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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For o	calend	lar year 2014 or tax year beginning , a	and ending				
	ne of four				A Emplo	oyer identification number	
S	tri	ckland Family Foundation			56	-1951984	
		street (or P O box number if mail is not delivered to street address)	Ro	oom/suite		none number (see instruction	s)
		Box 2273			910	0-425-8151	
•		, state or province, country, and ZIP or foreign postal code			C If exer	nption application is pending,	check here
		tteville NC 28302					
G C	heck a	all that apply 🔲 Initial return 🔲 Initial retu	rn of a former public cl	harity	D 1 Fo	reign organizations, check he	ere 🕨 📘
		Final return Amended	return)	reign organizations meeting t	
		Address change Name cha	inge		85	% test, check here and attach	computation >
н с	heck t	ype of organization $[\overline{\mathbf{X}}]$ Section 501(c)(3) exempt private	foundation			ate foundation status was terri	ninated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxabl	le private foundation		section	n 507(b)(1)(A), check here	▶ ∐
I Fa	ır marl	ket value of all assets at J Accounting method	X Cash Acc	rual	F If the f	oundation is in a 60-month te	rmination
en	d of ye	ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check h	ere 🕨 📘
lın	e 16) 🕽	▶ \$ 592,547 (Part I, column (d) must	be on cash basis)		L		
Pa	irt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	estment/	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	inco		ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	10,000				(Casil basis offly)
	2	Check ► If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	21,178		21,178		
	4	Dividends and interest from securities			,_,		
	5a	Gross rents	16,050		16,050		
Revenue	b	Net rental income or (loss) 16,050				·····	
	6a	Net gain or (loss) from sale of assets not on line 10					
	b	Gross sales price for all assets on line 6a					
	7	Capital gain net income (from Part IV, line 2)			0		
	8	Net short-term capital gain				, 0	
	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) Stmt 1	1,020				
	12	Total. Add lines 1 through 11	48,248		37,228	0	
<u></u>	13-	Compensation of officers directors, trustees, etc	0				
sėsúad	14	Offier employee salanes and wages					
éù	15-	Pension plans (employee benefits			-		
T	c1:6a	luega fees (attech schedule)					
ш	124	Pension plans (employee benefits legial fees (attach schedule) Accounting fees (attach schedule) Stmt 2	3,362				
MAY 2 6 2015 and Administrative Ex	, et	Other professionantees (attach schedule)					
	17	Interest					,
is/	18	Taxes (attach schedule) (see instructions) Stmt 3	2,818				
2.E	19	Depreciation (attach schedule) and depletion Stmt 4	6,410				
200	20	Occupancy		ļ			
≨ }	21	Travel, conferences, and meetings					ļ
a -	22	Printing and publications		ļ			
ျှစွာ	23	Other expenses (att sch) Stmt 5	110,278	1	10,278		
Operating	24	Total operating and administrative expenses.				_	_
e e	1	Add lines 13 through 23	122,868		10,278	0	
and GO.	25	Contributions, gifts, grants paid	39,450				39,450
	26	Total expenses and disbursements. Add lines 24 and 25	162,318	1	10,278	0	39,450
U?	27	Subtract line 26 from line 12	1				
	а	Excess of revenue over expenses and disbursements	-114,070				
	b	Net investment income (if negative, enter -0-)		ļ	0		
	l c	Adjusted net income (if negative, enter -0-)		l .		0	<u> </u>

