Department of the Treasury

For the 2006 calendar year, or tax year beginning

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

2006, and ending

20

OMB No. 1545-0047

Open to Public Inspection

D Employer identification number B Check if applicable 200612 031730000 29 IB SMITH SHAVER LAW SCHOOL SCHOLARSHIP 2749954 Address change Ι E Telephone number R W DAVID EDWARDS W 4TH ST STE 12 Name change (336) 721-3548 initial return S WINSTON SALEM NC 27101-3806 Final return Other (specify) Amended return H and I are not applicable to section 527 organizations. Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable Application pending H(a) Is this a group return for affiliates? ☐ Yes ✓ No trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(b) If "Yes," enter number of affiliates ▶ G Website: ► N/A H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.) H(d) Is this a separate return filed by an Check here ▶ ☐ if the organization is not a 509(a)(3) supporting organization and its gross organization covered by a group ruling? Yes No receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return. Group Exemption Number ▶ Check ▶

if the organization is not required Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ to attach Sch. B (Form 990, 990-EZ, or 990-PF). Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.) Contributions, gifts, grants, and similar amounts received: 1a a Contributions to donor advised funds . . . 1b **b** Direct public support (not included on line 1a) 1c c Indirect public support (not included on line 1a) , , , , 1d d Government contributions (grants) (not included on line 1a) Total (add lines 1a through 1d) (cash \$_____ noncash \$_ 1e 2 Program service revenue including government fees and contracts (from Part VII, line 93) 2 3 3 248,864 4 4 Interest on savings and temporary cash investments 5 5 Dividends and interest from securities 6a 6a Gross rents 6c Net rental income or (loss). Subtract line 6b from line 6a. C 7 Other investment income (describe > Revenue (A) Securities (B) Other 8a Gross amount from sales of assets other 8a 8b **b** Less: cost or other basis and sales expenses. c Gain or (loss) (attach schedule) . . . 8d d Net gain or (loss). Combine line 8c, columns (A) and (B) Special events and activities (attach schedule). If any amount is from gaming, check here ightharpoonupa Gross revenue (not including \$ 9a contributions reported on line 1b) Less: direct expenses other than fundraising expenses 9c c Net income or (loss) from special events. Subtract line 9b from line 9a 10a 10a Gross sales of inventory, less returns and allowances . . 10c Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a . . 11 Other revenue (from Part VII, line 103) 11 248,864 12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11. 12 100,000 13 13 14 14 Management and general (from line 44, column (C)) 15 15 Fundraising (from line 44, column (D)) 16 16 Payments to affiliates (attach schedule) . . . Total expenses. Add lines 16 and 44, column (A) 17 17 148,864 18 Excess or (deficit) for the year. Subtract line 17 from line 12 18 6.285.655 19 Net assets or fund balances at beginning of year (from line 73, column (A)). 19 20 Other changes in net assets or fund balances (attach explanation) 20 Net 6,434,519 Net assets or fund balances at end of year. Combine lines 18, 19, and 20 21 21

	Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
	6b, 8b, 9b, 10b, or 16 of Part I.		Vy Total	services	and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ noncash \$)			in the second		
	If this amount includes foreign grants, check here	22a				
2b	Other grants and allocations (attach schedule)					
	(cash \$)	001-	100.000	100.000		
	If this amount includes foreign grants, check here	22b	100,000	100,000		
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				
25a	Compensation of current officers, directors,					
	key employees, etc. listed in Part V-A (attach schedule)	25a				
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B (attach				ļ	
	schedule)	25b				
C	Compensation and other distributions, not included above, to					
	disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c				
26	Salaries and wages of employees not included					
	on lines 25a, b, and c	26				
27	Pension plan contributions not included on lines 25a, b, and c	27				
28	Employee benefits not included on lines 25a - 27	28				
29	Payroll taxes	29				
0	Professional fundralsing fees	30				
11	Accounting fees	31				
32	Legal fees	32				
33	Supplies	34				
14 15	Telephone	35				
36	Occupancy	36				
37	Equipment rental and maintenance	37				
88	Printing and publications	38				
89	Travel	39				
10	Conferences, conventions, and meetings	40				
H	Interest	41				
12	Depreciation, depletion, etc. (attach schedule)	42				
13	Other expenses not covered above (itemize):	400				
		43a 43b				
		43c				
		43d				
		43e				
f		43f				
-		43g				
4	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines		400 000	***		_
	t Costs. Check ► ☐ if you are following SOP	44	100,000	100,000	-0-	-0-

