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# EXTENDED TO AUGUST 15, 2016 Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

		nt of the Treasury				ecurity numb						
_		venue Service	or tax year beginning		m 990-1 11,	2015	parate	instructions in and e		.gov/form990pf. DEC 31, 20	15	Open to Public Inspection
		f foundation	or tax year beginning	UUL	<u> </u>	2013		, and c	namy	A Employer identific		number
п	ישני	מתיידים	CHARITABI	ב בטנוג	ייי ע רוד	TON				   47-45710	124	
_			oox number if mail is not d						Room/suite	B Telephone number		<del>-</del> ·
		NORTHS								336-886-		38
		own, state or pro	ovince, country, and Z		oostal co	ode				C If exemption application	n is per	nding, check here
		all that apply:	X Initial retui			I Initial return	of a fo	rmer public o	harity	D 1. Foreign organiza	ations	check here
•	J	· un that apply.	Final return			Amended re		inioi public c	ilui ity		·-	
			Address cl			Name chang				Foreign organization check here and attains	ns meet ach com	ing the 85% test, putation
H_G	Check	type of organiz	ation: X Section	n 501(c)(3) e	xempt p	rıvate foundat	on			  E   If private foundatio		
<u></u>			) nonexempt charitabl			axable private		tion		under section 507(	b)(1)(/	A), check here 🕨 🔲
			assets at end of year	J Account	-		Cash	Accr	ual	F If the foundation is		
		Part II, col. (c),	line 16) 84,516.		ther (sp		annh f		<del></del>	under section 507(	b)(1)(E	3), check here $ ightharpoonup$
	-\$ art l	Analysis of R	evenue and Expenses		7		- 1		· · · · · · · · · · · · · · · · · · ·	(a) Advicted not		(d) Disbursements
	A1 C I	(The total of amo	ounts in columns (b), (c), a al the amounts in column (	nd (d) may not		i) Revenue and penses per bo		( <b>a</b> ) Net in	vestment ome	(c) Adjusted net income		for charitable purposes (cash basis only)
	1	Contributions,	gifts, grants, etc., rece	eived		100,8	50.			N/A		
	2		rf the foundation is not required	to attach Sch B								
	3	Interest on saving cash investments	s and temporary		<u></u>						.	
	4	Dividends and	interest from securitie	s .								
	5a	Gross rents										
	۱ ـ	Net rental income						<del></del>				<del></del>
e	6a	Gross sales price	from sale of assets not on for all	line 10	-							
Revenue	٥ ا	assets on line 6a	ncome (from Part IV, line 2)	<u> </u>					0.		+	
Re	8	Net short-term		,					<u> </u>			
	9	Income modifi	. •						<del></del>			· · · · · · · · · · · · · · · · · · ·
	10a	Gross sales less land allowances										
	Ι.	Less Cost of goo	ds sold									
	C	Gross profit or	(loss)									
	11	Other income		••••								
	12	Total, Add line	s 1 through 11		<b>├</b>	100,8	1	170	0.			<del></del>
	13	•	officers, directors, trustee	s, etc		/	0.	RESE	Q.			0.
	14		e salaries and wages		-	/;	<u> </u>	2 111	<u>* (:1)</u>	<del> </del>		<del></del>
S	15	1 1 6	employee benefits		-	<u></u>	<del>2/   </del>	<del>v.,</del>	<del>)                                      </del>	<del>/</del>	$\dashv$	
sus	loa	Accounting fee			$\vdash$				<u> </u>		-	
Expenses		Other profession		••				C. L. III	UT SI		<u> </u>	······································
Ve E	17	Interest		••••			T				$\neg$	
rati	18	Taxes										
nist	19	Depreciation ai	nd depletion						_			
Ē	20	Оссирапсу										
Ϋ́	21		nces, and meetings			8,5	43.		<u>8,543.</u>			0.
anc	22		iblications		<u> </u>							
ing	23	Other expenses		TMT 1	-	1,0	41.		<u>1,041.</u>			0.
Operating and Administrative	24	•	g and administrative			0 5	ا ہ		0 504			^
ŏ	O.E.	-	l lines 13 through 23 gifts, grants paid	•	<u> </u>	9,58 6,7			9,584.		+	0. 6,750.
	23		gnts, grants paid s and disbursements.		<del></del>	<u>U, 1</u>	<del></del>					0,130.
	20	Add lines 24 ar		•	-	16,3	ا ـ 43		9,584.			6,750.
_	27	Subtract line 2				<u> </u>			<u></u>		$\neg \dagger$	<u></u>
	l		over expenses and disbu	ursements	1	84,5	16.				-	
	1		t income (if negative, en						0.			
	1		100me (if negative, enter	_						N/A		

