

**Return of Private Foundation**  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

OMB No 1545-0052

**2009**

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year **2009**, or tax year beginning **09/01**, 2009, and ending **08/31**, 2010G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return  
☐ Amended return ☒ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation		A Employer identification number
	TW K B REYNOLDS CHARITABLE TRUST BOND AC		56-6036515
	Number and street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number (see page 10 of the instructions)
	1525 W W.T. HARRIS BLVD. D1114-044		(336) 747-8161
City or town, state, and ZIP code		C If exemption application is pending, check here <input type="checkbox"/>	
CHARLOTTE, NC 28288		D 1 Foreign organizations, check here <input type="checkbox"/>	
		2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 473,988,283.		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual	
		<input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)				
2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B. . . . .				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities . . . . .	10,674,151.	10,444,527.		STMT 1
5a	Gross rents . . . . .				
b	Net rental income or (loss) . . . . .				
6a	Net gain or (loss) from sale of assets not on line 10	-11,944,283.			
b	Gross sales price for all assets on line 6a 138,294,425.				
7	Capital gain net income (from Part IV, line 2) . . . . .				
8	Net short-term capital gain . . . . .				
9	Income modifications . . . . .				
10a	Gross sales less returns and allowances . . . . .				
b	Less Cost of goods sold . . . . .				
c	Gross profit or (loss) (attach schedule) . . . . .				
11	Other income (attach schedule) . . . . .	2,106,412.	-282,820.		STMT 2
12	Total. Add lines 1 through 11 . . . . .	836,280.	10,161,707.		
13	Compensation of officers, directors, trustees, etc. . . . .	1,925,014.	1,925,014.		
14	Other employee salaries and wages . . . . .	1,609,567.	NONE	NONE	1,609,567.
15	Pension plans, employee benefits . . . . .	132,936.	NONE	NONE	132,936.
16a	Legal fees (attach schedule) . . . . .				
b	Accounting fees (attach schedule) STMT 3	29,775.	29,775.	NONE	NONE
c	Other professional fees (attach schedule) STMT 4	7,150.	7,150.		
17	Interest . . . . .				
18	Taxes (attach schedule) (see page 14 of the instructions) STMT 5	553,293.	149,506.		
19	Depreciation (attach schedule) and depletion . . . . .	3,994.	3,994.		
20	Occupancy . . . . .				
21	Travel, conferences, and meetings . . . . .				
22	Printing and publications . . . . .				
23	Other expenses (attach schedule) STMT 6	888,075.	18,614.		789,461.
24	Total operating and administrative expenses Add lines 13 through 23 . . . . .	5,149,804.	2,134,053.	NONE	2,531,964.
25	Contributions, gifts, grants paid . . . . .	18,477,576.			18,477,576.
26	Total expenses and disbursements Add lines 24 and 25 . . . . .	23,627,380.	2,134,053.	NONE	21,009,540.
27	Subtract line 26 from line 12 . . . . .	-22,791,100.			
a	Excess of revenue over expenses and disbursements . . . . .				
b	Net investment income (if negative, enter -0-) . . . . .		8,027,654.		
c	Adjusted net income (if negative, enter -0-) . . . . .				

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a SEE PART IV DETAIL</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2 Capital gain net income or (net capital loss)</b> . . . . .		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	<b>2</b>	-11,944,283.
<b>3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):</b>			<b>3</b>	
If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)				
If (loss), enter -0- in Part I, line 8. . . . .				

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? . . . . ☐ Yes ☒ No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	29,629,563.	428,245,780.	0.06918821944
2007	28,075,100.	603,803,637.	0.04649707004
2006	25,797,738.	605,343,284.	0.04261670804
2005	22,974,999.	562,620,077.	0.04083572546
2004	27,270,900.	519,089,544.	0.05253602257
<b>2 Total of line 1, column (d)</b> . . . . .			<b>2</b> 0.25167374555
<b>3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years</b> . . . . .			<b>3</b> 0.05033474911
<b>4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5</b> . . . . .			<b>4</b> 478,502,993.
<b>5 Multiply line 4 by line 3</b> . . . . .			<b>5</b> 24,085,328.
<b>6 Enter 1% of net investment income (1% of Part I, line 27b)</b> . . . . .			<b>6</b> 80,277.
<b>7 Add lines 5 and 6</b> . . . . .			<b>7</b> 24,165,605.
<b>8 Enter qualifying distributions from Part XII, line 4</b> . . . . .			<b>8</b> 21,009,540.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions) . . . . .	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? . . . . .	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? . . . . .	13	X	
Website address <u>N/A</u>				
14	The books are in care of <u>SEE STATEMENT 9</u> Telephone no <u></u>			
Located at <u></u> ZIP + 4 <u></u>				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year . . . . .	15		

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . . .	1b	X
Organizations relying on a current notice regarding disaster assistance check here <u></u>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009? . . . . .	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If "Yes," list the years <u></u>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 20 of the instructions) . . . . .	2b	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u></u>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.) . . . . .	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? . . . . .	4b	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)****5a** During the year did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☐ Yes ☒ No(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? ☐ **5b**Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **6b** X

If "Yes" to 6b, file Form 8870.

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ **7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		1,925,014.	-0-	-0-

**2** Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 11		893,964.	NONE	NONE

**Total** number of other employees paid over \$50,000 ☐ 5

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services** (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		NONE

Total number of others receiving over \$50,000 for professional services . . . . . NONE

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1 SEE ATTACHED	
	242,722.
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3 . . . . .	

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	483,396,582.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	2,393,259.
<b>c</b>	Fair market value of all other assets (see page 24 of the instructions)	<b>1c</b>	NONE
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	485,789,841.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	NONE
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	485,789,841.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions)	<b>4</b>	7,286,848.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	478,502,993.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	23,925,150.

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	23,925,150.
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5	<b>2a</b>	160,553.
<b>b</b>	Income tax for 2009. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	160,553.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	23,764,597.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	77,703.
<b>5</b>	Add lines 3 and 4	<b>5</b>	23,842,300.
<b>6</b>	Deduction from distributable amount (see page 25 of the instructions)	<b>6</b>	NONE
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	23,842,300.

**Part XII Qualifying Distributions** (see page 25 of the instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	<b>1a</b>	21,009,540.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	NONE
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	NONE
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	NONE
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	21,009,540.
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	<b>5</b>	N/A
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	21,009,540.

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9) **NOT APPLICABLE**

~~1. If the foundation has received a ruling or determination letter that it is a private operating~~

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

<div>Recipient</div> <div>Name and address (home or business)</div>	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>  SEE STATEMENT 14				
<b>Total</b> . . . . .			▶ <b>3a</b>	<b>18,477,576.</b>
<b>b Approved for future payment</b>  SEE STATEMENT 14				
<b>Total</b> . . . . .			▶ <b>3b</b>	<b>8,444,895.</b>

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**Enter gross amounts unless otherwise indicated.**

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See page 29 of the instructions )

11

11



**FORM 990-PF - PART IV**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS					1,197,006.	
3250000.00		74099.408 DREYFUS/THE BOSTON CO S/C - I PROPERTY TYPE: SECURITIES 3976915.00					08/01/2008 -726915.00	09/18/2009
3000000.00		158311.346 DREYFUS/THE BOSTON CA S/C - I PROPERTY TYPE: SECURITIES 3957784.00					03/15/2007 -957784.00	09/18/2009
2250000.00		56760.847 STRATTON SM-CAP VALUE FD #37 PROPERTY TYPE: SECURITIES 2659813.00					08/01/2008 -409813.00	09/18/2009
2284981900		1737628.836 BRIDGEWAY AGGRESSIVE INVESTO PROPERTY TYPE: SECURITIES 2735270800					10/17/2008 -450288900	01/08/2010
3751222.00		346373.268 ARTIO INTERNATIONAL EQ FD 3# PROPERTY TYPE: SECURITIES 4250000.00					09/18/2009 -498778.00	02/10/2010
1991750500		1839104.793 ARTIO INTERNATIONAL EQ FD 3# PROPERTY TYPE: SECURITIES 2780700100					12/27/2006 -788949600	02/10/2010
1187516900		279810.758 DREYFUS/THE BOSTON CO S/C - I PROPERTY TYPE: SECURITIES 1044125200					02/09/2009 1433917.00	02/10/2010
460,000.00		4528.005 DODGE & COX STK FD PROPERTY TYPE: SECURITIES 679,422.00					12/28/2007 -219422.00	03/16/2010
540,000.00		5315.484 DODGE & COX STK FD PROPERTY TYPE: SECURITIES 740,075.00					12/28/2007 -200075.00	03/16/2010
3144970400		2398909.501 DODGE & COX INCOME FD COM PROPERTY TYPE: SECURITIES 3052600600					02/09/2007 923,698.00	04/15/2010

**FORM 990-PF - PART IV**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
2975400000		2850000. VANGUARD BD INDEX FD INC TOTAL PROPERTY TYPE: SECURITIES 2850000000					03/13/2009 1254000.00	04/15/2010
3000000.00		154878.678 PERKINS MID CAP VALUE F/C I # PROPERTY TYPE: SECURITIES 3351334.00					02/09/2007 -351334.00	07/16/2010
1500000.00		69832.402 GOLDMAN SACHS GROWTH OPPORTUN PROPERTY TYPE: SECURITIES 1469274.00					01/08/2010 30,726.00	08/05/2010
1500000.00		74000.987 PERKINS MID CAP VALUE F/C I #1 PROPERTY TYPE: SECURITIES 1600009.00					12/19/2006 -100009.00	08/05/2010
1500000.00		16447.368 DODGE & COX STK FD PROPERTY TYPE: SECURITIES 2289967.00					12/28/2007 -789967.00	08/19/2010
500,000.00		15984.655 ROWE T PRICE BLUE CHIP GROWTH PROPERTY TYPE: SECURITIES 637,148.00					07/06/2007 -137148.00	08/19/2010
TOTAL GAIN(LOSS) .....							----- -11944283. =====	



Form 990 PF  
Part I Line 19  
Column (a)

Kate B. Reynolds  
Tax Year Ended  
8-31-2010

56-6036515

	Acquired	Method of Depreciation	Life of Property	Cost Basis	Allowed in Prior Years	Depreciation Cost to Be Recovered	Depreciation for this Year
Desk-1	02/90	SL	12 Years	542.85			
Exec. Chair	02/90	SL	12 Years	334.95			
Bookcase	03/90	SL	12 Years	262.50			
2 Side Chairs	04/90	SL	12 Years	560.70			
2 Love Seats	08/90	SL	12 Years	1938.30			
23 Chairs	08/90	SL	12 Years	9003.75		00	00
8 Tables	08/90	SL	12 Years	4461.87		00	00
2 Desks	08/90	SL	12 Years	2094.12		00	00
Credenza	08/90	SL	12 Years	844.20		00	00
Sec. Station	08/90	SL	12 Years	1220.94		00	00
1 lateral File	08/90	SL	12 Years	488.88		00	00
3 Bookcases	08/90	SL	12 Years	1889.16		00	
Window Treatment	08/90	SL	12 Years	3369.49			
Copier Machine	07/90	SL	12 Years	3990.00			
2 Pictures	11/90	SL	12 Years	168.00			
1 Sofa Table	11/90	SL	12 Years	295.00			
Teal Lamp	11/91	SL	12 Years	153.70			
Mirror	11/91	SL	12 Years	75.00			
Refrigerator	09/91	SL	12 Years	434.57			
Microwave Oven	09/91	SL	12 Years	201.37			
2 Chairs	08/91	SL	12 Years	468.06			
2 Bowling Tables	08/91	SL	12 Years	370.71			
Pedestal Desk	09/91	SL	12 Years	1029.42			
Window	08/91	SL	12 Years	182.32			

Form 990 PF  
Part I Line 19  
Column (a)

Kate B. Reynolds  
Tax Year Ended  
08/31/2010

56-6036515

	Acquired	Method of Depreciation	Life of Property	Cost Basis	Allowed in Prior Years	Depreciation Cost to Be Recovered	Depreciation for this Year
<del>Folding Table</del>	<del>10/91</del>	<del>SL</del>	<del>12 Years</del>	<del>61.48</del>			
<del>Answering Machine</del>	<del>19/91</del>	<del>SL</del>	<del>12 Years</del>	<del>137.80</del>			
<del>2 Dictaphones</del>	<del>19/91</del>	<del>SL</del>	<del>12 Years</del>	<del>1481.88</del>			
<del>1 Fronscriber</del>	<del>19/91</del>	<del>SL</del>	<del>12 Years</del>	<del>740.94</del>			
Chair-Parsley	02/93	SL	12 Years	485.27	485.27	00	00
Calculator	07/92	SL	12 Years	52.95	52.95	00	00
Bookcase	02/93	SL	12 Years	158.38	158.38	00	00
Shredder	06/93	SL	12 Years	1372.70	1372.70	00	00
Portrait-Picture	05/93	SL	12 Years	7150.00	7150.00	00	00
Calculator	21/92	SL	12 Years	52.95	52.95	00	00
Lateral File	07/92	SL	12 Years	583.00	583.00	00	00
Open File Shelving	04/94	SL	12 Years	1035.20	1035.20	00	00
Boardroom Boyles	05/94	SL	12 Years	7457.10	7457.10	00	00
Boardroom Tables	02/94	SL	12 Years	7141.10	7141.10	00	00
Visual Board w/Screen	08/94	SL	12 Years	965.13	965.13	00	00
G.E. Refrigerator	05/94	SL	12 Years	238.50	238.50	00	00
Office Furniture	06/94	SL	12 Years	4894.84	4894.84	00	00
Folding Table	06/94	SL	12 Years	138.67	138.67	00	00
Terminal Stand	06/94	SL	12 Years	115.54	115.54	00	00
Myrtle Desk	06/94	SL	12 Years	1372.70	1372.70	00	00
9 Various Pictures	06/94	SL	12 Years	1591.60	1591.60	00	00
Computer Software							
& Modems	05/94	SL	12 Years	37226.46	37226.46	00	00
Overhead Projector	11/94	SL	12 Years	316.94	316.94	00	00

