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Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

▶ Information about Form 990 and its instructions is at www.lrs.gov/form990.

Open to Public Inspection

A I	For the 2	2014 calendar year, or tax year beginning $$ JUL 1 , $$ 2014 $$ and er	nding J	<u>UN 30, 2015</u>	
В	Check if applicable	C Name of organization CATAWBA VALLEY COMMUNITY COLLEGE		D Employer identific	ation number
	Address	FOUNDATION, INC.			
F	change Name	Doing business as	_	58-1	598131
F	lchange lnitial		loom/suite	E Telephone number	
늗	lreturn Final	2550 HIGHWAY 70 SE	iooni/suite		327-7000
	—Ireturn/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,978,731.
Г	Amender return			H(a) Is this a group re	
\vdash	Applica-			for subordinates	
	pending	140 34th Avenue NW, Hickory, NC 28601		H(b) Are all subordinates in	cluded? Yes No
1	Tax-exen	npt status X 501(c)(3)	527	If "No," attach a	ist (see instructions)
		: ► N/A		H(c) Group exemption	number 🕨
K	Form of o	rganization: X Corporation Trust Association Other	L Year	of formation: 1984 M	State of legal domicile: NC
P		Summary			
ą.	1 B	riefly describe the organization's mission or most significant activities. $\overline{ ext{THE}}$			
Governance	F	OSTER AND PROMOTE THE GROWTH, PROGRESS,			
ern	2 C	heck this box 🕨 🔛 if the organization discontinued its operations or dispose	ed of more	1 1	
Š	3 N	umber of voting members of the governing body (Part VI, line 1a)		3	16
త	1 -4 14	lumber of independent voting members of the governing body (Part VI, line 1b)		4	16
ies		otal number of individuals employed in calendar year 2014 (Part V, line 2a)		5	0
Activities	1	otal number of volunteers (estimate if necessary)		6	0.
AC		otal unrelated business revenue from Part VIII, column (C), line 12		7a	<u></u>
_	PN	let unrelated business taxable income from Form 990-T, line 34		7b Prior Year	Current Year
,		Sentularities and greats (Part VIII line 1h)	∯⊢	235,414.	1,503,750.
Revenue	8 0	contributions and grants (Part VIII, line 1h)	70II	0.	0.
ۆ ك	9 P	rogram service revenue (Part VIII, line 2g)	lö∏	75,714.	13,366.
<u>.</u> 2	10 Ir	other revenue (Part VIII, column (A), lines 5, 4, a light of the revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	S	0.	0.
. J	1	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		311,128.	1,517,116.
<u></u>		Grants and similar amounts paid (Part IX, column (A), lines (1.3)		227,480.	580,996.
_	1	enefits paid to or for members (Part IX, column (A), line 4)		0.	0.
_ ⊙o		salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
€.g	. ьт	otal fundraising expenses (Part IX, column (D), line 25)	<u>0. </u>		
Şû	17 C	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	31,703.	42,881.
	18 T	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		259,183.	623,877.
		Revenue less expenses Subtract line 18 from line 12		51,945.	89 <u>3,239</u> .
Net Assets or	3		Ве	ginning of Current Year	End of Year
Set	20 T	otal assets (Part X, line 16)		4,670,700.	5,594,602.
# S	21 T	otal liabilities (Part X, line 26)		75,004.	58,780.
_		let assets or fund balances. Subtract line 21 from line 20		4,595,696.	5,535,822.
	art II	Signature Block			
		ties of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is
tru	e, correct,	and complete. Declaration of preparer (other than officer) is based on all information of while	ich preparei	las any knowledge.	115
۵.	Ì	Signature of officer		Date	//
Sig		DAVID H. SAIN, CHAIRMAN			
He	re	Type or print name and title			
		Print/Type preparer's name	4.01	Date Check	PTIN
Pa		Laura H. Haigler, CPA QUAL Have	UPA I	10-1-15 If self-employ	P00637773
	r	Firm's name WHISNANT & COMPANY, LLP	,	Firm's EIN	56-1084523
	· -	Firm's address P. O. BOX 639			
		HICKORY, NC 28603		Phone no.82	8-322-1803
Ma	v the iR	S discuss this return with the preparer shown above? (see instructions)			X Yes No