	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
<u></u>	arı	Balance Sheets   column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		84,516.	84,516.
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	ļ	Less: allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment, basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans	·		
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	0.	84,516.	84,516.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jabi	21	Mortgages and other notes payable			
_	22	Other liabilities (describe 🕨)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
	ŀ	Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.			
Se		Unrestricted			
äär	25	Temporarily restricted			
ä	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.	•	•	
ts (	27	Capital stock, trust principal, or current funds	0.	0.	
sse	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Net Assets or Fund Balance	29	Retained earnings, accumulated income, endowment, or other funds	0.	84,516.	
Ž	30	Total net assets or fund balances	0.	84,516.	
			0	01 516	
_	31	Total liabilities and net assets/fund balances	0.	84,516.	
F	art	III Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)		1	0.
2	•	r amount from Part I. line 27a		2	84,516.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	84,516.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	84,516.
					5 000 DE (0045)

					47-457	1024 Page
(a) List and desc	ribe the kind(s) of property sold (e.g	., real estate,	(b)	How acquired - Purchase	(c) Date acquired	(d) Date sold
2-5tory brick wa	arenouse, or common stock, 200 sin	S. IVILO GO.)	_ L	- Donation	(110.1, day, y)	(, au), y
	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. ML C co.)  (b) How acquired be P- Purchase D- Ponation  (c) Date acquired be P- Purchase D- Ponation  (d) How acquired be P- Purchase D- Ponation  (e) Gross sales price  (f) Depreciation allowed (g) Cost or other basis plus expense of sale  (g) Cost or other basis plus expense of sale  (h) Gain or (if (e) plus (f) min  (ii) F.M.V. as of 12/31/69  (ii) F.M.V. as of 12/31/69  (iii) Gains (Col. (h) over col. (i), if any  col. (k), but not less tower col. (i), if any  aspital gain net income or (net capital loss)  (iii) F.M.V. as of 12/31/69  (iii) Gains (Col. (h) over col. (i), if any  col. (k), but not less tower col. (i), if any  col. (k), but not less close (from col. (k), but not less the collection of 12/31/69  (iii) Gains (Col. (h), if any  col. (k), but not less close (from col. (k), but not less close (k), but not less close (from col. (k), b					
art IV   Capital Gains and Losses for Tax on Investment Income  (a) List and describe the kind(s) of property sold (e.g., real estate, 2-doby finds watchesses or common stores, 200 shs. MLC Go.)  (b) Provide the charges of the common stores, 200 shs. MLC Go.)  (c) Date south of the charges of the common stores, 200 shs. MLC Go.)  (d) Date south of the charges of t						
(c) Capital Gains and Losses for Tax on Investment Income  (e) Istand describe the introl(s) of protects yold (e.g., real series).  (e) Gross sales price  (f) Depreciation allowed (or alloweb)  (g) Cost or other basis (h) Gain acquired (inc., day, yr.)  (h) Gain (Gol., ft) paramates (h) F.M.V. as of 12/3 I/69  (h) Addistributions associated basis (i) F.M.V. as of 12/3 I/69  (i) Gain (Gol., ft) paramates (oi. (h), but not for that any) or (ii) F.M.V. as of 12/3 I/69  (ii) F.M.V. as of 12/3 I/69  (ii) F.M.V. as of 12/3 I/69  (ii) Gain (Gol., ft) paramates (iii) F.M.V. as of 12/3 I/69  (iii) F.M.V. as of 12/3 I/69						
e		<del></del>		<u> </u>		
(e) Gross sales price						
a						
<u>b</u>						
d d						
e	-					
	ng gain in column (h) and owned by	the foundation on 12/31/69		(1	) Gains (Col. (h) gain	minus
	(j) Adjusted basis	(k) Excess of col. (ı)			. (k), but not less than	ı -0-) or
a						
b						
<u>C</u>						
d					<del></del>	
<u>e</u>	<u> </u>			I		
2 Capital gain net income or (net ca			}	2		
If gain, also enter in Part I, line 8,		nd (6):	}			
	Inder Section 4940(e) for	Reduced Tay on Ne	t Inv	estment Inc	ome	
					701110	NI / D
(For optional use by domestic privati	s touridations subject to the section	4340(a) tax on net investment	11100111	·· <i>)</i>		14/ 21
If section 4940(d)(2) applies, leave t	his part blank.					
Was the foundation liable for the sec	tion 4942 tax on the distributable an	nount of any year in the base p	eriod?			Yes No
If "Yes," the foundation does not qua	lify under section 4940(e). Do not co	omplete this part.				
	each column for each year; see the i	nstructions before making any	entrie	S.		
Base periód years	مران گار مینم المعاملات	tributions Net value of n			Distrib (col. (b) div	(d) ution ratio ided by col. (c))
2014						
				<del></del>		
2010						<del></del>
2 Total of line 1 column (d)					2	
			er of ve	ears		
-	nea if leas then E years				3	
4 Enter the net value of noncharitat	ole-use assets for 2015 from Part X,	line 5	•••		4	
5 Multiply line 4 by line 3			•••••		5	_ <del>-</del>
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)				. 6	
7 Add lines 5 and 6					. 7	
8 Enter qualifying distributions from					. 8	<del></del>
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI, line	e 1b, and complete that part us	ing a 1	% tax rate.		