	Part II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
_		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash			
	2	Savings and temporary cash investments	151,110	84,789	84,789
Ì	3	Accounts receivable ▶		Ì	
-		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
1		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		ļ	
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att schedule) ► See Wrk 307,169			
		Less allowance for doubtful accounts ▶ 0	349,125	307,169	307,169
2	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
&	10a	Investments – U S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule)			
	С	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.)	Ī		
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ► 178,446			
		Less accumulated depreciation (attach sch) ► Stmt 6 38,096	146,143	140,350	200,000
	15	Other assets (describe ► See Statement 7)	589	589	589
	16	Total assets (to be completed by all filers – see the			
-		instructions Also, see page 1, item l)	646,967	532,897	592,547
٦	17	Accounts payable and accrued expenses			
ł	18	Grants payable			, ,
es	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ᇛ	21	Mortgages and other notes payable (attach schedule)			
7	22	Other liabilities (describe ▶)			
1	23	Total liabilities (add lines 17 through 22)	0	0	
I	•	Foundations that follow SFAS 117, check here			
တ္ထု		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted			
Net Assets or Fund Bala	25	Temporarily restricted			
ñ	26	Permanently restricted	· ···		
팈		Foundations that do not follow SFAS 117, check here $ X $			
딘		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
et	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	646,967	532,897	
ž	30	Total net assets or fund balances (see instructions)	646,967	532,897	
ž	31	Total liabilities and net assets/fund balances (see		· · · · ·	
		instructions)	646,967	532,897	
ī	Part II			· · · · · · · · · · · · · · · · · · ·	***************************************
_		net assets or fund balances at beginning of year - Part II, column (a), line 30 (mu	st agree with		
		f-year figure reported on prior year's return)	· -	1	646,967
2		amount from Part I, line 27a		2	-114,070
		increases not included in line 2 (itemize) ▶		3	
		nes 1, 2, and 3		4	532,897
		eases not included in line 2 (itemize)		5	• • • • • • • • • • • • • • • • • • • •
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (l	b), line 30	6	532,897

	1d Losses for lax on investment in the last of property sold (e.g., real estate,	ent income	(b) How acquired	(c) Date acqu	ured (d) Date sold
	rehouse, or common stock, 200 shs MLC Co)		P - Purchase D - Donation	(mo , day, y	(mo , day, yr)
1a N/A		····			· — - — · · — · · · · · · · · · · · · ·
<u>b</u> .	·				
<u>c</u>			 -		
<u>d</u>			··· · · · · -		
<u>e</u>	(0.D				#10 On a see #10 on 10
(e) Gross sales price	(f) Depreciation allowed (or allowable)		expense of sale		(h) Gain or (loss) e) plus (f) minus (g)
а					
b					
С					
d					
е					-
Complete only for assets showing	g gain in column (h) and owned by the fo	undation on 12/	31/69	(I) Ga	ins (Col. (h) gain minus
(ı) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		excess of col (i) er col (j), if any		, but not less than -0-) or osses (from col. (h))
a					
b					
С	-				
d					
е					
2 Capital gain net income or (net ca	apital loss) If gain, also enter in If (loss), enter -0- in			2	
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6		´		
If gain, also enter in Part I, line 8,	column (c) (see instructions) If (loss), e	enter -0- ın	l l		
Part I, line 8		_		3	
Part V Qualification Un	ider Section 4940(e) for Reduc	<u>ed Tax on N</u>	<u>et Investment Incon</u>	ne	
	is part blank tion 4942 tax on the distributable amoun ify under section 4940(e) Do not compl		he base period?		Yes X N
1 Enter the appropriate amount in e	each column for each year, see the instr	uctions before n	naking any entries		_
(a) Base period years	(b)		(c)		(d) Distribution ratio
Calendar year (or tax year beginning in)			value of noncharitable-use assets		(col (b) divided by col (c))
2013		,685	692,2		0.05010
2012		,400 ,300	652,5 614,7		0.04352 0.04766
2011		,450	608,4		0.05168
2010		,185	581,0		0.04162
2009		, 105	301,0	50	0.01102
2 Total of line 1, column (d)				2	0.23459
	5-year base period – divide the total on l	ine 2 by 5, or by	the	 	
_	as been in existence if less than 5 years			3	0.04691
4 Enter the net value of noncharital	ble-use assets for 2014 from Part X, line	5		4	650,64
5 Multiply line 4 by line 3				5	30,52
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	30,52
8 Enter qualifying distributions from	n Part XII. line 4			8	39,45
	n line 7, check the box in Part VI, line 1b	, and complete	that part using a 1% tax ra	ــــــــــــــــــــــــــــــــــــــ	

