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Form 990-PF

Department of the Treasury

EXTENDED TO FEBRUARY 16, 2016 Return of Private Foundation

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

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

OMB No 1545-0052 2014

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service JUN 30, 2015 For calendar year 2014 or tax year beginning JUL 1. 2014 and ending Name of foundation A Employer identification number EVERGREEN FOUNDATION 56-1351883 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 28 A OAK STREET (828)456-8005City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here WAYNESVILLE, NC 28786 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 30,926,198. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (a) Revenue and expenses per books (b) Net investment (c) Adjusted net (d) Disbursements for charitable purposes (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) income income (cash basis only) 262,500 Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 642. 642. STATEMENT 377,381. 377,381 Dividends and interest from securities STATEMENT 5a Gross rents b Net rental income or (loss) 2,402,395 STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 27,478,955. 2,476,056 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 556,680.STATEMENT 568,909 12,229 11 Other income 611,827. 2,866,308 556,680 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 0. 0. 0 15 Pension plans, employee benefits crea Legal fees 7 2016 0. STMT 5 15,024. 0. 0 STMT 6 35,730. 7,146. 0. 10,719. Other professional lees T 205,990. 23,760, 59,040. STMT 0. 17 In@ DEN, Operating and Administrative 71,743. STMT 8 0 0. 0. 48-Taxes 19 Depreciation and depletion 318,712. 0. 0. 70,514. 0 0. 1,296. 20 Occupancy 6,617. 0 0. 0. 21 Travel, conferences, and meetings 22 Printing and publications 245,818 161,610 0 662. STMT 9 23 Other expenses 24 Total operating and administrative 970,148 71,717. 192,516 0. expenses. Add lines 13 through 23 669,870 669,870. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 0 741,587. 1,640,018 192,516 Add lines 24 and 25 27 Subtract line 26 from line 12: 1,971,809 a Excess of revenue over expenses and disbursements 2,673,792 b Net investment income (if negative, enter -0-) 556,680. c Adjusted net income (if negative, enter -0-)

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EVERGREEN FOUNDATION

741,587.

8

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

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.

	990-PF (2014) EVERGREEN FOUNDATION		<u> 1351</u>			age 4
_	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u>4948</u>	- see ii	nstru	ction	ns)
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)		1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here And enter 1%	1	<u> </u>	<u> </u>	3,4	<u>76.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
	Add lines 1 and 2	3	 	5	3,4	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	├──		~ .	<u>0.</u>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			3,4	76.
	Credits/Payments:					
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 22,135	•				
	Exempt foreign organizations - tax withheld at source 6b	-	1			
	Tax paid with application for extension of time to file (Form 8868) 6c 31,154	•				
	Backup withholding erroneously withheld 6d	┥ _	1	_	າ າ	00
	Total credits and payments. Add lines 6a through 6d	7			3,2 1	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				<u>09.</u> 96.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 			30.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2015 estimated tax	10 11	+			
	Enter the amount of line 10 to be: Credited to 2015 estimated tax ► Refunded ► Int VII-A Statements Regarding Activities	1 11	J			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	16 IU		i	Yes	No
ıa	any political campaign?	10 111		1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	n)?		1b	-	X
٠	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish			,,,		
	distributed by the foundation in connection with the activities.					
c	Did the foundation file Form 1120-POL for this year?			1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
_	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				
	managers. ► \$0 .					
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_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
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:		ļ			
	By language in the governing instrument, or By the language in the governing instrument, or	ta law				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	le iaw			v	
-	remain in the governing instrument?	4 /		6 7	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 Part X	. v	ļ		Λ	
0.	Enter the states to which the foundation reports or with which it is registered (see instructions)		ļ			
σa	· · · · · · · · · · · · · · · · · · ·					
	NC If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
U	of each state as required by General Instruction G? If "No," attach explanation		ļ	8b	х	
۵	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar				
J	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? if "yes," attach a schedule listing their names and addresses			10		X
			Forr	ո 990	-PF(2014)

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Pa	art 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		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privilege	'S?		
	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 ► EVERGREENFOUNDATIONNC.ORG			
14	The books are in care of ► THOMAS W. MCDEVITT Telephone no. ► (8			5
		<u>≥28786</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	l 93	· / 3	ш
40	and enter the amount of tax-exempt interest received or accrued during the year 15	N	/A Yes	No
10	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	16	165	X
	securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the		Ь——	
	foreign country	J	j	
Pa	art 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?	J No │		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		1	
	a disqualified person?		[1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		}	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	」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)?	ا No ل	[[
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1	1	
	If the foundation agreed to make a grant to or to employ the official for a period after	a.]	
	termination of government service, if terminating within 90 days.)	」No │		
0	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	(/2)	ĺ	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? None practice of selections related to the second regarding disaster assistance (see instructions)?	/A 1b		
^	Organizations relying on a current notice regarding disaster assistance check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
٠	before the first day of the tax year beginning in 2014?	10		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)):	1		
a	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?	〗No │		
	If "Yes," list the years \blacktriangleright			
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			
	•	/A 2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
0 -	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Ja	during the year? West Table 1998	TNo		
h	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after	טוו ני		
U	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,	[
		/A 3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 2014?	4b		X
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orm 990-PF (2014) EVERGREEN FOUNDATION			<u>56-13518</u>	83	F	⁵ age 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)			
5a During the year did the foundation pay or incur any amount to:						
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y6	s X No			
(2) Influence the outcome of any specific public election (see section 4955); o		ectly,		ŀ		
any voter registration drive?			s X No	1		i
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		s X No		ĺ	
(4) Provide a grant to an organization other than a charitable, etc., organizatio						
4945(d)(4)(A)? (see instructions)		X Ye	s No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or :					
the prevention of cruelty to children or animals?	or outdational parpootog of	\	s X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the excentions described					
section 53.4945 or in a current notice regarding disaster assistance (see instru		iii riogulationo		5b	x	
Organizations relying on a current notice regarding disaster assistance check h			▶□ □	-		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		uned				
	E STATEMENT 1		es No			ĺ
, , , , , ,		الما الم	:5 NU			
If "Yes," attach the statement required by Regulations section 53.494						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No			İ
a personal benefit contract?		Y6	S LALINO	C.L	}	v
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal denetit 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 s		Ye	es X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Higni	У			
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to		a) Evn	once
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	ac	count,	ense , other
(a) name and address	to position	`enter'-0-)	compensation		allowai	1ces
						_
SEE STATEMENT 15		0.	0.			<u>0.</u>
				1		
				<u> </u>		
				İ		
				<u> </u>		
2 Compensation of five highest-paid employees (other than those inc		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	(c	e) Exp	ense , other nces
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deterred compensation	1 6	allowai	nces
NONE						
	-					
					_	
		1		1		
		1				
				1		
Fetal number of other amplayage paid over \$50,000	1	<u></u>		1		0
Total number of other employees paid over \$50,000			Enrm	gan	-PF	(2014)
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Part VIII Information About Officers, Directors, Trustees, F Paid Employees, and Contractors (continued)	oundation Managers, Highly		
3 Five highest-paid independent contractors for professional services. If nor	ne, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Cor	npensation
TOM MCDEVITT		ľ	
28 OAK STREET, WAYNESVILLE, NC 28786	MANAGEMENT	118	,800.
			
