Form **990-PF**

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

OMB No 1545-0052 2015

Department of the Treasury Internal Revenue Service

➤ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is atwww.lrs.gov/form990pf.

Open to Public Inspection

For cale	endar year 2015, or tax year beginning	, 2015,	and ending		5	T
Harr	is Upchurch Foundation, Inc.			A	Employer Identification num 20-8115216	nber
8317	Lilybet Lane Lotte, NC 28278			В	Telephone number (see insti 704-840-4744	ructions)
Char.	1000e, NC 20276			c	If exemption application is	pending check here
C Che	ck all that apply: Initial return	Initial return of a form	ser public charity	†		
G Che	Final return	Amended return	ier public criarity	l	1 Foreign organizations, chec	
	Address change	Name change			2 Foreign organizations meet here and attach computation	
H Che	ck type of organization: X Section 501 Section 4947(a)(1) nonexempt charitable tri	(c)(3) exempt private for	oundation orivate foundation	E	If private foundation status	U
1 Fair		ounting method: X C		-	under section 507(b)(1)(A)	
(fron		Other (specify)		F	If the foundation is in a 60-	
	Analysis of Revenue and	column (d) must be on			under section 507(b)(1)(B)	
<u> </u>	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investme income	rit	(c) Adjusted net income	(d) Disbursements for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)					purposes (cash basis only)
	(see instructions) 1 Contributions, gifts, grants, etc, received (attach schedule)	100,000.				
	2 Ck ► If the foundation is not required to attach Cch B					
	3 Interest on savings and temporary cash investments	95.		95.		
	4 Dividends and interest from securities 5 a Gross rents					
	b Net rental income or (loss)	 				
R E	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all					
V E	assets on line 6a. 7 Capital gain net income (from Part IV, line 2)					
N	8 Net short-term capital gain					
U E	9 Income modifications 10 a Gross sales less					
	returns and allowances b Less Cost of	; ;+n;- ;m; + ;; - ; - ; - ; - ; - ; - ; - ; - ; -	·.··· ··· ··· ···			
	goods sold C Gross profit or (loss) (attach schedule)				***************************************	
	11 Other income (attach schedule)					
	12 Total. Add lines 1 through 11	100 005		95.	0.	
	13 Compensation of officers, directors, trustees, etc	100,095. 0.		95.	0,	
	14 Other employee salaries and wages					
A	15 Pension plans, employee benefits 16a Legal fees (attach schedule) See St. 1	434.	4	34.		
D M	b Accounting fors (ettach sen) See St 2	500.		00.		
0 N	c Other provide strategy stm D					
P S	1.8. Taxes (attach schedule)(see instrs)					
R R A A T T	Depredation (attack 2016 schedule) and depletion					
ΝÝ	20 Occupancy					
GÉ	21 Traver controlled production and medicings					
A E N X D P	23 Other expenses (attach schedule)					
E N S E S	24 Total operating and administrative					
Ē	expenses Add lines 13 through 23	934.	9	34.		
	25 Contributions, gifts, grants paid Part XV 26 Total expenses and disbursements	36,650.	<u> </u>			36,650.
	Add lines 24 and 25.	37,584.	9	34.	0.	36,650.
	27 Subtract line 26 from line 12 : a Excess of revenue over expenses					‡
	and disbursements	62,511.		<u></u>		<u> </u>
! !	b Net investment income (if negative, enter 0) C Adjusted net income (if negative, enter -0-)			0.	0.	
	- Aujusteu net moome (ii negative, enter -0-)	<u> </u>	1		1 0.	F 200 PF (2015)

