 - BROOKLYN, NY | | | | | | | | | | |
| 11213 | 11-2633052 | | 10,000. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| VANCE GRANVILLE COMMUNITY COLLEGE | | | | | | | | | | |
| - SCHOL - P.O. BOX 917 - | | | | | | | | | | |
| HENDERSON, NC 27536 | 56-1338488 | | 5,000. | 0. | | | GENERAL PURPOSE | | | |
| VILLAGE OF WISDOM | | | | | | | | | | |
| 600 E. UMSTEAD ST. | | | | | | | | | | |
| DURHAM, NC 27701 | 47-2060936 | | 10,000. | 0. | | | GENERAL PURPOSE | | | |
| Bettimit, Ne 27701 | 1, 2000330 | | 10,000. | •• | | | | | | |
| VISUAL ART EXCHANGE | | | | | | | | | | |
| 410 GLENWOOD AVE #170 | | | | | | | | | | |
| RALEIGH, NC 27603 | 56-1287429 | | 8,500. | 0. | | | GENERAL PURPOSE | | | |
| | | | | | | | | | | |
| VOICES TOGETHER | | | | | | | | | | |
| 88 VILCOM CENTER DR STE 100 | | | | | | | | | | |
| CHAPEL HILL, NC 27514 | 20-4612388 | | 7,696. | 0. | | | GENERAL PURPOSE | | | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 COUNTY PUBLIC SCHOOL SYSTEM 110 CORNING ROAD - CROSSROADS II | | | 10,000 | 0 | | | GENERAL DURDOGE | | |
| CARY, NC 27518 | | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| WAKE EDUCATION PARTNERSHIP 3101 INDUSTRIAL DRIVE STE 100 RALEIGH, NC 27609 | 58-1518182 | | 38,000. | 0. | | | GENERAL PURPOSE | | |
| WAKE FOREST UNIVERSITY PO BOX 7227 | | | | | | | | | |
| WINSTON-SALEM, NC 27109 | 56-0532138 | | 49,500. | 0. | | | GENERAL PURPOSE | | |
| WAKE FOREST UNIVERSITY - SCHOL P.O. BOX 7246 WINSTON-SALEM, NC 27109-7246 | 56-0532138 | | 11,000. | 0. | | | GENERAL PURPOSE | | |
| WAKEMED FOUNDATION 3000 NEW BERN AVE. | | | | - | | | | | |
| RALEIGH, NC 27620 | 56-6017737 | | 66,500. | 0. | | | GENERAL PURPOSE | | |
| WAKE TECHNICAL COMMUNITY COLLEGE - SCHOL - 9101 FAYETTEVILLE ROAD - RALEIGH, NC 27603-5696 | 23-7017752 | | 21,200. | 0. | | | GENERAL PURPOSE | | |
| WAKEUP WAKE COUNTY 1409 WESTCHESTER ROAD | | | | | | | | | |
| RALEIGH, NC 27610 | 86-1172522 | | 11,000. | 0. | | | GENERAL PURPOSE | | |
| WALKING CLASSROOM INSTITUTE 3626 SHANNON ROAD STE 101 DURHAM, NC 27707 | 27-4477692 | | 10,000. | 0. | | | GENERAL PURPOSE | | |
| WALLTOWN CHILDREN'S THEATRE 1225 BERKELEY ST. | 2, 11,,052 | | 10,000. | | | | 201121 | | |
| DURHAM, NC 27705 | 56-2214825 | | 33,500. | 0. | | | GENERAL PURPOSE | | |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
| WATTS STREET BAPTIST CHURCH 800 WATTS ST. DURHAM, NC 27701 | | | 7,500. | 0. | | | GENERAL PURPOSE |
| WCPE RADIO - EDUCATIONAL INFORMATION CORPORATION - PO BOX 828 - WAKE FOREST, NC 27588 | 56-1061859 | | 18,450. | 0. | | | GENERAL PURPOSE |
| WESLEY HOUSE FAMILY SERVICES 1304 TRUMAN AVENUE KEY WEST, FL 33040 | 59-0624461 | | 10,000. | 0. | | | GENERAL PURPOSE |
| WEST CHATHAM FOOD PANTRY PO BOX 254 SILER CITY, NC 27344 | 51-0634273 | | 5,000. | 0. | | | general purpose |
| WESTERN WAKE CRISIS MINISTRY 1600 OLIVE CHAPEL ROAD, SUITE 408 APEX, NC 27502 | 56-1585440 | | 7,500. | 0. | | | general purpose |
| WESTMINSTER PRESBYTERIAN CHURCH 3639 OLD CHAPEL HILL ROAD DURHAM, NC 27707 | 56-0893567 | | 19,687. | 0. | | | general purpose |
| WEST SPRINGFIELD HIGH SCHOOL 26 CENTRAL STREET WEST SPRINGFIELD, MA 01089 | | | 17,281. | 0. | | | GENERAL PURPOSE |
| WEST VIRGINIA UNIVERSITY CHILDREN'S HOSPITAL - 1 MEDICAL CENTER DRIVE - MORGANTOWN, WV 26506 | 55-0643304 | | 10,000. | 0. | | | GENERAL PURPOSE |
| WHITE MEMORIAL PRESBYTERIAN CHURCH 1704 OBERLIN ROAD RALEIGH, NC 27608 | | | 99,750. | 0. | | | general purpose |

| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (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 |
| WHITE OAK FOUNDATION, INC. 1624 WHITE OAK CHURCH ROAD APEX, NC 27523 | 56-2093795 | | 30,000. | 0. | | | GENERAL PURPOSE |
| WHITE PLAINS UNITED METHODIST CHURCH - 313 S.E. MAYNARD RD - CARY, NC 27511-4511 | 56-1031475 | | 16,000. | 0. | | | GENERAL PURPOSE |
| WILSON YOUTH UNITED 910 TARBORO ST W WILSON, NC 27893 | 27-1604121 | | 20,000. | 0. | | | general purpose |
| WINSTON-SALEM STATE UNIVERSITY - SCHOL - 201 B THOMPSON CENTER - WINSTON-SALEM, NC 27110 | | | 7,000. | 0. | | | general purpose |
| WOMEN IN NEED INC. ONE STATE STREET PLAZA NEW YORK, NY 10004 | 13-3164477 | | 10,000. | 0. | | | GENERAL PURPOSE |
| WOODBERRY FOREST SCHOOL 402 WOODBERRY STATION WOODBERRY FOREST, VA 22989 | 54-0519590 | | 7,250. | 0. | | | general purpose |
| WORKING TO EXTEND ANTI-RACIST EDUCATION - 600 EAST UMSTEAD STREET - DURHAM, NC 27701 | 82-3043278 | | 7,000. | 0. | | | GENERAL PURPOSE |
| WORLD RELIEF DURHAM 801 GILBERT STREET, SUITE 209 DURHAM, NC 27701 | 23-6393344 | | 14,500. | 0. | | | general purpose |
| WOUNDED WARRIOR PROJECT INC. 4899 BELFORT ROAD SUITE 300 JACKSONVILLE, FL 32256 | 20-2370934 | | 5,000. | 0. | | | general purpose |