Form 990 PF  
Part I Line 19  
Column (a)

Kate B. Reynolds  
Tax Year Ended  
08/31/2010

56-6036515

	Acquired	Method of Depreciation	Life of Property	Cost Basis	Allowed in Prior Years	Depreciation Cost to Be Recovered	Depreciation for this Year
Partner Telephone							
System & Phone	08/98	SL	12 Years	6298.52	5773.67	524.85	524.85
15" Color Monitor	08/98	SL	12 Years	158.99	145.75	13.24	13.24
1 Step Stool	09/98	SL	12 Years	47.69	43.72	3.97	3.97
1 Computer Keyboard	02/98	SL	12 Years	31.78	29.15	2.63	2.63
Digital Answering							
Machine	04/98	SL	12 Years	42.39	38.86	3.53	3.53
3 Steel Shelving Units	05/98	SL	12 Years	878.53	805.32	73.21	73.21
Portrait of							
Kate B. Reynolds	05/98	SL	12 Years	15000.00	13750.00	1250.00	1250.00
Portrait of							
Will Reynolds	05/98	SL	12 Years	15000.00	13750.00	1250.00	1250.00
Lumina Chevrolets	11/98	SL	12 Years	20000.00	20000.00	0	0
Lumina Chevrolets	12/98	SL	12 Years	20000.00	20000.00	0	0
Computer Support Unit	12/98	SL	12 Years	356.21	326.53	29.68	29.68
Miller Executive Chair	12/98	SL	12 Years	421.88	386.75	35.13	35.13
Table Lamp	01/99	SL	12 Years	40.26	36.95	3.31	3.31
3 brass Lamps	12/99	SL	12 Years	158.21	145.03	13.18	13.18
17" Monitor	06/99	SL	12 Years	222.57	204.04	18.53	18.53
Adaptec SCSI							
Card & Cable	07/99	SL	12 Years	103.98	95.36	8.62	8.62
Wang Dat Internal Drive	07/99	SL	12 Years	307.25	281.65	25.60	25.60
Norton Anti-Virus							



Form 990 PF  
Part I Line 19  
Column (a)

Kate B. Reynolds  
Tax Year Ended  
08/31/2010

56-6036515

	Acquired	Method of Depreciation	Life of Property	Cost Basis	Depreciation Allowed in Prior Years	Cost to Be Recovered	Depreciation for this Year
AV Cart w/Outlets	11/94	SL	12 Years	210.94	210.94	0	0
Sharp Compel							
Calculator	04/95	SL	12 Years	115.54	115.54	0	0
Hand Painted							
Secretary & Chair	05/95	SL	12 Years	2500.00	2500.00	0	0
Triad TV							
& Appliance	02/95	SL	12 Years	100.70	100.70	0	0
NC State Map	01/95	SL	12 Years	50.00	50.00	0	0
Computer Software	07/95	SL	12 Years	324.47	324.47	0	0
Pocket Dictaphone	07/95	SL	12 Years	383.19	383.19	0	0
Fax Machine	11/95	SL	12 Years	2040.50	2040.50	0	0
Television	11/95	SL	12 Years	264.98	264.98	0	0
VCR	11/95	SL	12 Years	264.97	264.97	0	0
Dishwasher	11/95	SL	12 Years	423.97	423.97	0	0
File Cabinet	11/95	SL	12 Years	713.01	713.01	0	0
Packard Bell							
Computer							
Monitor & Upgrades	10/96	SL	12 Years	4427.27	4427.27	0	0
15" Color Monitor	08/98	SL	12 Years	158.99	145.75	13.24	13.24
72" Bookcase	09/98	SL	12 Years	529.38	485.31	44.07	44.07
Computer Table	09/98	SL	12 Years	356.21	326.49	29.72	29.72
Desk Library Table	10/98	SL	12 Years	493.50	452.42	41.08	41.08
4 Drawer Lateral File	10/98	SL	12 Years	1484.00	1360.36	123.64	123.64
52" Bookcase	10/98	SL	12 Years	265.00	242.89	22.11	22.11

## FORM 990PF, PART I - OTHER INCOME

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
INC FROM TIMBERLAND	1,874,151.	1,874,151.
NET PTNSHIP'S		-2,156,971.
RETURNED PRIOR GRANT	77,703.	
IRS EXCISE REFUND	154,558.	
	-----	-----
TOTALS	2,106,412.	-282,820.
	=====	=====

# Kate B. Reynolds Charitable Trust

Health Care Division Refunds for FY 10

8/31/2010

Stmt 2

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Type	Status
<b>Prior Year Refund</b>						
East Carolina University School of Medicine	non-migrant agricultural workers	2008155	6/29/2010	-\$14,017.00	Prior Year Refund	Refund
ECU School of Nursing	School-based case management program	2006203	3/18/2010	-\$485.00	Prior Year Refund	Refund
Rowan County Health Department	Healthy Carolinians Partnership, Round 2	2007185	8/6/2010	-\$478.00	Prior Year Refund	Refund
Rowan County Health Department	Healthy Carolinians Partnership, Round 2	2007185	11/23/2009	-\$223.00	Prior Year Refund	Refund
Western Carolina University	Center for Higher Nursing Education	2007039	2/10/2010	-\$49,758.00	Prior Year Refund	Refund
Total Prior Year Refund (5 items)				-\$64,961.00		
<b>Grand Totals (5 items)</b>				-\$64,961.00		

UNC - Chapel Hill 2008 Grant Evaluation 10/21/2009  
 UNC - Chapel Hill UNC Shepherd Center 10/20/2008

- 8173.76 prior year refund  
 - 4568.31 prior year refund

\$ 77,703.00

Stmt 2

Tax Form 990PF (COL B ONLY)

Tax Year 8/31/2010

Trust EIN 56-6036515

Partnership EIN 55-2223144

Page 1; Line 11: Other Income

From Hedged Equities, Super Accredited, L.P. Partnership K-1

Ordinary business income	(25,006)
Interest income	24,590
Ordinary dividends	153,276
Qualified dividends	2,593
Royalties	191
Net short-term capital gain(loss)	(134,542)
Net long-term capital gain(loss)	(1,506,071)
Net section 1231 gain(loss)	4,300
Net section 1250 gain(loss)	2
Net Section 1256 gain(loss)	(110,401)
Net section 988 gain(loss)	7,048
Total Other Income	(1,584,020)

Page 1; Line 23: Other Expenses

Miscellaneous Portfolio Deduction	(479,842)
Investment interest expense	(169,066)
50/30 % cash charitable to organization	(13)

Total Other Expenses	(648,921)
----------------------	-----------

## FORM 990PF, PART I - ACCOUNTING FEES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
AUDIT & ACCOUNTING FEES (ALLOC	29,775.	29,775.		
	-----	-----	-----	-----
TOTALS	29,775.	29,775.	NONE	NONE
	=====	=====	=====	=====

## FORM 990PF, PART I - OTHER PROFESSIONAL FEES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
INVESTMENT MGMT FEES-SUBJECT T	7,150.	7,150.
	-----	-----
TOTALS	7,150.	7,150.
	=====	=====

## FORM 990PF, PART I - TAXES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----
990PF EST	403,787.	
FOREIGN TAX W/HELD	149,506.	149,506.
	-----	-----
TOTALS	553,293.	149,506.
	=====	=====

## FORM 990PF, PART I - OTHER EXPENSES

=====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	CHARITABLE PURPOSES -----
533 SUMMIT ST. EXP	11,464.	11,464.	
LEGAL FEES	29,775.		29,775.
TIMBERLAND FEES	7,150.	7,150.	
CASH/DISBT REPORT	516,964.		516,964.
990T ESTIMATES PD	80,000.		
DIRECT ACTIVITIES	242,722.		242,722.
	-----	-----	-----
TOTALS	888,075.	18,614.	789,461.
	=====	=====	=====



part 1, Line 23; Other Expenses

Sheet 6

Honoraria	8,400
Meetings	3,400
Travel	1,221
Other	3,782
Audit/accounting fees	5,447
Consultant fees and expenses	30,605
Dues/memberships	46,897
Entertainment	2,152
Equipment and furnishings	51,292
Equipment maintenance	29,516
Housekeeping services	15,690
Insurance	11,521
Miscellaneous	3,397
Office supplies	15,510
Postage	3,040
Printing/copying	317
Professional services:	
Administrative expenses	16,759
Annual report	11,285
Newsletters	5,339
Other media support	2,892
Other printing/copying/photo	24
Public relations	4,800
Rent	105,680
Sponsored meetings	6,663
Staff development and travel	106,069
Subscriptions	1,625
Telephone services	24,961
Website/Internet (net)	( 1,320 )
Total cash disbursements	516,964.00

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES  
=====DESCRIPTION  
-----AMOUNT  
-----

PARTNERSHIP RECORD KEEPING CHANGE BOOK T  
ADJ FOR CHANGE OF RECORD KEEPING FROM BO  
CASH TRANSFERS

8,499,416.

3,357,723.

2,537,380.

TOTAL

14,394,519.  
=====

-----  
STATE(S) WHERE THE FOUNDATION IS REGISTERED  
=====

NC

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF

=====

NAME: WELLS FARGO BANK

ADDRESS: 1 WEST 4TH STREET 2ND FLOOR  
WINSTON-SALEM, NC 27101

TELEPHONE NUMBER: (336)747-8161

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES  
=====

OFFICER NAME:

Wells Fargo Bank

ADDRESS:

1525 WEST W.T. HARRIS BLVD.

CHARLOTTE, NC 28288-5709

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40

COMPENSATION ..... 1,925,014.

TOTAL COMPENSATION:

1,925,014.

=====

## 2010 EXECUTIVE ADVISORY COUNCIL

CHRISTOPHER W. SPAUGH *Senior Vice President, Senior Trust Team Manager, Philanthropic Services, Wells Fargo Wealth Management*  
T. RAY MCKINNEY *Retired Executive*  
LAURA CARPENTER BINGHAM *Retired, Peace College President*  
DAVID L. COTTERILL *Retired Executive*  
H. VERNON WINTERS *Retired Executive*  
KAREN MCNEIL-MILLER *President, Kate B. Reynolds Charitable Trust*  
SANDRA T. SHELL *Senior Vice President, Chief Operating Officer, Philanthropic Services, Wells Fargo Private Bank*  
JON S. ABRAMSON, M.D. *Chair, Department of Pediatrics, Wake Forest University School of Medicine*  
ROBERT S. KNIEJSKI *Retired Executive*  
SUE HENDERSON *Senior Vice President and Regional Managing Director, Wells Fargo Wealth Management, The Private Bank*

H. KING MCGLAUGHON, JR. *Senior Vice President, Chief Philanthropic Officer, Philanthropic Services, Wells Fargo Private Bank*

## 2010 HEALTH CARE DIVISION ADVISORY BOARD

A. RAY ROGERS *District Director to Representative G.K. Butterfield*  
WILLIAM "BILL" A. PULLY *President, N.C. Hospital Association, Inc.*  
THOMAS J. BACON *Director, North Carolina Area Health Education Centers*  
LISA C. BELL *District Court Judge, 26th Judicial District*  
MOSES CAREY, JR. *Secretary, N.C. Department of Administration*  
BECKY OLSON *Executive Director, Good Samaritan Clinic of Jackson County*  
EUGENE W. COCHRANE *President, The Duke Endowment*  
MATTHEW A. JOHNSON *Senior Vice President, Senior Wealth Management Director, Wells Fargo Private Bank*  
SANDRA T. SHELL *Senior Vice President, Chief Operating Officer, Philanthropic Services, Wells Fargo Private Bank*  
RAMON VELEZ, M.D., MSC *Professor of Medicine, Medical Center of Bowman Gray School of Medicine and N.C. Baptist Hospital*  
ROBERT W. SELIGSON *Executive Vice President, North Carolina Medical Society, Inc.*  
JANELLE A. RHYNE, M.D. *Medical Director, Cape Fear HealthNet*  
CHRISTOPHER W. SPAUGH *Senior Vice President, Senior Trust Team Manager, Philanthropic Services, Wells Fargo Wealth Management*

## 2010 POOR AND NEEDY DIVISION ADVISORY BOARD

RONALD J. DRAGO *President and CEO, United Way of Forsyth County, Inc.*  
SANDRA T. SHELL *Senior Vice President, Chief Operating Officer, Philanthropic Services, Wells Fargo Private Bank*  
SCOTT F. WIERMAN *President, The Winston-Salem Foundation*  
FERMIN BOCANEGRA *Senior Pastor, Iglesia Cristiana Wesleyana Church*  
JOE H. RAYMOND *Director, Forsyth County Department of Social Services*  
JANET P. WHEELER *Retired Executive*  
MICHAEL L. JOYCE *Senior Vice President, Senior Investment Manager, Wells Fargo Private Bank*  
CHRISTOPHER W. SPAUGH *Senior Vice President, Senior Trust Team Manager, Philanthropic Services, Wells Fargo Wealth Management*

BROOKE BURR Leonard, Ryden, and Burr Real Estate

## 990PF, PART VIII - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

## EMPLOYEE NAME:

KAREN MCNEIL-MILLER

## ADDRESS:

128 REYNOLDA VILLAGE

WINSTON-SALEM, NC

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40

COMPENSATION ..... 418,732.

