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Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Private Foundation**  
**or Section 4947(a)(1) Trust Treated as Private Foundation**  
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 ▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052  
**2015**  
**Open to Public Inspection**

**For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015**

Name of foundation HARVEST TIME FOUNDATION		<b>A Employer identification number</b> 06-1700689
Number and street (or P O box number if mail is not delivered to street address) 806 NORTH POST ROAD	Room/suite	<b>B Telephone number (see instructions)</b>
City or town, state or province, country, and ZIP or foreign postal code SHELBY, NC 28150		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/>  <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 4,661,303	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		Revenue and expenses per books <b>(a)</b>	Net investment income <b>(b)</b>	Adjusted net income <b>(c)</b>	Disbursements for charitable purposes <b>(d)</b> (cash basis only)
<b>1</b>	Contributions, gifts, grants, etc., received (attach schedule) . . . . .	256,000			
<b>2</b>	Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
<b>3</b>	Interest on savings and temporary cash investments				
<b>4</b>	Dividends and interest from securities . . . . .	14,461	14,461	14,461	
<b>5a</b>	Gross rents . . . . .				
<b>b</b>	Net rental income or (loss) _____				
<b>6a</b>	Net gain or (loss) from sale of assets not on line 10	127,561			
<b>b</b>	Gross sales price for all assets on line 6a 1,084,231				
<b>7</b>	Capital gain net income (from Part IV, line 2) . . . . .		127,561		
<b>8</b>	Net short-term capital gain . . . . .				
<b>9</b>	Income modifications . . . . .				
<b>10a</b>	Gross sales less returns and allowances				
<b>b</b>	Less Cost of goods sold . . . . .				
<b>c</b>	Gross profit or (loss) (attach schedule) . . . . .				
<b>11</b>	Other income (attach schedule) . . . . .	680,556		680,556	
<b>12</b>	<b>Total.</b> Add lines 1 through 11 . . . . .	1,078,578	142,022	695,017	
<b>13</b>	Compensation of officers, directors, trustees, etc	12,945	12,945	12,945	
<b>14</b>	Other employee salaries and wages . . . . .				
<b>15</b>	Pension plans, employee benefits . . . . .				
<b>16a</b>	Legal fees (attach schedule). . . . .				
<b>b</b>	Accounting fees (attach schedule). . . . .	11,156	8,817	11,156	
<b>c</b>	Other professional fees (attach schedule) . . . . .				
<b>17</b>	Interest . . . . .				
<b>18</b>	Taxes (attach schedule) (see instructions) . . . . .	12,467		3,557	
<b>19</b>	Depreciation (attach schedule) and depletion . . . . .	106,748			
<b>20</b>	Occupancy . . . . .				
<b>21</b>	Travel, conferences, and meetings . . . . .				
<b>22</b>	Printing and publications . . . . .				
<b>23</b>	Other expenses (attach schedule). . . . .	898,583		898,583	
<b>24</b>	<b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	1,041,899	21,762	926,241	0
<b>25</b>	Contributions, gifts, grants paid . . . . .	71,700			71,700
<b>26</b>	<b>Total expenses and disbursements.</b> Add lines 24 and 25	1,113,599	21,762	926,241	71,700
<b>27</b>	Subtract line 26 from line 12				
<b>a</b>	<b>Excess of revenue over expenses and disbursements</b>	-35,021			
<b>b</b>	<b>Net investment income</b> (if negative, enter -0-)		120,260		
<b>c</b>	<b>Adjusted net income</b> (if negative, enter -0-)			0	

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	42,112	135,980	135,980
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ 325,920 Less allowance for doubtful accounts ▶ _____	329,071	325,920	325,920
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	63,796	99,304	126,302
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	91,578	73,943	73,810
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	839,697	773,368	769,572
	<b>14</b> Land, buildings, and equipment basis ▶ _____ 2,651,373 Less accumulated depreciation (attach schedule) ▶ _____ 679,425	2,048,740	1,971,948	3,114,000
<b>15</b> Other assets (describe ▶ _____)	116,209	115,719	115,719	
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	3,531,203	3,496,182	4,661,303	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule). . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)	400	400	
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	400	400	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .	3,530,803	3,495,782	
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .			
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund			
	<b>29</b> Retained earnings, accumulated income, endowment, or other funds			
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	3,530,803	3,495,782		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	3,531,203	3,496,182		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b> 3,530,803
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b> -35,021
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b> 3,495,782
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b> 3,495,782