58-1598131 Page 2 FOUNDATION, INC. Part III | Statement of Program Service Accomplishments X Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission THE FOUNDATION'S MISSION IS TO FOSTER AND PROMOTE THE GROWTH, PROGRESS, AND GENERAL WELFARE OF CATAWBA VALLEY COMMUNITY COLLEGE. THE FOUNDATION PROVIDES A VEHICLE THROUGH WHICH ANY INDIVIDUAL OR ORGANIZATION MAY INVEST/PARTICIPATE IN THE DEVELOPMENT OF CATAWBA Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes 🗓 No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 580,996. including grants of \$ 580,996.) (Revenue \$) (Expenses \$ SCHOLARSHIPS AND GRANTS PROVIDED TO VARIOUS STUDENTS AND EDUCATIONAL PROGRAMS OF CATAWBA VALLEY COMMUNITY COLLEGE 18,956. including grants of \$ __) (Revenue \$ (Code) (Expenses \$ OTHER ADMINISTRATION EXPENSES RELATING DIRECTLY TO PROGRAM SERVICES ______) (Revenue \$ (Code) (Expenses \$ including grants of \$ ____ Other program services (Describe in Schedule O) including grants of \$ 599,952. 4e Total program service expenses Form 990 (2014) Form 990 (2014) FOUNDATION, INC.

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
_	If "Yes," complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u>X</u>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	•		х
	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
4	duning the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		'	1
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44.	Х	
	Part VI	11a		
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		- 22
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in		-	
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?			l
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	 	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140	·	<u> </u>
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			1
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	ļ	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	_	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	(2014)

Form 990 (2014) FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

				T
04	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	204	-	
•	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"	1		
	complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	ŀ	х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	:	х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
•	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2014)

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return 2a b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3h 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? Х 4a b If "Yes," enter the name of the foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Х a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year 7d Х Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Х 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 13 a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c Х

14a

14b

....

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

 \mathbf{x} Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 16 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. 16 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 X of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Х Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? Яa X b Each committee with authority to act on behalf of the governing body? 8b is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule Q Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Х Did the organization have a written whistleblower policy? 13 13 Х 14 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Х 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available 18 for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records: TERESA BIGGS - 828-327-7000 28602-8302 NC 2550 HWY 70 SE HICKORY, NC, HICKORY

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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per		not c		rtior more	than		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)				recto	Highest compensated sorty.	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) DAVID SAIN CHAIRMAN	0.00							0.	0.	0.
(2) LARRY E. ROBINSON	0.00			-						
VICE-CHAIRMAN								0.	0.	0.
(3) TERESA BIGGS	15.00									
SEC./TREASURER EXEC.DIREC				ļ				0.	0.	0.
(4) KELLY FARR	0.00									
DIRECTOR			_			-		0.	0.	0.
(5) KIM GEORGE	0.00									
DIRECTOR	0.00			-		╁	_	0.	0.	0.
(6) RICK HOWARD	0.00							0.	0.	0.
DIRECTOR (7) JAMES TARLTON	0.00	_		\vdash		 		<u>.</u>		<u> </u>
DIRECTOR	0.00							0.	0.	0.
(8) MAURICE CAPPS	0.00						\vdash			
DIRECTOR		i						0.	0.	0.
(9) GARRETT HINSHAW	0.00									
DIRECTOR								0.	0.	0.
(10) CHARLES SNIPES	0.00									_
DIRECTOR			<u> </u>					0.	0.	0.
(11) DAVID UNDERDOWN	0.00									
DIRECTOR			<u> </u>	_				0.	0.	0.
(12) JACK HOKE	0.00							_	_	_
DIRECTOR			ļ	_	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(13) ROBIN NICHOLSON	0.00								_	
DIRECTOR	0.00		<u> </u>	<u> </u>		├	 	0.	0.	0.
(14) A. POPE SHUFORD	0.00								0.	,
DIRECTOR	10 00	_					\vdash	0.	0.	0.
(15) MARY BETH SJAARDEMA	10.00							0.	0.	0.
ASSISTANT	0.00	_	-	-	-	1	\vdash			<u> </u>
(16) FORREST FERRELL DIRECTOR	3.00							0.	0.	_0.
(17) DON COLEMAN	0.00		<u> </u>	 	 	t	T	· ·		
DIRECTOR	3.30							0.	0.	0.
432007 11-07-14										Form 990 (2014)

orm	990	(201)	4)