## EMPLOYEE NAME:

JOHN FRANK

## ADDRESS:

128 REYNOLDA VILLAGE

WINSTON-SALEM, NC

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40

COMPENSATION ..... 110,540.

## EMPLOYEE NAME:

JOEL T. BEESON

## ADDRESS:

128 REYNOLDA VILLAGE

WINSTON-SALEM, NC

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40

COMPENSATION ..... 107,856.

## EMPLOYEE NAME:

SUSAN RICHARDSON

## ADDRESS:

128 REYNOLDA VILLAGE

WINSTON-SALEM, NC

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 40

COMPENSATION ..... 102,336.

990PF, PART VIII - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

=====

EMPLOYEE NAME:

ALLEN J SMART

ADDRESS:

128 REYNOLDA VILLAGE

WINSTON-SALEM, NC

COMPENSATION ..... 154,500.

TOTAL COMPENSATION: 893,964.

=====



- TW K B REYNOLDS CHARITABLE TRUST BOND AC  
FORM 990PF, PART XV - LINES 2a - 2d  
=====

56-6036515

RECIPIENT NAME:

SEE STATEMENT

FORM, INFORMATION AND MATERIALS:

SEE ATTACHED STATEMENT FOR LINE 2

SUBMISSION DEADLINES:

SEE ATTACHED SCHEDULE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

25% of net income is to benefit the poor & needy of forsyth  
county and 75% of net income to benefit health care for charity

STATEMENT 13

RECIPIENT NAME:  
Health Care; Poor & Needy Division  
SEE ATTACHED SCHEDULE  
ADDRESS:  
WINSTON-SALEM N C  
WINSTON-SALEM, NC 27104  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTIONS  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITIES  
AMOUNT OF GRANT PAID ..... 18,477,576.

TOTAL GRANTS PAID: 18,477,576.  
=====

RECIPIENT NAME:  
SEE ATTACHED SCHEDULE  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
CHARITABLE CONTRIBUTIONS  
FOUNDATION STATUS OF RECIPIENT:  
PUBLIC CHARITY  
AMOUNT APPROVED FOR FUTURE PAYMENT: ..... 8,444,895.

TOTAL GRANTS APPROVED FOR FUTURE PAYMENT: 8,444,895.  
=====

# Kate B. Reynolds Charitable Trust

Health Care Division Gross Payments Made in FY 2010

8/31/2010

Stmt 14  
part XV 3(a)

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
Albemarle Hospital Authority	Case management services at free clinics	2009062	5/15/2010	\$52,800.00	Paid
Albemarle Regional Health Services	Healthy Carolinians Partnerships, Round 2	2008047	2/12/2010	\$10,000.00	Paid
Albemarle Regional Health Services	Healthy Carolinians Partnership, Round II	2008291	8/18/2010	\$10,000.00	Paid
Albemarle Regional Health Services	Healthy Carolinians Partnership, Round II	2008293	8/18/2010	\$10,000.00	Paid
Albert Schweitzer Fellowship of America		2008357	8/5/2010	\$60,000.00	Paid
Alexander Children's Center	Multidimensional Treatment Foster Care	2009096	3/15/2010	\$55,000.00	Paid
Alexander County Health Department	Healthy Carolinians Round II	2009100	5/15/2010	\$10,000.00	Paid
All Souls Counseling Center	expand mental health counseling services	2009074	3/15/2010	\$39,690.00	Paid
All Souls Counseling Center	operating funds in honor of Anna (Candy) Shivers service as a member of the Kate B Reynolds Trust Health Care Advisory Board	2010034	1/15/2010	\$25,000.00	Paid
Alliance Medical Ministry, Inc.	Primary care for low-income	2007166	9/15/2009	\$49,261.00	Paid
Alliance Medical Ministry, Inc.	Increased Access to Health Care for Uninsured Working Families of Wake County	2010001	1/28/2010	\$55,000.00	Paid
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	8/12/2010	\$169,613.00	Paid
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	2/12/2010	\$169,614.00	Paid
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	5/15/2010	\$105,500.00	Paid
Ashe County Free Medical Clinic, Inc.	services for uninsured adults	2008065	1/28/2010	\$51,246.00	Paid
BAART Community HealthCare	SMART - Screening, Motivation And Recovery Treatment	2010044	7/30/2010	\$132,897.00	Paid

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
Bakersville Community Medical Clinic, Inc.	Bakersville Clinic Substance Abuse Screening and Treatment Initiative	2010045	7/15/2010	\$44,000.00	Paid
Black Women's Health Network	Nutrition and fitness classes to African American women and children	2009217	7/15/2010	\$55,000 00	Paid
Bladen County Free Clinic	care for uninsured individuals	2008139	2/12/2010	\$19,988.00	Paid
Bladen County Hospital	Healthy Carolinians Partnerships, Round 2	2008109	2/12/2010	\$10,000.00	Paid
Blue Ridge Community Health Services, Inc.	operating funds to expand the number of school based health centers	2009065	4/15/2010	\$55,000.00	Paid
Boys and Girls Club of the Piedmont	Healthy Lifestyles program	2008331	1/15/2010	\$22,000.00	Paid
Buncombe County Health Center	Nurse Family Partnership	2009250	9/15/2009	\$30,000.00	Paid
Caldwell Memorial Hospital	Diabetes Program EMR	2008268	10/15/2009	\$11,264.00	Paid
Caldwell Memorial Hospital	Diabetes Program EMR	2008268	8/5/2010	\$9,276.00	Paid
Cape Fear Health Net	Increasing Access to Medical Homes for the Low-Income Uninsured in Brunswick and New Hanover Counties	2010003	1/15/2010	\$124,300.00	Paid
Care Ring	Nurse Family Partnership	2008354	1/28/2010	\$81,769.00	Paid
Care Ring	Bridge funding for comprehensive health care for the uninsured	2009094	3/15/2010	\$82,500 00	Paid
Care Ring	Nurse Family Partnership	2008354	8/12/2010	\$81,770.00	Paid
Care Share Health Alliance	Care Share Health Alliance	2010025	1/28/2010	\$100,000.00	Paid
Carolinas-Anson Healthcare, Inc.	operating funds for a diabetes prevention program	2008319	8/12/2010	\$38,777.00	Paid
Catawba Valley Community College	Operating funds for a diabetes management program	2008326	12/15/2009	\$124,398.00	Paid
Catawba Valley Medical Center	childhood obesity prevention	2008340	12/15/2009	\$128,700.00	Paid
Catholic Social Services of the Diocese of Charlotte Western Regional Office	mental health counseling services for Latinos	2009106	3/15/2010	\$52,246.00	Paid
Center for Health and Healing, Inc.	FRIENDS Academy	2010004	1/15/2010	\$55,000.00	Paid

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
CenterPoint Human Services	Total Care: 21st Century Medical and MH/SA Integration in the Peidmont	2010048	7/15/2010	\$124,576.00	Paid
Charlotte Community Health Clinic, Inc.	expand clinic services	2009095	3/15/2010	\$66,000.00	Paid
Children's Advocacy Center of Catawba County, Inc.	Operating funds for children's mental health services	2008335	12/15/2009	\$22,440.00	Paid
Christians United Outreach Center	Operating funds for a medication assistance program	2008337	8/12/2010	\$10,399.00	Paid
Clay County Health Department	Healthy Carolinians Partnership, Round 2	2007071	3/15/2010	\$10,000.00	Paid
Cleveland County Health Department	Nutrition therapy	2007105	8/25/2010	\$54,697.00	Paid
Cleveland County Health Department	Nurse Family Partnership	2008355	12/15/2009	\$122,654.00	Paid
Cleveland County Health Department	Nurse Family Partnership	2008355	8/18/2010	\$204,424.00	Paid
Coastal Horizons Center, Inc.	Latino mental health service expansion	2009050	2/12/2010	\$105,600.00	Paid
Coastal Horizons Center, Inc.	"Horizons Co-location Project"	2010049	7/15/2010	\$137,500.00	Paid
Columbus County Health Department	Colposcopy clinic	2007101	10/15/2009	\$43,000 00	Paid
Columbus Regional Healthcare System	Healthy Carolinians Partnerships, Round 2	2008086	4/15/2010	\$10,000 00	Paid
Community Clinic of Rutherford County	operating funds to support a medical provider position to expand primary care services to serve low-income individuals in Rutherford County	2009225	8/5/2010	\$66,000.00	Paid
Community Clinic of Rutherford County	CCRC providing MH/SA	2010050	7/15/2010	\$137,500.00	Paid
Community Enrichment Organization	lay health advisor program to reduce HIV/AIDS	2008296	10/15/2009	\$55,000.00	Paid
Community Enrichment Organization	lay health advisor program to reduce HIV/AIDS	2008296	8/12/2010	\$110,000.00	Paid
Community Enrichment Organization	lay health advisor program to reduce HIV/AIDS	2008296	1/15/2010	\$55,000.00	Paid
Community Foundation of Western North Carolina	capacity building	2009063	3/15/2010	\$75,000.00	Paid
Council on Aging of Buncombe County, Inc.	Project Continuum Care	2007203	1/15/2010	\$58,293.00	Paid

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
Craven Regional Medical Center Foundation	diabetic patients	2008082	2/12/2010	\$120,296.00	Paid
Crossroads Behavioral Healthcare	mental health services to at-risk youth	2008117	3/15/2010	\$55,000.00	Paid
Crossroads Behavioral Healthcare	Reclaiming Futures-HCD Portion	2009115	12/15/2009	\$45,000.00	Paid
Cumberland County CommuniCare	Reclaiming Futures-HCD Portion	2009112	12/15/2009	\$45,000.00	Paid
Cumberland County Hospital System, Inc.	"Follow Our Footsteps" program	2007059	2/12/2010	\$67,878.00	Paid
Dare County Health Department	Substance Abuse Treatment and Medical Home Project	2010052	7/30/2010	\$126,250.00	Paid
Davidson Medical Ministries Clinic, Inc.	Grant in honor of John Frank's service to Kate B. Reynolds Charitable Trust	2010040	3/15/2010	\$25,000.00	Paid
Down East Partnership for Children	Enhanced nutrition and physical activity for 2-4 year olds	2009061	4/15/2010	\$55,000.00	Paid
Duke University	prevention and treatment program targeting breast cancer	2008316	8/18/2010	\$85,602.00	Paid
Duke University	nurse-administered phone intervention for diabetics	2008315	8/18/2010	\$97,260.00	Paid
Duke University	NAF Initiative	2008365	3/15/2010	\$21,143.00	Paid
Duke University	NAF Initiative	2008366	3/15/2010	\$33,333.00	Paid
Duke University	Healthy Mom/Happy Baby	2010054	7/30/2010	\$73,017.00	Paid
Durham County Health Department	Healthy Carolinians Partnerships, Round 2	2008046	6/15/2010	\$6,000.00	Paid
East Carolina University	mental health services	2008307	8/12/2010	\$96,419.00	Paid
East Carolina University School of Medicine	kidney disease treatment	2008317	8/12/2010	\$107,294.00	Paid
East Carolina University School of Medicine	Lay health advisor training and support	2009076	4/15/2010	\$110,000.00	Paid
East Carolina University School of Medicine	Clinical Health Psychologist Internship	2009186	8/12/2010	\$154,000.00	Paid
ECU School of Nursing	nurse case management program	2008304	7/30/2010	\$92,870.00	Paid
El Centro Hispano	stroke education and prevention effort targeting low-income and uninsured Latinos	2008297	8/18/2010	\$173,012.00	Paid
El Futuro, Inc.	Durham mental health service expansion	2009082	3/15/2010	\$195,037.00	Paid