| Part II Continuation of Grants and Other | Assistance to Don | nestic Organizations | and Domestic Go | vernments (Sch | edule I (Form 990), Pa I | rt II.) T | I |
|--|-------------------|-------------------------------|--------------------------|-----------------------------------|--|--|------------------------------------|
| (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 |
| MCA OF THE TRIANGLE AREA | | | | | | | |
| B01 CORPORATE CENTER DRIVE SUITE 2 | | | | | | | |
| RALEIGH, NC 27607-5073 | 56-0591307 | | 394,334. | 0. | | | GENERAL PURPOSE |
| , | | | , , , , , , | | | | |
| YOU CAN VOTE | | | | | | | |
| 902 BROAD STREET | | | | | | | |
| DURHAM, NC 27705 | 83-2882290 | | 6,500. | 0. | | | GENERAL PURPOSE |
| | | | | | | | |
| YOUNG LIFE CRYSTAL COAST | | | | | | | |
| PO BOX 461 | | | | | | | |
| MOREHEAD CITY, NC 28557-0461 | 84-0385934 | | 5,000. | 0. | | | GENERAL PURPOSE |
| YOUNG LIFE - GRANTS | | | | | | | |
| PO BOX 70065 | | | | | | | |
| PRESCOTT, AZ 86304-7065 | 84-0385934 | | 18,337. | 0. | | | GENERAL PURPOSE |
| induction, in cost , cos | 01 0303331 | | 10,557. | • | | | |
| YOUTH EDUCATION FOR SAVINGS | | | | | | | |
| CONSORTIUM - 217 TYLERWAY LANE - | | | | | | | |
| MORRISVILLE, NC 27560 | 45-2699802 | | 10,000. | 0. | | | GENERAL PURPOSE |
| · | | | | | | | |
| YOUTH VILLAGES, INC. | | | | | | | |
| 1822 E. NC HWY 54, SUITE 300 | | | | | | | |
| DURHAM, NC 27713 | 58-1716970 | | 10,000. | 0. | | | GENERAL PURPOSE |
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| (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 |
|--|--------------------------|--------------------------|---------------------------------------|--|---------------------------------------|
| | | | | | |
| STUDENT ASSISTANCE AWARDS | 70 | 34,011. | 0. | | |
| | | , | | | |
| FREY CHEEK MEMORIAL FUND | 1 | 1,000. | 0. | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| Part IV Supplemental Information. Provide the information re | | e 2: Part III. column | (b): and any other ac | l Iditional information | L |
| PART I, LINE 2: | | <u> </u> | (2), a.i.a a.i., o.i.i.o. a.o | | |
| GRANTS COORDINATOR RECEIVES GRANT RECOMMENDATIONS | , PERFORMS DUE | DILIGENCE | | | |
| ON GRANTEE. RECORDS ON GRANTS AND GRANTEES ARE M | AINTAINED IN I | ATABASE. | | | |
| DONOR SERVICES REVIEWS AND SIGNS GRANT LETTERS. | FINANCE REVIEW | S GRANTS, | | | |
| REVIEWS AND SIGNS GRANT CHECKS. | | · | | | |
| | | | | | |
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SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

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

Employer identification number 56-1380796

OMB No. 1545-0047

| | TRIANGLE COMMUNITY FOUNDATION INC | 56-1380796 | | |
|----|--|---|-----|----|
| Pa | art 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. | , | | |
| | First-class or charter travel Housing allowance or residence for person | nal use | | |
| | Travel for companions Payments for business use of personal res | | | |
| | Tax indemnification and gross-up payments Health or social club dues or initiation fees | | | |
| | Discretionary spending account Personal services (such as maid, chauffeu | | | |
| | | | | |
| 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 | | |
| | additions, and officers, including the obest Exceeding Photoetry, regularing the Removement of the real | | | |
| 3 | Indicate which, if any, of the following the 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 | | | |
| | establish compensation of the CEO/Executive Director, but explain in Part III. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | X Compensation committee Written employment contract | | | |
| | Independent compensation consultant X Compensation survey or study | | | |
| | Form 990 of other organizations X Approval by the board or compensation or | ommittee | | |
| | | Similation | | |
| 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: | | | |
| а | Receive a severance payment or change-of-control payment? | 4a | х | |
| | Participate in or receive payment from a supplemental nonqualified retirement plan? | | | х |
| | Participate in or receive payment from an equity-based compensation arrangement? | | | х |
| · | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | | |
| | The second any of lines 44.0, list the persons and provide the applicable amounts for each item in har in. | | | |
| | 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 | n l | | |
| • | contingent on the revenues of: | | | |
| а | | 5a | | х |
| | Any related organization? | 5b | | х |
| - | 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 | n | | |
| • | contingent on the net earnings of: | | | |
| а | The organization? | 6a | | х |
| | Any related organization? | | | х |
| | 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 | | | х |
| 8 | Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the | | | |
| | | ا ا | | х |
| 9 | If "Yes" on line 8 did the organization also follow the rebuttable presumption procedure described in | | | |
| | | | | |

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

Regulations section 53.4958-6(c)?

Schedule J (Form 990) 2020

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.

| | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation | |
|--------------------------------|---------------|--|-------------------------------------|-------------------------------------|-----------------------------|----------------|----------------------|--|--|
| (A) Name and Title | ame and Title | | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(i)-(D) | in column (B) reported as deferred on prior Form 990 | |
| (1) LORI O'KEEFE | (i) | 198,857. | 0. | 7,923. | 12,180. | 24,766. | 243,726. | 0. | |
| PRESIDENT & CEO | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. | |
| (2) ROBERT NAYLOR | (i) | 144,118. | 0. | 0. | 8,903. | 21,520. | 174,541. | 0. | |
| CFO | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. | |
| (3) ROBIN BAREFOOT | (i) | 129,521. | 0. | 4,954. | 7,806. | 13,757. | 156,038. | 0. | |
| GENERAL COUNSEL (THRU 3/31/21) | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. | |
| | (i) | | | | | | | | |
| | (ii) | | | | | | | | |
| | (i) | | | | | | | | |
| | (ii) | | | | | | | | |
| | (i) | | | | | | | | |
| | (ii) | | | | | | | | |
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| | (ii) | | | | | | | | |
| | (i) | | | | | | | | |
| | (ii) | | | | | | | | |

| Part III Supplemental Information |
|--|
| Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. |
| PART I, LINE 4A: |
| AN EMPLOYEE LISTED IN 990 PART VII RECEIVED A SEVERANCE PAYMENT FROM THE |
| ORGANIZATION DURING CALENDAR YEAR 2020. THE TERMS AND CONDITIONS OF THE |
| AGREEMENT ARE CONFIDENTIAL AND CAN BE MADE AVAILABLE TO THE IRS UPON |
| REQUEST. ALL AMOUNTS PAID DURING THE PERIOD COVERED BY THIS RETURN ARE |
| APPROPRIATELY INCLUDED IN FORM 990 PART VII AS PART OF REPORTABLE |
| COMPENSATION REPORTED ON THE EMPLOYEE'S FORM W-2. |
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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 instructions and the latest information.