Form 990-PF (2015) Harris Upchurch Foundation, Inc 20-8115216 Page 2 Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.) End of year Beginning of year Part II Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing Savings and temporary cash investments 25,606. 88,117 Accounts receivable Less: allowance for doubtful accounts 4 Pledges receivable . Less: allowance for doubtful accounts 5 Grants receivable . Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach sch) ASSET Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 a Investments - U.S and state government obligations (attach schedule) **b** Investments — corporate stock (attach schedule) c Investments - corporate bonds (attach schedule) 11 Investments - land, buildings, and equipment: basis . Less accumulated depreciation (attach schedule) 12 Investments - mortgage loans 13 Investments - other (attach schedule) 14 Land, buildings, and equipment. basis Less accumulated depreciation (attach schedule) 15 Other assets (describe ▶ Total assets (to be completed by all filers see the instructions Also, see page 1, item I) 25,606. 88,117. 0. Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, & other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ► 23 Total liabilities (add lines 17 through 22) 0 0. Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. N F 24 Unrestricted Ù 25 Temporarily restricted D 26 Permanently restricted A S Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ► X В SETS 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund CE Retained earnings, accumulated income, endowment, or other funds. 25,606. 88,117 O E R S 30 Total net assets or fund balances (see instructions) 25,606 88,117 Total liabilities and net assets/fund balances (see instructions) 25,606. 88,117 Part III Analysis of Changes in Net Assets or Fund Balances 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) 1 25,606. 2 Enter amount from Part I, line 27a 2 62,511. 3 Other increases not included in line 2 (itemize). 3

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

88,117.

88,117.

4

5

6

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

(a) List and describe	Losses for Tax on Investment ethe kind(s) of property sold (e.g., rese; or common stock, 200 shares MLC	al estate.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a N/A					
b					
c					
d					
е				<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or (e) plus (f) n	
a				<u>.</u>	
b					
С					
d					
<u>e</u>	1				
	wing gain in column (h) and owned by		_	(1) Gains (Co	
(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		gain minus col (k), l nan -0-) or Losses (f	
a b					
c					
d					
e				···	
2 Capital gain net income or (n		enter in Part I, line 7 er -0- in Part I, line 7	- 2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)			-	
If gain, also enter in Part I, Iii in Part I, line 8	ne 8, column (c) (see instructions), If	(loss), enter -0-	- 3		
Part V Qualification Und	er Section 4940(e) for Reduce	ed Tax on Net Investi	nent Incom	e	
If 'Yes,' the foundation does not qualify the appropriate amount (a) Base period years	ection 4942 tax on the distributable amalify under section 4940(e). Do not column for each year; see the (b) Adjusted qualifying distributions	mplete this part.	ng any entries.	(d) Distributio	
Calendar year (or tax year beginning in)		noncharitable-use as	sets (col	. (b) divided by	col. (c))
2014					
2013					
2012					
2011					
2010				,	
2 Total of line 1, column (d)			2	1	
3 Average distribution ratio for	the 5-year base period — divide the to on has been in existence if less than 5	otal on line 2 by 5, or by th			
-		•			
	iritable-use assets for 2015 from Part	A, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		. 6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions	•		8		
If line 8 is equal to or greater Part VI instructions.	than line 7, check the box in Part VI,	line 1b, and complete tha	t part using a 1	% tax rate. See	the
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			1152			age 4
Part		see ir	structi	ions)		
	Exempt operating foundations described in section 4940(d)(2), check here		1			
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)					•
	Domestic foundations that meet the section 4940(e) requirements in Part V,	.	1			<u>0.</u>
	check here. Land enter 1% of Part I, line 27b.		1			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	- [Ī			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	ł	2			Λ
	Add lines 1 and 2.	-	3			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	F	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<i>`</i>	5			0.
	Credits/Payments.	<u> </u>	<u></u>			
a	2015 estimated tax pmts and 2014 overpayment credited to 2015 . 6 a		‡			
ь	Exempt foreign organizations – tax withheld at source 6b	\neg	1			
С	Tax paid with application for extension of time to file (Form 8868)	\neg				
d	Backup withholding erroneously withheld 6 d	\neg	ŧ			
7	Total credits and payments. Add lines 6a through 6d		7			0.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	[8			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed .	>[9			0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			
_	Enter the amount of line 10 to be Credited to 2016 estimated tax	•	11			
Par	VII-A Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 6		Х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials or distributed by the foundation in connection with the activities	publi	shed			
	Did the foundation file Form 1120-POL for this year?			10	Ī	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				ļ	^
	(1) On the foundation •\$ 0. (2) On foundation managers •\$			0.		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose foundation managers	d on				
2	foundation managers S O Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	Ī	v
2	If 'Yes,' attach a detailed description of the activities			2	 	X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, artic	:les		_		
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3	<u> </u>	<u> </u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a		X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	l N	/A
,	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes,' attach the statement required by General Instruction T			3	ļ	X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions tha with the state law remain in the governing instrument? 	t conf	lict	6	f	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV			7	X	 "
	Enter the states to which the foundation reports or with which it is registered (see instructions).	•				
	NC				ĺ	
ь	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 6	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) (3)	or AC	242/1/5		 	1
	for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' comp	lete F	art XIV	9		x_
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the and addresses See Statem			10	Х	
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Part VII-B Statements Regarding Activiti		4720 May Be Req	uired (continued)		,		
5a During the year did the foundation pay or incur		40454333	n, 6				
(1) Carry on propaganda, or otherwise attempt	to influence legislation	(section 4945(e))?	Yes X	No			
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registrat	ion drive? .			No			
(3) Provide a grant to an individual for travel, s	study, or other similar p	urposes?	Yes X	No			
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions)	an a charitable, etc, org	anization described	. Yes X	No			
(5) Provide for any purpose other than religious educational purposes, or for the prevention	s, charitable, scientific, of cruelty to children o	literary, or ranimals?	Yes X	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	ne transactions fail to quality a current notice regarding	ualify under the exceptions disaster assistance	ons	5 b	N/A		
Organizations relying on a current notice regarding disaster assistance check here							
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure respons	ne foundation claim exembling for the grant?	mption from the	N/A Yes	No			
If 'Yes,' attach the statement required by Regu	•	5(d)		'			
6a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indire	ectly, to pay premiums	∏Yes X	No			
b Did the foundation, during the year, pay premiu	ıms, directly or indirectl	y, on a personal benefit		бь	X		
If 'Yes' to 6b, file Form 8870				_			
7a At any time during the tax year, was the found				No	}		
b If 'Yes,' did the foundation receive any proceed				N/A 7b			
Part VIII Information About Officers, Direction	ectors, Trustees, Fo	oundation Manager	s, Highly Paid Emp	loyees,			
and Contractors							
1 List all officers, directors, trustees, foundation				(a) Fun - m			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		se account, allowances		
Edith H. Upchurch	Pres/Treas	0.	0.		0.		
8317 Lilybet Lane	0						
Charlotte, NC 28278				<u> </u>			
Sallie Harris Glover	VP/Secretary	0.	0.		0.		
3301 Dryden Court	0						
Raleigh, NC 27609				 			
		:					
			 	 			