Part VII Section A. Officers, Directors,		ploye	ees,			ghes	st C					
(A)	(B))) 				(D)	(E)		(F)	
Name and title	Average		not cl	heck	ition more t	than o		Reportable	Reportable		Estimat	
	hours per week				rson is irector			compensation from	compensation from related	*	amount other	
	(list any	ē					ΓĖ	the	organizations	co	mpens	
	hours for	or director				9		organization	(W-2/1099-MISC)		from th	
	related	e 0-	stee			nsate		(W-2/1099-MISC)	(rganıza	
	organizations	trust	ıal tru		yee	adwo		`		a	nd rela	ted
	below	ndividual trustee	nstitutional trustee	ية	Key employee	est c loyee	뎔	1		or	ganızat	tions
	line)	μpu	Instr	Officer	Key (Highest compensated employee	툴					
(18) JOHN TEETER	0.00								_	1		
DIRECTOR								0.	0	•		<u>0.</u>
	-											
		_								_		
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		L										
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				 -	-		-	-		_		-
				<u> </u>						_		
to the second se			ļ	_			<u> </u>				-	
							├					
			L	<u> </u>			Ļ	-				
1b Sub-total								0.) .		0.
c Total from continuation sheets to P	art VII, Section A							0.) -		0.
d Total (add lines 1b and 1c)							<u> </u>	0.	L).		0.
2 Total number of individuals (including		nose	liste	ed a	bove	e) wh	ho r	eceived more than \$100	OOO of reportable			^
compensation from the organization	<u> </u>								· · · · · · · · · · · · · · · · · · ·		Yes	0 No
									1		165	140
3 Did the organization list any former of			e, ke	y er	nplo	yee	, or	highest compensated e	mployee on			v
line 1a? If "Yes," complete Schedule								h	Ale a	3		X
4 For any individual listed on line 1a, is									tne organization			X
and related organizations greater tha										4		 ^
5 Did any person listed on line 1a received							relat	ted organization or indiv	idual for services	_ ا		X
rendered to the organization? If "Yes,	<u>" complete Schedui</u>	e J t	or s	uch	pers	son				5		<u> A</u>
Section B. Independent Contractors							1	that received more than	\$100,000 of compa			
1 Complete this table for your five high										nsalio	HOIH	
the organization Report compensation		ear	enai	ng v	VILTI C	Or w	/(נרווו	·	year		(C)	
	A) siness address	NT/	ONI	-				(B) Description of s	services		co) pensati	on
		TAC)IA1				\dashv	· ·				
	· · · · · · · · · · · · · · · · · · ·											
						_						
									į			
2 Total number of independent contract	tors (including but r	not lu	mite	ed to	tho	se li	ster	d above) who received r	nore than	-		
\$100,000 of compensation from the						0 0						
# 100,000 or compensation nom the	organization -										000	

FOUNDATION, INC. Form 990 (2014)

Statement of Revenue

Part VIII

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Check if Schedule O contains a response or note to any line in this Part VIII (C) (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a Membership dues 1b Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 1,503,750 Q Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 503,750 **Business Code** Program Service Revenue f All other program service revenue q Total, Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 34.847 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (II) Other assets other than inventory 1,440,134 b Less cost or other basis and sales expenses 461,615 c Gain or (loss) -21,481 d Net gain or (loss) -21,481 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 а b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 а b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions.