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

| Par | τι | Types | of Property | | | | | | | |
|-----------|-------|-----------------------------|--|------------------|----------------------------|---|----------------------|----------|--------|----|
| | | | | (a) | (b) | (c) | (d | | | |
| | | | | Check if | Number of contributions or | Noncash contribution amounts reported or | 1110411041014 | | | _ |
| | | | | applicable | | Form 990, Part VIII, line | | ution ar | mounts | 3 |
| 1 | Art - | Works of a | art | | | | | | | |
| 2 | | | treasures | | | | | | | |
| 3 | | | interests | | | | | | | |
| 4 | | | olications | | | | | | | |
| 5 | | | ousehold goods | | | | | | | |
| 6 | | | vehicles | | | | | | | |
| 7 | | | nes | | | | | | | |
| 8 | | lectual pro | | | | | | | | |
| 9 | | | olicly traded | Х | 86 | 10,096,2 | 18. FAIR MARKET VALU | JΕ | | |
| 10 | | | sely held stock | | | | | | | |
| 11 | | | tnership, LLC, or | | | | | | | |
| | trust | t interests | | | | | | | | |
| 12 | Sec | urities - Mis | scellaneous | | | | | | | |
| 13 | | | ervation contribution - | | | | | | | |
| | Hist | oric structı | ıres | | | | | | | |
| 14 | Qua | lified conse | ervation contribution - Other | | | | | | | |
| 15 | Real | l estate - R | esidential | | | | | | | |
| 16 | Real | l estate - C | ommercial | | | | | | | |
| 17 | Real | l estate - O | ther | | | | | | | |
| 18 | Coll | ectibles | | | | | | | | |
| 19 | | | , | | | | | | | |
| 20 | Drug | gs and med | dical supplies | | | | | | | |
| 21 | | | | | | | | | | |
| 22 | | | cts | | | | | | | |
| 23 | | | imens | | | | | | | |
| 24 | Arch | | artifacts | | | | | | | |
| 25 | Othe | |) | | | | | | | |
| 26 | | |) | | | | | | | |
| 27 | | er 🕨 (|) | | | | | | | |
| 28 | | er 🕨 (|) | | | | | | | |
| 29 | | | ms 8283 received by the organiz | | , | | | | | |
| | for v | vhich the c | rganization completed Form 828 | 83, Part V, D | onee Acknowledg | ement 29 | | | I., I | |
| | | | | | | | | | Yes | No |
| 30a | | | r, did the organization receive by | | | | | | | |
| | | | at least three years from the date | | | | | 00- | | Х |
| | | | ses for the entire holding period? | · | | | | 30a | | |
| | | | be the arrangement in Part II. | ooliev that so | auires the review | of any nonetandard contr | ributions? | 24 | х | |
| 31 222 | | | nization have a gift acceptance poization him or use third parties | | | | | 31 | 43 | |
| s∠a | | s tne orgar tributions? | nization hire or use third parties | | _ | | d5H | 32a | х | |
| h | | | be in Part II. | | | | | SZa | ** | |
| 33 | | • | ion didn't report an amount in c | olumn (c) for | r a type of property | for which column (a) is | checked | | | |
| 55 | | e organizat cribe in Par | | Oldifili (C) 101 | a type of property | ioi wilicii colullili (a) is i | oncoreu, | | | |
| | 4550 | IIII ai | • | | | | | | | |

SCHEDULE O

(Form 990 or 990-EZ)

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 Inspection

Department of the Treasury Internal Revenue Service 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 PROCESSS. 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). |

SCHEDULE R (Form 990)

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.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

| TRIANGLE COMMUNITY F | 56-138079 | 56-1380796 | | | | |
|---|--|---|-----------------------|--------------------|------------------------|---------------------------------------|
| Part I Identification of Disregarded Entities. Comple | te 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 | | (f) t controlling entity |
| | _ | | | | | |
| | - | | | | | |
| | | | | | | |
| Part II Identification of Related Tax-Exempt Organizations during the tax year. | ations. Complete if the organization a | answered "Yes" on Form 990, F | Part IV, line 34, bed | cause it had one | or more related tax-ex | kempt |
| (a) | (b) | (c) | (d) | (e) | (f) | (g) Section 512/b/(12) |

| (a) Name, address, and EIN of related organization | Primary activity | Legal domicile (state or foreign country) | Exempt Code section | Public charity status (if section | Direct controlling entity | contr | 9) 512(b)(13) rolled ity? |
|--|---------------------------|---|---------------------|-----------------------------------|---------------------------|-------|------------------------------------|
| | | | | 501(c)(3)) | | Yes | No |
| | TO PROVIDE A PERMANENT | | | | TRIANGLE | | |
| DURHAM ARTS COUNCIL ENDOWMENT FUND - | ENDOWMENT OF SUPPORT FOR | | | | COMMUNITY | | |
| 56-1826969, PO BOX 12729, DURHAM, NC 27709 | LOCAL ARTS ORGANIZATIONS | NORTH CAROLINA | 501(C)(3) | LINE 12A, I | FOUNDATION | х | |
| TCF REAL ESTATE FOUNDATION - 20-1398786 | RECEIVES, MANAGES, AND | | | | TRIANGLE | | |
| PO BOX 12729 | SELLS REAL ESTATE, GRANTS | | | | COMMUNITY | | |
| DURHAM, NC 27709 | TO TCF | NORTH CAROLINA | 501(C)(3) | LINE 12A, I | FOUNDATION | Х | |
| | | | | | | | |
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

| Part III | Identification of Related Organizations Taxable as a Partnership. | Complete if the organization answered | "Yes" on Form 990 | , Part IV, line 34, beca | use it had one or more | e related |
|-----------|---|---------------------------------------|-------------------|--------------------------|------------------------|-----------|
| rai i iii | organizations treated as a partnership during the tax year. | | | | | |

| (a) | (b) | (c) | (d) | (e) | (f) | (g) | (1 | h) | (i) | (j) | (k) |
|--|------------------|---|--------------------|--|----------------|-----------------------------|---------|-----------|-----------------|-----------|------------|
| Name, address, and EIN of related organization | Primary activity | Legal domicile (state or foreign | Direct controlling | Predominant income (related, unrelated, excluded from tax under sections 512-514) | Share of total | Share of end-of-year assets | Disprop | ortionata | Code V-UBI | General o | Percentage |
| | | country) | | sections 512-514) | | | Yes | No | K-1 (Form 1065) | 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) | (b) | (c) | (d) | (e) | (f) | (g) | (h) | Sec | i) ction |
|--|------------------|--|---------------------------|---|-----------------------|-----------------------------------|-------------------------|-----|-----------------------------------|
| Name, address, and EIN of related organization | Primary activity | Legal domicile (state or foreign country) | Direct controlling entity | Type of entity (C corp, S corp, or trust) | Share of total income | Share of end-of-year assets | Percentage ownership | | tion b)(13) rolled tity? |
| | | couritry) | | | | | | Yes | No |
| | | | | | | | | | |
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| Part V 7 | Transactions With Related Organizations. | Complete if the organization answered | "Yes" on Form 99 | 0, Part IV, line 34 | , 35b, or 36. |
|----------|--|---------------------------------------|------------------|---------------------|---------------|
|----------|--|---------------------------------------|------------------|---------------------|---------------|