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

(a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	127,561
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	-1,014

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
 If section 4940(d)(2) applies, leave this part blank

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

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	129,800	5,443,926	0.023843
2013	267,800	4,192,610	0.063874
2012	212,800	4,115,211	0.051711
2011	259,400	3,418,959	0.075871
2010	189,252	5,018,821	0.037708

<b>2</b> Total of line 1, column (d).	<b>2</b>	0.253007
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0.050601
<b>4</b> Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	<b>4</b>	4,573,299
<b>5</b> Multiply line 4 by line 3.	<b>5</b>	231,414
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b).	<b>6</b>	1,203
<b>7</b> Add lines 5 and 6.	<b>7</b>	232,617
<b>8</b> Enter qualifying distributions from Part XII, line 4.	<b>8</b>	71,700

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

Table with 11 rows for excise tax calculation. Includes categories like 'Exempt operating foundations', 'Domestic foundations', 'Tax based on investment income', and 'Credits/Payments'. Total tax due is 3,345.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Questions include 'Did the foundation attempt to influence any national, state, or local legislation?', 'Did it spend more than \$100 during the year for political purposes?', 'Did the foundation file Form 1120-POL?', etc.

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

<b>11</b> 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). . . . .	<b>11</b>		<b>No</b>
<b>12</b> Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .	<b>12</b>		<b>No</b>
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► _____	<b>13</b>	<b>Yes</b>	
<b>14</b> The books are in care of ► <u>PAT NICHOLS</u> Telephone no ► <u>(704) 482-3456</u> Located at ► <u>806 N POST RD SHELBY NC</u> ZIP+4 ► <u>28150</u>			
<b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here . . . . . and enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>15</b>		<input type="checkbox"/>
<b>16</b> At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ► _____	<b>16</b>	<b>Yes</b>	<b>No</b>

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

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

		<b>Yes</b>	<b>No</b>
<b>1a</b> During the year did the foundation (either directly or indirectly) <b>(1)</b> Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>(2)</b> Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>(3)</b> Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>(4)</b> Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>(5)</b> Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>(6)</b> Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b> If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . <b>1b</b> Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>	<b>1b</b>		
<b>c</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? . . . . . <b>1c</b>	<b>1c</b>		
<b>2</b> 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)) <b>a</b> At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____ <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . . <b>2b</b>			
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>b</b> If "Yes," did it have excess business holdings in 2015 as a result of <b>(1)</b> any purchase by the foundation or disqualified persons after May 26, 1969, <b>(2)</b> 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 <b>(3)</b> the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i> ). . . . . <b>3b</b>			<b>No</b>
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	<b>4b</b>		<b>No</b>

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

**5a** During the year did the foundation pay or incur any amount to

**(1)** Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

**(2)** Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

**(3)** Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

**(4)** Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).  Yes  No

**(5)** Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No  
 Organizations relying on a current notice regarding disaster assistance check here.

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No  
*If "Yes," attach the statement required by Regulations section 53.4945–5(d)*

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

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No  
*If "Yes" to 6b, file Form 8870*

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

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

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

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

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

**Total** number of others receiving over \$50,000 for professional services. . . . . **▶**

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

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

	Expenses
<b>1</b> SHELBY CHRISTIAN SCHOOL CONTRIBUTION FOR GENERAL OPERATIONS OF CHARITY	52,000
<b>2</b> NATIONAL OUTREACH WORLDWIDE MINISTRIES INC MINISTRY OF ORGANIZATION TO MISIONARIES	4,800
<b>3</b> INTERNATIONAL PARTNERSHIP MINISTRIES INC MINISTRY OF ORGANIZATION TO MISSIONARIES	4,200
<b>4</b> EVANGELISM MISSIONS INTERNATIONAL MINISTRY OF ORGANIZATION TO MISSIONARIES	3,000

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments See instructions	
<b>3</b>	

**Total.** Add lines 1 through 3 . . . . . **▶**

**Part X Minimum Investment Return**

(All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	1,007,422
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	76,089
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	3,559,432
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	4,642,943
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	4,642,943
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	69,644
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	4,573,299
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	228,665