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Form 990 (2014) FOUNDATION, INC.
Part IX Statement of Functional Expenses

secu	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			implete column (A)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals See Part IV, line 22	580,996.	580,996.		
3	Grants and other assistance to foreign	-			
_	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees				
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).				
	Management				
	Legal				
	Accounting	20,580.		20,580.	
	Lobbying	,			
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	16,219.	16,219.	- 1	
	Other (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O)				
12	Advertising and promotion				
13	Office expenses				• •
14	Information technology				
15	Royalties				
16	Occupancy	2,355.	2,355.		
17	Travel	•	•		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		İ		
19	Conferences, conventions, and meetings				
20	Interest	1,837.		1,837.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а		1,508.		1,508.	
b	BOARD MEETING EXPENSE	382.	382.		
C					
d					
е	·			0.00	
25	Total functional expenses. Add lines 1 through 24e	623,877.	599,952.	23,925.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Objects have The I have a company a company and a company			i I	

FOUNDATION, INC.

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 1 Cash - non-interest-bearing 1,596,826. 681,714. 2 2 Savings and temporary cash investments 405,996. 295,934. 3 3 Pledges and grants receivable, net 768. 4 225. Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L. 7 Notes and loans receivable, net 8 inventories for sale or use 2,355. 2,355 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 627,625 basis Complete Part VI of Schedule D 10a 627,625. <u>627,625.</u> b Less accumulated depreciation 10b 10c 3,949,249. 1,999,630. 11 Investments · publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 37,500. 37,500. 15 Other assets See Part IV, line 11 15 5,594,602. 4,670,700. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 3,780. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 55,000. 75,004. 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 Schedule D 75,004. 58,780. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,121,996. 1,367,806. 937,315. Unrestricted net assets 27 602,646. 28 28 Temporarily restricted net assets 3,230,701. 2,871,054. Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 5,535,822. <u>4,595,696.</u> 33 Total net assets or fund balances

4,670,700.

Total liabilities and net assets/fund balances

Form	990 (2014) FOUNDATION, INC.	<u> 58-</u>	<u>-1598131</u>	Pa	<u>ige 12</u>
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,51		
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u> 77.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	89	3, 2	<u> 39.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,59	<u>5,6</u>	96.
5	Net unrealized gains (losses) on investments	5	4	<u>7,3</u>	<u>52.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		- 4	<u> 165.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	5,53	5,8	<u> 122.</u>
Pa	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII			r	
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			İ	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	a no b			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	s,		
	consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	ıdıt		
	Act and OMB Circular A-133?		3a	<u> </u>	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ıred au	dıt		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>

Form **990** (2014)

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

2014

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

CATAWBA VALLEY COMMUNITY COLLEGE Employee

Employer identification number

58-1598131 FOUNDATION, INC. Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church. convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(IV), (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. ☐ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions))

Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC.

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support (d) 2013 (e) 2014 (f) Total Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 1 Gifts, grants, contributions, and membership fees received (Do not 135,414. 496,013. 185,275. include any "unusual grants.") 420,834 3,548,653. 2,311,117 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 496,013. 185,275. 135,414. 420,834. 4 Total, Add lines 1 through 3 2,311,117 3,548,653. The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 3 548 653. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (a) 2010 (c) 2012 (d) 2013 (e) 2014 (f) Total Calendar year (or fiscal year beginning in) (b) 2011 135,414. 496,013. 185,275. 420,834. 2.311.117 3,548,653, 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties 53,956. 51,130. 52,008. 34,848. 240,256. 48,314 and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 3,788,909, 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 93.66 % 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) ... 14 92.72 15 Public support percentage from 2013 Schedule A, Part II, line 14 15 % 16a 33 1/3% support test - 2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ightharpoons Xstop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

Schedule A (Form 990 or 990-EZ) 2014 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