| Not | e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | | | | Yes | No |
|------|---|---------------------|------------------------------|-----------------------------------|-------|-----|----|
| 1 | During the tax year, did the organization engage in any of the following transactions | with one or more re | lated organizations listed i | in Parts II-IV? | | | |
| а | Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | , | | | 1a | | Х |
| b | Gift, grant, or capital contribution to related organization(s) | | | | 1b | | Х |
| | Gift, grant, or capital contribution from related organization(s) | | | | 1c | | Х |
| | Loans or loan guarantees to or for related organization(s) | | | | 1d | | Х |
| | Loans or loan guarantees by related organization(s) | | | | 1e | | Х |
| | | | | | | | |
| f | Dividends from related organization(s) | | | | 1f | | Х |
| g | Sale of assets to related organization(s) | | | | 1g | | Х |
| | | | | | 1h | | Х |
| i | Exchange of assets with related organization(s) | | | | 1i | | Х |
| j | Lease of facilities, equipment, or other assets to related organization(s) | | | | 1j | | Х |
| - | • | | | | | | |
| k | Lease of facilities, equipment, or other assets from related organization(s) | | | | 1k | | Х |
| 1 | Performance of services or membership or fundraising solicitations for related organ | nization(s) | | | 11 | | Х |
| m | Performance of services or membership or fundraising solicitations by related organ | | | | 1m | | Х |
| | Sharing of facilities, equipment, mailing lists, or other assets with related organization | | | | 1n | | Х |
| | Sharing of paid employees with related organization(s) | | | | 10 | | Х |
| | | | | | | | |
| р | Reimbursement paid to related organization(s) for expenses | | | | 1p | х | |
| a | Reimbursement paid by related organization(s) for expenses | | | | 1q | | Х |
| • | , | | | | | | |
| r | Other transfer of cash or property to related organization(s) | | | | 1r | | Х |
| | Other transfer of cash or property from related organization(s) | | | | 1s | | Х |
| 2 | If the answer to any of the above is "Yes," see the instructions for information on wh | | | | | • | |
| | | (b) | (c) | (d) | | | |
| | (a) Name of related organization | Transaction | Amount involved | Method of determining amount inve | olved | | |
| | | type (a-s) | | | | | |
| | | | | | | | |
| 1) 5 | CF REAL ESTATE FOUNDATION | P | 35,000. | CASH VALUE | | | |
| - | | | | | | | |
| 2) | | | | | | | |
| - | | | | | | | |
| 3) | | | | | | | |
| | | | | | | | |

(4)

<u>(5)</u>

Page 4

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| (a) Name, address, and EIN of entity | (b) Primary activity | (c) | Are a partners 501(c) orgs | s sec.)(3) .? | (f) Share of total income | (g) Share of end-of-year assets | Dispi tion alloca | opor- nate tions? | Genera manag partne Yes N | or Percentage ownership |
|--------------------------------------|----------------------|-----|----------------------------|----------------------|------------------------------------|--|-------------------------|-------------------------|------------------------------------|-------------------------|
| | | | | | | | | | | |
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| Form | 990-T | E | exempt Organization Business Income Tax Retur | 'n | OMB No. 1545-0047 |
|------------|--|------------|---|----------|--|
| | | For oal | endar year 2020 or other tax year beginning JUL 1, 2020, and ending JUN 30, 2021 | | 2020 |
| | | 1 Of Cal | Go to www.irs.gov/Form990T for instructions and the latest information. | <u> </u> | 2020 |
| | rtment of the Treasury al Revenue Service | • | Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3 | 3). | Open to Public Inspection for 501(c)(3) Organizations Only |
| A [| Check box if address changed. | | Name of organization (| DEmp | loyer identification number |
| ВЕ | xempt under section | Print | TRIANGLE COMMUNITY FOUNDATION INC | | 56-1380796 |
| X | 501(c)(3) 408(e) 220(e) | or Type | Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 12729 | | up exemption number instructions) |
| | 408A530(a)529(a)529S | | City or town, state or province, country, and ZIP or foreign postal code DURHAM, NC 27709-2729 | F | Check box if |
| | | | ok value of all assets at end of year | | an amended return. |
| G | Check organization | type 🕨 | X 501(c) corporation 501(c) trust 401(a) trust Other trust | Applica | able reinsurance entity |
| <u>H</u> | Check if filing only to | <u> </u> | Claim credit from Form 8941 Claim a refund shown on Form 2439 | | |
| | Check if a 501(c)(3) | organiz | ation filing a consolidated return with a 501(c)(2) titleholding corporation | | > |
| | | | ed Schedules A (Form 990-T) | | 1 |
| | | | e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? d identifying number of the parent corporation. | | Yes X No |
| | The books are in car | | | 919-4 | 74-8370 |
| Pa | rt I Total Unr | elate | d Business Taxable Income | | |
| 1 | Total of unrelated | busines | s taxable income computed from all unrelated trades or businesses (see | | |
| | instructions) | | | 1 | -145,552. |
| 2 | Reserved | | | 2 | 145 550 |
| 3 | Add lines 1 and 2 | | | 3 | -145,552. |
| 4 | | • | see instructions for limitation rules) | | 0. |
| 5 | | | axable income before net operating losses. Subtract line 4 from line 3 | . 5 | -145,552. |
| 6 | | • | ng loss. See instructions | 6 | 0. |
| 7 | | | s taxable income before specific deduction and section 199A deduction. | 7 | -145,552. |
| | Subtract line 6 from | | - 1 000 kg to 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | 1,000. |
| 8 9 | • | | | 9 | 1,000. |
| 10 | Total deductions | | | 10 | 1,000. |
| 11 | | | nes 8 and 9 ble income. Subtract line 10 from line 7. If line 10 is greater than line 7, | 10 | |
| •• | enter zero | oo taxe | be medical cubication to normality in the to to greater than the r, | 11 | 0. |
| Pa | rt II Tax Com | putati | on | | <u> </u> |
| 1 | Organizations tax | cable a | s corporations. Multiply Part I, line 11 by 21% (0.21) | ▶ 1 | 0. |
| 2 | Trusts taxable at | trust ra | tes. See instructions for tax computation. Income tax on the amount on | | |
| | Part I, line 11 from | n: | Tax rate schedule or Schedule D (Form 1041) | ▶ 2 | |
| 3 | Proxy tax. See ins | structio | ns | ▶ 3 | |
| 4 | Other tax amounts | s. See ii | nstructions | 4 | |
| 5 | Alternative minimu | ım tax (| trusts only) | 5 | |
| 6 | Tax on noncompl | liant fa | cility income. See instructions | 6 | |
| 7 | Total. Add lines 3 | throug | n 6 to line 1 or 2, whichever applies | 7 | 0. |

Form **990-T** (2020)

LHA For Paperwork Reduction Act Notice, see instructions.