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clears served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)) and (4) organizations and 947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others, attending one of five designated law schools, in the amount of \$300,000, payable over three years (to cover the 3 years of law school). In 2006, \$100,000 was paid with \$100,000 to be paid in 2007 and \$100,000 on 2008. In 2007, the Scholarship Fund committed to new funding of \$300,000 payable in egual installments over three years. Thus, total scholarship payments in 2007 will be \$200,000 (\$100,000 for the 2006 award cycle and \$100,000 for the 2007 award cycle and \$100,000 for the 2006 award cycle and \$100,000 for	Wh	at is the organization's primary exempt purpose? Grant Need-Based Scholarships to Attend Law School	Program Service
organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.) a The Scholarship Fund, through its supported organizations, awarded scholarships to 11 North Carolina residents attending one of five designated law schools, in the amount of \$300,000, payable over three years (to cover the 3 years of law school). In 2006, \$100,000 was paid with \$100,000 to be paid in 2007 and \$100,000 in 2008. In 2007, the Scholarship Fund committed to new funding of \$300,000 payable in equal installments over three years. Thus, total scholarship payments in 2007 will be \$200,000 (\$100,000 for the 2006 award cycle and \$100,000 for the 2007 award cycle). From the 2008 award cycle forward, payments will be made for students in each law school class. (Grants and allocations \$ 100,000 If this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	All of o	organizations must describe their exempt purpose achievements in a clear and concise manner. State the number	(Required for 501(c)(3) and
attending one of five designated law schools, in the amount of \$300,000, payable over three years (to cover the 3 years of law school). In 2005, \$100,000 was paid with \$100,000 to be paid in 2007 and \$100,000 in 2008. In 2007, the Scholarship payments in 2007 will be \$200,000 (\$100,000 for the 2006 award cycle and \$100,000 for the 2007 award cycle). From the 2008 award cycle forward, payments will be made for students in each law school class. (Grants and allocations \$ 100,000) if this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ d (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □ (Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	orga	anizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	trusts; but optional for others.)
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(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □			
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f Total of Program Service Expenses (should equal line 44, column (B), Program services)		Total of Program Service Expenses (should equal line 44, column (B), Program services)	100 000

Form **990** (2006)

Pa	irt IV	Balance Sheets (See the Instructions.)			
		Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing		45	
	46	Savings and temporary cash investments	6,285,655	46	6,434,519
	47a	Accounts receivable			
		Less: allowance for doubtful accounts 47b		47c	
		Edds. unowaride for doubtful accounts.		MAN	
	48a	Pledges receivable			
		Less: allowance for doubtful accounts . 48b		48c	
	49	Grants receivable		49	
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	h	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51a	Other notes and loans receivable (attach			
Assets	0.0	schedule)			
	ь	Less: allowance for doubtful accounts 51b		51c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges		53	
	54a	Investments—publicly-traded securities ▶ ☐ Cost ☐ FMV ☐		54a	
		Investments—other securities (attach schedule) Cost FMV		54b	
	55a	Investments—land, buildings, and			
		equipment: basis			
	b	Less: accumulated depreciation (attach			
		schedule)		55c	
	56	Investments—other (attach schedule)		56	
	57a	Land, buildings, and equipment: basis . 57a			
	b	Less: accumulated depreciation (attach			
		schedule) ,		57c	
	58	Other assets, including program-related Investments		58	
	59	(describe ►) Total assets (must equal line 74). Add lines 45 through 58	6,285,655		6,434,519
	60	Accounts payable and accrued expenses		60	
	61	Grants payable		61	
	62	Deferred revenue		62	
es	63	Loans from officers, directors, trustees, and key employees (attach			
=======================================		schedule)		63	
Liabilitie	64a	Tax-exempt bond liabilities (attach schedule)		64a	
J	b	Mortgages and other notes payable (attach schedule)		64b	
	65	Other liabilities (describe >)		65	
	66	Total liabilities. Add lines 60 through 65	-0-	66	-0-
	Orga	anizations that follow SFAS 117, check here ▶ ☐ and complete lines			
Ŋ		67 through 69 and lines 73 and 74.			
ည	67	Unrestricted		67	
alai	68	Temporarily restricted		68	
ä	69	Permanently restricted		69	
Net Assets or Fund Balances	Orga	anizations that do not follow SFAS 117, check here ► ☑ and complete lines 70 through 74.			
or .	70	Capital stock, trust principal, or current funds		70	
ţ	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
SSe	72	Retained earnings, endowment, accumulated income, or other funds	6,285,655	72	6,434,519
Ä	73	Total net assets or fund balances. Add lines 67 through 69 or lines			
Ne		70 through 72. (Column (A) must equal line 19 and column (B) must			
		equal line 21)	6,285,655		6,434,519
	74	Total liabilities and net assets/fund balances. Add lines 66 and 73	6,2 8 5, 6 55	74	6,434,519