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
Elderhaus, Inc.	PACE Clinical Positions	2010006	1/15/2010	\$155,100.00	Paid
Family Violence Prevention Center, Inc.	mental health and substance abuse	2008251	8/12/2010	\$77,000.00	Paid
FirstHealth of the Carolinas, Inc.	Healthy Living Program	2007048	8/5/2010	\$217,284 00	Paid
Franklin County Volunteers in Medicine Clinic	Access to care for uninsured persons	2007163	9/15/2009	\$30,000.00	Paid
Free Clinic of Reidsville and Vicinity, Inc	Operating funds to increase access to care for low-income individuals in Rockingham County	2008311	8/12/2010	\$29,752.00	Paid
Freedom House Recovery Center, Inc.	Freedom House Diabetes Self-Management Program	2010008	1/15/2010	\$107,800.00	Paid
Gaston County Health Department	Integrated Mental Health/Substance Abuse services at the Highlands Health Center	2010056	8/5/2010	\$137,500.00	Paid
Graham Children's Health Services of Toe River, Inc.	Healthy Carolinians Partnership, Round II	2008271	8/5/2010	\$10,000.00	Paid
Graham County Health Department	Healthy Carolinians Partnerships, Round 2	2008042	10/15/2009	\$10,000.00	Paid
Graham County Health Department	diabetes self-management education program	2010009	1/15/2010	\$28,248 00	Paid
Greene County Health Department	Healthy Carolinians Partnerships, Round 2	2008057	2/12/2010	\$10,000.00	Paid
Guilford Adult Health	Guilford Child Health And Healthserve Community Health Clinic--Substance Abuse Prevention And Treatment In A Primary Care Medical Home, Transitioning From Adolescent Care To Adult Care	2010058	7/30/2010	\$137,500.00	Paid
Guilford County Department of Public Health	Healthy Carolinians Partnerships, Round 2	2008040	3/15/2010	\$10,000.00	Paid
Halifax Community College	Prevent and reduce dental disease in elementary age children	2007032	10/15/2009	\$23,930 00	Paid
Halifax County Health Department	Healthy Carolinians Partnerships, Round 2	2008050	3/15/2010	\$10,000.00	Paid
Helping Hands Health Clinic	expand free clinic services	2009104	6/15/2010	\$55,000.00	Paid
Henderson County Free Medical Clinic, Inc.	Community Pharmacy	2008265	8/5/2010	\$77,000.00	Paid
Housing for New Hope, Inc.	For a Community Support Team	2007037	2/12/2010	\$40,000 00	Paid

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
Indian Health Care Inc	free clinic operating	2008276	8/5/2010	\$22,000.00	Paid
Iredell County Health Department	Healthy Carolinians Partnerships, Round 2	2008137	8/12/2010	\$10,000.00	Paid
Jackson County Department of Public Health	Healthy Carolinians Partnership, Round 2	2007054	9/1/2009	\$10,000.00	Paid
Jackson County Department of Public Health	establish a case management position	2009069	8/5/2010	\$56,904.00	Paid
Jackson County Department of Public Health	Jackson County Diabetes Care Clinic	2010016	1/28/2010	\$82,500.00	Paid
Johnston County Mental Health Center	Johnston County Mental Health/Public Health Integrated Care Project	2010060	8/12/2010	\$137,500.00	Paid
Johnston Memorial Hospital	Project Access	2008138	3/15/2010	\$58,116.00	Paid
Jones County Health Department	Healthy Carolinians Round II	2009073	3/15/2010	\$10,000.00	Paid
Lake Area Counseling, Inc.	Building Infrastructure and Skill Development Center.	2010081	7/15/2010	\$5,500.00	Paid
Land of Waterfalls Partnership	Healthy Carolinians Partnerships, Round 2	2008125	5/15/2010	\$10,000.00	Paid
Lee County Health Department	Healthy Carolinians Partnership	2009043	1/15/2010	\$10,000.00	Paid
Lincoln County Health Department	Healthy Carolinians Round II	2009102	3/15/2010	\$10,000.00	Paid
Macon County Public Health Center	diabetes self-management education program	2010010	1/19/2010	\$38,592.00	Paid
Madison County Health Department	Healthy Carolinians Partnerships, Round 2	2008103	2/12/2010	\$10,000.00	Paid
Martin-Tyrrell-Washington District Health Department	Healthy Carolinians Partnerships, Round 2	2008059	3/15/2010	\$10,000.00	Paid
Martin-Tyrrell-Washington District Health Department	primary care expansion	2009182	8/12/2010	\$88,000.00	Paid
MDC, Inc.	The Benefit Bank of North Carolina	2010011	1/28/2010	\$55,000.00	Paid
MDC, Inc.	The Benefit Bank of North Carolina	2010011	7/30/2010	\$55,000.00	Paid
Mental Health Association in Orange County	Reclaiming Futures-HCD Portion	2009114	12/15/2009	\$45,000.00	Paid
Mental Health Fund, Inc.	Supervised Crisis Observation Unit	2009107	5/15/2010	\$172,029.00	Paid
Mission Hospitals, Inc.	Breast cancer screenings, education, and treatment	2007079	11/15/2009	\$39,756.00	Paid



Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
Mount Olive College	Fitness by Design	2008093	7/30/2010	\$96,423.00	Paid
Mountain Area Health Education Center, Inc.	healthcare demonstration project	2008260	8/18/2010	\$129,186.00	Paid
Mountain Youth Resources, Inc.	Operating funds to support a licensed therapist position to provide counseling to low-income youth in a seven-county area in Western North Carolina	2009240	8/5/2010	\$41,250.00	Paid
NC Association of School-Based/School-Linked Health Care Centers	school-linked health centers	2008147	2/12/2010	\$90,487.00	Paid
NC DHHS Division of Public Health	HIV prevention program	2008164	12/15/2009	\$498,267.00	Paid
NC Institute of Medicine	North Carolina Prevention Task Force	2008061	3/15/2010	\$35,845.00	Paid
NC Institute of Medicine	Healthy North Carolina 2020	2010017	1/15/2010	\$70,986.00	Paid
North Carolina Community Health Center Association	Diabetes Education Program	2008281	7/30/2010	\$86,476.00	Paid
North Carolina Community Health Center Association	Support for new FQHC sites	2010033	1/28/2010	\$100,000.00	Paid
North Carolina Community Health Center Association	Support for new FQHC sites	2010033	8/5/2010	\$200,000.00	Paid
North Carolina Foundation for Advanced Health Programs, Inc.	Integrated substance abuse care and screening in primary care offices	2009088	2/12/2010	\$126,500.00	Paid
Northampton County Health Department	Healthy Carolinians Partnerships, Round 2	2008049	3/15/2010	\$10,000.00	Paid
Onslow Community Ministries, Inc.	Caring Community Clinic Dental Service Expansion	2009052	2/12/2010	\$25,280.00	Paid
Onslow County Hospital Authority	stroke prevention	2008282	7/15/2010	\$69,087.00	Paid
Opportunities Industrialization Center, Inc.	"Welcome Home":Primary Care Access for Rocky Mount's Most Needy	2010019	1/15/2010	\$110,000.00	Paid
Orange County Health Department	Healthy Carolinians Partnerships, Round 2	2008091	3/15/2010	\$10,000.00	Paid
Pender County Health Department	Healthy Carolinians Partnerships, Round 2	2008126	3/15/2010	\$10,000.00	Paid
Pender County Health Department	migrant health program	2009051	3/15/2010	\$82,500.00	Paid
Person County Health Department	Healthy Carolinians Partnership, Round II	2008292	8/12/2010	\$10,000.00	Paid

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
Piedmont Area MH/MR/SA Services	facility based crisis center in Union County	2009220	10/15/2009	\$220,000.00	Paid
Piedmont Health Services, Inc.	Diabetes Self-Management Education Program in Burlington and Siler City	2010020	1/15/2010	\$80,465.00	Paid
Pitt County Health Department	Nurse Family Partnership	2009120	2/12/2010	\$89,000.00	Paid
Pitt County Health Department	Nurse Family Partnership	2009120	8/18/2010	\$83,336.00	Paid
Portland State University	Reclaiming Futures-HCD portion	2008350	1/28/2010	\$279,804.00	Paid
Prevent Child Abuse North Carolina, Inc.	Nurse Family Partnership Evaluation	2008359	7/15/2010	\$50,000.00	Paid
Public Health Authority of Cabarrus County	Healthy Lives, Healthy Futures program	2008036	3/15/2010	\$172,548.00	Paid
Public Health Authority of Cabarrus County	Diabetes Patient Self-Management Program	2010021	1/19/2010	\$99,000.00	Paid
Public Private Ventures	Reclaiming Futures-HCD portion	2008351	4/15/2010	\$22,292.00	Paid
Raleigh Rescue Mission Incorporated	Mental health services	2009030	7/15/2010	\$143,000.00	Paid
Research Foundation of the City University of New York	Reclaiming Futures-HCD portion	2008351	6/15/2010	\$55,534.00	Paid
Roanoke Chowan Community Health Center	diabetes education	2008075	3/15/2010	\$60,822.00	Paid
Robeson County Department of Public Health	Nurse Family Partnership	2008353	12/15/2009	\$107,636.00	Paid
Robeson County Department of Public Health	Nurse Family Partnership	2008353	8/18/2010	\$198,849.00	Paid
Rowan County Youth Services Bureau	Reclaiming Futures-HCD Portion	2009111	5/15/2010	\$45,000.00	Paid
Rural Health Group, Inc.	Behavioral Health & Substance Abuse Integration in Primary Care	2010065	7/30/2010	\$137,500.00	Paid
Rutherford-Polk-McDowell District Health Department	Healthy Carolinians Partnerships, Round 2	2008043	2/12/2010	\$10,000.00	Paid
Sampson County Health Department	Diabetes clinic	2007172	2/12/2010	\$79,742.00	Paid
Scotland Community Health Clinic, Inc.	free clinic support	2009049	3/15/2010	\$71,180.00	Paid
Scotland County Health Department	Healthy Carolinians Partnership	2009044	3/15/2010	\$10,000.00	Paid
Southeastern Regional Medical Center	Healthy Carolinians Partnership, Round II	2008280	7/30/2010	\$10,000.00	Paid
SouthLight, Inc.	Linking Substance Abuse Treatment to Primary HealthCare The SBIRT Initiative	2010066	7/15/2010	\$123,435.00	Paid

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
St. Luke's Hospital	Healthy Carolinians Partnerships, Round 2	2008044	2/12/2010	\$10,000.00	Paid
Stanly County Health Department	Healthy Carolinians Partnership, Round II	2008323	10/15/2009	\$10,000.00	Paid
Stanly County Health Department	Healthy Carolinians Partnership, Round II	2008323	8/12/2010	\$10,000.00	Paid
Surry County Health Department	Healthy Carolinians Partnership, Round II	2008322	8/12/2010	\$10,000.00	Paid
Swain County Health Department	Healthy Carolinians Partnership, Round II	2008270	8/5/2010	\$10,000.00	Paid
The Community Care Clinic of Rowan County, Inc.	medical care	2008119	12/15/2009	\$74,656.00	Paid
The Food Bank of Central and Eastern NC	Grant in honor of Bob Greczyn's service to Kate B. Reynolds Charitable Trust	2010039	3/15/2010	\$25,000.00	Paid
The Free Clinic Of Transylvania County Inc	Primary Care Clinic Expansion	2010022	1/15/2010	\$55,000.00	Paid
The North Carolina Public Health Foundation	Statewide Diabetes Education Program	2008253	7/15/2010	\$82,500.00	Paid
The North Carolina Public Health Foundation	NC Center for Performance Excellence	2009027	4/15/2010	\$275,000.00	Paid
Toe River Health District	New Beginnings-A Diabetes Self Management Program	2010023	3/15/2010	\$92,959.00	Paid
Tri-County Community Health Council, Inc.	pharmacy services	2008120	3/15/2010	\$82,500.00	Paid
Tri-County Health Resource Center	free clinic	2008073	5/15/2010	\$22,000.00	Paid
UNC School of Medicine	Horizons at Alamance County HD	2007213	1/15/2010	\$90,000.00	Paid
UNC School of Medicine	Cervical Cancer Screening	2008328	10/15/2009	\$91,818.00	Paid
UNC School of Public Health	Breastfeeding-friendly Star Approach	2009103	5/15/2010	\$180,654.00	Paid
Union County Health Department	nutrition and exercise	2008132	8/12/2010	\$50,952.00	Paid
University of North Carolina at Greensboro	Reclaiming Futures-HCD Portion	2009113	12/15/2009	\$45,000.00	Paid
University of North Carolina at Wilmington	QENO	2009199	8/25/2010	\$88,000.00	Paid
Wake Forest University Health Sciences	Reclaiming Futures-HCD portion	2008352	11/15/2009	\$41,033.00	Paid
Wake Forest University Health Sciences	improve health of obese children	2009098	5/15/2010	\$188,364.00	Paid
Wake Health Services, Inc	ADA Recognition	2010014	1/15/2010	\$55,000.00	Paid
Watauga Medical Center, Inc.	Healthy Carolinians Partnership, Round 2	2007144	12/15/2009	\$10,000.00	Paid