| orm 9 | 90-T (2 | 2020) | | | | | Pac | ie 2 |
|---|--|--|--|--|---|---|---------------------------------------|--------------|
| Part | | Tax and Payments | | | | | | , - <u>-</u> |
| 1a | | gn tax credit (corporations attach Form 1118; trusts attach Form 1116) | 1a | | | | | |
| b | | r credits (see instructions) | | | | | | |
| C | | ral business credit. Attach Form 3800 (see instructions) | | | | | | |
| d | | t for prior year minimum tax (attach Form 8801 or 8827) | | | | | | |
| е | | credits. Add lines 1a through 1d | | | 1e | | | |
| 2 | | ract line 1e from Part II, line 7 | | | 2 | | | 0. |
| 3 | Other | r taxes. Check if from: Form 4255 Form 8611 Form 8 | | orm 8866 | | | | |
| | | Other (attach statement) | | | 3 | | | |
| 4 | Total | tax. Add lines 2 and 3 (see instructions). | | | | | | |
| | sectio | on 1294. Enter tax amount here | > | | 4 | | | 0. |
| 5 | | net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line | | | 5 | | | 0. |
| 6a | Paym | nents: A 2019 overpayment credited to 2020 | 6a | | | | | |
| b | | estimated tax payments. Check if section 643(g) election applies | 6b | | | | | |
| С | Tax d | leposited with Form 8868 | 6c | | | | | |
| d | Foreig | gn organizations: Tax paid or withheld at source (see instructions) | 6d | | | | | |
| е | Backu | up withholding (see instructions) | 6e | | | | | |
| f | Credit | t for small employer health insurance premiums (attach Form 8941) | 6f | | | | | |
| g | | r credits, adjustments, and payments: Form 2439 | | | | | | |
| | | Form 4136 Other Total > | | | | | | |
| 7 | | payments. Add lines 6a through 6g | | | 7 | | | |
| 8 | | | | | 8 | | | |
| 9 | | due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed | | | 9 | | | |
| 10 | | payment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpa | aid | > | 10 | | | |
| | | | | | | | | |
| 11 Dowt | | the amount of line 10 you want: Credited to 2021 estimated tax | | Refunded > | 11 | | | |
| Part | IV S | Statements Regarding Certain Activities and Other Information | on (see instru | ctions) | 11 | 1 | 1. | |
| | At any | Statements Regarding Certain Activities and Other Information y time during the 2020 calendar year, did the organization have an interest in or a | on (see instruction (see instruction) | ctions) ther authority | 11 | Y | es N | lo_ |
| Part | At any over a | Statements Regarding Certain Activities and Other Information year, did the organization have an interest in or a safinancial account (bank, securities, or other) in a foreign country? If "Yes," the organization have an interest in or a safinancial account (bank, securities, or other) in a foreign country? If "Yes," the organization of the safinancial account (bank, securities, or other) in a foreign country? | on (see instruction (see instruction) (see instr | ctions) ther authority y have to file | 11 | Y | es N | lo_ |
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| Part | At any over a FinCE here | Statements Regarding Certain Activities and Other Information y time during the 2020 calendar year, did the organization have an interest in or a a financial account (bank, securities, or other) in a foreign country? If "Yes," the of EN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the g the tax year, did the organization receive a distribution from, or was it the grant | on (see instruction (see instruction) (see instruction of control of the form of, or transfer of, or transfer of the form of, or transfer of the form | ther authority y have to file eign country eror to, a | | | 2 | ĸ |
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Form **990-T** (2020)

Phone no. 703-336-6400

Firm's address MCLEAN, VA 22102

1

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2020

Department of the Treasury Internal Revenue Service

Co 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).

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

Schedule A (Form 990-T) 2020

| A Name of the organization TRIANGLE COMMUNITY FOUNDATION INC | | | 56-1380796 | cation number |
|--|--------|----------------------|--------------------|---------------|
| C Unrelated business activity code (see instructions) ▶ 900099 | | | D Sequence: | 1 of 1 |
| E Describe the unrelated trade or business ▶RECIPIENT OF UBTI | FROM A | LTERNATIVE INVEST | MENTS | |
| 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 (Part III, line 8) | 2 | | | |
| 3 Gross profit. Subtract line 2 from line 1c | 3 | | | |
| 4a Capital gain net income (attach Sch D (Form 1041 or Form | | | | |
| 1120)) (see instructions) | 4a | 0. | | |
| b Net gain (loss) (Form 4797) (attach Form 4797) (see instructions) | 4b | | | |
| c Capital loss deduction for trusts | 4c | | | |
| 5 Income (loss) from a partnership or an S corporation (attach | | | | |
| statement) STATEMENT 1 | 5 | -145,552. | | -145,552. |
| 6 Rent income (Part IV) | 6 | | | |
| 7 Unrelated debt-financed income (Part V) | 7 | | | |
| 8 Interest, annuities, royalties, and rents from a controlled | | | | |
| organization (Part VI) | 8 | | | |
| 9 Investment income of section 501(c)(7), (9), or (17) | | | | |
| organizations (Part VII) | | | | |
| 10 Exploited exempt activity income (Part VIII) | | | | |
| 11 Advertising income (Part IX) | | | | |
| 12 Other income (see instructions; attach statement) | | | | |
| 13 Total. Combine lines 3 through 12 | 13 | -145,552. | | -145,552. |
| Part II Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business in the connected with the connected wit | | r limitations on ded | uctions) Deduction | ns must be |
| 1 Compensation of officers, directors, and trustees (Part X) | | | 1 | |
| 2 Salaries and wages | | | 2 | |
| 3 Repairs and maintenance | | | 3 | |
| 4 Bad debts | | | 4 | |
| 5 Interest (attach statement) (see instructions) | | | 5 | |
| 6 Taxes and licenses | | | 6 | |
| 7 Depreciation (attach Form 4562) (see instructions) | | | | |
| 8 Less depreciation claimed in Part III and elsewhere on return | | 8a | 8b | |
| 9 Depletion | | | | |
| 10 Contributions to deferred compensation plans | | | 10 | |
| 11 Employee benefit programs | | | | |
| 12 Excess exempt expenses (Part VIII) | | | | |
| 13 Excess readership costs (Part IX) | | | 13 | |
| 14 Other deductions (attach statement) | | | | _ |
| - | | | | 0. |
| 16 Unrelated business income before net operating loss deduction. S column (C) | | • | | -145,552. |
| 17 Deduction for net operating loss (see instructions) | | | 17 | 0. |
| 18 Unrelated business taxable income. Subtract line 17 from line | | | | -145,552. |

LHA For Paperwork Reduction Act Notice, see instructions.