**Part XI Distributable Amount**

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	228,665
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	2,405
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	2,405
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	226,260
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	226,260
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	226,260

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	71,700
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	71,700
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	71,700

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

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
<b>1</b> Distributable amount for 2015 from Part XI, line 7				226,260
<b>2</b> Undistributed income, if any, as of the end of 2015				
<b>a</b> Enter amount for 2014 only. . . . .			112	
<b>b</b> Total for prior years 20___, 20___, 20___				
<b>3</b> Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010. . . . .				
<b>b</b> From 2011. . . . .				
<b>c</b> From 2012. . . . .				
<b>d</b> From 2013. . . . .				
<b>e</b> From 2014. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2015 from Part XII, line 4 ► \$ <u>71,700</u>				
<b>a</b> Applied to 2014, but not more than line 2a			112	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2015 distributable amount. . . . .				71,588
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .				
<b>e</b> Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions. . . . .				
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015. . . . .				154,672
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
<b>8</b> Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9</b> Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a. . . . .				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2011. . . . .				
<b>b</b> Excess from 2012. . . . .				
<b>c</b> Excess from 2013. . . . .				
<b>d</b> Excess from 2014. . . . .				
<b>e</b> Excess from 2015. . . . .				



**Part XV Supplementary Information**(continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<p><b>a</b> <i>Paid during the year</i> See Additional Data Table</p>				
<p><b>Total</b> . . . . .</p>				71,700
<p><b>b</b> <i>Approved for future payment</i></p>				
<p><b>Total</b> . . . . .</p>				0













**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
30000 SHS MORGAN STANLEY	P	2011-08-26	2015-08-31
100 SHS NUCOR CORP	P	2010-08-23	2015-11-12
100 SHS FMC TECHNOLOGIES INC	P	2012-05-22	2015-01-23
85 SHS FLUOR CORP	P	2010-08-23	2015-01-23
70 SHS PENTAIR PLC	P	2013-07-23	2015-04-22
50 SHS MYLAN NV	P	2011-07-15	2015-04-22
DIRECT TV EXCHANGE	P	2015-07-28	2015-07-28
LONG TERM CAPITAL GAIN DIVIDENDS	P		2015-12-31

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
30,000		30,000	
4,031		3,824	207
3,892		4,294	-402
4,673		3,974	699
4,219		4,203	16
3,689		1,192	2,497
2,850			2,850
19,077			19,077

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DAVID MIMS 806 NORTH POST ROAD SHELBY, NC 28150	BOARD MEMBER 1 00	0	0	0
DARRYL MIMS 806 NORTH POST ROAD SHELBY, NC 28150	BOARD CHAIRMAN 1 00	0	0	0
STEVE HYDE 806 NORTH POST ROAD SHELBY, NC 28150	BOARD MEMBER 1 00	0	0	0
TERESA MCFARLAND 806 NORTH POST ROAD SHELBY, NC 28150	BOARD MEMBER 1 00	0	0	0
BARRY SHEARER 806 NORTH POST ROAD SHELBY, NC 28150	BOARD MEMBER 1 00	0	0	0
CHARLIE MARSHALL 806 NORTH POST ROAD SHELBY, NC 28150	BOARD MEMBER 1 00	0	0	0
DOUGLAS KING 806 NORTH POST ROAD SHELBY, NC 28150	BOARD MEMBER 1 00	0	0	0
BANK OF THE OZARKS 806 NORTH POST ROAD SHELBY, NC 28150	TRUSTEE 5 00	12,945	0	0