Total number of others receiving over \$50,000 for professional services		>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relev number of organizations and other beneficiaries served, conferences convened, research pa	rant statistical information such as the apers produced, etc.	Expense	s
ı N/A			···
			
2			
3			
1			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the ta	x year on lines 1 and 2.	Amount	
N/A			
All other program-related investments. See instructions.			
3			
Fatal Add lines 1 through 3	▶ 1		0.

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	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	15,566,245
b	Average of monthly cash balances	1b	486,743
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	16,052,988
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.]]	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	16,052,988
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	240,795
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	15,812,193
6	Minimum investment return. Enter 5% of line 5	6	790,610
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	790,610
	Tax on investment income for 2014 from Part VI, line 5		
	Income tax for 2014. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	53,476
	Distributable amount before adjustments. Subtract line 2c from line 1	3	737,134
	Recoveries of amounts treated as qualifying distributions	4	0
	Add lines 3 and 4	5	737,134
	Deduction from distributable amount (see instructions)	6	0
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	737,134
	rt XII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	741,587
	Program-related investments - total from Part IX-B	1b	0
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	741,587
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	ncome. Enter 1% of Part I, line 27b	5	0
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	741,587
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies fo	r the section

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Part XIII Undistributed Income (see instructions)

				
•	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI.	Corpus	Tears prior to 2013	2013	2014
line 7				737,134.
2 Undistributed income, if any, as of the end of 2014				131,134.
a Enter amount for 2013 only			0.	
b Total for prior years:				
g rotal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013 6,925.				
f Total of lines 3a through e	6,925.			
4 Qualifying distributions for 2014 from	0,7200			
Part XII, line 4: ►\$ 741,587.				
a Applied to 2013, but not more than line 2a	Ì		0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)	j	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		<i>'</i>	
d Applied to 2014 distributable amount				737,134.
e Remaining amount distributed out of corpus	4,453.			
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	11,378.			
b Prior years' undistributed income. Subtract	1			
line 4b from line 2b		0.		
c 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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of	}			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	_		ŀ	
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.	11 252			
Subtract lines 7 and 8 from line 6a	11,378.			
0 Analysis of line 9:	1			
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013 6,925.				
e Excess from 2014 4,453.				Form 990-PF (2014)
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	EN FOUNDAT				351883 Page 1
Part XIV Private Operating F	oundations (see in	nstructions and Part VI	I-A, question 9)	N/A	
1 a if the foundation has received a ruling of	or determination letter tha	at it is a private operating			
foundation, and the ruling is effective fo	·	•	D		
b Check box to indicate whether the foun	dation is a private operat	ing foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed			j		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		 	 		
alternative test relied upon:					
a "Assets" afternative test - enter;(1) Value of all assets					
` '				-	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed		ļ <u> </u>	 	 	
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on			1	\	
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	the year-see inst	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed r	nore than \$5,000). (See	section 507(a)(2).)			
NONE					
b List any managers of the foundation wh			(or an equally large port	on of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater intere	est.			
NONE				- 	
2 Information Regarding Contribut					
				not accept unsolicited requ	
the foundation makes gifts, grants, etc.					<u>d d.</u>
a The name, address, and telephone num	ber or e-mail address of	the person to whom appl	cations should be addre	ssed:	
SEE STATEMENT 17					
b The form in which applications should be	pe submitted and informa	ation and materials they st	nould include:		
c Any submission deadlines:					
This outsing documents.					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	

Part XV Supplementary Information	n (continued)			
3 Grants and Contributions Paid During the	fear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of	contribution	Amount
	or substantial contributor	recipient	**	
a Paid during the year				
APPALACHIAN COMMUNITY SERVICES	NONE	NC	\$20,000 TO CONTINUE	
P O BOX 444			TRANSPORTATION TO AND	
MURPHY, NC 28906			FROM PSYCHIATRIC	
			INPATIENT FACILITIES	
			FOR VOLUNTARILY	20,000.
ADDITIONAL COMPANY CONTRACTOR			420 226 mg covmTVVV	
APPALACHIAN COMMUNITY SERVICES	NONE	NC	\$39,336 TO CONTINUE	
P O BOX 444		ļ	PROVIDING THE	
MURPHY, NC 28906		1	ALTERNATIVE SERVICE TO FORMER COMMUNITY	
			SUPPORT TEAM FOR	39,366.
CLEAN SLATE COALITION	NONE	PC	\$10,000 TO BEGIN AN	
P O BOX 455			EMPLOYMENT AND	
WEBSTER, NC 28788		1	TRAINING PROGRAM TO	
			SUPPORT WOMEN WHO HAVE	
	<u> </u>	-	BEEN INCARCERATED AND	10,000,
CONSTRUCTED THE CONOCCU	NO.YZ	700	613 100 mg HELD EIDID	
COMMUNITIES IN SCHOOLS 100 BRENDLE STREET	NONE	PC	\$13,100 TO HELP FUND THE SUBSTANCE ABUSE	
BRYSON CITY, NC 28713		1	PREVENTION PROGRAM FOR	
DRISON CITT, NC 20713			YOUTH AGE 10-14 AND	
		<u> </u>	THEIR FAMILIES.	13,100,
MOUNTAIN PROJECTS	NONE	₽C	\$11,504 TO PROVIDE	
2251 OLD BALSAM RD		1	FUNDING FOR THE	
WAYNESVILLE, NC 28786			PROVISION OF ELDER	
			ABUSE VICTIM	11 504
Total SEE CO	NTINUATION SHE	የጥ(ኖ)	ASSISTANCE EDUCATION 3a	11 504. 669 870.
b Approved for future payment				
170175				
NONE				
•				
·				
Total			<u>▶ 3b</u>	0.

Part XVI-A	Analy	sis of	Income-	-Producing	Activities
		,			

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		d by section 512, 513, or 514	(e)	
6 6	(a)	(b)	(c) Exclu-	(d)	Related or exempt	
1 Program service revenue:	Business	Amount	sion	Amount	function income	
a EXEMPT PURPOSE RENTAL						
b INCOME					539,798.	
C						
d						
e	- I					
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments	1 1		14	642.		
4 Dividends and interest from securities			14	377,381.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income			14	12,229.		
8 Gain or (loss) from sales of assets other						
than inventory	1		18	2,402,395.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a MISC INC FROM RENTALS					16,882.	
b						
C						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		0		2,792,647.	<u>556,680.</u>	
13 Total. Add line 12, columns (b), (d), and (e)				13	3,349,327.	
(See worksheet in line 13 instructions to verify calculations.)					·	

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). 														
38	FΑ	CII	ΙΤΥ	AND	HOU	SING	PRO	VIDEI) AT	LOW	RENT	то	MENTAL	HEALTH	COMMUNITY
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Form 990-PF (2014) 56-1351883 **EVERGREEN FOUNDATION** Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign shown below (see instr)? Here PRESIDENT X Yes Signature of officer or trustee Title Check Print/Type preparer's name Preparer's signature Date self- employed atl Paid 12/11/15 P00930007 KATHRYN M. ATKINSON **Preparer** Firm's EIN ► 56-1169449 Firm's name ► JOHNSON PRICE Use Only

Form 990-PF (2014)

Phone no. (828) 652-7044

Firm's address ▶ 500 NORTH MAIN STREET, SUITE 16

MARION, NC 28752

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2014

Name of the organization .	Employer identification number							
E\	56-1351883							
Organization type (check of	one):							
Filers of:	Section:							
Form 990 or 990-EZ 501(c)() (enter number) organization								
•	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.						
General Rule								
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor							
Special Rules								
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount line 1. Complete Parts I and II.	or 16b, and that received from						
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educeruelty to children or animals. Complete Parts I, II, and III.	-						
year, contributions is checked, enter hourpose. Do not co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from exclusively for religious, charitable, etc., purposes, but no such contributions totaled makere the total contributions that were received during the year for an exclusively religious amplete any of the parts unless the General Rule applies to this organization because it e, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., t received <i>nonexclusively</i>						
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule E Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

EVERG	REEN FOUNDATION	5 t	<u> </u>
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	HARRIS REGIONAL HOSPITAL 68 HOSPITAL RD SYLVA, NC 28779	\$ <u>262,500.</u>	Person Payroll Noncash X (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
		\$	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 Omnocash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

EVERGREEN FOUNDATION

56-1351883

art II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	3.5 ACRES OF LAND TO BE DEEDED TO THE ORGANIZATION UNDER TERMS OF		
	LEASE/OPTION AGREEMENT	\$ 262,500.	09/30/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of orga	anization		Employer identification number
EVERGR Part III	REEN FOUNDATION	ributions to organizations described	56-1351883 in section 501(c)(7), (8), or (10) that total more than \$1,000 for
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou	Columns (a) through (e) and the follov s, charitable, etc , contributions of \$1,000 or	VING LIDE ENTRY. For organizations
	Use duplicate copies of Part III if addition	al space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
ĺ			
(a) No. from	(h) Dumana af aift	()) ()	
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, ar		Relationship of transferor to transferee
	Transfer o name, ada ess, ar	M 211 + 7	nelationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
L			
}		(e) Transfer of gift	
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
.			
.		· · · · · · · · · · · · · · · · · · ·	
		(e) Transfer of gift	
- -	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
-			

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
H.A.V.E.N	NONE	₽C	\$5,000 TO PROVIDE	
4297 EAST US 64 ALTERNATE			FUNDING FOR 20	
MURPHY, NC 28906			COMMUNITY PARTNERS TO	
			ATTEND THE CHILD ABUSE	
			SYMPOSIUM AT LAKE	5,000
MERIDIAN BEHAVORIAL HEALTH SERVICES	NONE	PC	\$27,000 TO PROVIDE	
, INC		1	CONTINUATION OF THE	
154 MEDICAL PARK LOOP			JAIL ASSESSMENT AND	
SYLVA, NC 28779			TREATMENT PROGRAMS IN	
		 	HAYWOOD AND JACKSON	27,000
MERIDIAN BEHAVORIAL HEALTH SERVICES	NONE	PC PC	\$150,000 TO PROVIDE	
, INC			CONTINUATION FUNDING	
154 MEDICAL PARK LOOP			FOR THE PATIENT	
SYLVA, NC 28779			ASSISTANCE PROGRAM,	
		 	PROVIDING FREE	150,000
REGION A PARTNERSHIP FOR CHILDREN	NONE	PC	\$12,500 TO SUPPORT A	
116 JACKSON STREET		f	FAMILY SUPPORT NETWORK	
SYLVA, NC 28779			PROVIDING OUTREACH AND	
		ŀ	SERIVCES TO FAMILIES	
		 	OF CHILDREN WITH	12,500.
SOUTHWESTERN CHILD DEVELOPMENT	NONE	PC	\$50,000 TO SUPPORT THE	
P O BOX 250 .			FAMILY NURSE	
WEBSTER, NC 28788			PARTNERSHIP PROGRAM, A	
			VISITING NURSE PROGRAM	
		 -	FOR FIRST TIME MOTHERS	50,000.
THE ARC OF HAYWOOD COUNTY	NONE	PC	\$20,000 TO PROVIDE	
407 WELCH STREET			CONTINUATION AND	
WAYNESVILLE, NC 28786			EXPANSION OF THEIR	
			COMMUNITY LIVING AND	
			SUPPORTED EMPLOYMENT	20,000.
THE ARC OF HAYWOOD COUNTY	NONE	PC	\$3,825 TO PROVIDE	
107 WELCH STREET			FUNDING FOR AN	
NAYNESVILLE, NC 28786			EXPRESSIVE ARTS	
			THERAPY PROGRAM FOR	2 025
TER OWN LINGS OF ING	NONE		ONE_YEAR.	3,825.
LIFE CHALLENGE OF WNC	NONE	PC	\$5,000 TO PROVIDE	
P O BOX 2553			FUNDING FOR THE	
CULLOWHEE, NC 28723			UPGRADE OF THEIR	
			KITCHEN APPLIANCES AND	E 000
WEBSTER ENTERPRISES	NONE	na	FURNISHINGS IN THE SA	5,000.
	NONE	PC	\$9,341 TO HELP WITH	
140 LITTLE SAVANNAH RD			THE COST OF BECOMING	
SYLVA, NC 28779			ISO 13485 AND ISO 9001 CERTIFIED IN ORDER TO	
			,	0 2/1
ANDID I DAD ADIUM DEGDIME	NONE	COV	BRING MORE PRODUCTION	9,341,
MAPLE LEAF ADULT RESPITE	MONE	GOV	\$21,717 TO PROVIDE	
.57 PARAGON PKWY S			FUNDING FOR 2	
CLYDE, NC 28721			ADDITIONAL NURSES HOURS A DAY, O/T AND	
			P/T SUPPLIES OUTDOOR	21,717.
Total from continuation sheets		·	T, 2 2012 2120, COIDOON	575 900.

EVERGREEN FOUNDATION

3 Grants and Contributions Paid During the		T	_, <u>_</u>	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
ELIDA HOME	NONE	PC	\$12,815 TO PROVIDE	
2 COMPTON DRIVE			FUNDING TO EXPAND	
ASHEVILLE, NC 28806			FAMILY FOSTER CARE	
			PROGRAM INTO THE 7 WNC	
			COUNTIES, FUNDS WILL	12,81
CLAY COUNTY SCHOOLS	NONE	GOV	\$6,400 TO PROVIDE	
P.O. BOX 178			FUNDING FOR ADDITIONAL	
HAYESVILLE, NC 28904			STAFF IN THE SUMMER	
			DISCOVERY PROGRAM IN	
	1		ORDER_TO INCLUDE	6.400
APPALACHIAN COMMUNITY SERVICES	NONE	NC	\$60,000 TO PROVIDE	
750 US HWY 64 WEST			FUNDING FOR THE JAIL	
MURPHY, NC 28906			TREATMENT PROGRAM IN	
			CHEROKEE, CLAY,	
			GRAHAM MACON AND	60,000
APPALACHIAN COMMUNITY SERVICES	NONE	NC	\$12,557 TO PROVIDE	
750 US HWY 64 WEST		["	FUNDING TO EXPAND THE	
MURPHY, NC 28906			OFFICE SPACE AND THE	
nonthi, he hoses			PARKING AT THEIR RUSS	
			AVE. LOCATION.	_12.557
APPALACHIAN COMMUNITY SERVICES	NONE	NC	\$17,830 TO PROVIDE	12,55
750 US HWY 64 WEST	10112		SAFETY AND SECURITY	
MURPHY, NC 28906		•	ENHANCEMENTS TO THE	
MORITI, NO 20500		İ	BALSAM CENTER TO	
			INCLUDE MONITORING	17.830
THIRTIETH JUDICIAL DISTRICT DOMESTIC	NONE	PC	\$6,827 TO PROVIDE	17,000
VIOLENCE SEXUAL ASSAULT ALLIANCE		1	FUNDING FOR EFFORTS IN	
P O BOX 554			HAYWOOD AND EXPAND	
WAYNESVILLE, NC 28786			THROUGH FOUR REGIONAL	
WAINDOVIDED, NO 20700		1	TRAININGS REGARDING	6.827
JACKSON COUNTY PSYCH	NONE	NC	\$44,500 TO PROVIDE FOR	
98 D COPE CREEK	HONE		A PROJECT DIRECTOR TO	
SYLVA, NC 28779			WORK WITH FOUR MIDDLE	
31HVA, RC 20779			SCHOOLS TO DEVELOP THE	
			"BE THE DIFFERENCE"	44,500
APPALACHIAN COMMUNITY SERVICES	NONE	NC	\$13,639 TO PROVIDE	44,500
750 US HWY 64 WEST	NONE	NC	FUNDING FOR A VAN TO	
			BE USED IN THE SAIOP	
MURPHY, NC 28906			IN HAYWOOD AND JACKSON	
			I i	13 630
INDUSTRIAL OPPORTUNITIES	NONE	PC	S42,422 TO HELP	13,639
2586 BUSINESS HWY 19	HONE	1	DEVELOP A	
ANDREWS, NC 28901			"HOSPITALITY" PROGRAM SO THAT THEY CAN TRAIN	
			1	40 400
MULTIMITEMU TUDIOTAL DIGMOTOM DOVERNO	MONE	DC.	INDIVIDUALS WITH	42,422
THIRTIETH JUDICIAL DISTRICT DOMESTIC	NONE	PC	\$6,904 TO HELP PERFORM	
VIOLENCE SEXUAL ASSAULT ALLIANCE			A FEASIBILITY STUDY ON	
P O BOX 554			HOW TO DEVELOP A	
WAYNESVILLE, NC 28786			SPECIALIZED VETERANS	
			COURT_TREATMENT	6,904

EVERGREEN FOUNDATION

Part XV Supplementary Informati	on		56-135	
3 Grants and Contributions Paid During th	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
SOUTHWESTERN CHILD DEVELOPMENT	NONE	PC	\$16,500 TO PROVIDE	
P O BOX 250			CASE MANAGEMENT NEEDED	
WEBSTER, NC 28788			FOR THE WINTER	
			HOMELESS SHELTER	
			PROGRAM.	16,500
HAYWOOD PATHWAYS PROJECT	NONE	PC PC	\$21,000 TO PROVIDE	
P O BOX 1272			SUPPORT FOR AN INTAKE	
WAYNESVILLE, NC 28786			WORKER TO IDENTIFY	
			MH/SA/IDD NEEDS FOR	
		<u> </u>	THEIR YEAR ROUND	21,000
CHEROKEE SEED CORN, INC.	NONE	PC	\$10,123 TO HELP WITH	
1160 TOW STRING RD			STARTUP FUNDING TO	
CHEROKEE, NC 28719			RENOVATE A MOTEL WITH	
			10 UNITS FOR VETERANS	
		 	THAT ARE HOMELESS AND	10,123
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Total from continuation sheets				

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EVERGREEN FOUNDATION Part XV Supplementary Information	56-1351883
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
MANE OF RECEPTENT APPALACITAN COMPRISE CONTRACTOR	
NAME OF RECIPIENT - APPALACHIAN COMMUNITY SERVICES	
\$20,000 TO CONTINUE TRANSPORTATION TO AND FROM PSYCHIATRIC	INPATIENT
FACILITIES FOR VOLUNTARILY COMMITED CONSUMERS.	
	
NAME OF RECIPIENT - APPALACHIAN COMMUNITY SERVICES	
\$39,336 TO CONTINUE PROVIDING THE ALTERNATIVE SERVICE TO F	ORMER
COMMUNITY SUPPORT TEAM FOR INDIVIDUALS WITH BEHAVORIAL HEA	LTH NEEDS.
NAME OF RECIPIENT - CLEAN SLATE COALITION	
\$10,000 TO BEGIN AN EMPLOYMENT AND TRAINING PROGRAM TO SUP	PORT WOMEN
WHO HAVE BEEN INCARCERATED AND ARE TRANSITIONING BACK INTO	THE
COMMUNITY.	
NAME OF RECIPIENT - MOUNTAIN PROJECTS	
\$11,504 TO PROVIDE FUNDING FOR THE PROVISION OF ELDER ABUS	E VICTIM
ASSISTANCE, EDUCATION AND OUTREACH AND COORDINATION OF THE	
MULTIDISCIPLINARY APPROACH.	
NAME OF RECIPIENT - H.A.V.E.N	
\$5,000 TO PROVIDE FUNDING FOR 20 COMMUNITY PARTNERS TO ATT	END THE CHILD
ABUSE SYMPOSIUM AT LAKE JUNALUSKA IN SEPTEMBER.	

NAME OF RECIPIENT - MERIDIAN BEHAVORIAL HEALTH SERVICES ,INC \$27,000 TO PROVIDE CONTINUATION OF THE JAIL ASSESSMENT AND TREATMENT PROGRAMS IN HAYWOOD AND JACKSON COUNTIES.

NAME OF RECIPIENT - MERIDIAN BEHAVORIAL HEALTH SERVICES , INC \$150,000 TO PROVIDE CONTINUATION FUNDING FOR THE PATIENT ASSISTANCE

•
EVERGREEN FOUNDATION 56-1351883 Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
PROGRAM, PROVIDING FREE MEDICATION FOR INDIVIDUALS WITH BEHAVORIAL
HEALTH NEEDS.
HEADIN NEEDO.
NAME OF RECIPIENT - REGION A PARTNERSHIP FOR CHILDREN
\$12,500 TO SUPPORT A FAMILY SUPPORT NETWORK PROVIDING OUTREACH AND
SERIVCES TO FAMILIES OF CHILDREN WITH BEHAVORIAL, MENTAL HEALTH OR
DEVELOPMENTAL DISABILITIES.
DEVELOPMENTAL DISABILITIES.
NAME OF RECIPIENT - SOUTHWESTERN CHILD DEVELOPMENT
\$50,000 TO SUPPORT THE FAMILY NURSE PARTNERSHIP PROGRAM, A VISITING
NURSE PROGRAM FOR FIRST TIME MOTHERS THAT ARE BELOW POVERTY LEVEL.
NAME OF RECIPIENT - THE ARC OF HAYWOOD COUNTY
\$20,000 TO PROVIDE CONTINUATION AND EXPANSION OF THEIR COMMUNITY LIVING
AND SUPPORTED EMPLOYMENT PROGRAMS FOR ADULTS WITH INTELLECTUAL AND
DEVELOPMENTAL DISABILITIES.
NAME OF RECIPIENT - LIFE CHALLENGE OF WNC
\$5,000 TO PROVIDE FUNDING FOR THE UPGRADE OF THEIR KITCHEN APPLIANCES
AND FURNISHINGS IN THE SA RESIDENTIAL TREATMENT FACILITY FOR YOUNG
WOMEN AND PROVIDE LIFE SKILLS TRAINING.
NAME OF RECIPIENT - WEBSTER ENTERPRISES
\$9,341 TO HELP WITH THE COST OF BECOMING ISO 13485 AND ISO 9001

\$9,341 TO HELP WITH THE COST OF BECOMING ISO 13485 AND ISO 9001

CERTIFIED IN ORDER TO BRING MORE PRODUCTION GROWTH INTO THEIR COMMUNITY

REHAB FACILITY.

NAME OF RECIPIENT - MAPLE LEAF ADULT RESPITE

423655 05-01-14

i dit Av Cuppiementary imormation	Part XV	Supplementary	Information
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3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

\$21,717 TO PROVIDE FUNDING FOR 2 ADDITIONAL NURSES HOURS A DAY, O/T AND
P/T SUPPLIES, OUTDOOR RAISED GARDENTS, OUTDOOR FURNITURE, PROGRAM
SUPPLIES.

NAME OF RECIPIENT - ELIDA HOME

\$12,815 TO PROVIDE FUNDING TO EXPAND FAMILY FOSTER CARE PROGRAM INTO

THE 7 WNC COUNTIES. FUNDS WILL COVER TFCBT TRAINING FOR THE CLINICAL

SUPERVISOR IN MACON COUNTY AND ADDITIONAL TRAINING FOR TWO OTHER

CONSULTANTS WORKING IN HOMES.

NAME OF RECIPIENT - CLAY COUNTY SCHOOLS

\$6,400 TO PROVIDE FUNDING FOR ADDITIONAL STAFF IN THE SUMMER DISCOVERY PROGRAM IN ORDER TO INCLUDE INDIVIDUALS WITH I/DD THIS YEAR.

NAME OF RECIPIENT - APPALACHIAN COMMUNITY SERVICES

\$60,000 TO PROVIDE FUNDING FOR THE JAIL TREATMENT PROGRAM IN CHEROKEE,
CLAY, GRAHAM, MACON AND SWAIN COUNTIES.

NAME OF RECIPIENT - APPALACHIAN COMMUNITY SERVICES

\$17,830 TO PROVIDE SAFETY AND SECURITY ENHANCEMENTS TO THE BALSAM

CENTER TO INCLUDE MONITORING CAMERAS, SECURITY GLASS, OUTSIDE SECURITY

DOORS, AND ISOLATION ROOM WITH SECURITY DOOR.

NAME OF RECIPIENT - THIRTIETH JUDICIAL DISTRICT DOMESTIC VIOLENCE SEXUAL ASSAULT ALLIANCE

\$6,827 TO PROVIDE FUNDING FOR EFFORTS IN HAYWOOD AND EXPAND THROUGH
FOUR REGIONAL TRAININGS REGARDING "TRAUMA INFORMED RESPONSE" FOR
PROVIDERS.

423655 05-01-14

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - JACKSON COUNTY PSYCH

\$44,500 TO PROVIDE FOR A PROJECT DIRECTOR TO WORK WITH FOUR MIDDLE

SCHOOLS TO DEVELOP THE "BE THE DIFFERENCE" PROGRAM AND INTEGRATE IT

INTO THE CULTURE OF EACH SCHOOL.

NAME OF RECIPIENT - INDUSTRIAL OPPORTUNITIES

\$42,422 TO HELP DEVELOP A "HOSPITALITY" PROGRAM SO THAT THEY CAN TRAIN INDIVIDUALS WITH DISABILITIES FOR THE NEW JOBS THAT WILL BE AVAILABLE WHEN THE NEW HARRAH'S CASINO/HOTEL OPENS IN MURPHY.

NAME OF RECIPIENT - THIRTIETH JUDICIAL DISTRICT DOMESTIC VIOLENCE SEXUAL ASSAULT ALLIANCE

\$6,904 TO HELP PERFORM A FEASIBILITY STUDY ON HOW TO DEVELOP A SPECIALIZED VETERANS COURT TREATMENT PROGRAM.

NAME OF RECIPIENT - HAYWOOD PATHWAYS PROJECT

\$21,000 TO PROVIDE SUPPORT FOR AN INTAKE WORKER TO IDENTIFY MH/SA/IDD NEEDS FOR THEIR YEAR ROUND PROGRAM FOR HOMELESS MEN AND WOMEN.

NAME OF RECIPIENT - CHEROKEE SEED CORN, INC.

\$10,123 TO HELP WITH STARTUP FUNDING TO RENOVATE A MOTEL WITH 10 UNITS
FOR VETERANS THAT ARE HOMELESS AND NEEDING SERVICES AND SUPPORTS FOR
PTSD/SA.

FORM 990-PF INTER	EST ON SAVING	S AND TEMPORA	RY CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A) REVENUE PER BOOKS		(B) VESTMENT COME	(C) ADJUSTED NET INCOME
INTEREST INCOME -	BANK	64	2.	642.	642.
TOTAL TO PART I, L	INE 3	64	2.	642.	642.
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM	
WELLS FARGO	377,381.	0.	377,381.	377,381	377,381.
TO PART I, LINE 4	377,381.	0.	377,381.	377,381	377,381.

FORM 99	0-PF (GAIN OR (LOSS)	FROM SALE	OF A	SSETS	STATEMENT 3
DESCRIP	(A) TION OF PROPERTY	r				DATE QUIRED DATE SOLD
PUBLICL	Y TRADED SECURIT	 Ties		P	URCHASED	
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E)	(F) GAIN OR LOSS
-	27,478,955.	25,002,899.	·	0.	0.	2,476,056.
DESCRIP'	(A) TION OF PROPERTY	<u>r</u>				DATE QUIRED DATE SOLD
ABANDON: IMPROVE	ED LEASEHOLD MENTS			P	URCHASED	06/30/15
	(B)	(C)	(D)		(E)	(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPREC.	GAIN OR LOSS
	0.	207,878.		0.	134,217.	<73,661.
NET GAI	N OR LOSS FROM S	SALE OF ASSETS				2,402,395.
CAPITAL	GAINS DIVIDENDS	FROM PART IV				0.
TOTAL TO	O FORM 990-PF, F	ART I, LINE 6A				2,402,395.
FORM 990	0-PF	ОТНЕ	R INCOME			STATEMENT 4
DESCRIP:	rion		(A) REVENU PER BOO		(B) NET INVEST MENT INCOM	
	T INCOME HAMPTON			3,042		
	T INCOME BRITTAN PURPOSE RENTAL I C FROM RENTALS		539	1,187 9,798 5,882	•	7. 0. 539,798. 0. 16,882.
MISC INC	C IIIOII IIIIII			,		•

FORM 990-PF	LEGAL	FEES	នា 	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	15,024.	0.	0.	0.
TO FM 990-PF, PG 1, LN 16A	15,024.	0.	0.	0.
FORM 990-PF	ACCOUNTI	NG FEES	SI	PATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	35,730.	7,146.	0.	10,719.
TO FORM 990-PF, PG 1, LN 16B	35,730.	7,146.	0.	10,719.
FORM 990-PF (OTHER PROFES	SIONAL FEES	re	PATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADMINISTRATION CONTRACT PROPERTY MAINTENANCE INDEPENDENT CONTRACTORS	165,600. 40,140. 250.	23,760.	0. 0. 0.	59,040. 0. 0.
TO FORM 990-PF, PG 1, LN 16C	205,990.	23,760.	0.	59,040.
FORM 990-PF	TAX	ES	ST	PATEMENT 8
· · · · · · · · · · · · · · · · · · ·		(B)	(C)	(D)
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
DESCRIPTION PROPERTY TAX EXCISE TAX	EXPENSES	NET INVEST-		CHARITABLE

FORM 990-PF	OTHER E	XPENSES	Si	PATEMENT S		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
REPAIRS	80,098.	0.	0.	0.		
OFFICE EXPENSE INVESTMENT FEES	2,208. 161,610.	0. 161,610.	0. 0.	662. 0.		
DUES	978.	0.	0.	0.		
MISCELLANEOUS EXPENSE BANK CHARGES	913. 11.	0. 0.	0. 0.	0. 0.		
TO FORM 990-PF, PG 1, LN 23	245,818.	161,610.	0.	662.		

FORM 990-PF (OTHER NOTES	AND	LOANS	REPORTED	SEPARATELY	S'	TATEMENT	1
BORROWER'S NAME			TER	MS OF REPA	AYMENT	INT	EREST RATI	E
HAMPTON PROMISSORY 1	NOTE			ONE FINAL	STALLMENTS L BALLOON		7.00%	
DATE OF MATURITY NOTE DATE	ORIGINA LOAN AMOU			CRIPTION (COI	FMV OF NSIDERATIO	AC
08/29/02 11/01/07	141,	000.					113,12	7.
SECURITY PROVIDED BY	Y BORROWER	PUR	POSE (OF LOAN				
PURCHASE MONEY DEED	OF TRUST		CHASE PERTY	OF FORME	R HAMPTON			
RELATIONSHIP OF BORE	ROWER		В	ALANCE DUI	DOUBTFUL .		FMV OF LOAN	
				113,12	7.	0.		0
ORROWER'S NAME			TERI	MS OF REPA	AYMENT	INT	EREST RATI	3
	3RTY		179	EQUAL INS	TALLMENTS	INT	EREST RATI	Ξ
BRITTAIN TRACE PROPE	ERTY ORIGINA LOAN AMOU		179 AND PYM	EQUAL INS	STALLMENTS L BALLOON	**************************************		
BRITTAIN TRACE PROPE DATE OF MATURITY NOTE DATE	ORIGINA LOAN AMOU		179 AND PYM	EQUAL INS ONE FINAL CRIPTION (STALLMENTS L BALLOON	**************************************	7.00% FMV OF	 ON
DATE OF MATURITY NOTE DATE 05/28/03 05/30/18	ORIGINA LOAN AMOU 72,	250.	179 AND PYM DESC	EQUAL INS ONE FINAL CRIPTION (STALLMENTS L BALLOON	**************************************	7.00% FMV OF NSIDERATIO	 ON
DATE OF MATURITY NOTE DATE 05/28/03 05/30/18 DECURITY PROVIDED BY	ORIGINA LOAN AMOU 72, BORROWER	250. PUR	179 AND PYM DESC CONS	EQUAL INS ONE FINAL CRIPTION (SIDERATION OF LOAN	STALLMENTS L BALLOON	**************************************	7.00% FMV OF NSIDERATIO	 ON
DATE OF MATURITY NOTE DATE 05/28/03 05/30/18 ECURITY PROVIDED BY PURCHASE MONEY DEED	ORIGINA LOAN AMOU 72, BORROWER OF TRUST	250. PUR	179 AND PYM DESC CONS POSE (CHASE CE PRO	EQUAL INS ONE FINAL CRIPTION OF SIDERATION OF LOAN OF FORMER OPERTY	STALLMENTS L BALLOON OF	COI	7.00% FMV OF NSIDERATIO 58,943	 ON
NOTE DATE	ORIGINA LOAN AMOU 72, BORROWER OF TRUST	250. PUR	179 AND PYM DESC CONS POSE (CHASE CE PRO	EQUAL INS ONE FINAL CRIPTION OF SIDERATION OF LOAN OF FORMER OPERTY	STALLMENTS DE BALLOON R BRITTAIN DOUBTFUL ALLOWANG	COI	7.00% FMV OF NSIDERATIO 58,943	 ON

	C/CITY GOVERNMENT	OBLIGATIONS	STATEMENT 11
DESCRIPTION	U.S. OTHER GOV'T GOV'T	BOOK VALUE	FAIR MARKET VALUE
GOVERNMENT BONDS	<u>x</u>	84,822.	84,822.
TOTAL U.S. GOVERNMENT OBLIGATIONS	;	84,822.	84,822.
TOTAL STATE AND MUNICIPAL GOVERNM	ENT OBLIGATIONS		
TOTAL TO FORM 990-PF, PART II, LI	NE 10A	84,822.	84,822.
FORM 990-PF OT	HER INVESTMENTS		STATEMENT 12
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CORPORATE ASSET BACKED SECURITIES MONEY MARKET FUNDS	FMV FMV	153,924. 13,784,822.	153,924. 13,784,822.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	13,938,746.	13,938,746.
FORM 990-PF	OTHER ASSETS		STATEMENT 13
	BEGINNING OF	END OF YEAR	
DESCRIPTION	YR BOOK VALUE	BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION DEPOSIT CONTRIBUTION RECEIVABLE	YR BOOK VALUE 100. 0.	100. 262,500.	
DEPOSIT	100.	100.	VALUE 100.
DEPOSIT CONTRIBUTION RECEIVABLE TO FORM 990-PF, PART II, LINE 15	100.	100. 262,500.	VALUE 100. 262,500. 262,600.
DEPOSIT CONTRIBUTION RECEIVABLE TO FORM 990-PF, PART II, LINE 15	100.	100. 262,500.	VALUE 100. 262,500. 262,600.
DEPOSIT CONTRIBUTION RECEIVABLE TO FORM 990-PF, PART II, LINE 15 FORM 990-PF OT	100.	100. 262,500. 262,600.	VALUE 100. 262,500. 262,600. STATEMENT 14

	- LIST OF OFFICERS, DI S AND FOUNDATION MANAG		STAT	EMENT 15
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
JOHN BAUKNIGHT 175 HIDEWAY TRAIL HIGHLANDS, NC 28741	BOARD MEMBER 2.00	0.	0.	0.
KEVIN CORBIN P O BOX 758 FRANKLIN, NC 28744	BOARD MEMBER 2.00	0.	0.	0.
JOHN FEIL 765 GOLDMINE ROAD ROBBINSVILLE, NC 28771	BOARD MEMBER 2.00	0.	0.	0.
VICKI GORDON 52 DEER GLADE LANE WAYNESVILLE, NC 28786	TREASURER 4.00	0.	0.	0.
MARTY HYDAKER 300 JITTERBUG LANE CULLOWHEE, NC 28723	PRESIDENT 4.00	0.	0.	0.
JIMMY JOHNSON 518 HIGHWAY 64 EAST HAYESVILLE, NC 28904	BOARD MEMBER 2.00	0.	0.	0.
RALPH MURPHY 2757 COOPER'S CREEK ROAD BRYSON CITY, NC 28713	VICE PRESIDENT 2.00	0.	0.	0.
HUGH MOON 15 PAR THREE DRIVE SYLVA, NC 28779	BOARD MEMBER 2.00	0.	0.	0.
BILL TEAGUE 105 GALLOWAY STREET WAYNESVILLE, NC 28786	BOARD MEMBER 2.00	0.	0.	0.
RON YOWELL . 385 COWAN VALLEY ESTATES SYLVA, NC 28779	SECRETARY 2.00	0.	0.	0.
GLENN JONES P O BOX 87 BRYSON CITY, NC 28713	BOARD MEMBER 2.00	0.	0.	0.

EVERGREEN FOUNDATION			56-13	351883
DANA JONES 1755 HEALEY FIELDS RD ANDREWS, NC 28901	BOARD MEMBER 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.

56-1351883

EVERGREEN FOUNDATION

FORM 990-PF EXPENDITURE RESPONSIBILITY STATEMENT PART VII-B, LINE 5C

STATEMENT 16

GRANTEE'S NAME

APPALACHIAN COMMUNITY SERVICES

GRANTEE'S ADDRESS

750 US HWY 64 MURPHY, NC 28906

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED VERIFICATION DATE

20,000. 07/03/14

20,000.

08/20/15

PURPOSE OF GRANT

CASE MANAGEMENT TO PROVIDE ALTERNATIVE SERIVCE TO THE FORMER COMMUNITY SUPPORT TEAM FOR INDIVIDUALS WITH BEHAVORIAL HEALTH NEEDS.

DATES OF REPORTS BY GRANTEE

08/20/2015

ANY DIVERSION BY GRANTEE

NONE

RESULTS OF VERIFICATION

APPROVED THE EXPENDITURE REPORT

56-1351883

GRANTEE'S NAME

APPALACHIAN COMMUNITY SERVICES

GRANTEE'S ADDRESS

750 US HWY 64 MURPHY, NC 28906

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED VERIFICATION DATE

39,366. 07/03/14 39,366. 08/20/15

PURPOSE OF GRANT

TO CONTINUE TRANSPORTATION TO AND FROM PSYCHIATRIC INPATIENT FACILITIES FOR VOLUNTARILY COMMITTED CONSUMERS.

DATES OF REPORTS BY GRANTEE

08/20/2015

ANY DIVERSION BY GRANTEE

NONE

RESULTS OF VERIFICATION

APPROVED THE EXPENDITURE REPORT

APPALACHIAN COMMUNITY SERVICES

GRANTEE'S ADDRESS

750 US HWY 64 MURPHY, NC 28906

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED VERIFICATION DATE

12,557. 07/03/14

12,557.

10/15/14

PURPOSE OF GRANT

TO PROVIDE FUNDING TO EXPAND THE OFFICE SPACE AND PARKING AT THEIR RUSS AVENUE LOCATION.

DATES OF REPORTS BY GRANTEE

10/15/2014

ANY DIVERSION BY GRANTEE

NONE

RESULTS OF VERIFICATION

APPROVED THE EXPENDITURE REPORT

APPALACHIAN COMMUNITY SERVICES

GRANTEE'S ADDRESS

750 US HWY 64 MURPHY, NC 28906

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED VERIFICATION DATE

17,830.

07/03/14

17,830.

10/15/14

PURPOSE OF GRANT

TO PROVIDE SAFETY AND SECURITY ENHANCEMENTS TO THE BALSAM CENTER TO INCLUDE MONITORING CAMERAS, SECURITY GLASS, OUTSIDE SECURITY DOORS, AND ISOLATION ROOM WITH SECURITY DOOR.

DATES OF REPORTS BY GRANTEE

10/15/2014

ANY DIVERSION BY GRANTEE

NONE

APPALACHIAN COMMUNITY SERVICES

GRANTEE'S ADDRESS

750 US HWY 64 MURPHY, NC 28906

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED VERIFICATION DATE

15,000. 09/30/14 13,639. 05/01/15

PURPOSE OF GRANT

TO PROVIDE FUNDING FOR A VAN TO BE USED IN THE SAIOP IN HAYWOOD AND JACKSON COUNTIES.

DATES OF REPORTS BY GRANTEE

05/01/2015

ANY DIVERSION BY GRANTEE

NONE

APPALACHIAN COMMUNITY SERVICES

GRANTEE'S ADDRESS

750 US HWY 64 MURPHY, NC 28906

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED VERIFICATION DATE

60,000.

07/03/14

60,000.

08/20/15

PURPOSE OF GRANT

TO PROVIDE FUNDING FOR THE JAIL TREATMENT PROGRAMS IN CHEROKEE, CLAY, GRAHAM, MACON AND SWAIN COUNTIES.

DATES OF REPORTS BY GRANTEE

08/20/2015

ANY DIVERSION BY GRANTEE

NOT ALL FUNDS WERE EXPENDED

RESULTS OF VERIFICATION

NOT ALL FUNDS WERE UTILTIZED FOR THE PROGRAM SO THEY HAD TO RETURN \$35,309 TO EVERGREEN FOUNDATION AFTER 8/20/2015.

56-1351883

EVERGREEN FOUNDATION

GRANTEE'S NAME

JACKSON COUNTY PSYCH

GRANTEE'S ADDRESS

98D COPE CREEK SYLVA, NC 28779

 GRANT AMOUNT
 DATE OF GRANT
 AMOUNT EXPENDED
 VERIFICATION DATE

 44,500.
 09/30/14
 44,500.
 08/20/15

PURPOSE OF GRANT

TO PROVIDE FOR A PROJECT TO WORK WITH FOUR MIDDLE SCHOOLS TO DEVELOP THE "BE THE DIFFERENCE" PROGRAM AND INTEGRATE IT INTO THE CULTURE OF EACH SCHOOL.

DATES OF REPORTS BY GRANTEE

08/20/2015

ANY DIVERSION BY GRANTEE

NONE

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 17 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

TOM MCDEVITT 28 A OAK STREET WAYNESVILLE, NC 28786

TELEPHONE NUMBER NAME OF GRANT PROGRAM

828-456-8005

SUPPORT MENTAL HEALTH, SUBSTANCE ABUSE OR

DEVELOPMENTALLY DISABLED PEOPLE

EMAIL ADDRESS

TOM. EVERGREEN@ATT.NET

FORM AND CONTENT OF APPLICATIONS

THEY SHOULD FILL OUT THE GRANT APPLICATION PACKAGE AND SUBMIT TO THE EXECUTIVE DIRECTOR FOR COMPLETENESS. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED NOR RETURNED TO THE APPLICANT. APPROPRIATELY COMPLETED GRANT APPLICATIONS WILL BE PRESENTED TO THE BOARD FOR REVIEW AND CONSIDERATION AT REGULARLY SCHEDULED BOARD MEETINGS.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FUNDING WILL BE USED TO DIRECTLY SUPPORT THE MENTAL HEALTH, SUBSTANCE ABUSE OR DEVELOPMENTALLY DISABLED POPULATIONS. THE FUNDING WILL BE UTILIZED IN ONE OR MORE OF THE FOLLOWING COUNTIES: CHEROKEE, CLAY, GRAHAM, HAYWOOD, JACKSON, MACON OR SWAIN.

EVERGREEN FOUNDATION FIXED ASSETS - SCHEDULE 7/1/14-6/30/15

		Accumulated Depreciation	Ending Book Value
Land, Buildings, and Equipment	Orignial Cost	6/30/2015	6/30/2015
Buildings			
Buildings - 2183 Airport Road	\$618,292 11	\$465,126 80	\$153,165 31
Buildings - 1254 Church Street	427,487 09	\$427,487 09	\$0 00
Buildings - 131 Walnut Street	265,330 00	\$251,618 55	\$13,711 45
Buildings - 154 Medical Park Loop	1,479,089 23	\$924,430 58	\$554,658 65
Buildings - 100 Thomas Heights Road	447,283 03	\$381,819 01	\$65,464 02
Buildings - 44 Bonnie Lane	2,134,119 17	\$1,179,806 33	\$954,312 84
Buildings - 35 Aquifer Brae Lane	113,676 00	\$66,819 77	\$46,856 23
Buildings - 719 Fisher Creek	159,260 50	\$90,247 56	\$69,012 94
Buildings - 5696 Old Clyde Road	98,816 00	\$57,642 83	\$41,173 17
Buildings - 33 Sharon Lynn Way	149,427 38	\$84,677 07	\$64,750 31
Buildings - 211 Nellie John Drive	137,941 50	\$78,166 73	\$59,774 77
Buildings - 244 South Painter Road	149,136 50	\$84,510 97	\$64,625 53
Buildings - 28 A&B Oak Street	74,508 85	\$43,450 17	\$31,058 68
Buildings - 30 Arlington Extension	136,147 97	\$77,150 70	\$58,997 27
Buildings - 38, 40 & 42 Oak Street	99,291 00	\$53,231 24	\$46,059 76
Buildings - 205 Hazelwood Avenue	129,119 37	\$67,429 40	\$61,689 97
Buildings - 7 Gabriel Lane	106,050 19	\$50,078 73	\$55,971 46
Renovation - 33 Sharon Lynn Way	77,966 65	\$33,351 84	\$44,614 81
Buildings - 27 Aquifer Brae Road	93,123 55	\$35,439 13	\$57,684 42
Buildings - 91 Timberlane Road	1,073,054 09	\$427,731 86	\$645,322 23
Buildings - 144 Falls Circle Road	309,600 00	\$111,800 00	\$197,800 00
Renov - 33 Sharon Lynn Way	75,476 00	\$27,675 10	\$47,800 90
Renov - 91 Timberlane Road	447,089 82	\$143,441 73	\$303,648 09
Renov - 91 Timberlane Road	183,742 01	\$49,507 83	\$134,234 18
Sprinkler - 91 Timberlane Road	395,957 70	\$128,026 42	\$267,931 28
Renovation 719 Fisher Creek	78,656 66	\$13,546 38	\$65,110 28
Roof - 719 Fisher Creek	8,400 00	\$474 39	\$7,925 61
Renov - 1254 Church Street	53,450 00	\$2,227 05	\$51,222 95
Total Buildings	\$9,521,492.37	\$5,356,915.26	\$4,164,577.11
Equipment		64 (20 70	£0.00
Equipment - 1998	4,628 78	\$4,628 78	\$0.00
Telephones	1,900 00	\$1,900 00	\$0 00 \$0 00
HVAC	4,100 00	\$4,100 00	\$0 00 \$0 00
Telephone System - Cherokee Center	25,812 00	\$25,812 00	\$0.00
Telephone System - Clay Center	22,985 00	\$22,985 00	\$0.00
Telephone System - Haywood Center	28,308 75	\$28,308 75	\$0.00
Telephone System - Macon Center	24,507 33	\$24,507 33 \$21,510 96	\$0.00
Telephone System - Swain Center	21,510 96	\$21,510.96	\$0.00
Telephone System - Haywood Child & Family	27,868 00 6,000 00	\$27,868 00 \$4,071 51	\$1,928 49
HVAC-Bonnie Lane Computer Room Commerceail Washer - Balsam Center	•	\$4,071 51 \$1,080 30	\$4,969 70
	6,050 00 6,000 00	\$1,285 74	\$4,714 26
Heat Pump - Walnut Street 4 Ton Heat Pump - Jackson	6,796 00	\$1,132 74	\$5,663 26
Total Equipment	\$186,466.82	\$169,191.11	\$17,275.71
Other Fixed Assets			
Leasehold Improvements - East St	\$207,878 11	\$134,217 25	\$73,660 86
Parking Lot	16,381 00	\$16,381 00	\$0 00
Additions - 1997	7,550 18	\$7,550 18	\$0.00
Leasehold Improvements - Jackson	10,850 00	\$10,488 72	\$361 28
Parking Lot - 33 Sharon Lynn Way	13,837 00	\$8,302 32	\$5,534 68
Dispusal - leasehold improvement abandoned	-207 878 11	-134 217 25	-\$73,660 86
Total Other Fixed Assets	\$48,618.18	\$42,722.22	\$5,895.96

ak Street rood Avenue Brae Raod	6,253 55 6,651 41 \$383,584.72	\$0 00 \$0 00 \$0.00	\$6,253 55 \$6,651 41 \$383,584.72
rood Avenue	·	*	•
rood Avenue	·	*	•
ak Street			
	4,244 90	\$0 00	\$4,244 90
n Extension	5,368 24	\$0 00	\$5,368 24
Oak Street	2,484 73	\$0 00	\$2,484 73
Painter Road	5,368 24	\$0 00	\$5,368 24
John Drive	9,953 95	\$0 00	\$9,953 95
ynn Way (Stamey)	14,496 10	\$0 00	\$14,496 10
lyde Road	5,852 31	\$0 00	\$5,852 31
Creek	6,871 35	\$0 00	\$6,871 35
Brae Lane	6,135 14	\$0 00	\$6,135 14
Lane	36,994 88	\$0 00	\$36,994 88
s Heights Road	48,866 37	\$0 00	\$48,866 37
Street	110,239 21	\$0 00	\$110,239 21
h Street	31,442 58	\$0 00	\$31,442 58
rt Road	8,006 36	\$0 00	\$8,006 36
rcle Road	17,600 00	\$0 00	\$17,600 00
e Road	50,000 00	\$0 00	\$50,000 00
	6.755.40	\$0.00	\$6,755 40
e II (cle Road	Road 50,000 00 cle Road 17,600 00	Road 50,000 00 \$0 00 cle Road 17,600 00 \$0 00