| Sched | ule A (Form 990-T) 2020 | | | | Page 2 |
|--------|---|--------------------------|----------------------------|---------------|----------|
| Part | | nod of inventory valuat | ion | | |
| 1 | Inventory at beginning of year | | | 1 | |
| 2 | Purchases | | | 2 | |
| 3 | Cost of labor | | | 3 | |
| 4 | Additional section 263A costs (attach statement) | | | 4 | |
| 5 | Other costs (attach statement) | | | | |
| 6 | Total. Add lines 1 through 5 | | | 6 | |
| 7 | Inventory at end of year | | | 7 | |
| 8 | Cost of goods sold. Subtract line 7 from line 6. Enter h | nere and in Part I, line | 2 | 8 | |
| 9 | Do the rules of section 263A (with respect to property p | | | | Yes No |
| Part | | | _ | | |
| 1 | Description of property (property street address, city, st | tate, ZIP code). Check | if a dual-use (see instri | uctions) | |
| | A | | | | |
| | B | | | | |
| | <u> </u> | | | | |
| | D | | | • | |
| • | Deat was in ad an assumed | Α | В | С | D |
| 2 | Rent received or accrued | | | | |
| а | 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 | | | | |
| b | percentage of rent for personal property exceeds | | | | |
| | 50% or if the rent is based on profit or income) | | | | |
| С | Total rents received or accrued by property. | | | | |
| Ū | Add lines 2a and 2b, columns A through D | | | | |
| | | | | <u> </u> | |
| 3 | Total rents received or accrued. Add line 2c columns A | through D. Enter here | and on Part I, line 6, c | olumn (A) | 0. |
| | Deductions directly connected with the income | | | | |
| 4 | in lines 2(a) and 2(b) (attach statement) | | | | |
| | | | | | |
| 5 | Total deductions. Add line 4 columns A through D. En | ter here and on Part I, | line 6, column (B) | > | 0. |
| Part | V Unrelated Debt-Financed Income (se | ee instructions) | | | |
| 1 | Description of debt-financed property (street address, of | ity, state, ZIP code). C | check if a dual-use (see | instructions) | |
| | A 🔛 | | | | |
| | В | | | | |
| | c | | | | |
| | D | | | | |
| | | Α | В | С | D |
| 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 statement) | | | | |
| b | Other deductions (attach statement) | | | | |
| С | Total deductions (add lines 3a and 3b, | | | | |
| | columns A through D) | | | | |
| 4 | Amount of average acquisition debt on or allocable | | | | |
| _ | to debt-financed property (attach statement) | | | | |
| 5 | Average adjusted basis of or allocable to debt- | | | | |
| 6 | financed property (attach statement) | | % | % | 0/ |
| 6 7 | Divide line 4 by line 5 Gross income reportable. Multiply line 2 by line 6 | <u> %</u> | 90 | <u>%</u> | <u>%</u> |
| 8 | Total gross income (add line 7, columns A through D). | Enter here and on Da | rt Lline 7 column (A) | | 0. |
| O | iotal gross moonie (add line 1, columns A through D). | Line nere and on Pa | ren, mile 7, column (A) | / | |
| 9 | Allocable deductions. Multiply line 3c by line 6 | | | | |
| 10 | Total allocable deductions. Add line 9, columns A thr | ough D. Enter here and | d on Part I, line 7, colur | mn (B) | 0. |
| 11 | Total dividends-received deductions included in line | | | | 0. |

| _ | |
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| Pag | e |
| | |

| | ule A (Form 990-T) 2020 | | | | | | | | | | Page 3 |
|------------|--|---------------|----------------------|------------------------|----------------|----------|-------------------------|-----------|-----------------------------------|--------|---|
| Part | VI Interest, Annu | uities, Ro | oyalties, and Re | ents fron | n Control | led Or | ganizations | see (see | instruct | ions) | |
| | | | | | | E | xempt Contro | lled Orga | nization | s | |
| | 1. Name of controlle | d | 2. Employer | 3. Net | unrelated | 4. Tota | al of specified | | of colur | | 6. Deductions directly |
| | organization | | identification | incon | ne (loss) | payn | ments made | | that is included controlling orga | | connected with |
| | | | number | (see ins | structions) | | | | ross inc | | income in column 5 |
| (1) | | | | | | | | | | | |
| (2) | | | | | | | | | | | |
| (3) | | | | | | | | | | | |
| (4) | | | | | | | | | | | |
| | | | No | | Controlled O | | ions | | | | |
| 7 | . Taxable Income | | Net unrelated | | otal of specif | | 10. Part of | | | | Deductions directly |
| | | 1 | icome (loss) | pa | yments mad | е | controlling | | | | connected with |
| | | (see | e instructions) | | | | | income | | inc | come in column 10 |
| <u>(1)</u> | | | | | | | | | | | |
| (2) | | | | | | | | | | | |
| (3) | | | | | | | | | | | |
| (4) | | | | | | | . | | | | |
| | | | | | | | Add colum Enter here | | | | I columns 6 and 11. er here and on Part I, |
| | | | | | | | 1 | olumn (A | , | | ine 8, column (B) |
| Totals | | | | | | _ | | | 0. | | 0. |
| Part | VII Investment | Income | of a Section 50 | 1(c)(7). (| 9). or (17) | Organ | nization (s | ee instru | | | |
| | | cription of | | -(-/(-/ / / | 2. Amou | | 3. Deduction | | 4. Set- | asides | 5. Total deductions |
| | | • | | | incon | | directly conne | | attach st | | |
| | | | | | | | (attach stater | ment) | | | (add cols 3 and 4) |
| (1) | | | | | | | | | | | |
| (2) | | | | | | | | | | | |
| (3) | | | | | | | | | | | |
| (4) | | | | | | | | | | | |
| | | | | | Add amou | | | | | | Add amounts in column 5. Enter |
| | | | | | here and o | | | | | | here and on Part I, |
| | | | | | line 9, colu | | | | | | line 9, column (B) |
| Totals | VIII | | | <u></u> | <u> </u> | 0. | _ | | | | 0. |
| Part | | | activity Income, | Otner 1 | nan Adve | ertising | g income (| see instr | uctions) | Т | |
| 1 | Description of exploite | • | | | | | | (*) | | | |
| 2 | Gross unrelated busin | | | | | , | • | . , | | 2 | |
| 3 | Expenses directly con | | | | | | | , | | | |
| | line 10, column (B) | | | | | | | | | 3 | |
| 4 | Net income (loss) from | | | | | | • . | | | 4 | |
| 5 | lines 5 through 7 Gross income from ac | tivity that i | e not unrelated busi | noce incor | no | | | | | 5 | |
| 6 | Expenses attributable | | | | | | | | | 6 | |
| 7 | Excess exempt expen | | | | | | | | | | |
| • | 4. Enter here and on F | | | | | | | | | 7 | |
| | = und Off f | , | | | | | | | | | |