Form 990-PF (2015) THE REITER CHARITABLE FOUNDATION		<u> 571024</u>		<u> Page 4</u>
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u> 4948 - s</u>	see instru	ıctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1%	1			0.
of Part I, line 27b				_
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3 Add lines 1 and 2	3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			0.
6 Credits/Payments:				
a 2015 estimated tax payments and 2014 overpayment credited to 2015				
b Exempt foreign organizations - tax withheld at source 6b	7			
c Tax paid with application for extension of time to file (Form 8868)	7			
d Backup withholding erroneously withheld 6d 6d	7			
7 Total credits and payments. Add lines 6a through 6d	7 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			
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax	11	-		
Part VII-A Statements Regarding Activities				
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervel	ne in		Yes	No
any political campaign?		1a		х
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	 m)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis		15		<u> </u>
distributed by the foundation in connection with the activities.	100 01			
Did the foundation file Form 4400 DOI for this year?		1c		х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			·	
(1) On the foundation. $\blacktriangleright$ \$ 0 . (2) On foundation managers. $\blacktriangleright$ \$ 0				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	<u>•</u>			
managers. > \$0				
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		x
	•			1
If "Yes," attach a detailed description of the activities.			ļ	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, 01	١,		v
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/	A 4a 4b	-	<u> </u>
b If "Yes," has it filed a tax return on Form 990-T for this year?	14 \			X
Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5_		
If "Yes," attach the statement required by General Instruction T.				
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1	
By language in the governing instrument, or				
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	ite iaw		1	7.
remain in the governing instrument?		6_	37	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X	αν	7	<u> </u>	-
· · · · · · · · · · · · · · · · · · ·				
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		<del></del>		1
NC				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	llendar		1	
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	<del>  -</del>	<u>X</u>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses				X

Form 990-PF (20	15) <b>THE</b>	REITER	CHARITABLE	FOUNDATION
Part VII-A	Statements I	Regarding	Activities (continued	d)

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	١.,		37
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	40		v
40	If "Yes," attach statement (see instructions)	12	Х	_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   N/A	13	Λ	
14	The books are in care of ► MARIA REITER  Telephone no. ►336-88	6-5	938	
14	Located at > 902 NORTHSHORE CT, HIGH POINT, NC ZIP+4 >27			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	203	_	. $\Box$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after	1		
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4.		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
_	Organizations relying on a current notice regarding disaster assistance check here			
C	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?	1c		х
9	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	"		-13
2	defined in section 4942(j)(3) or 4942(j)(5)):	İ		
9	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			
٠	before 2015?			
	If "Yes," list the years  ,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	2b		
c	: 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.			
	<b>)</b>		1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Light X No			
t	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			1
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A	3b	-	77
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a_		X
t	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?	<u>  4b</u> rm <b>99</b>	n_PF	(2015)
	FI)	பயக்க	U-1-1	170110

Form 990-PF (2015) THE REITER CHARITABLE FO	UNDATION		<u>47-45710</u>	24 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
<ul> <li>5a During the year did the foundation pay or incur any amount to:</li> <li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section)</li> <li>(2) Influence the outcome of any specific public election (see section 4955); or</li> </ul>			s X No	
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		L Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio 4945(d)(4)(A)? (see instructions)	n described in section	Ye	S X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or f		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	 ter the excentions described i		.3 [22] 110	
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	***			
expenditure responsibility for the grant?	N	I/A   Ye	s No	
If "Yes," attach the statement required by Regulations section 53.494	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		<b></b>	
a personal benefit contract?		Y		c.   37
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.	halton transpation 0		as X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s b if "Yes," did the foundation receive any proceeds or have any net income attribute.		I IXE		7b
Part VIII Information About Officers, Directors, Trust		nagers Highly		70
Paid Employees, and Contractors	ees, i oundation ma	inagers, riigin	_	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
(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	(e) Expense account, other allowances
TODD M. REITER	TRUSTEE		·	
902 NORTHSHORE CT				
HIGH POINT, NC 27265	5.00	0.	0.	0.
	TRUSTEE			
902 NORTHSHORE CT		1		
HIGH POINT, NC 27265	5.00	0.	0.	0.
	-			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
NONE	·			
	<u></u>	L		
Total number of other employees paid over \$50,000				<u>0</u>

Form **990-PF** (2015)

Form 990-PF (2015) THE REITER CHARITABLE FOUNDATION		571024 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
210112	7	
	· ·	
A = 0.000 p	7	
	7	
	_]	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities	<del></del>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers prod	ical information such as the uced, etc.	Expenses
1 N/A		
2		
3		
	<del></del>	
4		
Part IX-B   Summary of Program-Related Investments	1.	<del></del>
Describe the two largest program-related investments made by the foundation during the tax year on	ines 1 and 2.	Amount
1 N/A		· · · · · · · · · · · · · · · · · · ·
2		
		<del></del>
All other program-related investments. See instructions.	ł	
3		
Table 1 Add Imag 1 Abrough 2	•	0.
Total. Add lines 1 through 3		<u> </u>

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	18,691.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	18,691.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	18,691.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	280.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	18,411.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	540.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here   in and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	540.
2a	Tax on investment income for 2015 from Part VI, line 5		
ь	Income tax for 2015. (This does not include the tax from Part VI.)	1	
	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	540.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	540.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	540.
<u>P</u>	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	6,750.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	6,750.
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	_5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,750.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation (	qualifies for th	e section

Form **990-PF** (2015)

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
1 Distributable amount for 2015 from Part XI,	Остраз	10013 prior to 2014	2014	2013
line 7				540.
2 Undistributed income, if any, as of the end of 2015				340.
a Enter amount for 2014 only			0.	
b Total for prior years:	-	······································		
·		0.		
3 Excess distributions carryover, if any, to 2015:				
<b>a</b> From 2010				
<b>b</b> From 2011				
c From 2012		i		
d From 2013				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 6,750.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior			· · · · · · · · · · · · · · · · · · ·	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				540.
e Remaining amount distributed out of corpus	6,210.			
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))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,210.			
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 instr.			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				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.		ļ		
Subtract lines 7 and 8 from line 6a	6,210.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015 6,210.				

	TER CHARITA			47-457	71024 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2015, enter the date of t	the ruling	<b>&gt;</b>		
<b>b</b> Check box to indicate whether the found	dation is a private operatir	ng foundation described i	n section	] 4942(j)(3) or	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
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			•		
e Qualifying distributions made directly					-
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets				-	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on	į				
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV   Supplementary Info	rmation (Comple	te this part only i	if the foundation	n had \$5,000 or mor	re in assets
at any time during t				• •	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh		than 2% of the total contr	ubutions received by the	e foundation before the close	of any tax
year (but only if they have contributed n			,		<b>,</b>
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (	or an equally large port	on of the ownership of a par	tnership or
other entity) of which the foundation ha			. ,		·
NONE					
2 Information Regarding Contributi	ion, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here ► X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions t	to preselected charitable o	organizations and does		
	·				<u>.                                    </u>
a The name, address, and telephone num	per or e-mail address of t	ne person to whom applic	cations snould be addre	ssed.	
b The form in which applications should b	e submitted and informat	tion and materials they sh	ould include;		
c Any submission deadlines:					<u>.                                    </u>
d Any restrictions or limitations on awards	e cuch ac hu accaranhar	al areas inharitable fields	kinde of inetitutions or	other factores	
u Any restrictions of inflitations of awards	s, such as by yeographica	ii ai cas, ciiai liavie lielus,	หแนง บา แเงแนนเบแง, บา	other ractors.	

3 Grants and Contributions Paid During the		rayment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
<u> </u>	or substantial contributor	recipient		
a Paid during the year				
CALVARY LIFE FELLOWSHIP	NONE		CHARITABLE	
PO BOX 812			CONTRIBUTION	
KASILOF, AK 99610-0812				3,500
COMPANIEW PIDIT CHEEN				
COMMUNITY BIBLE CHURCH 4125 JOHNSON ST	NONE		CHARITABLE	
HIGH POINT NC 27265			CONTRIBUTION	1,000
10111, 10 17203		·		1,000
GLOBAL MINISTRY CENTER	NONE		CHARITABLE	
17001 PRAIRIE STAR PARKWAY			CONTRIBUTION	
LENEXA KS 66220			-	500
THE NORTH CAROLINA LEADERSHIP ACADEMY	NONE		CHARITABLE	
4353 HIGH POINT ROAD			CONTRIBUTION	
KERNERSVILLE, NC 27284				1.000
				·
EVANGELICAL FREE CHURCH OF AMERICA	NONE		CHARITABLE	
901 EAST 78TH STREET MINNEAPOLIS MN 55420-1300			CONTRIBUTION	500
	NTINUATION SHEE	T(S)	<b>▶</b> 3a	500 6,750
b Approved for future payment		~ \ D /	Julia	0,730
,,				
NONE				
Total	<del>-                                    </del>		<b>▶</b> 3b	0

#### Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ided by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	-	code	Amount	Tunction income
<u> </u>			<u> </u>	<u>-</u>	
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					-
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities	<del></del>			<del></del> :	
5 Net rental income or (loss) from real estate:		<u>-,                                      </u>	<del>                                     </del>		
a Debt-financed property			<del> </del>		<u> </u>
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory		·			
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b				-	
C					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0.		0.	0.
3 Total. Add line 12, columns (b), (d), and (e)			•		0.
See worksheet in line 13 instructions to verify calculations.)		• •			
Part XVI-B Relationship of Activities to  Line No. Explain below how each activity for which income the foundation's exempt purposes (other than because it is a second to be a second to	ne is reported	ın column (e) of Part XVI-A			nplishment of
				· · · · · · · · · · · · · · · · · · ·	
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THE REITER CHARITABLE FOUNDATION

Part 2	XVII	Information Re Exempt Organ		sfers To a	and Tran	sactions a	and Relations	ships With Non	charitab	le	
1 Did	the or	ganization directly or indi	rectly engage in any	of the followin	g with any o	ther organization	on described in sec	tion 501(c) of		Yes	No
		other than section 501(c							1		
		from the reporting found			_						
	Cash		and to a mondification		gamzanon	-			1a(1	N	x
		assets				•	•				X
		-		• •••				• • • • • • • • • • • • • • • • • • • •	1a(2	9	
		sactions:									7.7
		of assets to a noncharita						·· ···· ·	1b(1		X
		ases of assets from a no	· ·	organization	•			•••	. 1b(2		X
(3)		I of facilities, equipment,							1b(3	9)	X
(4)		oursement arrangements							1b(4	0	X
(5)	Loans	or loan guarantees						-	1b(5	6)	X
(6)	Perfo	rmance of services or me	embership or fundra	ısıng solıcıtatıo	ns				16(6	6)	X
c Sha	arıng of	facilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees		••••		_1c		X_
d Ifti	he ansv	ver to any of the above is	"Yes," complete the	following sche	dule. Colum	n (b) should ah	ways show the fair	market value of the go	ods, other a	ssets,	
ors	services	s given by the reporting f	oundation. If the fou	indation receive	ed less than	fair market valu	ie in any transactio	n or sharing arrangen	nent, show in		
col	umn (d	) the value of the goods,	other assets, or serv	vices received.							
(a) Line n	0	(b) Amount involved	(c) Name o	f noncharitable	e exempt org	anization	(d) Description	on of transfers, transaction	s, and sharing	arrangeme	ents
<u> </u>		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	N/A							
				-1,						<u>-</u>	
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	ho four	dation disasthi or indisas	the offiliated with or	rolated to one	ar mara tav	avamnt araani	izationa dagazibad				
		idation directly or indirec				exempt organi	zations described			. 5	7
		501(c) of the Code (other	•	(3)) or in sect	IION 52/?	-			Ye	s ∟A∆	No
<u> </u>	Yes," co	mplete the following sch				•	1	( ) D	- <b>.</b>		
		(a) Name of org	janization		(b) Type of	organization		(c) Description of rela	ationsnip		
		N/A									
		•									
		penalties of perjury, I declare							May the IR:	discuss	thie
Sign	and be	lief, it is true, correct, and cor	$\dot{a}$		n taxpayer) is b	ased on all inform	nation of which prepar	er has any knowledge	return with	the prepar	er l
Here		Mari	P. Rev	ter	15.	27-16	TRUST	EE	X Ye		
	Sian	ature of officer or trustee			Date		Title	——	- [		,
	J. 911	Print/Type preparer's na		Preparer's s			Date	Check   If	PTIN		
		i inio i jpo proparer s lic	41110	7) 1	,	1	, ,	self- employed			
Paid		D3.000-0-3		10.11	- ! a .	J 11 ] _ //. I	h Klink	Jon omployed	D0001	<u>ሳ</u> ርሳር	
	~~~	PATRICIA L		rall	<u>alal</u>	viran	11. 2/1/1/p	l	P0001		
Prepa		Firm's name ► SHA	RRARD, MO	CGEE &	CO., I	.A.		Firm's EIN ► 56	-1146	T 3./	
Use (	Unly										
		Fırm's address ▶ ₽ .	O. BOX 58	369							
		HI	GH POINT	NC 27	262			Phone no. (33	36)884	-041	0

3 Grants and Contributions Paid During the Year (Continuation)								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient						
	1							
OYS SCOUT TROOP 23	NONE		CHARITABLE					
658 SQUIRE DAVIS ROAD			CONTRIBUTION	•				
ERNERSVILLE, NC 27284	1			25				
	<del>-</del>	<del>-</del> ·						
	į l							
		<del></del>	<del></del>					
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	1		<u> </u>					

#### Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

Name of the organization

or 990-PF)

#### Schedule of Contributors

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

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

OMB No 1545-0047

Employer identification number

2015

THE REITER CHARITABLE FOUNDATION 47-4571024 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 chantable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions, General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 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, Ine 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 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

#### THE REITER CHARITABLE FOUNDATION

47-4571024

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	TODD AND MARIA REITER  902 NORTHSHORE CT  HIGH POINT, NC 27262	\$\$ <b>100,850.</b>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-   -   \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

### THE REITER CHARITABLE FOUNDATION

47-4571024

art il	Noncash Property (see instructions). Use duplicate copies of F	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
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(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	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Page	4
raue	

Name of orga	nization			Employer identification number		
	ITER CHARITABLE FOUNDAT	ION		47-4571024		
Part III	Exclusively religious, charitable, etc., contrib the year from any one contributor. Complete col completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or	in section 501(c)(7), (8), or Wing line entry. For organization less for the year (Enter this info onc	r (10) that total more than \$1,000 for  s  >   \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$     \$		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held		
		(e) Transfer of gif	t			
	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
		(e) Transfer of gif	l			
	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
		(e) Transfer of gift	t			
-	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	eription of how gift is held		
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	Transferee's name, address, and	(e) Transfer of gift		nsferor to transferee		
-	<del></del>					

FORM 990-PF	OTHER E	XPENSES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK CHARGES ORGANIZATION COSTS MISCELLANEOUS EXPENSE	41. 850. 150.	41. 850. 150.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	1,041.	1,041.		0.	