ra	IC IV-A	instructions.)	ited Financial Statem	ents With Rev	enue per	Return	See the
a	Total reve	enue, gains, and other support per audite	ed financial statements			а	N/A
b		included on line a but not on Part I, line					
1	Net unrea	alized gains on investments		b1			
2	Donated	services and use of facilities		b2		31.57	
3	Recoverie	es of prior year grants		_b3			
4	Other (sp	ecify):					
				b4			
		b1 through b4				b	
С						C	
d		included on Part I, line 12, but not on lin					
1		nt expenses not included on Part I, line		d1			
2	Other (sp	ecify):		امدا			
	A	d4 and d0		d2			
е	Total rev	d1 and d2 renue (Part I, line 12). Add lines c and d				d	
	rt IV-B	Reconciliation of Expenses per Aug	dited Financial Stater	nents With Ex	penses p	er Retur	n
а	Total exp	enses and losses per audited financial s			T	а	N/A
b	Amounts	included on line a but not on Part I, line	17:				
1	Donated	services and use of facilities		b1			
2	-	r adjustments reported on Part I, line 20		b2			
3	Losses re	eported on Part I, line 20		b3			
4	Other (sp	ecify):					
				b4			
		b1 through b4				b c	
C						機関数	
ď		included on Part I, line 17, but not on lin		i d1			
1		nt expenses not included on Part I, line		di			
2	Other (sp	ecify):		d2			
	Add lines	s d1 and d2				d	
е	Total ex	penses (Part I, line 17). Add lines c and	d	<u> </u>	▶	е	
Pa		Current Officers, Directors, Trustees					, director, trustee,
		or key employee at any time during the year	(B)	(C) Compensation		_	(E) Expense account
		(A) Name and address	Title and average hours per week devoted to position	(If not paid, enter	benefit plan	s & deferred ation plans	and other allowances
See	attachmen	ıt	Wook devoted to position		Compone	anon plans	
			•				
		-					
							
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				I	1		1

Par	t V-A Current Officers, Directors, Trustees	s, and Key Employe	es (continued)		Yes No	
75a	Enter the total number of officers, directors, and transetings	ustees permitted to vo	ote on organizatio	n business at board		
			▶ .			
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent						
	contractors listed in Schedule A, Part II-A or	II-B, related to each	other through	family or business		
	relationships? If "Yes," attach a statement that ide		-	. , ,	75b	
С	Do any officers, directors, trustees, or key compensated employees listed in Schedule A,	employees listed in	Form 990, Pa	rt V-A, or highest		
	independent contractors listed in Schedule A,	Part II-A or II-B, rec	ceive compensati	ion from any other		
	organizations, whether tax exempt or taxable, that	at are related to the o	rganization? See			
	the definition of "related organization."	rmation described in			75c ✓	
d	Does the organization have a written conflict of in	nterest policy?	· · · · · ·	<u></u>	75d ✓	
Par	V-B Former Officers, Directors, Trustees, and	Key Employees That I	Received Comper	nsation or Other Ben		
	officer, director, trustee, or key employee re person below and enter the amount of comp	ceived compensation opensation opensation or other benef	or other benefits (di fits in the appropria	escribed below) during ate column. See the in	g the year, list that structions.)	
	(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances	
N/A			Since o ,			
		-				
		_				
		1				
		1	1			
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Dar	t VI Other Information (See the instruction	<u> </u>			Yes No	
76	Did the organization make a change in its activiti		nducting activities	27 If "Yes " attach a	(新疆)(A. 1987)(新疆(B))	
	detailed statement of each change				76	
77	Were any changes made in the organizing or gov		it not reported to	the IRS? ,	77	
700	If "Yes," attach a conformed copy of the change: Did the organization have unrelated business gro		or more during t	the year covered by		
10a	this return?	·			78a ✓	
b	If "Yes," has it filed a tax return on Form 990-T f	•			78b	
79	Was there a liquidation, dissolution, termination, a statement	or substantial contrac	tion during the ye	ear? If "Yes," attach	79 ✓	
80a	Is the organization related (other than by association common membership, governing bodies, truste					
_	organization?				80a ✓	
b	If "Yes," enter the name of the organization ▶			nonevemnt		
81a	Enter direct and indirect political expenditures. (S			-0-		
	Did the organization file Form 1120-POL for this				81b ✓	