<b>Payee Name</b>	<b>Request Project Title</b>	<b>Request ID</b>	<b>Schedule Date</b>	<b>Amount</b>	<b>Status</b>
Wayne Community College	Expand an ADN program	2007020	10/15/2009	\$33,265.00	Paid
West Caldwell Health Council, Inc.	mental health and nutrition education	2008150	8/5/2010	\$56,694.00	Paid
Wilkes County Health Department	Substance Abuse/Health Care Connection	2010088	8/5/2010	\$137,500.00	Paid
Wilmington Health Access for Teens, Inc.	new SBHC	2008274	7/30/2010	\$121,579.00	Paid
Wilmington Health Access for Teens, Inc.	WHAT's Screening, Brief Intervention & Referral into Treatment (SBIRT) Enhancement Program	2010073	7/15/2010	\$82,500.00	Paid
Yadkin County Health Department	operating funds for new dental clinic	2008324	3/15/2010	\$83,600.00	Paid
Young Women's Christian Association of the Greater Triangle, Inc.	Health and Wellness Outreach Project	2007142	8/12/2010	\$75,000.00	Paid
YWCA of Greensboro, Inc.	infant mortality	2008113	3/15/2010	\$31,379.00	Paid
<b>Grand Totals (186 items)</b>				\$13,659,497.00	

# Kate B. Reynolds Charitable Trust

Poor & Needy Division Gross Payments Made in FY 10

8/31/2010

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
AIDS Care Service, Inc.	Holly Haven Family Care Home	2008006	1/15/2010	\$36,135.00	Paid
Bethesda Center for the Homeless, Inc.	Emergency night shelter	2009008	8/5/2010	\$60,697 00	Paid
Bethesda Center for the Homeless, Inc.	Case Management Services	2009147	7/30/2010	\$87,091.00	Paid
Cancer Services, Inc.	Prescriptions, medical supplies, and emergency assistance	2009144	1/28/2010	\$148,471 00	Paid
Cancer Services, Inc.	Prescription Assistance program	2008002	1/28/2010	\$11,825 00	Paid
Community Care Center for Forsyth County	Increase clinical staff from part time to full time	2010102	8/25/2010	\$49,500.00	Paid
Crisis Control Ministry, Inc.	Direct program costs	2009010	12/15/2009	\$393,188.00	Paid
Crisis Control Ministry, Inc	Direct program costs	2009010	8/5/2010	\$364,385.00	Paid
Crosby Scholars Community Partnership	Financial assistance for needy Crosby Scholars	2009152	8/5/2010	\$138,985.00	Paid
Experiment in Self-Reliance, Inc	Self-Sufficiency Program	2009139	7/30/2010	\$88,051.00	Paid
Experiment in Self-Reliance, Inc.	Transitional Housing Program	2009138	7/30/2010	\$122,294.00	Paid
Fellowship Home of Winston-Salem, NC, Inc.	Supportive housing	2008001	3/15/2010	\$66,000 00	Paid
Forsyth County Department of Social Services	Direct Client Assistance	2009150	8/5/2010	\$129,058.00	Paid
Forsyth Futures	Community collaborative that will identify community goals and measurable markers of progress, and help bring about their achievement	2009235	8/25/2010	\$110,000.00	Paid
Habitat for Humanity of Forsyth County, Inc.	Career assessment, education, and job training	2008013	3/15/2010	\$39,858 00	Paid
Habitat for Humanity of Forsyth County, Inc.	Career assessment, education, and job training	2010104	8/25/2010	\$82,500 00	Paid
Moravian Church in America, Southern Province	Direct client emergency financial assistance	2009013	1/28/2010	\$138,985.00	Paid

Payee Name	Request Project Title	Request ID	Schedule Date	Amount	Status
Portland State University	Reclaiming Futures - PND	2008360	1/28/2010	\$93,268.00	Paid
Public Private Ventures	Reclaiming Futures - PND	2008361	4/15/2010	\$4,473.00	Paid
Research Foundation of the City University of New York	Reclaiming Futures - PND	2008361	6/15/2010	\$12,991.00	Paid
Second Harvest Food Bank of Northwest North Carolina, Inc.	Childhood Hunger Coordinator	2009007	3/15/2010	\$50,875.00	Paid
Second Harvest Food Bank of Northwest North Carolina, Inc.	Additional Triad Community Kitchen staff	2008021	2/12/2010	\$27,500.00	Paid
Senior Services, Inc.	Home Care Program	2009146	7/30/2010	\$167,080.00	Paid
Senior Services, Inc.	Meals-on-Wheels	2009145	7/30/2010	\$310,361.00	Paid
Shepherd's Center of Greater Winston-Salem, Inc.	Volunteer transportation program	2008005	10/15/2009	\$11,000.00	Paid
The Salvation Army	Emergency financial assistance	2009006	12/15/2009	\$238,260.00	Paid
The Winston-Salem Foundation	operating funds to establish the "Richard and Becky Davis Fund for Education" to benefit low-income youth within the field of interest of education	2010026	1/28/2010	\$25,000.00	Paid
The Winston-Salem Foundation	Post-secondary scholarships	2009133	4/15/2010	\$115,520.00	Paid
The Winston-Salem Foundation	Youth in Transition	2010107	8/25/2010	\$30,000.00	Paid
United Way of Forsyth County, Inc.	Ten-Year Plan to End Chronic Homelessness	2010103	8/25/2010	\$49,500.00	Paid
United Way of Forsyth County, Inc.	Operating funds for fiscal year 2009-10	2009009	8/5/2010	\$668,203.00	Paid
Wake Forest University Health Sciences	Reclaiming Futures - PND	2008362	11/15/2009	\$8,206.00	Paid
Wake Forest University Health Sciences	Expand health care services	2008004	7/15/2010	\$85,525.00	Paid
Winston-Salem Rescue Mission	Transformers Program	2009012	8/25/2010	\$55,000.00	Paid
Winston-Salem/Forsyth County Board of Education	transportation for the summer feeding sites	2010136	8/18/2010	\$193,860.00	Paid
Winston-Salem/Forsyth County Board of Education	Community Outreach Worker	2009011	7/15/2010	\$48,201.00	Paid

<b>Payee Name</b>	<b>Request Project Title</b>	<b>Request ID</b>	<b>Schedule Date</b>	<b>Amount</b>	<b>Status</b>
Winston-Salem/Forsyth County Board of Education	Mental health group therapy program	2009003	1/19/2010	\$80,795.00	Paid
Winston-Salem/Forsyth County Board of Education	medical clinics at summer feeding sites	2010106	8/18/2010	\$12,716.00	Paid
Young Men's Christian Association of Northwest North Carolina	Childhood Obesity Initiative II	2008020	1/15/2010	\$110,000.00	Paid
Young Women's Christian Association of Winston-Salem and Forsyth County	Childhood Obesity Initiative II	2008019	2/2/2010	\$110,000.00	Paid
<b>Grand Totals (40 items)</b>				<b>\$4,575,357.00</b>	

# Kate B. Reynolds Charitable Trust

Health care Division Payments Scheduled for FY 2011

8/31/2010

Sheet 14  
part XU 3(b)

Payee Name	Request Project Title	Request ID	Schedule Date	Amount
Albemarle Hospital Authority	Case management services at free clinics	2009062	3/15/2011	49,500
Alexander Children's Center	Multidimensional Treatment Foster Care	2009096	2/1/2011	55,000
Alexander County Health Department	Healthy Carolinians Round II	2009100	3/1/2011	10,000
All Souls Counseling Center	expand mental health counseling services	2009074	3/31/2011	31,857
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	11/1/2010	169,613
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	2/1/2011	169,614
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	5/1/2011	169,614
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	5/1/2011	105,500
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	8/1/2011	169,613
American Indian Mothers Inc.	Circle of Life Board Capacity Building 2010	2010086	10/1/2010	16,500
An Open Door Community Development Corporation, Inc.	An Open Door Capacity Building Project	2010087	10/1/2010	16,500
Blue Ridge Community Health Services, Inc.	operating funds to expand the number of school based health centers	2009065	3/31/2011	55,000
Boys and Girls Club of the Piedmont	Healthy Lifestyles program	2008331	2/1/2011	19,800
Buncombe County Health Center	Nurse Family Partnership	2009250	9/15/2010	15,000
Burke County Schools	Mental Health Prevention Services	2008341	9/1/2010	57,325
Care Ring	Nurse Family Partnership	2008354	2/1/2011	163,539
Carenet Counseling Center of Wilkes	PCCC of Wilkes -- Wholistic and Integrated Growth	2010062	10/1/2010	7,700
Catawba Valley Medical Center	childhood obesity prevention	2008340	10/1/2010	110,000



<b>Payee Name</b>	<b>Request Project Title</b>	<b>Request ID</b>	<b>Schedule Date</b>	<b>Amount</b>
Coastal Horizons Center, Inc.	Latino mental health service expansion	2009050	2/1/2011	72,600
Community Foundation of Western North Carolina	capacity building	2009063	3/31/2011	75,000
Craven Regional Medical Center Foundation	diabetic patients	2008082	2/5/2011	70,426
Cumberland County Hospital System, Inc.	"Follow Our Footsteps" program	2007059	2/1/2011	50,000
Duke University	NAF Initiative	2008365	9/1/2010	21,143
Duke University	NAF Initiative	2008366	12/1/2010	33,333
Duke University	nurse-administered phone intervention for diabetics	2008315	8/1/2011	20,069
East Carolina University School of Medicine	Lay health advisor training and support	2009076	11/30/2010	110,000
East Carolina University School of Medicine	mental health services at primary care clinic	2009092	3/1/2011	38,500
El Futuro, Inc.	Durham mental health service expansion	2009082	3/31/2011	113,496
FirstHealth of the Carolinas, Inc.	Healthy Living Program	2007048	8/1/2011	212,415
Franklin County Volunteers in Medicine Clinic	Access to care for uninsured persons	2007163	5/1/2011	35,000
Free Clinic of Reidsville and Vicinity, Inc.	Operating funds to increase access to care for low-income individuals in Rockingham County	2008311	8/1/2011	20,462
Greene County Health Care, Inc.	mental health services	2008295	1/31/2011	98,125
Halifax Community College	Prevent and reduce dental disease in elementary age children	2007032	9/30/2010	23,930
Halifax Community College	Prevent and reduce dental disease in elementary age children	2007032	8/1/2011	23,930
Health Support Center , Inc	Collaborating and Connecting Communities	2010075	10/1/2010	16,500
Helping Hands Health Clinic	expand free clinic services	2009104	4/1/2011	33,000
Jackson County Department of Public Health	establish a case management position	2009069	8/1/2011	44,051
Jones County Health Department	Healthy Carolinians Round II	2009073	2/1/2011	10,000
Lee County Health Department	Healthy Carolinians Partnership	2009043	2/1/2011	10,000
Lincoln County Health Department	Healthy Carolinians Round II	2009102	2/1/2011	10,000

<b>Payee Name</b>	<b>Request Project Title</b>	<b>Request ID</b>	<b>Schedule Date</b>	<b>Amount</b>
North Carolina Community Health Center Association	Support for new FQHC sites	2010033	2/15/2011	100,000
Onslow Community Ministries, Inc.	Caring Community Clinic Dental Service Expansion	2009052	2/1/2011	23,400
Onslow County Hospital Authority	stroke prevention	2008282	7/1/2011	64,205
Pitt County Health Department	Nurse Family Partnership	2009120	3/1/2011	83,336
Portland State University	Reclaiming Futures-HCD portion	2008350	11/1/2010	92,754
Public Health Authority of Cabarrus County	Healthy Lives, Healthy Futures program	2008036	2/1/2011	171,363
Raleigh Rescue Mission Incorporated	Mental health services	2009030	7/1/2011	104,500
Research Foundation of the City University of New York	Reclaiming Futures-HCD portion	2008351	4/1/2011	55,503
Scotland County Health Department	Healthy Carolinians Partnership	2009044	1/1/2011	10,000
Shepherds Care Medical Clinic		2010084	10/1/2010	16,500
Success Dynamics Community Development Corporation	Success Dynamics Board Development and Strategic Planning	2010068	10/1/2010	16,500
The Community Care Clinic of Rowan County, Inc.	medical care	2008119	11/1/2010	50,751
The Cornerstone Ministry, Inc.	The Cornerstone Ministry, Inc. Board Development Project	2010069	10/1/2010	16,500
The Place of Possibilities	Weight No More for Health	2010070	10/1/2010	16,500
Triangle Residential Options for Substance Abusers, Inc.	Primary care for substance abuse clients	2008306	1/15/2011	55,000
UNC School of Public Health	Breastfeeding-friendly Star Approach	2009103	3/1/2011	165,740
Wake Forest University Health Sciences	improve health of obese children	2009098	3/1/2011	183,803
Wake Forest University Health Sciences	Reclaiming Futures-HCD portion	2008352	9/1/2010	41,707
Wilson County Substance Abuse Coalition, Inc.		2010074	10/1/2010	6,930
Young Women's Christian Association of the Greater Triangle, Inc.	Health and Wellness Outreach Project	2007142	8/1/2011	65,000
<b>Grand Totals (60 items)</b>				<b>3,873,647</b>