Section A. Public Support	iow, piease com	piete i ait ii j				
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
include any "unusual grants ")						
2 Gross receipts from admissions.						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose		 				
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513		-				
4 Tax revenues levied for the organ-						
ization's benefit and either paid to		1				
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						1
the organization without charge				<u> </u>		
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and	-					
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b	-					
8 Public support (Subtract line 7c from line 6)		 				
Section B. Total Support					<u>, l , </u>	
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6			1			
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses			ļ			
acquired after June 30, 1975			 			
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b,						
whether or not the business is						
regularly carried on						
12 Other income Do not include gain						
or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12)						<u> </u>
14 First five years. If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
check this box and stop here						. ▶
Section C. Computation of Public	c Support Pe	ercentage				
15 Public support percentage for 2014 (lii	ne 8, column (f)	divided by line 13,	column (f))		15	
16 Public support percentage from 2013					16	
Section D. Computation of Inves						
17 Investment income percentage for 20	14 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	
18 Investment income percentage from 2					18	
19a 33 1/3% support tests - 2014. If the			on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box an						▶□
b 33 1/3% support tests - 2013. If the						and
line 18 is not more than 33 1/3%, check						
20 Private foundation. If the organization						. ▶

Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC.

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Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined **that** the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501 (c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's Control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes, " provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- B Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

-		Yes	No
	1		
		·	
	_ 2		
	3a		
	3b		<u>.</u>
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	i		
	6		
	_		
	7		
	8		
	9a		
	6 1		
	9b		
	9c	ļ <u></u>	
	10a		
m O	10b 90 or 99	N-F7	2014

<u>Sc</u> he	dule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC.	58-1598 1 3	<u>31 P</u> a	ige 5
	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		1	
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities If the organization had more than one supported organization,		1	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		1	
	supervised, or controlled the supporting organization.	2	<u> </u>	
Sec	tion C. Type II Supporting Organizations	·		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	ļ		
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	<u> </u>	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			į
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			İ
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see Insti	ructions):		
а	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity	(see instruction		_
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	_		
	that these activities constituted substantially all of its activities	2a	+	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		}	
	activities but for the organization's involvement.	2b	-	
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	+	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

	dule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC.			<u> 58-1598131 Page</u>
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov 20, 1970. See instr	uctions. All
	other Type III non-functionally integrated supporting organizations must co	omplete Se	ections A through E	
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	· · · · · ·	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	llv integrat	ted Type III supporting ord	anization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions)

Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC. 58-1598131 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive R (provide details in Part VI) See instructions Distributable amount for 2014 from Section C, line 6 9 Line 8 amount divided by Line 9 amount 10 (i) (ii) (iii) **Excess Distributions** Underdistributions Distributable Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014 C d e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2014 from Section D, a Applied to underdistributions of prior years b Applied to 2014 distributable amount c Remainder Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see Excess distributions carryover to 2015. Add lines 3j Breakdown of line 7 C d Excess from 2013

e Excess from 2014

•

hedule A	(Form 990 or 990-EZ) 20	14 FOUNDATION,	INC.		58-1598131 Pag
Part VI	Supplemental Info	ormation. Provide the ex	xplanations required by	y Part II, line 10; Part II, line	e 17a or 17b, and Part III, line 12
	Also complete this part	for any additional informat	ion (See instructions)		
		•	· · · · · ·	·-	
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_					
28 09-17	-14			5	Schedule A (Form 990 or 990-EZ)

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

CATAWBA VALLEY COMMUNITY COLLEGE FOUNDATION, INC.