Schedule A (Form 990-T) 2020

| Part | IX Advertising Income | | | | | |
|------------|--|--------------------------|---------------|--------------------|-----------------|--------------------|
| 1 | Name(s) of periodical(s). Check box if reporting | na two or more perio | dicals on a c | onsolidated basis. | | |
| | A () | | | | | |
| | В 🗆 | | | | | |
| | | | | | | |
| | c | | | | | |
| | D | | | | | |
| Enter | amounts for each periodical listed above in the | corresponding colur | nn. | | | |
| | | | Α | В | С | D |
| 2 | Gross advertising income | | | | | |
| | Add columns A through D. Enter here and on | Part I, line 11, colur | nn (A) | | > | 0. |
| а | | | | | | |
| 3 | Direct advertising costs by periodical | | | | | |
| а | Add columns A through D. Enter here and on | | nn (B) | | | 0. |
| - | rida oblamno / timoagn D. Enter nore and on | ir arei, iiro iri, oolar | (2) | | | |
| 4 | Advertising gain (loss). Subtract line 3 from lin | 20 | | | | |
| 7 | | | | | | |
| | 2. For any column in line 4 showing a gain, | | | | | |
| | complete lines 5 through 8. For any column in | I | | | | |
| | line 4 showing a loss or zero, do not complet | I | | | | |
| | lines 5 through 7, and enter zero on line 8 \dots | | | | | |
| 5 | Readership costs | | | | | |
| 6 | Circulation income | | | | | |
| 7 | Excess readership costs. If line 6 is less than | | | | | |
| | line 5, subtract line 6 from line 5. If line 5 is le | ss | | | | |
| | than line 6, enter zero | | | | | |
| 8 | Excess readership costs allowed as a | | | | | |
| | deduction. For each column showing a gain of | on | | | | |
| | line 4, enter the lesser of line 4 or line 7 | I | | | | |
| а | Add line 8, columns A through D. Enter the g | | columns tota | l or zero here and | on | |
| а | - | | | | _ | 0. |
| Part | X Compensation of Officers, Di | | | - :t | | |
| ı art | X Compensation of Officers, Di | cotors, and me | istees (se | e instructions) | • | 4.0 |
| | | | | | 3. Percentage | 4. Compensation |
| | 1. Name | | 2. Title | | of time devoted | attributable to |
| | | | | | to business | unrelated business |
| <u>(1)</u> | | | | | % | |
| (2) | | | | | % | |
| (3) | | | | | % | |
| (4) | | | | | % | |
| | | | | | | |
| Total | LEnter here and on Part II, line 1 | | | | | 0. |
| Part | | ee instructions) | | | , | |
| | 11 | | | | | |
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| FORM 990-T (A) | INCOME (LOSS) FROM F | PARTNERSHIPS STATEMENT 1 |
|---|--|-----------------------------------|
| DESCRIPTION | | NET INCOME OR (LOSS) |
| AETHER REAL ASSETS III | L.P ORDINARY BUSI | |
| (LOSS) BLUE HERON REAL ESTATE | OPPORTUNITY - ORDINAR | -9 RY BUSINESS |
| INCOME (LOSS) DENHAM COMMODITY PARTNI | RS FUND VI LP - ORDIN | -24,73 NARY BUSINESS |
| INCOME (LOSS) | | 7,68 |
| GEM REALTY FUND V, L.P. MONTAUK TRIGUARD FUND V | | |
| (LOSS) | | 21,44 |
| PERENNIAL REAL ESTATE I | 'UND II, LP - ORDINARY | BUSINESS |
| INCOME (LOSS) | | -9,08 |
| STEPSTONE PIONEER CAPIT | AL III LP - ORDINARY | |
| INCOME (LOSS) | | -5,17 |
| TIFF PRIVATE EQUITY PAR | TNERS 2009, LLC - ORD | |
| INCOME (LOSS) | | 23,89 |
| JUNIPER CAPITAL III, L | P ORDINARY BUSINES | |
| (LOSS) | | -159,81 -20 VII (1.000) |
| AT ONE VENTURES, L.P. | ORDINARY BUSINESS IN | ICOME (LOSS) |
| TOTAL INCLUDED ON SCHEI | OULE A, PART I, LINE 5 | -145,55 |
| | | |
| FORM 990-T DESCRIPT SCHEDULE A | TION OF ORGANIZATION'S BUSINESS ACTIVI | |

RECIPIENT OF UBTI FROM ALTERNATIVE INVESTMENTS

TO FORM 990-T, SCHEDULE A, LINE E

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0123

Name

Employer identification number

| TRIANGLE COMMUNITY FOUNDATION INC | | | | 56-1380796 | | |
|---|---|--|---|------------|---|--|
| Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? | | | | | Yes X No | |
| If "Yes," attach Form 8949 and see its instruc | | | r gain or loss. | | | |
| Part I Short-Term Capital Gai | ns and Losses - Ass | ets 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 | instructions for how to figure the amounts (d) (e) (g) Adjustments to gain or loss from Form(s) 8949, | | | | | |
| round off cents to whole dollars. | (sales price) | (or other basis) | Part I, line 2, column | (g) | 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 | | | | | 196. | |
| 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 | | | | 5 | | |
| 6 Unused capital loss carryover (attach computa | | | | 6 | () | |
| 7 Net short-term capital gain or (loss). Combine | e lines 1a through 6 in column | h | | 7 | 196. | |
| Part II Long-Term Capital Gain | ns and Losses - Asse | ets Held More Tha | n 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 ga or loss from Form(s) 89 Part II, line 2, column | 49, | (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 | | | | | | |
| 9 Totals for all transactions reported on | | | | | | |
| Form(s) 8949 with Box E checked | | | | | | |
| 10 Totals for all transactions reported on | | | | | 10.040 | |
| Form(s) 8949 with Box F checked | | | | | -10,048. | |
| | | | | 11 | | |
| 12 Long-term capital gain from installment sales | | | | 12 | | |
| 13 Long-term capital gain or (loss) from like-kind | · · | | | 13 | | |
| 14 Capital gain distributions | 14 | 10.040 | | | | |
| 15 Net long-term capital gain or (loss). Combine Part III Summary of Parts I and | | 1 N | | 15 | -10,048. | |
| | | Lloss (line 15) | | 16 | | |
| 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)117 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)1 | | | | | | |
| | | | | | 0. | |
| Note: If losses exceed gains, see Capital Los | | The second secon | | 18 | | |

LHA

Form **8949**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information.
File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2020

Attachment 120

Attachment Sequence No. 12A

Social security number or

TRIANGLE COMMUNITY FOUNDATION INC

taxpayer identification no.

56-1380796

| Before you check Box A, B, or C below statement will have the same information. | atión as Form 109 | you received any 99-B. Either will s | v Form(s) 1099-B c show whether you | r substitute statem r basis (usually you | ent(s) fron r cost) was | n your broker. A su s reported to the IF | bstitute 'S by your |
|---|-----------------------------------|--|---|--|----------------------------|--|--|
| broker and may even tell you which be Part I Short-Term. Transact | | al acceta valu hald | 1 ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | acrally object torm (occ | inatruation | a) Farlang tarm | |
| transactions, see page 2. Note: You may aggregate all | short-term transac | tions reported on I | Form(s) 1099-B show | ing basis was reporte | d to the IRS | and for which no ad | |
| codes are required. Enter the You must check Box A, B, or C below. | | | • • | | | · · · · · · · · · · · · · · · · · · · | |
| If you have more short-term transactions than wil | I fit on this page for on | e or more of the boxes | s, complete as many forn | ns with the same box che | cked as you n | eed. | caon applicable box. |
| (A) Short-term transactions rep | • | - | - | • | Note ab | ove) | |
| (B) Short-term transactions rep | oorted on Form(s | s) 1099-B showin | g basis wasn't re | ported to the IRS | | | |
| X (C) Short-term transactions no | t reported to you | on Form 1099-l | 3 | | | | |
| 1 (a) Description of property (Example: 100 sh. XYZ Co.) | (b) Date acquired (Mo., day, yr.) | (c) Date sold or disposed of (Mo., day, yr.) | (d) Proceeds (sales price) | (e) Cost or other basis. See the Note below and see Column (e) in the instructions | loss. If you | nt, if any, to gain or ou enter an amount (g), enter a code in). See instructions. (g) Amount of adjustment | (h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g) |
| AETHER REAL ASSETS III, | | | | | | | |
| L.P. | | | | | | | 1. |
| PERENNIAL REAL ESTATE FUND | | | | | | | |
| II, LP | | | | | | | 195. |
| , | | | | | | | |
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| | | | | | | | |
| 2 Totals. Add the amounts in colur | nns (d), (e), (g), a | nd (h) (subtract | | | | | |
| negative amounts). Enter each to | | | | | | | |
| Schedule D, line 1b (if Box A abo | | , | | | | | |
| above is checked), or line 3 (if B | | ` | | | | | 196. |

Note: If you checked Box A 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.