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_Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)					
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1				
	here ▶ X and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of					
	Part I, line 12, col. (b)					^
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_2_				0
3	Add lines 1 and 2	3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			-	_ <u>0</u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				
6	Credits/Payments					
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 589					
b	Exempt foreign organizations – tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a through 6d	7				<u> 589</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				=
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				<u> 589</u>
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 589 Refunded ▶	11_	İ		_	
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?			<u>1a</u>		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					7.
	Instructions for the definition)?			1b	-	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities					
С	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	_				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers \$					4.5
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		 / .	4a_	<u> </u>	Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	-	X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			_	٠,	
	conflict with the state law remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Pa	rt XV		7	_^_	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NC					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"					
	complete Part XIV			9_	ļ	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				1	_
	names and addresses			10	<u> </u>	X
			1	Form 9	90-PI	(2014)

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Pa	urt 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 instructions)		11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified				
	person had advisory privileges? If "Yes," attach statement (see instructions)		12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of ▶ Joseph T. Strickland Telephone no ▶	910-4	25-	815	1
	P.O.Box 2273				
	Located at ▶ Fayetteville NC ZIP+4 ▶	28302			,ب
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	1			▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the year	15			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	1		Yes	No
	over a bank, securities, or other financial account in a foreign country?		16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If			Ì	
	"Yes," enter the name of the foreign country ▶				
P	rt 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)	(T.)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	□			
	disqualified person?	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	X No			
	the benefit or use of a disqualified person)? [Yes (C) Associate the approximation of the control of the con	X 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.) Yes	X No			
_	· · · · · · · · · · · · · · · · · · ·	A NO			
Þ	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 instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶ []	10		
С	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 2014?	N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	2., 22			
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and				
	6e, Part XIII) for tax year(s) beginning before 2014?	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20				
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 instructions)	N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
	▶ 20 , 20 , 20 , 20				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	_			
	at any time during the year?	X No			
b	If "Yes," did it have excess business holdings in 2014 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	ar 1-			
	foundation had excess business holdings in 2014)	N/A	3b	ļ	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its				4,
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b		<u> </u>
		F	om 95	9U-Ph	(2014)

	nd Family Foundation garding Activities for Which For		951984	nuod)		Page 6
		in 4/20 May be K	equired (conti	nueu)		
5a During the year did the foundation	• •	4045(-)\0		es 🗓 No		
• • • • •	wise attempt to influence legislation (section			es X No		
` '	specific public election (see section 4955),	or to carry on,		es X No		
cirectly or indirectly, any voter	•	•		 		
• •	il for travel, study, or other similar purpose		¥	es X No		
	tion other than a charitable, etc., organizat	tion described in	П.,	. .		
section 4945(d)(4)(A)? (see in	•		Y	es X No		
** *	than religious, charitable, scientific, literary	y, or educational		. .		
	of cruelty to children or animals?			es X No		
-	, did any of the transactions fail to qualify t			37 / 3	_	
•	a current notice regarding disaster assista	,		N/A	5b	
Organizations relying on a current	notice regarding disaster assistance check	k here		▶ 📋		
•	5a(4), does the foundation claim exemption	n from the tax	/- 🗀			
because it maintained expenditure	responsibility for the grant?		N/A 🗌 Y	es 📙 No		
If "Yes," attach the statement requ	ired by Regulations section 53 4945-5(d)					
6a Did the foundation, during the year	r, receive any funds, directly or indirectly, t	o pay premiums				
on a personal benefit contract?			Y	es 🗓 No		
b Did the foundation, during the year	r, pay premiums, directly or indirectly, on a	personal benefit contr	act?		6b	X
If "Yes" to 6b, file Form 8870					1	
7a At any time during the tax year, wa	as the foundation a party to a prohibited tax	x shelter transaction?	Y	es X No		
	any proceeds or have any net income atti			N/A	7b	
Part VIII Information Abo	ut Officers, Directors, Trustees,	Foundation Mana	agers, Highly	Paid Employ	ees,	
and Contractors						
1 List all officers, directors, trustees	s, foundation managers and their comp	ensation (see instruc	tions).			
		(b) Title, and average	(c) Compensation	(d) Contributions to	1	
(a) Nar	me and address	hours per week	(if not paid,	employee benefit plans and deferred		ense account, allowances
		devoted to position	enter -0-)	compensation		
Joseph Strickland	Fayetteville	President				
P.O. Box 2273	NC 28302	1.00	0		(0
					}	
2 Compensation of five highest-p	aid employees (other than those include	ed on line 1 – see ins	tructions). If non	e, enter		
"NONE."			•	•		
	1, 272	(t) Title and success		(d) Contributions to	I	
(a) Name and address of each en	nplovee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account, allowances
(-,		devoted to position		plans and deferred compensation	outer	anowances
NONE	· · ·			·	1	
NONE			ŀ		1	
					 	