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SHELBY CHRISTIAN SCHOOL P O BOX 86 POLKVILLE,NC 28136	NA ORGANIZATION		FOR GENERAL OPERATIONS OF CHARITY	52,000
EVANGELISM MISSIONS INTL P O DRAWER 550 THORSBY,AL 351710550	NA ORGANIZATION		MINISTRY OF MISSIONARIES	3,000
NOW MINISTRIES 5040 PENN ROAD IRON STATION,NC 28080	NA ORGANIZATION		MINISTRY OF MISSIONARIES	4,800
INTERNATIONAL PARTNERSHIP MINISTRY P O BOX 337 HANOVER,PA 173310337	NA ORGANIZATION		MINISTRY OF MISSIONARIES	4,200
DEDICATION EVANGELISM P O BOX 10 TOWACO,NJ 07082	NA ORGANIZATION		FOR GENERAL OPERATIONS OF CHARITY	1,800
GRACE OF GOD RESCUE MISSION P O BOX 212 FOREST CITY,NC 28043	NA ORGANIZATION		FOR GENERAL OPERATIONS OF CHARITY	1,200
CHILD EVANGELISM FELLOWSHIP P O BOX 1668 FOREST CITY,NC 28043	NA ORGANIZATION		MINISTRY OF MISSIONARIES	1,100
CHRISTIAN INDIAN MISSION P O BOX 9 ANTLERS,OK 74523	NA ORGANIZATION		MINISTRY OF MISSIONARIES	1,100
CROSSROADS RESCUE MISSION P O BOX 2090 SHELBY,NC 28151	NA ORGANIZATION		FOR GENERAL OPERATIONS OF CHARITY	600
MISSIONARY EVANGELISM MINISTRIES P O BOX 515 HIXSON,TN 373433881	NA ORGANIZATION		MINISTRY OF MISSIONARIES	600
FISHERS BAPTIST CHURCH 9587 EAST 131ST STREET FISHERS,NY 14453	NA ORGANIZATION		FOR GENERAL OPERATIONS OF CHURCH	700
PROVIDENCE BAPTIST CHURCH 1175 WYKE ROAD SHELBY,NC 28150	NA ORGANIZATION		MISSIONARY SUPPORT	600
<b>Total . . . . .</b>				<b>71,700</b>

**TY 2015 Accounting Fees Schedule****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	8,817	8,817	8,817	0
GOLF COURSE	2,339	0	2,339	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2015 Amortization Schedule

**Name:** HARVEST TIME FOUNDATION

**EIN:** 06-1700689

Description of Amortized Expenses	Date Acquired, Completed, or Expended	Amount Amortized	Deduction for Prior Years	Amortization Method	Current Year Amortization	Net Investment Income	Adjusted Net Income	Total Amount of Amortization
POS SYSTEM	2012-02-02	2,000	2,000	3	0	0	0	2,000

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2015 Depreciation Schedule

**Name:** HARVEST TIME FOUNDATION

**EIN:** 06-1700689

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
ACCRUED INTEREST	2011-09-01	31,103	9,562	ADS	15	2,154	0	0	
BUILDINGS	2011-09-01	114,176	9,636	ARP	39	2,927	0	0	
SINK FOR HALFWAY HOUSE	2012-05-25	548	548	M	7	0	0	0	
MAINTENANCE BUILDING	2012-06-22	33,556	1,720	ARP	39	860	0	0	
CART BARN	2013-11-01	114,635	5,878	ARP	39	2,939	0	0	
CART BARN	2014-01-28	44,002	1,081	ARP	39	1,128	0	0	
EQUIPMENT	2011-09-01	151,990	128,868	M	7	2,275	0	0	
EQUIPMENT	2014-07-01	11,035	829	M	7	1,417	0	0	
OUTDOOR FURNITURE	2011-09-01	151	104	M	7	13	0	0	
IMPROVEMENTS	2011-09-01	1,331,795	395,006	ALT	15	91,739	0	0	
LAND	2011-09-01	410,839	0	NDA		0	0	0	
CART BARN	2015-03-04	6,792	0	M	39	138	0	0	
CART PATH	2015-05-14	5,747	0	M	15	287	0	0	
SOD	2015-06-25	10,957	0	M	15	548	0	0	
TURF DRAINAGE	2015-09-07	2,700	0	M	15	135	0	0	
TURF DRAIN	2015-03-30	3,761	0	M	15	188	0	0	

**TY 2015 Investments Corporate Bonds Schedule****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
CORPORATE BONDS	73,943	73,810

**TY 2015 Investments Corporate Stock Schedule****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
INVESTMENTS- CORPORATE STOCKS	99,304	126,302

**TY 2015 Investments - Other Schedule****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
MUTUAL FUNDS		771,822	768,026
INVESTMENT IN LOOKOUT LINKS		1,546	1,546

**TY 2015 Other Assets Schedule****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DEER BROOK COLF CLUB LLC INVESTMENT	116,209	115,719	115,719

**TY 2015 Other Expenses Schedule****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GOLF COURSE COGS	816,073	0	816,073	0
GOLF COURSE LANDSCAPING	25,691	0	25,691	0
GOLF COURSE CREDIT CARD FEES	10,547	0	10,547	0
GOLF COURSE MISCELLANEOUS	2,858	0	2,858	0
GOLF COURSE BANK CHARGES	113	0	113	0
GOLF COURSE PAYROLL TAXES	11,729	0	11,729	0
GOLF COURSE ADVERTISING	29,240	0	29,240	0
GOLF COURSE UNIFORMS	1,643	0	1,643	0
OFFICE EXPENSE	389	0	389	0
MISCELLANEOUS	300	0	300	0

**TY 2015 Other Income Schedule****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GOLF COURSE	681,067	0	681,067
DEER BRROK GOLF CLUB K-1	-511	0	-511

**TY 2015 Other Liabilities Schedule****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689

<b>Description</b>	<b>Beginning of Year - Book Value</b>	<b>End of Year - Book Value</b>
SECURITY DEPOSIT	400	400

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2015 Other Notes/Loans Receivable Long Schedule

**Name:** HARVEST TIME FOUNDATION

**EIN:** 06-1700689

Borrower's Name	Relationship to Insider	Original Amount of Loan	Balance Due	Date of Note	Maturity Date	Repayment Terms	Interest Rate	Security Provided by Borrower	Purpose of Loan	Description of Lender Consideration	Consideration FMV
DEER BROOK GOLF CLUB		0	269,571				0 %				269,571
SWOFFORD ROAD		0	56,349				0 %				56,349

**TY 2015 Taxes Schedule****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
PROPERTY TAXES	6,710	0	0	0
GOLF COURSE	3,357	0	3,357	0
LICENSES	200	0	200	0
EXCISE TAX	2,200	0	0	0

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

2015

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

Name of the organization HARVEST TIME FOUNDATION

Employer identification number 06-1700689

Organization type (check 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

Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- [x] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- [ ] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II [ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III [ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc , purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc , contributions totaling \$5,000 or more during the year . . . . . [ ] \$ \_\_\_\_\_

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

**Name of organization**  
HARVEST TIME FOUNDATION

**Employer identification number**  
06-1700689

<b>Part I Contributors</b> (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MACHINE BUILDERS DESIGN INC 806 N POST RD SHELBY, NC 28152	\$ 256,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
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		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

<b>Name of organization</b> HARVEST TIME FOUNDATION	<b>Employer identification number</b> 06-1700689
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**Part II** **Noncash Property**  
(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____
_____	_____ _____ _____	_____ \$	_____

<b>Name of organization</b> HARVEST TIME FOUNDATION	<b>Employer identification number</b> 06-1700689
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional 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, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	
-	_____ _____ _____	_____ _____ _____	_____ _____ _____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4 _____ _____ --	Relationship of transferor to transferee _____ _____ _____	

**TY 2015 GeneralDependencySmall****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689**Business Name or Person Name:** HARVEST TIME FOUNDATION**Taxpayer Identification Number:** 06-1700689**Form, Line or Instruction  
Reference:****Regulations Reference:****Description:** Election to Waive Net Operating Loss Carryback**Attachment Information:** Pursuant to IRC Section 172(b)(3), HARVEST TIME FOUNDATION hereby elects to relinquish the entire carryback period with respect to the net operating loss incurred for the tax year ended 12-31-2015.

**TY 2015 GeneralDependencySmall****Name:** HARVEST TIME FOUNDATION**EIN:** 06-1700689**Business Name or Person Name:** HARVEST TIME FOUNDATION**Taxpayer Identification Number:** 06-1700689**Form, Line or Instruction  
Reference:****Regulations Reference:****Description:** Section 1263a-1f de minimis safe harbor election**Attachment Information:** Name: HARVEST TIME FOUNDATION Address: 806 NORTH POST ROAD, SHELBY, NC 28150 EIN: 06-1700689 Statement: Taxpayer is making the de minimis safe harbor election under 1.263(a)-1(f).