Form 8949 (2020) Attachment Sequence No. 12A Page

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 generally long-term (see instructions). 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.

(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 X (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or 1 (a) (b) (c) (d) (e) (h) loss. If you enter an amount Proceeds Cost or other Gain or (loss). Description of property Date sold or Date acquired in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. from column (d) & Note below and (Mo., day, yr.) see *Column (*e) ir combine the result Amount of Code(s) with column (g) the instructions adjustment

AETHER REAL ASSETS III L.P. 1,888. DENHAM COMMODITY PARTNERS FUND VT LP <21.244.> MONTAUK TRIGUARD FUND VI LE 5,364. PERENNIAL REAL ESTATE FUND II, LP 8,060. STEPSTONE PIONEER CAPITAL III LP <2.449.> TIFF PRIVATE EQUITY PARTNERS 2009, LLC 161. <1,828.> JUNIPER CAPITAL III, L.P.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶

<10,048.>

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.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0123

Name

Employer identification number

| TRIANGLE COMMUNITY FOUNDATION INC | | | | 56-1380796 | | |
|---|---|--|---|------------|---|--|
| Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? | | | | | Yes X No | |
| If "Yes," attach Form 8949 and see its instruc | | | r gain or loss. | | | |
| Part I Short-Term Capital Gai | ns and Losses - Ass | ets 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 | instructions for how to figure the amounts (d) (e) (g) Adjustments to gain or loss from Form(s) 8949, | | | | | |
| round off cents to whole dollars. | (sales price) | (or other basis) | Part I, line 2, column | (g) | 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 | | | | | 196. | |
| 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 | | | | 5 | | |
| 6 Unused capital loss carryover (attach computa | | | | 6 | () | |
| 7 Net short-term capital gain or (loss). Combine | e lines 1a through 6 in column | h | | 7 | 196. | |
| Part II Long-Term Capital Gain | ns and Losses - Asse | ets Held More Tha | n 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 ga or loss from Form(s) 89 Part II, line 2, column | 49, | (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 | | | | | | |
| 9 Totals for all transactions reported on | | | | | | |
| Form(s) 8949 with Box E checked | | | | | | |
| 10 Totals for all transactions reported on | | | | | 10.040 | |
| Form(s) 8949 with Box F checked | | | | | -10,048. | |
| | | | | 11 | | |
| 12 Long-term capital gain from installment sales | | | | 12 | | |
| 13 Long-term capital gain or (loss) from like-kind | · · | | | 13 | | |
| 14 Capital gain distributions | 14 | 10.040 | | | | |
| 15 Net long-term capital gain or (loss). Combine Part III Summary of Parts I and | | 1 N | | 15 | -10,048. | |
| | | Lloss (line 15) | | 16 | | |
| 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)117 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)1 | | | | | | |
| | | | | | 0. | |
| Note: If losses exceed gains, see Capital Los | | The second secon | | 18 | | |

LHA

Form **8949**

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information.
File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

2020

Attachment 120

Attachment Sequence No. 12A

Social security number or

TRIANGLE COMMUNITY FOUNDATION INC

taxpayer identification no.

56-1380796

| Before you check Box A, B, or C below statement will have the same information. | atión as Form 109 | you received any 99-B. Either will s | v Form(s) 1099-B c show whether you | r substitute statem r basis (usually you | ent(s) fron r cost) was | n your broker. A su s reported to the IF | bstitute 'S by your |
|---|-----------------------------------|--|---|--|----------------------------|--|--|
| broker and may even tell you which be Part I Short-Term. Transact | | al acceta valu hald | 1 ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | acrally object torm (occ | inatruation | a) Farlang tarm | |
| transactions, see page 2. Note: You may aggregate all | short-term transac | tions reported on I | Form(s) 1099-B show | ing basis was reporte | d to the IRS | and for which no ad | |
| codes are required. Enter the You must check Box A, B, or C below. | | | • • | | | · · · · · · · · · · · · · · · · · · · | |
| If you have more short-term transactions than wil | I fit on this page for on | e or more of the boxes | s, complete as many forn | ns with the same box che | cked as you n | eed. | caon applicable box. |
| (A) Short-term transactions rep | • | - | - | • | Note ab | ove) | |
| (B) Short-term transactions rep | oorted on Form(s | s) 1099-B showin | g basis wasn't re | ported to the IRS | | | |
| X (C) Short-term transactions no | t reported to you | on Form 1099-l | 3 | | | | |
| 1 (a) Description of property (Example: 100 sh. XYZ Co.) | (b) Date acquired (Mo., day, yr.) | (c) Date sold or disposed of (Mo., day, yr.) | (d) Proceeds (sales price) | (e) Cost or other basis. See the Note below and see Column (e) in the instructions | loss. If you | nt, if any, to gain or ou enter an amount (g), enter a code in). See instructions. (g) Amount of adjustment | (h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g) |
| AETHER REAL ASSETS III, | | | | | | | |
| L.P. | | | | | | | 1. |
| PERENNIAL REAL ESTATE FUND | | | | | | | |
| II, LP | | | | | | | 195. |
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| 2 Totals. Add the amounts in colur | nns (d), (e), (g), a | nd (h) (subtract | | | | | |
| negative amounts). Enter each to | | | | | | | |
| Schedule D, line 1b (if Box A abo | | , | | | | | |
| above is checked), or line 3 (if B | | ` | | | | | 196. |

Note: If you checked Box A 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.

Form 8949 (2020) Attachment Sequence No. 12A Page

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 generally long-term (see instructions). 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.

(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 X (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or 1 (a) (b) (c) (d) (e) (h) loss. If you enter an amount Proceeds Cost or other Gain or (loss). Description of property Date sold or Date acquired in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. from column (d) & Note below and (Mo., day, yr.) see *Column (*e) ir combine the result Amount of Code(s) with column (g) the instructions adjustment

AETHER REAL ASSETS III L.P. 1,888. DENHAM COMMODITY PARTNERS FUND VT LP <21.244.> MONTAUK TRIGUARD FUND VI LE 5,364. PERENNIAL REAL ESTATE FUND II, LP 8,060. STEPSTONE PIONEER CAPITAL III LP <2.449.> TIFF PRIVATE EQUITY PARTNERS 2009, LLC 161. <1,828.> JUNIPER CAPITAL III, L.P.

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶

<10,048.>

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.