		1				
			 		†	
			 		+	
···			 		+	
			l	<u> </u>		
Total number of other employees paid of	ver \$50,000					0 25 0
				F	om 99	0-PF (2014)

orm 990-PF (2014	Strickland Family Foundation	56-1951984	Page 7
Part VIII I	nformation About Officers, Directors, Trustees, Four	ndation Managers, Highly Paid E	mployees,
	nd Contractors (continued) -paid independent contractors for professional services (see ins	tructions) If none enter "NONE"	
3 Five Highest	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE ·	(a) Namia and addition of each person pare more than everyone	(6) 1) pe di cel ma	(c) components
Total number of oth	ners receiving over \$50,000 for professional services		>
Part IX-A	Summary of Direct Charitable Activities		
	ur largest direct charitable activities during the tax year include relevant statistical information r beneficianes served, conferences convened, research papers produced, etc	on such as the number of	Expenses
1 N/A			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see inst	tructions)	
	st program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
			-
2			
All other program-relat	ed investments. See instructions		
3			
			I

Total. Add lines 1 through 3

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

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

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 instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form 990-PF (2014)

39,450

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5

Pa	rt XIII Undistributed Income (se	<u>e instructions)</u>				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,		Corpus	Years prior to 2013	2013	2014
	line 7	Į.				32,532
2	Undistributed income, if any, as of the end of	2014				
а	Enter amount for 2013 only	ļ			1,002	
b	Total for prior years 20 , 20 ,	20				
3	Excess distributions carryover, if any, to 2014					
а	From 2009					
þ	From 2010					
С	From 2011					
d	From 2012					
е	From 2013					
f	Total of lines 3a through e					
4	Qualifying distributions for 2014 from Part XII,					
	line 4 ▶ \$39,450	1				
а	Applied to 2013, but not more than line 2a				1,002	
	Applied to undistributed income of prior years	ſ	·			
_	(Election required – see instructions)					
c	Treated as distributions out of corpus (Election	, [***************************************
	required – see instructions)					
А	Applied to 2014 distributable amount	Ī	·····			32,532
	Remaining amount distributed out of corpus	İ	5,916			
5	Excess distributions carryover applied to 2014					
5	(If an amount appears in column (d), the same	Г				
	amount must be shown in column (a))	·				
6	Enter the net total of each column as					
O	indicated below:	ļ				
_			5,916			
	Corpus Add lines 3f, 4c, and 4e Subtract line	, 5	3,710			
D	Prior years' undistributed income Subtract				į.	
	line 4b from line 2b	ŀ				
Ç	Enter the amount of prior years' undistributed			,		
	income for which a notice of deficiency has					
	been issued, or on which the section 4942(a)					
	tax has been previously assessed	}				
d	Subtract line 6c from line 6b Taxable					
	amount – see instructions	}	······			·····
е	Undistributed income for 2013 Subtract line					
	4a from line 2a. Taxable amount – see					
	instructions	}				
f	Undistributed income for 2014 Subtract lines	İ				
	4d and 5 from line 1 This amount must be	l				0
	distributed in 2015	ŀ				<u> </u>
7	Amounts treated as distributions out of corpus	5				
	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may be					
	required—see instructions)					
8	Excess distributions carryover from 2009 not					
	applied on line 5 or line 7 (see instructions)	ļ				
9	Excess distributions carryover to 2015.					
	Subtract lines 7 and 8 from line 6a		5,916			
10	Analysis of line 9					
а	Excess from 2010					
b	Excess from 2011					
С	Excess from 2012					
đ	Excess from 2013					
е	Excess from 2014	5,916				
						990 PE