# Kate B. Reynolds Charitable Trust

Health Care Division Payments Scheduled for FY 2012

31 August 2010

Payee Name	Request Project Title	Request ID	Schedule Date	Amount
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	11/1/2011	169,613
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	2/1/2012	169,613
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	5/1/2012	169,614
American Alliance for Health Physical Education Rec & Dance North Carolina	in-school childhood obesity prevention program	2008286	5/1/2012	105,500
Buncombe County Health Center	Nurse Family Partnership	2009250	9/15/2011	20,000
Crossworks, Inc.	Capacity Building	2010051	10/1/2011	14,300
Cumberland County Hospital System, Inc.	"Follow Our Footsteps" program	2007059	2/1/2012	45,000
FirstHealth of the Carolinas, Inc.	Healthy Living Program	2007048	8/1/2012	217,700
Pitt County Health Department	Nurse Family Partnership	2009120	9/15/2011	77,860
Public Health Authority of Cabarrus County	Healthy Lives, Healthy Futures program	2008036	2/1/2012	169,754
UNC School of Public Health	Breastfeeding-friendly Star Approach	2009103	3/1/2012	116,257
Wake Forest University Health Sciences	Reclaiming Futures-HCD portion	2008352	9/1/2011	17,856
Young Women's Christian Association of the Greater Triangle, Inc.	Health and Wellness Outreach Project	2007142	8/1/2012	65,000
<b>Grand Totals (13 items)</b>				<b>1,358,067</b>

## Kate B. Reynolds Charitable Trust

Health Care Division Payments Scheduled for FY 2013

31 August 2010

Payee Name	Request Project Title	Request ID	Schedule Date	Amount
FirstHealth of the Carolinas, Inc.	Healthy Living Program	2007048	8/1/2013	233,143
Public Health Authority of Cabarrus County	Healthy Lives, Healthy Futures program	2008036	2/1/2013	166,551
Young Women's Christian Association of the Greater Triangle, Inc.	Health and Wellness Outreach Project	2007142	8/1/2013	40,000
<b>Grand Totals (3 items)</b>				439,694

## Kate B. Reynolds Charitable Trust

Health Care Division Payments Scheduled for FY 2014

31 August 2010

Payee Name	Request Project Title	Request ID	Schedule Date	Amount
Public Health Authority of Cabarrus County	Healthy Lives, Healthy Futures program	2008036	2/1/2014	166,349
Grand Totals (1 item)				166,349

# Kate B. Reynolds Charitable Trust

Poor & Needy Division Payments Scheduled for FY 2011

31 August 2010

Payee/Reference	Payee Primary Contact Name	Payee Contact	Schedule Date	Amount Notes	Type
The Winston-Salem Foundation Request [2009133/2009-133]	Mr. Scott F. Wierman	Mr. Scott F. Wierman	8/1/2011	109,744	Needs to submit a report
Experiment in Self-Reliance, Inc. Request [2009138/2009-138]	Ms. Twana C. Wellman-Roebuck	Ms. Twana C. Wellman-Roebuck	8/1/2011	116,179	Needs to submit a report
Experiment in Self-Reliance, Inc. Request [2009139/2009-139]	Ms. Twana C. Wellman-Roebuck	Ms. Twana C. Wellman-Roebuck	8/1/2011	83,648	Needs to submit a report
Senior Services, Inc. Request [2009145/2009-145]	Mr. Richard Gottlieb	Mr. Richard Gottlieb	8/1/2011	276,435	Needs to submit a report
Senior Services, Inc. Request [2009146/2009-146]	Mr. Richard Gottlieb	Mr. Richard Gottlieb	8/1/2011	158,726	Needs to submit a report
Bethesda Center for the Homeless, Inc. Request [2009147/2009-147]	Mr. Mike Ryan	Mr. Mike Ryan	8/1/2011	87,091	Needs to submit a report
Forsyth County Department of Social Services Request [2009150/2009-150]	Mr. Joe H. Raymond	Mr. Joe H. Raymond	8/1/2011	122,605	Needs to submit a report
Crosby Scholars Community Partnership Request [2009152/2009-152]	Ms. Mona W. Lovett	Ms. Mona W. Lovett	8/1/2011	132,036	Needs to submit a report
United Way of Forsyth County, Inc. Request [2009009/2009-009]	Mr. Ronald J. Drago	Mr. Eric Aft	8/1/2011	634,793 3rd year	Contingency to be met
Winston-Salem/Forsyth County Board of Education Request [2009011/2009-011]	Dr. Donald L. Martin, Jr.	Dr. Donald L. Martin, Jr.	7/1/2011	24,760 3rd year	Needs to submit a report
The Winston-Salem Foundation Request [2009236/2009-236]	Mr. Scott F. Wierman	Mr Scott F. Wierman	4/1/2011	165,000	Needs to submit a report
Research Foundation of the City University of New York Request [2008361/2008-361]	Dr. James P. Levine	Dr James P. Levine	4/1/2011	11,101	Needs to submit a report

<b>Payee/Reference</b>	<b>Payee Primary Contact Name</b>	<b>Payee Contact</b>	<b>Schedule Date</b>	<b>Amount Notes</b>	<b>Type</b>
Cancer Services, Inc. Request [2009144/2009-144]	Ms. Tara C. O'Brien	Ms. Tara C. O'Brien	2/1/2011	141,048	Needs to submit a report
Moravian Church in America, Southern Province Request [2009013/2009-013]	Mr. Tommy Cole	Mr. Tommy Cole	2/1/2011	132,036 3rd year	Needs to submit a report
North Carolina Housing Foundation Inc. Request [2009148/2009-148]	Mr. Garry L. Merritt	Mr. John Nichols	12/1/2010	75,000	Contingency to be met
Winston-Salem/Forsyth County Board of Education Request [2009003/2009-003]	Dr. Donald L. Martin, Jr.	Dr. Donald L. Martin, Jr.	12/1/2010	82,795 3rd year	Needs to submit a report
The Salvation Army Request [2009006/2009-006]	Major Terry Israel	Major Terry Israel	11/1/2010	211,310 3rd year	Needs to submit a report
Portland State University Request [2008360/2008-360]	Ms. Kristine Nelson	Ms. Kristine Nelson	11/1/2010	30,918	Needs to submit a report
Wake Forest University Health Sciences Request [2008362/2008-362]	Dr. William B. Applegate, MD, MPH	Dr. William B. Applegate, MD, MPH	11/1/2010	8,342	Needs to submit a report
<b>Grand Totals (19 items)</b>				2,603,567	

## Kate B. Reynolds Charitable Trust

Poor & Needy Division Payments Scheduled for FY 2012

31 August 2010

Payee/Reference	Payee Primary Contact Name	Payee Contact	Schedule Date	Amount Notes	Type
Wake Forest University Health Sciences Request [2008362/2008-362]	Dr. William B. Applegate, MD, MPH	Dr. William B. Applegate, MD, MPH	11/1/2011	3,571	Needs to submit a report
<b>Grand Totals (1 item)</b>				3,571	



**SCHEDULE D**  
**(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**

► **Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).**

OMB No 1545-0092

**2009**

Name of estate or trust

TW K B REYNOLDS CHARITABLE TRUST BOND AC

Employer identification number

56-6036515

**Note:** Form 5227 filers need to complete *only* Parts I and II.

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

(a) Description of property (Example: 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>1a</b>					

<b>b</b> Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b . . . . .	<b>1b</b>	-468,052.
<b>2</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 . . . . .	<b>2</b>	
<b>3</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .	<b>3</b>	
<b>4</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2008 Capital Loss Carryover Worksheet . . . . .	<b>4</b>	( )
<b>5</b> <b>Net short-term gain or (loss).</b> Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back . . . . . ►	<b>5</b>	-468,052.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example: 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>6a</b>					
LONG-TERM CAPITAL GAIN DIVIDENDS		STMT 1			1,197,006.

<b>b</b> Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b . . . . .	<b>6b</b>	-12,673,237.
<b>7</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 . . . . .	<b>7</b>	
<b>8</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . . .	<b>8</b>	
<b>9</b> Capital gain distributions . . . . .	<b>9</b>	
<b>10</b> Gain from Form 4797, Part I . . . . .	<b>10</b>	
<b>11</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss Carryover Worksheet . . . . .	<b>11</b>	( )
<b>12</b> <b>Net long-term gain or (loss).</b> Combine lines 6a through 11 in column (f). Enter here and on line 14a, column (3) on the back . . . . . ►	<b>12</b>	-11,476,231.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

Part III Summary of Parts I and II		(1) Beneficiaries' (see page 5)	(2) Estate's or trust's	(3) Total
<b>Caution: Read the instructions before completing this part.</b>				
13	Net short-term gain or (loss)	13		-468,052.
14	Net long-term gain or (loss):			
a	Total for year	14a		-11,476,231.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	14b		
c	28% rate gain	14c		
15	Total net gain or (loss). Combine lines 13 and 14a	15		-11,944,283.

**Note:** If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation	
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of:
a	The loss on line 15, column (3) or b \$3,000
16	( 3,000 )

**Note:** If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** on page 7 of the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates	
<b>Form 1041 filers.</b> Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.	
<b>Caution:</b> Skip this part and complete the worksheet on page 8 of the instructions if:	
• Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or	
• Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.	
<b>Form 990-T trusts.</b> Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.	

17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17		
18	Enter the smaller of line 14a or 15 in column (2) but not less than zero	18		
19	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	19		
20	Add lines 18 and 19	20		
21	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	21		
22	Subtract line 21 from line 20. If zero or less, enter -0-	22		
23	Subtract line 22 from line 17. If zero or less, enter -0-	23		
24	Enter the smaller of the amount on line 17 or \$2,300	24		
25	Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. <input type="checkbox"/> No. Enter the amount from line 23	25		
26	Subtract line 25 from line 24	26		
27	Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> No. Enter the smaller of line 17 or line 22	27		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28		
29	Subtract line 28 from line 27	29		
30	Multiply line 29 by 15% (.15)	30		
31	Figure the tax on the amount on line 23. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	31		
32	Add lines 30 and 31	32		
33	Figure the tax on the amount on line 17. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	33		
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36)	34		

Schedule D (Form 1041) 2009

Department of the Treasury  
Internal Revenue Service

▶ See instructions for Schedule D (Form 1041).  
▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

2009

Employer identification number

56-6036515

[illegible]

<b>1b Total.</b> Combine the amounts in column (f). Enter here and on Schedule D, line 1b . . . . .	-468,052.00
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**For Paperwork Reduction Act Notice, see the Instructions for Form 1041.**

Schedule D-1 (Form 1041) 2009

Employer identification number

56-6036515

[illegible]

<b>6b Total.</b> Combine the amounts in column (f). Enter here and on Schedule D, line 6b . . . . .		-12673237.00
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FEDERAL CAPITAL GAIN DIVIDENDS  
=====LONG-TERM CAPITAL GAIN DIVIDENDS  
-----

## 15% RATE CAPITAL GAIN DIVIDENDS

AOL TIME WARNER INC COM	18,184.00	
BANC ONE CORP COM	9,873.00	
I2 TECHNOLOGIES INC COM	5,199.00	
NORTEL NETWORKS CORP NEW COM	632.00	
PIMCO COMMODITY REAL RET STRAT-I#45	87,147.00	
TENET HEALTHCARE CORP COM W/RIGHTS ATTACHED E	1,233.00	
TIMBERLAND BALANCED FUND C	1,074,738.00	
	-----	
TOTAL 15% RATE CAPITAL GAIN DIVIDENDS		1,197,006.00
		-----
TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS		1,197,006.00
		=====



Account Statement For:  
REYNOLDS K B CHAR TRUST MAIN

Period Covered: August 1, 2010 - August 31, 2010

## ASSET DETAIL

ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	CURRENT YIELD	ACCRUED INCOME
<b>Cash &amp; Equivalents</b>							
MONEY MARKET							
WELLS FARGO ADVANTAGE HERITAGE MONEY MARKET INSTITUTIONAL #3106 <i>Asset held in Invested Income Portfolio</i>	45,922.670		\$45,922.67	\$45,922.67	\$0.00	0.19%	\$69.27
WELLS FARGO ADVANTAGE HERITAGE MONEY MARKET INSTITUTIONAL #3106	597,657.690		597,657.69	597,657.69	0.00	0.19	104.77
<b>Total Money Market</b>			<b>\$643,580.36</b>	<b>\$643,580.36</b>	<b>\$0.00</b>	<b>0.19%</b>	<b>\$174.04</b>
<b>Total Cash &amp; Equivalents</b>			<b>\$643,580.36</b>	<b>\$643,580.36</b>	<b>\$0.00</b>	<b>0.19%</b>	<b>\$174.04</b>