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1- see ins	tructions). If none, ent	er 'NONE.'			
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to		se account,		
paid more than \$50,000	hours per week devoted to position		employee benefit plans and deferred	other a	allowances		
	develope to position		compensation				
None				7			
			ļ				
				 			
				<u> </u>			
			Į				
				 			
		ļ		 			
	}						
	<u> </u>		<u> </u>				
Total number of other employees paid over \$50,000					0		
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pa and Contractors (continued)	id Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NON	VE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	
	1
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	
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
1	
N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.
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orm	990-PF (2015) Harris Upchurch Foundation, Inc.	20-811521	
Pai	Minimum Investment Return (All domestic foundations must complete this par see instructions.)	t. Foreign four	ndations, —————
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes. Average monthly fair market value of securities.	1 a	
ı	Average of monthly cash balances	1 b	102,535.
•	Fair market value of all other assets (see instructions)	. 1c	
•	Total (add lines 1a, b, and c) .	1 d	102,535.
•	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation) 1 e	0.	
2	Acquisition indebtedness applicable to line 1 assets .	2	0.
3	Subtract line 2 from line 1d	3	102,535.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,538.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	100,997.
6	Minimum investment return. Enter 5% of line 5	6	5,050.
Pa	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here ► and do not complete this pa		dations
1	Minimum investment return from Part X, line 6	1	5,050.
2	Tax on investment income for 2015 from Part VI, line 5		· · · · · · · · · · · · · · · · · · ·
	Income tax for 2015. (This does not include the tax from Part VI)		
	Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	5,050.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5,050.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,050.
Pa	rt XII Qualifying Distributions (see Instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	. 1a	36,650.
	b Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	
	b Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	36,650.
5	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)	5	

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

Adjusted qualifying distributions. Subtract line 5 from line 4

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36,650.

5 6

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7 2 Undistributed income, if any, as of the end of 2015				5,050.
a Enter amount for 2014 only			0.	
b Total for prior years 20 , 20 , 20		0.	U .	
3 Excess distributions carryover, if any, to 2015		U .		
a From 2010 69,884.				
b From 2011 138, 423.				
c From 2012 103, 035.	-			
d From 2013 128, 669.	-			
e From 2014 82,507.	1		İ	
f Total of lines 3a through e	522,518.			
4 Qualifying distributions for 2015 from Part	322,310.	· · · · · · · · · · · · · · · · · · ·		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
XII, line 4: ► \$ 36,650.				
a Applied to 2014, but not more than line 2a			0.	
			U.	······································
b Applied to undistributed income of prior years (Election required — see instructions)	•	0.		
c Treated as distributions out of corpus		0.	•••••••••••••••••••••••••••••••••••••••	<u></u>
(Election required — see instructions)	0.		;	
d Applied to 2015 distributable amount	<u> </u>			5,050.
e Remaining amount distributed out of corpus	31,600.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				<u> </u>
same amount must be snown in column (a))				
6 Enter the net total of each column as				
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5	554 440		1	
	554,118.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed			· · · · · · · · · · · · · · · · · · ·	
income for which a notice of deficiency has been issued, or on which the section 4942(a)	•			
tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				***************************************
amount — see instructions		0.	-	
e Undistributed income for 2014 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2015. Subtract lines				
4d and 5 from line 1. This amount must be			,	
distributed in 2016			;	0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by			İ	
section 170(b)(1)(F) or 4942(a)(3) (Flection			Ì	
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	69,884.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	484,234.			
10 Analysis of line 9:	704,234.		<u>I</u>	
a Excess from 2011 138, 423.			1	
b Excess from 2012 103, 035.			1	
c Excess from 2013 128,669.			ŧ	
d Excess from 2014 82,507.		,	1	
e Excess from 2015 31,600.			1	
31,000.			<u></u>	Form 990-PF (2015)

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Part XIV Private Operating Foundat					<u> N/A</u>
1 a If the foundation has received a ruling or do is effective for 2015, enter the date of the r	uling		-		4942(j)(5)
b Check box to indicate whether the foundation2 a Enter the lesser of the adjusted net		Taling foundation des		4942(j)(3) or	4942()(3)
income from Part I or the minimum	Tax year (a) 2015	(b) 2014	Prior 3 years (c) 2013	(d) 2012	(e) Total
investment return from Part X for each year listed	(a) 2013	(B) 2014	(6) 2013	(d) 2012	(e) rotal
b 85% of line 2a		<u> </u>	ļ	<u> </u>	·
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities		<u> </u>	ļ		-
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c. 					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets(2) Value of assets qualifying under				<u> </u>	
section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of					
minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during the 1 Information Regarding Foundation Managers at List any managers of the foundation who have close of any tax year (but only if they have None	ne year — see in pers: pave contributed mo	nstructions.) ore than 2% of the to	otal contributions re		
b List any managers of the foundation who capartnership or other entity) of which the None	own 10% or more of foundation has a 10	f the stock of a corp 0% or greater intere	oration (or an equa st.	lly large portion of th	ne ownership of
2 Information Regarding Contribution, Gran Check here ▼ X if the foundation only in requests for funds. If the foundation makes complete items 2a, b, c, and d.	nakes contributions gifts, grants, etc	to preselected char (see instructions) to	itable organizations individuals or organ	nizations under other	
a The name, address, and telephone number	r or e-mail address	of the person to wh	om applications sho	ould be addressed.	
b The form in which applications should be s	submitted and infori	mation and material	s they should includ	e:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charitat	ole fields, kinds of i	nstitutions, or other f	actors:
BAA	TI	EEA0310L 10/13/15	 		Form 990-PF (2015)

Page 11

Name and address (home or business) a Paid during the year See Statement 4	s an individual, attenship to any manager or I contributor Foundation status of recipient	Purpose of grant or contribution	
Total	<u> </u>	► 3a	36,650.
b Approved for future payment			
Total	1	► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross	amounts unless otherwise indicated.	Unrelated	l business income	Excluded by	section 512, 513, or 514	
	am service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
				code		
			· ·			
						
е						···
f						
g Fees	and contracts from government agencies					
2 Memb	bership dues and assessments					
	st on savings and temporary cash investments			14	95.	
	ends and interest from securities					
	ental income or (loss) from real estate:		·			11 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	financed property					
	lebt-financed property					
	ntal income or (loss) from personal property					
	r investment income					
	r (loss) from sales of assets other than inventory					
	ncome or (loss) from special events			-		
	s profit or (loss) from sales of inventory revenue:	ļ	·····		···· · · · · · · · · · · · · · · · · ·	
a a	revenue.	<u> </u>			· · · · · · · · · · · · · · · · · · ·	-11441 1
		-		_		
		 				
d		 				
e						
12 Subto	otal Add columns (b), (d), and (e)				95.	
	. Add line 12, columns (b), (d), and (e)	L	-		13	95.
	sheet in line 13 instructions to verify calculation	ons)	·			
Part YVI	-B Relationship of Activities to the	Accompli	ishment of Ever	nnt Durno		· -
	Notationship of Activities to the	Accomp		iipt Futpo:)C3	
Line No. ▼	Explain below how each activity for which in accomplishment of the foundation's exempt	ncome is repo purposes (oth	rted in column (e) of ner than by providing	f Part XVI-A o	ontributed important ch purposes). (See ii	ly to the nstructions.)
N/A			··			

Form 990-PF (2015) Harris Upchurch Foundation, Inc. 20-811521
Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 20-8115216 No Yes Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfer	s from the reporting	foundation to a r	noncharitable exempt o	rganization of.				
(1) Cash				. 3			1a(1)	X
(2) Othe							1 a (2)	X
	ansactions:	•		•				
	es of assets to a non	charitable exemn	nt organization				16(1)	Х
• •			e exempt organization.			•	1 b (2)	$\frac{x}{x}$
\- '	tal of facilities, equip			•	•		1 b (3)	X
`	, , ,		33613		•	•		X
• •	nbursement arranger		1				1 b (4)	
\- /	ns or loan guarantee				•		1 b (5)	X
1-7		•	or fundraising solicitation				1 b (6)	X
c Sharing	of facilities, equipme	ent, mailing lists,	other assets, or paid	employees			1 c	X
d If the an the good any tran	iswer to any of the a ds, other assets, or s isaction or sharing a	bove is 'Yes,' co services given by rrangement, sho	mplete the following so the reporting foundation win column (d) the val	hedule. Column on. If the founda ue of the goods	(b) should alwation received less, other assets, or	ys show the fa s than fair mar services recei	ir market value ket value in ved.	of
(a) Line no	(b) Amount involved	(c) Name of	noncharitable exempt organiz	ation (d) Description of trans	sfers, transactions,	and sharing arrange	ements
N/A								
		1						
		Ţ						
					,			
								
		 						
						-		
		 			· · · · · · · · · · · · · · · · · · ·			
		 						
		 					 	
describe	oundation directly or ed in section 501(c) of complete the following	of the Code (othe	ed with, or related to, or than section 501(c)(3	ne or more tax- 3)) or in section	exempt organizat 527?	tions	Yes	XNo
(a) Name of organizat	ion	(b) Type of orga	nization	(c)	Description o	f relationship	
N/A								
					<u></u>			
Sign Here	penalties of perjury, I declare, and complete Declaration	that I have examined to of preparer (other that	this return, including accompany in taxpayer) is based on all inf	ring schedules and sta ormation of which pro	Resident Resident	dge	May the IR this return preparer s	with the shown below
Signa	ature of officer or trustee		Date	 .	Title		(see instru	Yes No
	Print/Type preparer's na	ime	Preparer's signature		Date	Check	If PTIN	
Paid	Marshall M. Sh	ort Jr CDA	Wars 1	NOT ON	8-30-2016	self-employed	J.	32
			& SHORT P.A.		1		5-1245529	<u> </u>
Preparer	ı					26	-1243323	
Use Only			MINT HILL RD 28227			Phone no (*	704) 545-977	1
					i	ו יוטוסווט (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1

Form **990-PF** (2015)

BAA

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Employer Identification number

Harris Upchurch Foundation,	Inc.	20-8115216
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 p	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) orga	inization can check boxes for both the General Rule and a Sp	pecial Rule. See instructions.
General Rule		
X For an organization filing Form 990, 990 EZ	, or 990-PF that received, during the year, contributions totali te Parts I and II. See instructions for determining a contributo	ng \$5,000 or more (in money or
property) from any one contributor. Complet	te Parts I and II. See instructions for determining a contributo	r's total contributions
Special Rules		
For an organization described in section 501	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% suppo n), that checked Schedule A (Form 990 or 990-EZ), Part II, Iir	et test of the regulations
received from any one contributor, during th	ne 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	J-EZ, line 1. Complete Parts I and II.	
For an organization described in section 501	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fr	om any one contributor,
during the year, total contributions of more	than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lite children or animals. Complete Parts I, II, and III.	erary, or educational
purposes, or for the prevention of crueity to	children or animals. Complete Falts 1, 11, and 111.	
For an organization described in section 50°	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fr	om any ana contributor
	r religious, charitable, etc., purposes, but no such contribution	
\$1,000. If this box is checked, enter here the	e total contributions that were received during the year for an	exclusively religious,
charitable, etc., purpose. Do not complete a	any of the parts unless the General Rule applies to this organ ble, etc., contributions totaling \$5,000 or more during the year	ilzation because
it received <i>nonexclusively</i> religious, charitab	ne, 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 Sche	edule B (Form 990, 990-EZ, or
990-PF), but it must answer 'No' on Part IV, line	e 2, of its Form 990; or check the box on line H of its Form 9	90-EZ or on its Form 990-PF,
in arcit, line 2, to certify that it does not meet the	e filing requirements of Schedule B (Form 990, 990-EZ, or 990	J•⊏୮).

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part I
Name of org	r identification number 115216		
Part	Contributors (see instructions). Use duplicate copies of Part I if additional sp		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Larry Harris		Person X Payroll
	17537 S.E. Conch Bar Ave.	\$100,000.	Noncash
	Tequesta, FL 33469	-	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash
		•	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash Complete Part II for noncash contributions.)
BAA	TEEA0702L 10/12/15	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2015)

1 to

1 of Part II

Name of organization

Employer Identification number

Harris Upchurch Foundation, Inc.

20-8115216

art II	Noncash Property (see instructions). Use duplicate copies of Part II if additional spa	ace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- -			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		e e	
(a) No.	(b)	(6)	(d)
from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

)15	Federal Statements		Page ²	
· .	Harris Upchurch Fo	undation, Inc	•	20-811521
Statement 1 Form 990-PF, Part I, Line 16a Legal Fees				
Legal Fees	(a) Expenses Per Books \$ 43 Total \$ 43		ment Adjusted	(d) Charitable Purposes 0.
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees		-		
Accounting Fees	(a) Expenses per Book \$ 50 Total \$ 50			(d) Charitable Purposes
Statement 3 Form 990-PF, Part VII-A, Line 10 Substantial Contributors During the		iress of S	ubstantial Contribu	itor
Larry Harris	17537 S.E. Conch Bar Avenue Tequesta, FL 33469			
Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Catawba Riverkeeper Foundation PO Box 11838 Charlotte NC 28220	None	PC	River protection and youth kayaking programs	
Teach for America 5855 Executive Center Drive	None	PC	Teacher sponsorship	10,00

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70		7

Federal Statements

Page 2

Harris Upchurch Foundation, Inc.

20-8115216

Statement 4 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation <u>Status</u>	Purpose of Grant	<u>Amount</u>
Akita Rescue Society of Florida 2364 Emerson Street Jacksonville FL 32207	None	PC	Boarding and placement for homeless akitas	\$ 6,450.
Bruce Irons Camp Fund 725 Providence Rd. Ste 212 Charlotte NC 28207	None	PC	Summer camp fund	5,000.
Spay Neuter Charlotte 2017 N. Davidson St. Ste A Charlotte NC 28278	Common Directors	PC	Sterilization and animal wellness services	2,000.
Women's Impact Fund 2525 Distribution Street Charlotte NC 28203	None	PC	Leadership and education programs	2,200.
Profound Gentlemen, Inc. 7715 Krefeld Glen Drive, 511 Charlotte NC 28227	None	PC	Educational programs	1,000.

Total \$ 36,650.