Employer identification number 58-1598131

Par	t I Organizations Maintaining Donor Advise	d Funds or Other	Similar Funds	s or Accounts. Complete if the			
	organization answered "Yes" to Form 990, Part IV, line	∍6					
		(a) Donor advis	ed funds	(b) Funds and other accounts			
1	Total number at end of year	_					
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in	writing that the assets h	neld in donor advis	sed funds			
_	are the organization's property, subject to the organization's			Yes No			
6	Did the organization inform all grantees, donors, and donor a	_		used only			
	for charitable purposes and not for the benefit of the donor of						
	impermissible private benefit?			Yes No			
Par		ganization answered "Y	es" to Form 990, I	Part IV, line 7			
1	Purpose(s) of conservation easements held by the organizat						
	Preservation of land for public use (e.g., recreation or e			torically important land area			
	Protection of natural habitat	Pre	servation of a cer	tified historic structure			
	Preservation of open space						
2							
	day of the tax year						
				Held at the End of the Tax Year			
а	Total number of conservation easements	2a					
b	Total acreage restricted by conservation easements	2b					
С	c Number of conservation easements on a certified historic structure included in (a)						
d	d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure						
	listed in the National Register						
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax						
	year ▶						
4	Number of states where property subject to conservation ea	sement is located 🕨 _					
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspe	ction, handling of				
	violations, and enforcement of the conservation easements	t holds?		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting,						
7	Amount of expenses incurred in monitoring, inspecting, and						
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requireme	ents of section 170				
	and section 170(h)(4)(B)(ii)?			Yes No			
9	In Part XIII, describe how the organization reports conservat						
	include, if applicable, the text of the footnote to the organiza	tion's financial stateme	nts that describes	the organization's accounting for			
Do	conservation easements rt III Organizations Maintaining Collections o	f Art Historical To	roacuras or (Thor Similar Assets			
Pai	Complete if the organization answered "Yes" to Form		reasures, or C	Aller Sillina Assets.			
	If the organization elected, as permitted under SFAS 116 (AS		uto rovonuo stato	mont and halance shoot works of art			
та	-						
	historical treasures, or other similar assets held for public ex		esearch in luttilen	ance of public service, provide, in Fart Am,			
_	the text of the footnote to its financial statements that descr If the organization elected, as permitted under SFAS 116 (AS		revenue statemer	at and halance sheet works of art, historical			
b	treasures, or other similar assets held for public exhibition, e						
		ducation, or research in	riditilerance or po	abile service, provide title rollowing amounts			
	relating to these items			~ ¢			
	(i) Revenue included in Form 990, Part VIII, line 1	••	•	► \$			
^	(ii) Assets included in Form 990, Part XIf the organization received or held works of art, historical tree		assets for financi				
2	the following amounts required to be reported under SFAS 1			argani, provido			
_	000 D 1744 1 4	_	o inodo itoma.	▶ \$			
a h	Assets included in Form 990, Part X			s			
U	, additional and a second a second and cond and cond and a second and a second and a second and			· ·			

Sche	dule D (Form 990) 2014 FOUNDAT:	ION, INC.				<u> 58 – 15</u>	<u>98131</u>	Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tre	easures, or Oth	er Simil	ar Asset	ts(contini	jed)
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that are a s	significant	use of its	collection	ıtems
	(check all that apply)							
а	Public exhibition	d		hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	ne organization's exe	empt purp	ose in Part	XIII	
5	During the year, did the organization solicit or		•	•	ır assets	_	7	
_	to be sold to raise funds rather than to be ma						Yes	No_
Par	t IV Escrow and Custodial Arrang		te if the organization	n answered "Yes" to	Form 990), Part IV, i	ine 9, or	
	reported an amount on Form 990, Par			 				
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribution	s or other assets no	t included	_	٦.,	X No
	on Form 990, Part X?		1.51.			└─	Yes	NO LAL
þ	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table				A	
	Day and the lands				4-		Amount	
	Beginning balance				1c			
	Additions during the year				1d 1e			
e 4	Distributions during the year Ending balance				1f			
20	•	orm 990 Part Y line	21 for escrow or cu	istodial account liah		<u> </u>	Yes	No
	2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII							
Par							•	
L		(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four	years back
1a	Beginning of year balance	2,871,054.	2,719,796,	2,630,412,		304 518.		175,070.
b	Contributions							23,317.
c							106,131,	
d	Grants or scholarships 9,999, 3,000,							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
9	End of year balance	3,230,701.	2,871,054,	2,719,796.	2,	630,412.	1.	304,518.
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1g, column (a	a)) held as				
а	Board designated or quasi-endowment		_%					
b	Permanent endowment ► 100.00	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c should							
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered for	the organi	zation	г	
	by							Yes No
	(i) unrelated organizations					-	3a(i)	X
	(ii) related organizations						3a(ii)	X_
	If "Yes" to 3a(ii), are the related organizations					•••	<u>3</u> b	<u> </u>
A Date	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment funds					
Fai	· · · · · · · · · · · · · · · ·		Part IV line 11a S	es Form 990 Part Y	line 10			
	Complete if the organization answere	(a) Cost or of			ccumulat	ed T	(d) Book	value
	Description of property	basis (investr		1 1.	epreciation		(u) DOOR	value
	Land	627,		,=,		·	62	7,625.
	Buildings	027,	<u> </u>					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Leasehold improvements							
	Equipment							
	Other							
	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line 1	10c)			627	7,625.