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors None

Page 11 Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year Holmes Bible College School 10 Paul Beacham Way Greenville SC 29609 Religious 18,250 Northwood Temple Church 4250 Ramsey Street General Fund Fayetteville NC 28311 12,000 Salvation Army 220 East Russell Street 501(c)(3) General Fund 500 Fayetteville NC 28301 Cedar Creek Church of God 4010 Cedar Creek Road Church Fayetteville NC 28312 General Fund 1,000 Vision East Ministries - New Vision 501(c)(3) 1281 Ringwood Rd. Fayetteville NC 28312 General Fund 1,200 Stedman Pentecostal Holiness Church 501(c)(3) 432 Hillsboro St. General Fund 3,500 Stedman NC 28391 Bethany Church of God 7350 Maxwell Rd. Church General Fund Stedman NC 28391 1,000 Baywood PH Church Church 1830 Baywood Dr. Fayetteville NC 28312 General Fund 1,000 King's Court Ministries Church 2801 Ramsey St. General Fund 1,000 Fayetteville NC 28301 39,450 Total ▶ 3a Approved for future payment N/A

▶ 3b

Total

Form 990-PF (2014) Strickland Family Foundation 56-1951984 Page 12 **Analysis of Income-Producing Activities** Excluded by section 512, 513, or 514 Unrelated business income Enter gross amounts unless otherwise indicated (e) Related or exempt (c) (b) Exclusion code function income Business code Amount Amount (See instructions) 1 Program service revenue g Fees and contracts from government agencies 2 Membership dues and assessments 14 3 Interest on savings and temporary cash investments 21,178 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate a Debt-financed property 33 16,050 b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a 1,020 b Other Income d 0 38,248 12 Subtotal Add columns (b), (d), and (e) 13 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the Line No. accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) \mathbf{v} N/A

Part 3		Information Exempt O			insfers To and	d Transacti	ons and Relation	ships Wit	h Noncharita	ble		
1 Dic					e in any of the follo	owing with any	other organization de	scribed			Yes	No
ın s	section 50	01(c) of the Co					ection 527, relating to					
•	artization		na found	ation to a no	acharitable avamm	t organization	of					
	Cash	om the reporti	ing iouna	ation to a no	ncharitable exemp	ot organization	OI			1a(1)		X
	Other as	seets								1a(1)		X
, ,	ner transa									1.2(2)		
		assets to a n	noncharita	able exempt	organization					1b(1)		x
					exempt organization	วก				1b(2)		X
(3)	Rental o	of facilities, eq	uipment,	or other ass	ets					1b(3)		X
(4)	Reimbui	rsement arrar	ngements							1b(4)		X
(5)	Loans o	r loan guaran	tees							1b(5)		X
(6)	Perform	ance of service	ces or me	embership or	fundraising solicit	ations				1b(6)		<u> </u>
c Sh	aring of fa	acilities, equip	oment, ma	ailing lists, of	her assets, or paid	d employees				1c		X
					_		umn (b) should always					
		•		•	• •	-	If the foundation receiv					
		1			of noncharitable exemp		of the goods, other ass		nsactions, and sharing	arrangeme	nte	
(a) Lii	ne no	(b) Amount in	IIVOIVEU	(c) Name	or nonciamable exemp	A Organization	(u) Descriptio	iror transiers, tra	risactions, and starting	unungeme		
				,					** ***			
						· · · · ·						
												