Account Statement For:  
REYNOLDS K B CHAR TRUST MAIN

Period Covered: August 1, 2010 - August 31, 2010

**ASSET DETAIL** *(continued)*

ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	CURRENT YIELD	ACCRUED INCOME
<b>Fixed Income</b>							
<b>DOMESTIC MUTUAL FUNDS</b>							
BLACKROCK INTERMEDIATE BOND FUND BLACKROCK SHARES #335 CUSIP: 091929752	2,188,841.202	\$9 640	\$21,100,429.19	\$20,400,000 00	\$700,429.19	4.51%	\$0 00
PIMCO EMERGING MARKETS BOND FUND- INSTL #137 CUSIP: 693391559	946,405 861	11 250	10,647,065.94	10,423,761 98	223,303.96	5.06	0 00
PIMCO HIGH YIELD FUND INSTITUTIONAL SHARES CUSIP: 693390841	2,292,650 895	9 060	20,771,417.11	22,456,056 32	- 1,684,639 21	8.13	0.00
PIMCO MODERATE DURATION FUND INSTITUTIONAL CLASS #120 CUSIP: 693390593	1,894,150.426	11.090	21,006,128.22	20,400,000.00	606,128 22	3 02	0.00
VANGUARD INFLATION PROTECTION SECURITIES FUND #119 CUSIP: 922031869	1,080,582.426	13.210	14,274,493.85	12,830,344.35	1,444,149 50	2.44	0.00
VANGUARD INTERM-TERM BOND INDEX SIGNALFUND 1350 CUSIP: 921937843	1,876,724.931	11.690	21,938,914.44	20,400,000.00	1,538,914 44	4 07	0 00
<b>Total Domestic Mutual Funds</b>			<b>\$109,738,448.75</b>	<b>\$106,910,162.65</b>	<b>\$2,828,286.10</b>	<b>4.61%</b>	<b>\$0.00</b>
<b>INTERNATIONAL MUTUAL FUNDS</b>							
PIMCO FOREIGN BOND (UNHEDGED) FUND #1853 CUSIP: 722005220	940,993.789	\$10 810	\$10,172,142.86	\$9,090,000 00	\$1,082,142.86	2 72%	\$0 00
<b>Total International Mutual Funds</b>			<b>\$10,172,142.86</b>	<b>\$9,090,000.00</b>	<b>\$1,082,142.86</b>	<b>2.72%</b>	<b>\$0.00</b>
<b>Total Fixed Income</b>			<b>\$119,910,591.61</b>	<b>\$116,000,162.65</b>	<b>\$3,910,428.96</b>		<b>\$0.00</b>

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PRIVATE CLIENT SERVICES



Account Statement For:  
REYNOLDS K B CHAR TRUST MAIN

Period Covered: August 1, 2010 - August 31, 2010

**ASSET DETAIL** (continued)

ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	CURRENT YIELD	ACCRUED INCOME
<b>Equities</b>							
<b>DOMESTIC MUTUAL FUNDS</b>							
DELAWARE POOLED TR INTL EQUITY PORTFOLIO #31 SYMBOL: DPIEX CUSIP: 246248306	2,061,130.829	\$12.160	\$25,063,350.88	\$31,381,692.42	- \$6,318,341.54	3.44%	\$0.00
DODGE & COX STOCK FUND #145 SYMBOL: DODGX CUSIP: 256219106	529,274.149	88.600	46,893,689.60	60,275,957.32	- 13,382,267.72	1.28	0.00
DREYFUS/THE BOSTON COMPANY SMALL CAP VALUE FUND CLASS I #6944 SYMBOL: STSVX CUSIP: 26203E851	449,948.095	18.410	8,283,544.43	11,242,214.59	- 2,958,670.16	0.40	0.00
GOLDMAN SACHS GROWTH OPPORTUNITY FUND INSTITUTIONAL SHARES #1132 SYMBOL: GGOIX CUSIP: 38142Y401	1,013,817.787	20.210	20,489,257.48	21,330,726.26	- 841,468.78	0.00	0.00
PERKINS MID CAP VALUE FUND CLASS I #1167 SYMBOL: JMVAX CUSIP: 47103C241	1,093,857.313	19.150	20,947,367.54	23,299,729.66	- 2,352,362.12	0.98	0.00
SSGA EMERGING MARKETS FUND CLASS S #1510 SYMBOL: SEMSX CUSIP: 784924425	1,247,636.008	19.280	24,054,422.23	26,490,910.34	- 2,436,488.11	2.18	0.00
STRATTON SMALL-CAP VALUE FUND #37 SYMBOL: STSCX CUSIP: 863137105	91,975.533	39.030	3,589,805.05	4,309,973.11	- 720,168.06	0.00	0.00
T ROWE PRICE BLUE CHIP GROWTH FUND #93 SYMBOL: TRBCX CUSIP: 77954Q106	1,714,140.117	30.370	52,058,435.35	65,701,869.21	- 13,643,433.86	0.05	0.00
VANGUARD SMALL CAP GROWTH INDEX FUND SYMBOL: VISGX CUSIP: 922908827	735,275.883	16.530	12,154,110.35	11,860,000.00	294,110.35	0.30	0.00
<b>Total Domestic Mutual Funds</b>			<b>\$213,533,982.91</b>	<b>\$255,893,072.91</b>	<b>- \$42,359,090.00</b>	<b>1.07%</b>	<b>\$0.00</b>
<b>INTERNATIONAL MUTUAL FUNDS</b>							
ARTISAN INTERNATIONAL FUND #661 SYMBOL: ARTIX CUSIP: 04314H204	1,262,933.344	\$18.490	\$23,351,637.53	\$23,680,000.00	- \$328,362.47	1.33%	\$0.00
<b>Total International Mutual Funds</b>			<b>\$23,351,637.53</b>	<b>\$23,680,000.00</b>	<b>- \$328,362.47</b>	<b>1.33%</b>	<b>\$0.00</b>
<b>Total Equities</b>			<b>\$236,885,620.44</b>	<b>\$279,573,072.91</b>	<b>- \$42,687,452.47</b>	<b>1.10%</b>	<b>\$0.00</b>

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PRIVATE CLIENT SERVICES





Account Statement For:  
REYNOLDS K B CHAR TRUST MAIN

Period Covered: August 1, 2010 - August 31, 2010

**ASSET DETAIL** *(continued)*

ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	CURRENT YIELD	ACCRUED INCOME
<b>Real Assets</b>							
REAL ASSET FUNDS							
ING INTERNATIONAL REAL ESTATE FUND CLASS I #2664 SYMBOL. IIRIX CUSIP: 44980Q518	869,565.236	\$7.760	\$6,747,826.23	\$11,263,565.21	- \$4,515,738.98	8.29%	\$0.00
PIMCO COMMODITY REAL RETURN STRATEGY FUND-CLASS I #45 SYMBOL. PCRIX CUSIP: 722005667	890,377.357	7.790	6,936,039.61	10,815,731.26	- 3,879,691.65	9.33	0.00
T ROWE PRICE REAL ESTATE FUND #122 SYMBOL. TRREX CUSIP 779919109	668,151.994	15.670	10,469,941.75	15,737,020.21	- 5,267,078.46	2.68	0.00
<b>Total Real Asset Funds</b>			<b>\$24,153,807.59</b>	<b>\$37,816,316.68</b>	<b>- \$13,662,509.09</b>	<b>6.16%</b>	<b>\$0.00</b>
<b>Total Real Assets</b>			<b>\$24,153,807.59</b>	<b>\$37,816,316.68</b>	<b>- \$13,662,509.09</b>	<b>6.16%</b>	<b>\$0.00</b>
<hr/>							
			ACCOUNT VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	ACCRUED INCOME	
<b>TOTAL ASSETS</b>			<b>\$381,593,600.00</b>	<b>\$434,033,132.60</b>	<b>- \$52,439,532.60</b>	<b>\$174.04</b>	



Account Statement For:  
REYNOLDS K B CHAR TRUST TIMBER

Period Covered: August 1, 2010 - August 31, 2010

## ASSET DETAIL

ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	CURRENT YIELD	ACCRUED INCOME
<b>Cash &amp; Equivalents</b>							
MONEY MARKET							
WELLS FARGO ADVANTAGE HERITAGE MONEY MARKET INSTITUTIONAL #3106	795,555.670		\$795,555.67	\$795,555.67	\$0.00	0.19%	\$83.73
<b>Total Money Market</b>			<b>\$795,555.67</b>	<b>\$795,555.67</b>	<b>\$0.00</b>	<b>0.19%</b>	<b>\$83.73</b>
<b>Total Cash &amp; Equivalents</b>			<b>\$795,555.67</b>	<b>\$795,555.67</b>	<b>\$0.00</b>	<b>0.19%</b>	<b>\$83.73</b>

ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	CURRENT YIELD	ACCRUED INCOME
<b>Equities</b>							
COMMON TRUST FUNDS							
TIMBERLAND BALANCED FUND C CUSIP: 996102091	57,177.710	\$600.125	\$34,313,773.21	\$5,717,771.00	\$28,596,002.21	0.00%	\$0.00
<b>Total Common Trust Funds</b>			<b>\$34,313,773.21</b>	<b>\$5,717,771.00</b>	<b>\$28,596,002.21</b>	<b>0.00%</b>	<b>\$0.00</b>
<b>Total Equities</b>			<b>\$34,313,773.21</b>	<b>\$5,717,771.00</b>	<b>\$28,596,002.21</b>	<b>0.00%</b>	<b>\$0.00</b>



Account Statement For:  
REYNOLDS K B CHAR TRUST TIMBER

Period Covered: August 1, 2010 - August 31, 2010

**ASSET DETAIL** *(continued)*

ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	CURRENT YIELD	ACCRUED INCOME
<b>Complementary Strategies</b>							
CLOSELY HELD INTERESTS							
RCF TIMBER, LLC CUSIP: 9WB026483	35,000 000	\$88.001	\$3,080,045.29	\$3,500,000.00	- \$419,954.71	0.00%	\$0.00
<b>Total Closely Held Interests</b>			<b>\$3,080,045.29</b>	<b>\$3,500,000.00</b>	<b>- \$419,954.71</b>	<b>0.00%</b>	<b>\$0.00</b>
<b>Total Complementary Strategies</b>			<b>\$3,080,045.29</b>	<b>\$0.00</b>	<b>- \$419,954.71</b>	<b>0.00%</b>	<b>\$0.00</b>
<hr/>							
			<b>ACCOUNT VALUE AS OF 08/31/10</b>	<b>COST BASIS</b>	<b>UNREALIZED GAIN/LOSS</b>	<b>ACCRUED INCOME</b>	
<b>TOTAL ASSETS</b>			<b>\$38,189,374.17</b>	<b>\$10,013,326.67</b>	<b>\$28,176,047.50</b>	<b>\$83.73</b>	



Account Statement For:  
K B REYNOLDS CHAR TR-OPERATING

Period Covered: August 1, 2010 - August 31, 2010

## ASSET DETAIL

ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	CURRENT YIELD	ACCRUED INCOME
<b>Cash &amp; Equivalents</b>							
MONEY MARKET							
WELLS FARGO ADVANTAGE HERITAGE MONEY MARKET INSTITUTIONAL #3106	425,187.490		\$425,187.49	\$425,187.49	\$0.00	0.19%	\$70.99
<b>Total Money Market</b>			<b>\$425,187.49</b>	<b>\$425,187.49</b>	<b>\$0.00</b>	<b>0.19%</b>	<b>\$70.99</b>
<b>Total Cash &amp; Equivalents</b>			<b>\$425,187.49</b>	<b>\$425,187.49</b>	<b>\$0.00</b>	<b>0.19%</b>	<b>\$70.99</b>

ASSET DESCRIPTION	VALUED CARRIED AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	ACCRUED INCOME
<b>Miscellaneous</b>				
OTHER				
PHYSICAL ASSETS HELD AT KATE B REYNOLDS CHARITABLE OFFICE AT REYNOLDA VILLAGE OFFICE ASSETS AND VEHICLES CUSIP: 9WB003821	\$309,057.38	\$309,057.38	\$0.00	\$0.00
TITLE FOR TOYOTA CAMRY VIN #4T1BF32K26U627593 CHARITABLE USE ASSET BY FOUNDATION, TAX VALUE \$1.00 CUSIP: 7MS000R48	1.00	1.00	0.00	0.00
TITLE FOR TOYOTA CAMRY VIN #4T1BK46KX7U022590 CHARITABLE USE ASSET BY FOUNDATION, TAX VALUE \$1.00 CUSIP: 7MS000R30	1.00	1.00	0.00	0.00

5 of 19

PRIVATE CLIENT SERVICES



Account Statement For:  
K B REYNOLDS CHAR TR-OPERATING

Period Covered: August 1, 2010 - August 31, 2010

## ASSET DETAIL *(continued)*

### ASSET DESCRIPTION

#### Miscellaneous *(continued)*

##### OTHER *(continued)*

TITLE FOR 2007 TOYOTA CAMRY VIN  
#4T1BK46KU527377 CHARITABLE USE  
ASSET BY FOUNDATION, TAX VALUE  
\$1.00  
CUSIP: 7MS000R22

##### Total Other

##### Total Miscellaneous

VALUED CARRIED  
AS OF 08/31/10

COST BASIS

UNREALIZED  
GAIN/LOSS

ACCRUED  
INCOME

1.00

1.00

0.00

0.00

\$309,060.38

\$309,060.38

\$0.00

\$0.00

\$309,060.38

\$309,060.38

\$0.00

\$0.00

ACCOUNT VALUE  
AS OF 08/31/10

COST BASIS

UNREALIZED  
GAIN/LOSS

ACCRUED  
INCOME

##### TOTAL ASSETS

\$734,247.87

\$734,247.87

\$0.00

\$70.99



Account Statement For:  
REYNOLDS K-HEDGE

Period Covered: August 1, 2010 - August 31, 2010

## ASSET DETAIL

ASSET DESCRIPTION	QUANTITY	PRICE	MARKET VALUE AS OF 08/31/10	COST BASIS	UNREALIZED GAIN/LOSS	CURRENT YIELD	ACCRUED INCOME
<b>Complementary Strategies</b>							
HEDGE INVESTMENTS							
ASGI HEDGED EQUITIES SUPER ACCREDITED, LP RESTRICTED, INTEREST CLASS C	1,187,027.380	\$22.319	\$26,492,907.98	\$21,691,007.00	\$4,801,900.98	0.00%	\$0.00
ASGI MULTI-STRATEGY SUPER ACCREDITED LP-RESTRICTED, INTEREST CLASS C	1,350,167.204	19.980	26,976,070.71	21,006,875.00	5,969,195.71	0.00	0.00
<b>Total Hedge Investments</b>			<b>\$53,468,978.69</b>	<b>\$42,697,882.00</b>	<b>\$10,771,096.69</b>	<b>0.00%</b>	<b>\$0.00</b>
<b>Total Complementary Strategies</b>			<b>\$53,468,978.69</b>	<b>\$42,697,882.00</b>	<b>\$10,771,096.69</b>	<b>0.00%</b>	<b>\$0.00</b>
<hr/>							
			<b>ACCOUNT VALUE AS OF 08/31/10</b>	<b>COST BASIS</b>	<b>UNREALIZED GAIN/LOSS</b>	<b>ACCRUED INCOME</b>	
<b>TOTAL ASSETS</b>			<b>\$53,468,978.69</b>	<b>\$42,697,882.00</b>	<b>\$10,771,096.69</b>	<b>\$0.00</b>	

# Kate B. Reynolds Charitable Trust

SIF Payments Current Fiscal Year

8/31/2010

part IX-A  
part XV 3(r)

Request Primary Organization Name	Request Status	Fund Donor	Amount	Check Number	Payment Date	Request Project Description
<b><u>SIF-Health Care Division</u></b>						
UNC Sheps Center for Health Services Research	Grantee Technical Assistance	SIF-Health Care Division	\$15,000.00	51353744	11/23/2009	Provide technical assistance on data collection and outcomes measurement to two long-term prevention grantees
Mountain Youth Resources, Inc.	KBR Conferences/Seminars	SIF-Health Care Division	\$202.00	51353747	11/23/2009	Healthy Community Institute travel reimbursement for October 13-14 2009
Doubletree Hotel-Rocky Mount	KBR Conferences/Seminars	SIF-Health Care Division	\$1,661.00	51353748	11/23/2009	Catering for Ladder to Leadership orientation kickoff
McLeese Marketing Associates, Inc.	Capacity Building	SIF-Health Care Division	\$250.00	51392571	12/21/2009	Host Foundation promotion of Ladder to Leadership Program
Center for Creative Leadership	KBR Conferences/Seminars	SIF-Health Care Division	\$10,716.00	51392572	12/21/2009	Tuition for KBR Leadership Essentials Program and hotel expense for grantee
Health Education Foundation for Eastern North Carolina, Inc.	KBR Conferences/Seminars	SIF-Health Care Division	\$800.00	51392573	12/21/2009	Ladder to Leadership kickoff event venue and use of LCD projector for 2 days 11/16-17/2009
Black Women's Health Network	Other	SIF-Health Care Division	\$5,000.00	51499316	3/17/2010	Reimbursement for audit
S. Preston Douglas and Associates LLP	Other	SIF-Health Care Division	\$3,850.00	51499317	3/17/2010	Audit for Indian Healthcare FY 2008
Comfort Suites Riverfront Park	Capacity Building	SIF-Health Care Division	\$4,002.00	51574794	5/17/2010	BCBSNCF Health Communities Institute - Hotel Sponsorship
Nantahala Mountain Village	KBR Conferences/Seminars	SIF-Health Care Division	\$1,525.00	51574795	5/17/2010	Deposit for Cherokee Leadership Essentials training
Hal Williams	Grantee Technical Assistance	SIF-Health Care Division	\$5,914.00	51574796	5/17/2010	Consulting Services
Earney & Company LLP	Other	SIF-Health Care Division	\$5,000.00	26400873	6/23/2010	Audit payment for NC School Community Health Alliance

Request Primary Organization Name	Request Status	Fund Donor	Amount	Check Number	Payment Date	Request Project Description
Nantahala Mountain Village	KBR Conferences/Seminars	SIF-Health Care Division	\$1,525.00	26400876	6/23/2010	Second payment for Cherokee Leadership Essentials Venue/Lodging
Hal Williams	Grantee Technical Assistance	SIF-Health Care Division	\$7,692.00	26455271	7/19/2010	Hal Williams time for May - June 2010
Ken Blackman	KBR Conferences/Seminars	SIF-Health Care Division	\$1,250.00	26477993	7/30/2010	Ladders to Leadership stipend for individual serving as local sponsor.
Henrietta Zalkind	KBR Conferences/Seminars	SIF-Health Care Division	\$1,250.00	26477994	7/30/2010	Ladders to Leadership stipend for individual serving as local sponsor.
Gary Grant	KBR Conferences/Seminars	SIF-Health Care Division	\$1,250.00	26477995	7/30/2010	Ladders to Leadership stipend for individual serving as local sponsor.
Proximity Hotel	KBR Conferences/Seminars	SIF-Health Care Division	\$1,989.00	26477998	7/30/2010	Reclaiming Futures Leadership Essentials training accommodations
Homewood Suites	KBR Conferences/Seminars	SIF-Health Care Division	\$4,156.00	26477999	7/30/2010	Wilmington Leadership Essentials accommodations and catering
The Picnic Basket	KBR Conferences/Seminars	SIF-Health Care Division	\$787.00	26495369	8/9/2010	Catering for breakfast and lunch for the capacity building kickoff on 7/13/10
Center for Creative Leadership	Grantee Technical Assistance	SIF-Health Care Division	\$14,032.00	26495370	8/9/2010	Leadership Essentials for Reclaiming Futures Group-registration and meals fee
Center for Creative Leadership	Capacity Building	SIF-Health Care Division	\$10,228.00	26495372	8/9/2010	Leadership Essentials-Wilmington registration and partial staff travel
Center for Creative Leadership	Capacity Building	SIF-Health Care Division	\$10,000.00	26495373	8/9/2010	Leadership Essentials-Cherokee registration only
Nantahala Mountain Village	KBR Conferences/Seminars	SIF-Health Care Division	\$1,698.00	26503943	8/12/2010	Lodging for Leadership Essentials training 8/4 - 8/5 2010
Thirteen Moons Restaurant	KBR Conferences/Seminars	SIF-Health Care Division	\$2,282.00	26503944	8/12/2010	Breakfast and lunch catering for Leadership Essentials training 8/5 - 8/6 2010
Hal Williams	Grantee Technical Assistance	SIF-Health Care Division	\$5,600.00	26503945	8/12/2010	Grantee workshop and work with Community Health Center Initiative
Institute for Dismantling Racism	Capacity Building	SIF-Health Care Division	\$21,150.00	26503948	8/12/2010	IDR training in Asheville NC 8/9-11 2010



Request Primary Organization Name	Request Status	Fund Donor	Amount	Check Number	Payment Date	Request Project Description
Homewood Suites	KBR Conferences/Seminars	SIF-Health Care Division	\$248.00	26522220	8/23/2010	Room for Leadership Essentials Training attendee 8/3/2010 - 8/4/2010
Doubletree Biltmore Hotel	KBR Conferences/Seminars	SIF-Health Care Division	\$2,185.00	26522221	8/23/2010	Lodging for IDR event 8/9/2010 - 8/11/2010
<i>Total SIF-Health Care Division (29 items)</i>			<u>\$141,242 00</u>			

Request Primary Organization Name	Request Status	Fund Donor	Amount	Check Number	Payment Date	Request Project Description
<b><u>SIF-Poor and Needy Division</u></b>						
Residence Inn by Marriott	KBR Conferences/Seminars	SIF-Poor and Needy Division	\$643.00	51392570	12/21/2009	Fall 09 Healthy Community Institute hotel direct bill for organization sponsored by KBR
Institute for Dismantling Racism	KBR Conferences/Seminars	SIF-Poor and Needy Division	\$3,450.00	51574793	5/17/2010	Follow up with participants from February and May 2009 training events
Children's Law Center of Central North Carolina	Other	SIF-Poor and Needy Division	\$5,000.00	26400867	6/23/2010	Audit by Butler and Burke for the FY ending 6/30/09
AIDS Care Service, Inc.	Other	SIF-Poor and Needy Division	\$19,878.00	26477992	7/30/2010	Funding for technology and other infrastructure needs to enable shared space & services from multiple partner organizations in the new office space for ACS. Excludes moving expenses.
Winston-Salem/Forsyth County Board of Education	Capacity Building	SIF-Poor and Needy Division	\$15,000.00	26477996	7/30/2010	School system employees and board to attend organizational learning conference.
Winston-Salem/Forsyth County Board of Education	Research	SIF-Poor and Needy Division	\$8,500.00	26477997	7/30/2010	Outside evaluation of current drop out prevention initiative at equity plus schools
<i>Total SIF-Poor and Needy Division (6 items)</i>			<u>\$52,471.00</u>			

Request Primary Organization Name	Request Status	Fund Donor	Amount	Check Number	Payment Date	Request Project Description
<b><u>SIF-Trustwide</u></b>						
Embassy Suites RDU	KBR Conferences/Seminars	SIF-Trustwide	\$791.00	51353743	11/23/2009	Ladders to Leadership Essentials room block
The Picnic Basket	KBR Conferences/Seminars	SIF-Trustwide	\$1,008.00	51353745	11/23/2009	Catering for 10/7-8 Leadership Essentials CCL training in Cary
Embassy Suites Concord	KBR Conferences/Seminars	SIF-Trustwide	\$2,781.00	51353746	11/23/2009	Hotel invoice for KBR sponsored attendees to BCBSNCF Healthy Community Institute (Fall 2009)
North Carolina Center for Nonprofit Organizations, Inc.	Capacity Building	SIF-Trustwide	\$35,000.00	51537838	4/16/2010	Capacity building support for KBR grantee
North Carolina Center for Nonprofit Organizations, Inc.	Capacity Building	SIF-Trustwide	\$8,953.00	26400870	6/23/2010	Membership for KBR grantees
Lady Justice Cafe	Grantee Technical Assistance	SIF-Trustwide	\$476.00	26400878	6/23/2010	Catering for Reclaiming Futures outcomes session with Hal Williams
<i>Total SIF-Trustwide (6 items)</i>			<u>\$49,009.00</u>			
<b>Grand Totals</b>			<b>\$242,722.00</b>			

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete **only Part II** and check this box . . . . . ☒ **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete **only Part I** (on page 1)

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

<b>Type or print</b>  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <b>TW K B REYNOLDS CHARITABLE TRUST</b> <b>AC</b>	<b>Employer identification number</b> <b>56-6036515</b>
	Number, street, and room or suite no. If a P.O. box, see instructions <b>1525 W W.T. HARRIS BLVD. D1114-044</b> City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>CHARLOTTE, NC 28288</b>	For IRS use only

**Check type of return to be filed (File a separate application for each return):**

<input type="checkbox"/>	Form 990	<input checked="" type="checkbox"/>	Form 990-PF	<input type="checkbox"/>	Form 1041-A	<input type="checkbox"/>	Form 6069
<input type="checkbox"/>	Form 990-BL	<input type="checkbox"/>	Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/>	Form 4720	<input type="checkbox"/>	Form 8870
<input type="checkbox"/>	Form 990-EZ	<input type="checkbox"/>	Form 990-T (trust other than above)	<input type="checkbox"/>	Form 5227		

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of ► WELLS FARGO BANK  
Telephone No. ► (336) 747-8161 FAX No. ► 336-747-8722
- If the organization does not have an office or place of business in the United States, check this box . . . . . ► ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)         . If this is for the whole group, check this box . . . ► ☐. If it is for part of the group, check this box . . . ► ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 07/15/2011  
5 For calendar year \_\_\_\_\_, or other tax year beginning 09/01/2009, and ending 08/31/2010  
6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period  
7 State in detail why you need the extension COMPLYING INFORMATION FROM THE FOUNDATION  
TO PRODUCE AN ACCURATE TAX RETURN.

<b>8a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$ 197,549.
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	\$ 540,607.
<b>c Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$

## Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

DEBRA S. GORDY

**Signature** ▶

Title ► TRUST OFFICER

Date ► 04/09/2011

Form 8868 (Rev. 4-2009)