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 FOUNDATION,	INC.	TI COULEGE	58-	1598131 Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes" t	to Form 990, Part IV, Iir	ne 11b. See Form 990, Part	X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation		of-year market value
(1) Financial derivatives .				
(2) Closely-held equity interests				
(3) Other				
(A)	•			
(B)				
(C)				· · · · · · · · · · · · · · · · · · ·
(D)	-		· -	
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	to Form 990 Part IV Ju	ne 11c. See Form 990. Part	X line 13	
(a) Description of investment	(b) Book value	(c) Method of valua		of-year market value
(1)	-			. '
(2)				
(3)	-			-
(4)				
(5)		-		
(6)		-		
(7)				.
(8)				
(9)				
Total (Col (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.				-
		44 - Coo Form 000 Don't	V line 15	
Complete if the organization answered "Yes"		ne 11d. See Form 990, Part	X, line 15	(b) Book value
 	Description			(b) BOOK VAIGE
(1)	·			
(2)				
(3)	.			
(4)		<u> </u>		
(5)		· · · · · · · · · · · · · · · · · · ·	-	
(6)				
(7)	_			
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	9 15)			
Part X Other Liabilities.				
Complete if the organization answered "Yes"	to Form 990, Part IV, III), Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

(5) (6) (7) (8) (9)

58-1598131 Page 4 FOUNDATION, INC. Schedule D (Form 990) 2014 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 1,564,468. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 47,352 a Net unrealized gains (losses) on investments 2a 2b b Donated services and use of facilities c Recoveries of prior year grants 2c 2d Other (Describe in Part XIII) 47,352. e Add lines 2a through 2d 2e 1,517,116. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII) 4h 0. c Add lines 4a and 4b 4c 517 116. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 624,342. 1 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities 2a 2b **b** Prior year adjustments c Other losses 2c 465 24 d Other (Describe in Part XIII) 465. e Add lines 2a through 2d 623,877. 3 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 4c 877. Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information Part V, line 4: TO PROVIDE AN INCOME STREAM IN ORDER TO FACILITATE ENHANCED EDUCATIONAL OPPORTUNITIES IN AN ENVIRONMENT THAT IS CONDUCIVE TO LEARNING. Part XII, Line 2d - Other Adjustments: BAD DEBT EXPENSE

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

2014	Open to Public Inspection.
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OMB No 1545-0047

Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.

2 Schedule I (Form 990) (2014) Employer identification number 58-1598131 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table CATAWBA VALLEY COMMUNITY COLLEGE (c) IRC section LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. if applicable Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance INC. (p) EIN criteria used to award the grants or assistance? FOUNDATION, 1 (a) Name and address of organization or government Name of the organization Part I

Page 2

58-1598131

FOUNDATION, INC.

Schedule I (Form 990) (2014) FOUNDATION, INC.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Grants and scholarships for tuition to Catawba Valley Community College	80	966 089	0		•
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	ured in Part I, line	2, Part III, column	(b), and any other ac	iditional information.	
	i				
	i				

432102 10-15-14

SCHEDULE M (Form 990) .

Noncash Contributions

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

Name of the organization FOUNDATION, INC.