												
						· · · · · · · · · · · · · · · · · · ·		-				
												
		<u> </u>		<u></u>			<u> </u>					
					with, or related to, than section 501(c		ax-exempt organization	าร		Y	os 🕱	l No
		n section 50 i (inplete the foll			than section 50 I(t	(3)) or in sec	10H 527 F			`''	C3 <u>111</u>	} 140
<u> </u>		a) Name of organi		iledale	(b) Type of o	rganization		(c) Descrip	tion of relationship			
N/		· • •										
							- 				. —	
	Lindor nor	nation of nomine	I declare th	at I have evamu	ned this return, including	a accompanying s	chedules and statements, an	d to the best of	my knowledge and beli	ef. it is tru		
	correct, a	nd complete Dec	claration of	preparer (other t	han taxpayer) is based	on all information	of which preparer has any kr	nowledge	May the IRS di		_	\neg
Sign					. (_			with the prepar	rer shown b	elow	_
Here	X	\wedge	0 -	11	David	, ,	6/1	\bigcirc	(see instruction	1s)?	Yes	No
		Joseph	41	She	CAL SUN	*	3/12/15	. Tre	sedent			
	Sign	ature of officer or	trustee			Da	ate	Title				
	Print/Ty	pe preparer's nar	me		-	Prepareds signs	ature J . I All	4D1 A1	Date		Check	ıf
Paid		_	_	_	_	1 White	- Type Oller	, , , , ,		00/=-	1	nployed
repare	r	iam Temp					Temple Allen,	CPA, P		08/15	•	
Jse Onl	V Firm's r			_	nple Aller		r.A.			0107: -183		
	Firm's a			cape (Center Dri	1Ve 8304				0-32		
	.1		Layer	<u> </u>	20, 40 2				THOUSIN 21			F (2014)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990. Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

Strickland Family Foundation 56-1951984 Organization type (check one). Section: Filers of: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Page 1 of 1

ane 2

Name of organization
Strickland Family Foundation

Employer identification number 56 - 1951984

Part I	Contributors (see instructions) Use duplicate copies of Pa	art I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Joe Strickland Joe Strickland Realty P O Box 2273 Fayetteville NC 28302	\$ 10,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
NO.	Hame, address, and all 14	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.10.		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c)Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

893 Strickland Family Foundation 56-1951984 FYE: 12/31/2014		Federal S	Federal Statements		2//	5/8/2015 8:31 AM
	Statement 1 - F	orm 990-PF, F	- Form 990-PF, Part I, Line 11 - Other Income	ther Income		
Description		ļ	Revenue per Books	Net Investment Income		Adjusted Net Income
Other Income Total			\$ 1,020	w w	w w	0
State	Statement 2 - Form		990-PF, Part I, Line 16b - Accounting Fees	counting Fees		
Description	•	Total	Net Investment	Adjusted Net	sted t	Charitable Purpose
WTA, CPA BOOKKEEPER Total	, , , , , , , , , , , , , , , , , , ,	962 2,400 3,362	w w	w w	\s \s	0
	Statement 3	3 - Form 990-PF,	PF, Part I, Line 18	3 - Taxes		
Description	•	Total	Net Investment	Adjusted Net	sted t	Charitable Purpose
Indirect Taxes/Licenses Total	w w	2,818	w w	w w		0
SI	Statement 4 - F	- Form 990-PF,	m 990-PF, Part I, Line 19 - [- Depreciation		
Description						
Date Cost P Acquired Basis De	Prior Year Depreciation	Method	Life	Current Year Depreciation	Net Investment Income	Adjusted Net Income
Land - 6843 Bryanstone Way 6/12/08 \$ 9,760 \$ 6843 Bryanstone Way 6/12/08 87,841 Land - 222 Glenola Drive 7/30/08 7,780	17,701	S/L	27.5 0	3,195	·γ·	v ₂
						1-4