Par	t VI Other Information (continued)	,	Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	7/12/19	✓
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)			
022	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	and the same	ALC: NO.
	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	1	
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		1
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		STATE OF THE PARTY.
85	gifts were not tax deductible?	85a		
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
J	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members			
	Section 162(e) lobbying and political expenditures			
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			30 11
	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
_	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f			
•	to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a			
	Gross receipts, included on line 12, for public use of club facilities			
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a		OTES LE	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a		√
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	E 7. 145.0	√
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		~
C	Enter: Amount of tax imposed on the organization managers or disqualified			
	persons during the year under sections 4912, 4955, and 4958			
	Effer. Affiddit of tax on line eac, above, reimbursed by the organization :		1	
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		✓
	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		V THE STATE OF THE
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8 9 q		
902	at any time during the year?			
	Number of employees employed in the pay period that includes March 12, 2006 (See			
				-0-
91a	instructions.) The books are in care of ▶ W. David Edwards Located at ▶ One West Fourth Street, Suite 1200, Winston-Salem, N.C. [90b] Telephone no. ▶ (336) ZIP + 4 ▶ 27101		1-354	8
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			T 2
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	91b	Sull Ment le	
	If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
	with the control of the control	HEELE OF		COLUMN TO SERVICE

Part	VI Other Information (continued)						Page O
			-1-4-116				Yes No ✓
<i>U ,</i>	At any time during the calendar year, did the If "Yes," enter the name of the foreign count					BIC	
92	Section 4947(a)(1) nonexempt charitable trus	ts filina Form 990	n in lieu of Form	1041Check	horo		▶□
í	and enter the amount of tax-exempt interest	received or accr	ued during the t	ax vear	▶ 1 92 1		, L
Part '	VII Analysis of Income-Producing A	ctivities (See th	ne instructions.)	- 02		
	Enter gross amounts unless otherwise		business income		lon 512, 513, or 514		(E)
indicat		(A)	(B)	(C)	(D)	Rela	ated or
93	Program service revenue:	Business code		Exclusion code	Amount		t function come
а							
b							
С							
d							
е							
f	Medicare/Medicaid payments						
g	Fees and contracts from government agencie						
94	Membership dues and assessments	l l					
95	Interest on savings and temporary cash investmen	its		14	248,864		
96	Dividends and interest from securities						
97	Net rental income or (loss) from real estate:		alle in the				
а	debt-financed property						
b	not debt-financed property						
98	Net rental income or (loss) from personal property	у				· ·	
99	Other investment income						
100	Gain or (loss) from sales of assets other than invento	ry					
101	Net income or (loss) from special events .						
102	Gross profit or (loss) from sales of inventory						
103	Other revenue: a						
þ		_					
C		-	_	-		├	
d		_		 			
е			2		248.864	 	-0-
104	Subtotal (add columns (B), (D), and (E))			to a bound of the state of the	240,004	<u> </u>	248,864
105 Note:	Total (add line 104, columns (B), (D), and (E Line 105 plus line 1e, Part I, should equal th						240,004
Part '				noses (See th	e instructions.)		
Line						accomr	olishment
▼	the state of the s				portainty to the	4000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
N/A	1						
Part	IX Information Regarding Taxable Su	bsidiaries and D	isregarded Enti	ties (See the i	instructions.)		
	(A) Name, address, and EIN of corporation,	(B) Percentage of	(C)		(D)	End	(E) of-year
	partnership, or disregarded entity	ownership interest	Nature of a	ctivities	Total income		sets
N/A		%					
		%					
		%					
		%	1.5			<u></u>	
Part	X Information Regarding Transfers Ass	sociated with Per	sonal Benefit Co	ontracts (See ti	ne instructions.)		
(a) (b)	Did the organization, during the year, receive any funds, Did the organization, during the year, pay pr e: If "Yes" to (b), file Form 8870 and Form 4	remiums, directly	or indirectly, on				☑ No ☑ No
HOL	e. II Tes to to, the Form 6070 and Form 4	120 See insudct	ions).		_		

Part	is a controlling organization			itiles. Comp	nete only if the c	organiz	ation
106	Did the reporting organization ma the Code? If "Yes," complete the	ke any transfers to a contro	olled entity as d	lefined in sect	ion 512(b)(13) of	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	((Descri	C) ption of isfer	Amount o		er
а							
b [
С							
	Totals						
107	Did the reporting organization rec 512(b)(13) of the Code? If "Yes,"				section	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C Descrip	C) otion of esfer	Amount o	O) of transf	er
а							
b							
С							
	Totals		. White	Tesa	*		
108	Did the organization have a bindirents, royalties, and annuities des			2006, coverin	g the interest,	Yes	No
Pleas Sign Here	Under penalties of perjury, I declare that and belief, it is true, correct, and complete	have examined this return, including the Declaration of preparer (other the	accompanying scl	hedules and stater I on all information	8/15/07	of my kno	wledge
Paid	Type or print name and title Preparer's		Date	Check if self-	Preparer's SSN or PTIN	I (See Gen	, Inst, X)
Prepare Use Or				employed ► ☐ EIN Phone r	▶ ;		

Form **990** (2006)

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

Department of the Treasury Internal Revenue Service Name of the organization

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

Smlth/Sha	ver Law School Scholarship Fund, In	c.		20	2749954
Part I	Compensation of the Five High (See page 2 of the instructions. L	est Paid Employees O ist each one. If there a	ther Than Officere none, enter "I	ers. Directors. a	
(a) Name a	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 & deferred compensation	(e) Expense account and other altowances
None					
Total number	of other employees paid over \$50,000 .	-0-	TO SECURE OF THE PARTY OF THE P		
Part II-A	Compensation of the Five Highe (See page 2 of the instructions. List				
(a) N	ame and address of each independent contractor		<u> </u>	of service	(c) Compensation
None					
professional		-0-		第45 图 文 ·	
Part II-B	Compensation of the Five Higher (List each contractor who perform firms. If there are none, enter "No	ed services other than p	orofessional serv		lividuals or
(a) N	ame and address of each independent contractor			of service	(c) Compensation
None	and and address of dash mapping in contractor	paid more than \$60,000	(Б) Туро	01 3011/03	(c) compensation
					,
	or of other contractors receiving over other services	-0-	5 -4 2 5 5 5 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6		

Pai	Statements About Activities (See page 2 of the instructions.)	Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities MA (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		
	Organizations that made an election under section 501(h) by filling Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
а	Sale, exchange, or leasing of property?		✓_
b	Lending of money or other extension of credit?		✓
С	Furnishing of goods, services, or facilities?		✓
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		✓
е	Transfer of any part of its Income or assets?		✓
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	✓	
b	Did the organization have a section 403(b) annuity plan for its employees?		✓
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement		✓
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? . 3d		✓_
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g		1
b	Did the organization make any taxable distributions under section 4966?		
С	Did the organization make a distribution to a donor, donor advisor, or related person?		
d	Enter the total number of donor advised funds owned at the end of the tax year		
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year •		
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts		-0-
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year		-0-

Pa	rt (Reason for Non-Private	Foundation S	Status (See pages 4	through 7 c	of the instruc	tions.)
I ce	rtify	that the organization is not a priva	te foundation bed	cause it is: (Please check	k only ONE an	plicable box.)	
5		A church, convention of churches				process com,	
6		A school. Section 170(b)(1)(A)(ii). ((Also complete Pa	art V.)			
7		A hospital or a cooperative hospital	tal service organi	zation. Section 170(b)(1)	(A)(III).		
8		A federal, state, or local government	ent or governmer	ntal unit. Section 170(b)(1)(A)(v).		
9	9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city and state ▶						e hospital's name, city,
10		An organization operated for the be (Also complete the Support Scheo		or university owned or op	perated by a go	overnmental un	it. Section 170(b)(1)(A)(iv).
11a		An organization that normally rece 170(b)(1)(A)(vi). (Also complete the			a governmenta	l unit or from th	ne general public. Section
11b		A community trust. Section 170(b)(1)(A)(vi). (Also co	omplete the Support Sc	hedule in Parl	t IV-A.)	
12		An organization that normally recel from activities related to its charite from gross investment income ar organization after June 30, 1975.	able, etc., function and unrelated busi	ns—subject to certain ex ness taxable income (le	cceptions, and ss section 511	(2) no more the tax) from bus	nan 33%% of its support sinesses acquired by the
13	abla	An organization that is not contri requirements of section 509(a)(3).					and otherwise meets the
		✓ Type I ☐ Type II	☐Type I	III-Functionally Integrate	ed [Type III-Othe	ər
		Provide the following info	rmation about th	e supported organizat	ions. (See pag	ge 7 of the inst	ructions.)
Na	ame	(a) (s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the so organizati the sup organi	d) upported on listed in oporting zation's documents?	(e) Amount of support
					Yes	No	
		hools at:	50.050040				
		ell University, Incorporated	56-0529940	6	V		20,000
		niversity Carolina Central University	56-0532129 56-6000730	6	V		20,000 20,000
		sity of North Carolina at Chapel Hill	56-6001393	6	<u> </u>		20,000
		orest University	56-0532138	6	<i>\</i>		20,000
Tota						🕨	100,000
14		An organization organized and op	perated to test for	public safety. Section 5	509(a)(4). (See	page 7 of the	instructions.)

Note	t IV-A Support Schedule (Complete only: You may use the worksheet in the instructions	y If you checked for converting fr	a box on line 10), 11, or 12.) Use to the cash metho	cash method or	f accounting.
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15	Gifts, grants, and contributions received. (Do					, , ,
_	not include unusual grants. See line 28.).					
16	Membership fees received				_	
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose.					
18	Gross Income from Interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975.					
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other Income. Attach a schedule. Do not					
	include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22					
24	Line 23 mlnus line 17					
25	Enter 1% of line 23					
26	Organizations described on lines 10 or 11:		amount in colur	nn (e) line 24	▶ 26a	
b c d	Prepare a list for your records to show the nar governmental unit or publicly supported organizamount shown in line 26a. Do not file this list w Total support for section 509(a)(1) test: Enter li Add: Amounts from column (e) for lines: 18	ne of and amoun zation) whose tota ith your return. E ne 24, column (e)	t contributed by al gifts for 2002 finter the total of a 19	each person (oth through 2005 exce Ill these excess am	er than a seded the hounts > 26b 26c	
f	Public support percentage (line 26e (numera	ator) divided by	line 26c (denom	inator))	. ▶ 26f	%
27	Organizations described on line 12: a For person," prepare a list for your records to show Do not file this list with your return. Enter the	or amounts include the name of, and	ded in lines 15, total amounts re	16, and 17 that vecelved in each year	vere received from	om a "disqualifled
	(2005) (2004)		. (2003)		. (2002)	
b	For any amount included in line 17 that was receishow the name of, and amount received for each (Include in the list organizations described in lines the difference between the amount received and amounts) for each year:	ved from each per year, that was mo 5 through 11b, as to the larger amount	rson (other than " re than the larger well as individuals t described in (1)	disqualified person of (1) the amount a) Do not file this li or (2), enter the s	s"), prepare a list on line 25 for the st with your retui um of these diffe	for your records to year or (2) \$5,000. m. After computing rences (the excess
	(2005)		. (2003)		. (2002)	
С	Add: Amounts from column (e) for lines: 15		16 21		> 27c	
d	Add: Line 27a total	and line 27b tota		 	▶ 27d	
е	Public support (line 27c total minus line 27d to					At least order
f	Total support for section 509(a)(2) test: Enter a					
g	Public support percentage (line 27e (numera				▶ 27g	%
_ <u>h</u>	investment income percentage (line 18, colu					%
28	Unusual Grants: For an organization describe prepare a list for your records to show, for ea description of the nature of the grant. Do not the	ch year, the nam	e of the contrib	utor, the date and	amount of the	grant, and a brief

Part V	Private School Questionnaire (See page 9 of the instructions.)
	(To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	Yes No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31
32	Does the organization maintain the following:	
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	
	with student admissions, programs, and scholarships?	32c
ď	Copies of all material used by the organization or on its behalf to solicit contributions?	
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	
33	Does the organization discriminate by race in any way with respect to:	
а	Students' rights or privileges?	33a
b	Admissions policies?	33b
С	Employment of faculty or administrative staff?	33c
d	Scholarships or other financial assistance?	33d
е	Educational policies?	33e
f	Use of facilities?	33f
g	Athletic programs?	33g
h	Other extracurricular activities?	33h
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35

Pa	rt VI-A	Lobbying Expenditures by Ele (To be completed ONLY by an				e instructions	.)
Che	ck ▶ a 📋	if the organization belongs to an affilia			you checked "a" ar	nd "limited control"	provisions apply.
		Limits on Lobbyir (The term "expenditures" mear	•			(a) Affiliated group totals	(b) To be completed for all electing organizations
36	Total John	ying expenditures to influence public	<u>'</u>		36		or gui manorio
37		ying expenditures to influence a legis		, 4.	37		
38		ying expenditures (add lines 36 and					
39		mpt purpose expenditures					
40		npt purpose expenditures (add lines					
41		nontaxable amount. Enter the amoun					
			obbylng nontaxa	-	-		的差别
	Not over \$	\$500,000 20% (of the amount on	line 40)		
	Over \$500,	000 but not over \$1,000,000 . \$100,0	000 plus 15% of th	ne excess over \$5	500,000	W IN H	
	Over \$1,000		000 plus 10% of the			Marking Market Charles	2000
	Over \$1,50		000 plus 5% of the		発性の必要性 御りむり		
			0,000				
42		s nontaxable amount (enter 25% of II					<u> </u>
43		ine 42 from line 36. Enter -0- if line 4			• • • •		
44		ine 41 from line 38. Enter -0- if line 4					
	Caution: /	If there is an amount on either line 43	<u> </u>		Sept. 4 (1985)		
	(Sc	4-Year Av ome organizations that made a section See the instructions for		do not have to	complete all of the		elow.
			Lob	bying Expendit	ures During 4-Ye	ar Averaging P	eriod
	Calendar	year (or	(a)	(b)	(c)	(d)	(e)
	fiscal yea	r beginning in) ▶	2006	2005	2004	2003	Total
45	Lobbying	nontaxable amount					
46	Lobbying	ceiling amount (150% of line 45(e))			16 5 15		
47	Total lobb	ying expenditures					
48	Grassroot	s nontaxable amount					2
49	Grassroot	s ceiling amount (150% of line 48(e))	Same Man	the life had been been been been been been been bee			
50		s lobbying expenditures					
Pa	rt VI-B	Lobbying Activity by Nonelector (For reporting only by organization)			Part VI-A) (See	page 13 of th	e instructions.)
		, did the organization attempt to influ				ny Yes No	Amount
atte	mpt to influ	ence public opinion on a legislative n	natter or referend	ium, through the	use of:		
_	Volunteer						
b		or management (Include compensati	on in expenses r	eported on lines	c through h.).	· V	
C C		vertisements					
d	_	o members, legislators, or the public					Tyleria are
e f		ns, or published or broadcast statem other organizations for lobbylng purp					
g		ntact with legislators, their staffs, gov			· · · · · · · · · · · · · · · · · · ·		2
9 h		emonstrations, seminars, conventions		•	-		
ï	Total lobb	ying expenditures (Add lines c through	gh h.)				-0-
		any of the above, also attach a stat				activities.	

Sche	dule A	(Form 990 or 990-EZ)	2006					Page 7
Par	t VI			ransfers To and Transa e page 13 of the instruction	ctions and Relationships	With	Nonc	haritable
51					following with any other organion 527, relating to political organ			I In section
a	Trai	nsfers from the repo	orting organization	to a noncharitable exempt orga	nization of:	_		Yes No
	(i)	Cash				. 5	51a(i)	✓
	(II)	Other assets					a(ii)	✓
b	Oth	er transactions:						
	(i)	Sales or exchange	es of assets with a	noncharitable exempt organiza	tion		b(i)	√
	(ii)	Purchases of asse	ets from a nonchari		. [_	b(II)	✓	
	(iii)	Rental of facilities	, equipment, or oth	ner assets		. L	b(III)	✓
	(iv)	Reimbursement a	rrangements		. L	b(iv)	✓	
	(v)		_			. L	b(v)	✓
	(vi)	-		ship or fundralsing solicitations			b(vi)	✓
С				sts, other assets, or paid emplo	yees	. L	С	✓
d					. Column (b) should always show	the fair m	narket v	alue of the
	goo	ds, other assets, or	r services given by	the reporting organization. If the	ne organization received less that s, other assets, or services receiv	an fair ma		
(a)	(b)		(c)	(d)			
Line	no.	Amount Involved	Name of nonc	haritable exempt organization	Description of transfers, transaction	ns, and shar	ring arra	ngements
N	/A							
	des		01(c) of the Code (other than section 501(c)(3)) or	ne or more tax-exempt organization section 527?] Yes	☑ No
		(a)	ention	(b) Type of organization	(c) Description of re	alationehin		
•		Name of organiz	ERLION	Type of organization	Description of the			
Nor	ie							
_								40. 44
	-							
_	-	*****						
_					7-20-20-20-20-20-20-20-20-20-20-20-20-20-			
							_	
					-			
_								
	_							Three-care land
-								

SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC. EIN: 20-2749954

FORM 990 (2006) SCHEDULE ATTACHMENT

FORM 990, PART II, 22b Statement of Functional Expenses: Other Grants and Allocations

Law School Scholarship Awards:

Recipient	Grant Amount
Campbell University, Incorporated Buies Creek, North Carolina	\$20,000
Duke University Durham, North Carolina	\$20,000
North Carolina Central University Durham, North Carolina	\$20,000
University of North Carolina at Chapel Hill Chapel Hill, North Carolina	\$20,000
Wake Forest University Winston-Salem, North Carolina	\$20,000
Total	\$100,000

FORM 990, PART V-A Current Officers, Directors, Trustees and Key Employees

(A) Name and address	(B) Title and average hours per week	(C) Compensation	(D) Contributions to Employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Arch T. Allen, III Allen & Moore, LLP 3700 Computer Drive Suite 320 P.O. Box 18627 Raleigh, NC 27619-8627	Director (1 hour/week)	-0-	-0-	-0-
G. Eugene Boyce Boyce & Isley, PLLC Lawyers Weekly Building Suite 100 107 Fayetteville Street Mall P.O. Box 1990 Raleigh, NC 27602-1990	Director Chair of Board (2 hours/week)	-0	-0-	-0-

(A) Name and address	(B) Title and average hours per week	(C) Compensation	(D) Contributions to Employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Judge Wanda G. Bryant North Carolina Court of Appeals 1 West Morgan Street Raleigh, NC 27601	Director (1 hours/week)	-0-	-0-	-0-
W. David Edwards Womble Carlyle Sandridge & Rice, PLLC One West Fourth Street Winston-Salem, NC 27101	Director Secretary Treasurer (3 hours/week)	-0-	-0-	-0-
Judge Donald L. Smith North Carolina Court of Appeals, Retired 445 Van Thomas Drive Raleigh, NC 27615	Director (1 hour/week)	-0-	-0-	-0-
Keith W. Vaughan Womble Carlyle Sandridge & Rice, PLLC One West Fourth Street Winston-Salem, NC 27101	Director Vice Chair of Board (1 hour/week)	-0-	-0-	-0-
C. Colon Willoughby, Jr. Wake County District Attorney 3 rd Floor, Wake County Courthouse P.O. Box 31 Raleigh, NC 27602-0031	Director (1 hour/week)	-0-	-0-	-0-

FORM 990, PART V-A, 75b

Director/Vice President Keith W. Vaughan and Director/Secretary/Treasurer W. David Edwards are Members of the law firm Womble Carlyle Sandridge & Rice, PLLC. Mr. Vaughan was appointed to the Scholarship Fund by the Honorable Howard E. Manning, Jr., North Carolina Superior Court Judge. Mr. Edwards represents the Duke University School of Law on the Board. Mr. Vaughan and Mr. Edwards, along with Director/President G. Eugene Boyce, represented the plaintiff class members in the class action from which the Scholarship Fund received its initial endowment.

SMITH/SHAVER LAW SCHOOL SCHOLARSHIP FUND, INC. EIN: 20-2749954

FORM 990 (2006) SCHEDULE A ATTACHMENT

SCHEDULE A, PART III, 3a Statements About Activities-Scholarship Award Process

Smith/Shaver Scholarship awards are open to all North Carolina residents who attend or will attend one of five specified law schools located in North Carolina: the law schools at Campbell University, Incorporated, Duke University, North Carolina Central University, University of North Carolina at Chapel Hill, and Wake Forest University. Scholarships are full tuition or partial tuition and generally range between \$5,000 and \$20,000 per year. Scholarships are extended to students who have been accepted at one of the specified law schools and are automatically renewable for the second and third years of law school provided the recipient remains in good standing with his or her law school.

Scholarships are awarded to students at one of the specified law schools and are specific to that law school. Awards are based primarily on need.

Currently, a student accepted at one of the specified law schools and who requests financial assistance is eligible provided that student is a North Carolina resident. The Smith/Shaver Law School Scholarship Fund Inc. works with the Admissions Office of the law schools and offers scholarships based on recommendations made by a law school with respect to applicants accepted by that law school. Lump-sum payments are made to the law schools and allocated by the law schools.

There are no restrictions or limitations based upon race or the employment status of the prospective recipient or any relative of the prospective recipient. Scholarships awards are not based on the employment status of the applicant or any relative of the applicant.

The Smith/Shaver Law School Scholarship Fund, Inc. was established pursuant to the Order of the Honorable Howard E. Manning, Jr., North Carolina Superior Court Judge, by a grant from the Settlement Fund created in the consolidated class action <u>Donald L.</u> Smith, et al. v. State of North Carolina and Manila G. Shaver v. State of North Carolina.