CATAWBA VALLEY COMMUNITY COLLEGE

58-1598131

Par	t I Types of Property	-						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of c noncash contrib	determining		;
1	Art - Works of art		romo commageca	Tommood, Fair Vingano 1g	•			
2	Art - Historical treasures						-	
3	Art - Fractional interests						_	
4	Books and publications							
5	Clothing and household goods			· · · · · · · · ·		-		
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property					<u> </u>		
9	Securities - Publicly traded	Х	3	112 678.	New York S	t ock	Exc	-ha
10	Securities - Closely held stock			112,070.	TICW TOTAL B	COOK .		<u> </u>
11	Securities - Partnership, LLC, or						-	
• • •	trust interests							
12	Securities · Miscellaneous					-		—
13	Qualified conservation contribution -							
13	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential			_		4		
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies		-					—
		·	-					
21 22	Taxidermy Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts					-	_	—
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organi							
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement 29			· T	
00-	Division African and add the consequence of the con				-b 00 4b-4	\	'es	No
30a	During the year, did the organization receive b						ļ	
	must hold for at least three years from the date		ai contribution, and	a which is not required to be	used for	00-		v
	exempt purposes for the entire holding period	1	٠			30a		X
	If "Yes," describe the arrangement in Part II			of any man atominant anatomin	t.amp0		l	v
31	Does the organization have a gift acceptance					31	\dashv	<u> </u>
32a	Does the organization hire or use third parties	or related o	rganizations to sol	icit, process, or sell noncash				v
	contributions?		•••			. 32a		<u> </u>
	If "Yes," describe in Part II		fa. a ha - f :					
33	If the organization did not report an amount in describe in Part II	column (c)	ior a type of prope	rty for which column (a) is cl	IECKEO,			
	describe in Part II					1 1		

CATAWBA VALLEY COMMUNITY COLLEGE Schedule M (Form 990) (2014) FOUNDATION. INC.

Schedule M	(Form 990) (2014) FO	UNDATION,	INC.	58-1598131	Page 2
Part II	Supplemental Info	ormation. Provide lumn (b), the numbe	the information required by Part I, lines 30b, r of contributions, the number of items received.	, 32b, and 33, and whether the organized, or a combination of both. Also cor	ation
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432142 08-12	-14			Schedule M (Form	990) (2014

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990. CATAWBA VALLEY COMMUNITY COLLEGE

Employer identification number 58-1598131

FOUNDATION, INC. Form 990, Part I, Line 1, Description of Organization Mission: CATAWBA VALLEY COMMUNITY COLLEGE. THE FOUNDATION PROVIDES A VEHICLE THROUGH WHICH ANY INDIVIDUAL OR ORGANIZATION MAY INVEST/PARTICIPATE IN THE DEVELOPMENT OF CATAWBA VALLEY COMMUNITY COLLEGE. Form 990, Part III, Line 1, Description of Organization Mission: VALLEY COMMUNITY COLLEGE. Form 990, Part VI, Section A, line 7a: MEMBERS OF THE COMMUNITY ARE ASKED TO SERVE AS VOLUNTEERS ON THE FOUNDATION'S BOARD OF DIRECTORS. THESE MEMBERS ELECT THE INDIVIDUALS TO SERVE AS OFFICERS OF THE BOARD OF DIRECTORS. Form 990, Part VI, Section B, line 11: THE FINAL TAX RETURN AND AUDITED FINANCIAL STATEMENTS ARE PRESENTED TO THE BOARD OF DIRECTORS BY THE EXTERNAL AUDITORS. THE BOARD OF DIRECTORS MAY INQUIRE AT THE PRESENTATION REGARDING ANY QUESTIONS THEY MAY HAVE PRIOR TO THE FILING OF THE TAX RETURN. Form 990, Part VI, Section C, Line 19: THE FOUNDATION OPERATES OUT OF THE OFFICES OF CATAWBA VALLEY COMMUNITY ALL INTERESTED PARTIES ARE NOTIFIED OF THE AVAILABILITY OF THESE COLLEGE. DOCUMENTS WHENEVER AN INQUIRY IS MADE.

Form 990, Part XI, line 9, Changes in Net Assets:

WRITE-OFF OF UNCOLLECTIBLE PROMISES TO GIVE

-465.

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization: CATAWBA VALLEY COMMUNITY COLLEGE FOUNDATION, INC.	Employer identification number 58-1598131
Form 990, Part XII, Line 2c:	
THERE HAS BEEN NO CHANGE IN THE OVERSIGHT OR SELECTION PR	OCESS OF THE
INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT.	