4

893 Strickland Family Foundation

Federal Statements

56-1951984 FYE: 12/31/2014 Statement 4 - Form 990-PF, Part I, Line 19 - Depreciation (continued)

	Adjusted Net Income	W		\$
	Net Investment Income	٠		\$
	Current Year Depreciation	2,546 \$	699	6,410
	Life	27.5 \$	7	•
	Method	Ţ,	00DB	
	Prior Year Depreciation	13,898 S,	87 2	31,686
Description	Cost Fassis D	70,019 \$	6843 Bryanstor 2,430	177,830 \$
	Date Acquired	222 Glenola Drive 7/30/08 \$	Floor & Carpet - 6843 Bryanstone Way 10/21/13 2,430	Total \$

Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses

Charitable Purpose	ጭ									\$
Adjusted Net	₩									\$
Net Investment	₩		09	843	639	999	107,194	589	287	\$ 110,278
Total	Ŷ		09	843	639	999	107,194	589	287	\$ 110,278
Description		Expenses	Bank Fees	Advertising	Repairs	Utilities	Bad Debts	Insurance	Supplies	Total

	Net FMV	200,000	200,000
	ı	w l	တ္ ။
<u>ment</u>	End Accumulated Depreciation	38,096	38,096
nd Equip	End A Deg	w	₩.
nd, Building, a	End Cost / Basis	160,906 17,540	178,446
4 - Laı	Ö	৵	₩.
PF, Part II, Line 14 - Land, Building, and Equipment	Seginning Vet Book	128,603 17,540	146,143
	ш ~	·Ω·	Ϋ́
Statement 6 - Form 990	Description		Total

893 Strickland Family Foundation

56-1951984 FYE: 12/31/2014

Federal Statements

5/8/2015 8:31 AM

Statement 7 - Form 990-PF. Part II. Line 15 - Other Assets

<u>State</u>							
Description			inning Year	End of Year		Fair Market Value	
Prepaid Taxes		\$	589	\$	589	\$	589
Total		\$	589	\$	589	\$	589
Form 990-PF, P	art XV, Line 1a - I	Managers \	Who Cont	ributed	Over 2% c	or \$5,000	
Nar	me of Manager				Amount		
Joseph T. Strickland				\$		_	
Total				\$		0	
Form 990-PF,	Part XV, Line 2b	- Application	on Forma	t and Re	quired Co	ontents	
Form 990-PF, Contact Individual na	Description	-	on Forma	t and Re	quired Co	ontents	
Contact Individual na	Description	details				ontents	
Contact Individual na	Description amed in 2a for	details				ontents	
Contact Individual na	Description amed in 2a for o	details				ontents	
Contact Individual na Fore None	Description amed in 2a for o	details V, Line 2c	Submiss	sion Dea	<u>dlines</u>		
Contact Individual na Fore None	Description amed in 2a for or m 990-PF, Part XV Description	details V, Line 2c	Submiss	sion Dea	<u>dlines</u>		

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Name(s) shown on return

(99)

Attach to your tax return. ▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Identifying number

Strickland Family Foundation 56-1951984 Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filling separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 R 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2015 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property) (See instructions) Section A 6,410 MACRS deductions for assets placed in service in tax years beginning before 2014 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (business/investment use (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property placed in period service only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25-year property 25 vrs h Residential rental S/L 27 5 yrs MM property 27 5 yrs MM S/L MM Nonresidential real 39 yrs S/L property MM Section C-Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs S/L b 12-year С 40-year 40 yrs MM S/L Summary (See instructions) Part IV Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 6,410 here and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs