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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

► 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.

2015

OMB No. 1545 0052

Open to Public Inspection

For c	alendar y	ear 2015, or ta	x year beginning		, 2015,	and ending		•	
			AMILY FOUND		OM.		Α	Employer identification nur 56-1743194	nber
683	6 MORE	RISON BLVD E, NC 2821	#330	VIII.	ON .		В	Totophone number (see inst 704/552/7074	ructions)
ChA	KLUIIE	S, NC 2021	<b>.</b>				С	If exemption application is	pending, check here.
		U1	Initial return	- Т	Initial return of a form	ner public charity	1		
G	heck all t	that apply:	Final return	ŀ	Amended return	ier public charry	D	1 Foreign organizations, che	ck here
		<b> </b> -	Address change	.  -	Name change		1	2 Foreign organizations meet	
H C	heck type	e of organization			(c)(3) exempt private for	oundation	1	here and attach computation	on
	Sect	ion 4947(a)(1)	nonexempt charit	able t	rust Other taxable p	rivate foundation	E	If private foundation status	
I F	air market v	alue of all assets a	t end of year J	_	ounting method: X Ca	ash Accrual		under section 507(b)(1)(A)	
		column (c), line 16			Other (specify)		F	If the foundation is in a 60 under section 507(b)(1)(B)	
	\$	1,840,		art I,	column (d) must be or				<u> </u>
Par		alysis of Re	total of amounts in		(a) Revenue and expenses per books	(b) Net investme income	ent	(c) Adjusted net income	(d) Disbursements for charitable
	coli	imns (b). (c). a	ind (d) may not n	eces.	CAPCIISCO POI DOSIG				purposes (cash basis only)
	sarı (see	ily <b>equa</b> l the an e instructions) ]	nounts in column )	(a)					(Cash basis Only)
			, etc, received (attach schedul	e).	15,519.				
	2 0	Ck ► if the four	ndation is not required to atta	ch Sch B	140	** *		·^	
	3 1	nterest on savings and ter	mporary cash investments		21.		21.	N/A	
	1 .		n securities		35,599.	35,5	99.		
				• • • •			<del></del>		
_		Net rental income or (loss)	le of assets not on line 10		44,912.				\$ \\ \tag{2.5}
R E	l be	Gross sales price for			44, 712.			,	
V	1 -	assets on line 6a Capital gain net inco	ome (from Part IV, line			44,9	12.		\$
E N U	8 1	Net short-term capila	al gain				,		\$C 355
U		Income modification Gross sales less	\$ 1	• • • •	*				* ***
_		returns and allowances			, ,	- 377		1	***
	ј в	Less Cost of goods sold			The state of the state of				
		-	ach schedule)			,			,
	111	•	h schedule),		2 275		70	RECEIVED	<b></b>
	1		ee Statemer		8,276. 104,327.	8,2 88,8		PROPINCIO	13
			cers directors, trustee		104, 327.	19		JUN 0 6 2016	<u> </u>
	1	,	aries and wages			ă.		DOM W W ZUID	II.
<b>9</b>	,	Pension plans, emp		• • • •		ļ	느		
(E)		Legal fees (altach s	chedule) ach sch) . SeeS	:+ 2	2 257	2,72	-E-7	GDEN. UT	
<b></b>		Other prof. fees (all		t.3	2,257. 24,046.	24,0			
್ಠ	N 17	Interest			21,0101				
MINTERNATOS	S 18 R 19	Taves (altach schedute)(s	ee instra)See St	m 4	2,659.				
≘R A	A 1 12	Depreciation (attacli schedule) and deple							
		Occupancy							
ĞĠ	Ĕ 21	Travel conferences							
Ä	E 22	Printing and publication Other expenses (att	ofions	•		<u> </u>			
SS P	ê 23	Other expenses (att	act screation						
S	E 22 X 23 E N 24 S 24	Total operating and	administrative						
		expenses Add line	D t-	χV	28,962.	26,3	303.		176,110.
	1	Contributions, gifts, grant	•		176,110.	<del></del>			170,110.
		Total expenses and Add lines 24 and 25		<u></u> .	205,072.	26,3	303.		176,110.
		Subtract line 26 from							
	a	Excess of revenue and disbursements			-100,745.				
	b		ome (if negative enter	-0).,		62,5	05.		
_			no (if negative, enter 0			<u> </u>		<u> </u>	<u> </u>
BA	A For Pa	perwork Reduc	ction Act Notice,	see in	structions.	TEEA0504L	12/04	/15	Form <b>990-PF</b> (2015)

	<del></del>		Attached schedules and amounts in the description	Beginning of year	Ena o	i year
Part	<u>                                     </u>	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest			985.	985.
			ary cash investments		<del></del> -	
		Accounts receivable	r			
	_	Less. allowance for				
						, , , , , , , , , , , , , , , , , , , ,
ı	4	Pledges receivable.				
		Less allowance for	doubtful accounts		<del></del>	
İ	_	Grants receivable				
	6	Receivables due from offic disqualified persons (attac	cers, directors, trustees, and other ch schedule) (see instructions)			
ı	7	Other notes and loans rec	eivable (attach sch)			
A		Less allowance for	doubtful accounts >			
S E T	8	Inventories for sale	or use			
Ē	9	Prepaid expenses a	nd deferred charges			
S	10 a	Investments – US obligations (attach s	and state government			
- 1	h		stock (attach schedule). Statement 5	1,963,617.	1,717,231.	1,717,231.
1			bonds (attach schedule)			
		Investments - land		* 3	•	,
	11	equipment, basis		, and the second	mare some country entry on a	Europeanie au automorphise de Luciene I
ļ		Less accumulated deprec (attach schedule).	►			
l	12	Investments - mort	gage loans			
	13	Investments - othe	r (attach schedule) Statement 6	124,267.	122,726.	122,726.
	14		equipment basis >	A TANK	Sale Comments	
		Less accumulated depred (attach schedule)				
	15 16	Other assets (descr Total assets (to be see the instructions	ibe > ) completed by all filers - ) . Also, see page 1, ilem 1)	2,087,884.	1,840,942.	1,840,942.
	17		nd accrued expenses			11
Ī						
B		Deferred revenue.				
ĭ			ctors, trustees, & other disqualified persons			
Ļ			es payable (attach schedule).			<b>1</b>
i l	21					
Ţ	22	Other liabilities (des	scribe >)			
E S	23	Total liabilities (add	d lines 17 through 22)	0.	0.	
		Foundations that to	ollow SFAS 117, check here 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted				Janes Maria
ΕU	25	Temporarily restrict	ed			
T N D		Permanently restrict				
A S B		Foundations that d	o not follow SFAS 117, check here. 🕨 🛭 27 through 31.			
SAEL	27		principal, or current funds	2,087,884.	1,840,942.	
TA	28		s, or land, bldg , and equipment fund			
С	29		nulated income, endowment, or other funds			
O E R S	30		fund balances (see instructions)	2,087,884.	1,840,942	
	31	Total liabilities and (see instructions)	I net assets/fund balances	2,087,884.	1,840,942	1
Pari		<b>Analysis of Cha</b>	nges in Net Assets or Fund Baland	ces		1
1	Tota	I not assets or fund )	balances at beginning of year - Part II, collect on prior year's return)	umn (a), line 30 (must a	gree with	2,087,884.
		er amount from Part I			2	-100,745.
		increases not included in			3	
4		lines 1, 2, and 3			4	1,987,139.
5	Decre	eases not included in line 2	(itemize) See Statement	7	5	146,197.
6	Tota	I net assets or fund	balances at end of year (line 4 minus line 5	5) - Part II, column (b),	line 30 6	1,840,942.

		ORELICK FAMILY FOUNDAT			56-1743194	Page 3
Part		osses for Tax on Investmen		TAS		
	(a) List and describe 2-story brick warehouse	the kind(s) of property sold (e.g., roe, or common stock, 200 shares ML	eal estate, C Company)	(b) How acquire P — Purchase D — Donation	(mo , day, yr )	(d) Date sold (mo , day, yr )
1 a	See Statement 8					
b						
С						
d						
e						
	(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						
Ь						
С						
d						
е						
	Complete only for assets show	ring gain in column (h) and owned b	y the foundation on 12/31	/69	(I) Gains (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		gain minus col (k), I than -0-) or Losses (f	out not less
a						
b						
С						
d						<del></del>
			······································		<del></del>	
		□ □ If gain, also	enter in Part I line 7			
	Capital gain net income or (ne	t capital loss) . If (loss), ent (loss) as defined in sections 1222(5)	enter in Part I, line 7 ] ter -0- in Part I, line 7 ]		2	44,912.
•			_			
	in Part I, line 8				3	28,039.
		r Section 4940(e) for Reduce			<u></u>	
For o	ptional use by domestic private for	oundations subject to the section 4940	(a) tax on net investment in	come.)		
fsor	tion 4940(d)(2) applies, leave t	this part blank				
1 360	mon 4940(d)(z) applies, leave i	ms part diam.				_
		ction 4942 tax on the distributable a		base period?	Yes	X No
f 'Ye	s,' the foundation does not qua	alify under section 4940(e) Do not o	complete this part.			
1	Enter the appropriate amount in	each column for each year; see the in-	structions before making any	y entries.		
	_ (a)	(b)	(c)		(d)	
ı	(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as	ssets (c	Distribution of (b) divided by	n ratio col (c))
	2014	87,960.	2,04	2,435.		0.043066
	2013	161,055.		7,538.		0.078276
	2012	133,507.		8,288.		0.063026
	2011	127,500.		4,036.	<del></del>	0.058378
	2010	144,105.		1,924.		0.067594
2	Total of line 1, column (d)	,			2	0.310340
	· · · · · · · · · · · · · · · · · · ·	he 5-year base period — divide the	total on line 2 hv 5 or hv			0.010040
3	number of years the foundation	ne 5-year base period — divide the in has been in existence if less than	5 years	ine	3	0.062068
4	Enter the net value of nonchar	ritable-use assets for 2015 from Par	rt X, line 5		4	1,976,546.
5	Multiply line 4 by line 3	,			5	122,680.
6	Enter 1% of net investment in	come (1% of Part I, line 27b)			6	625.
7	Add lines 5 and 6,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			7	123,305.
8	Enter qualifying distributions for	rom Part XII, line 4			8	176,110.
	If line 8 is equal to or greater that Part VI instructions	an line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1% ta	x rate See the	

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for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

and addresses....

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orn	m 990-PF (2015) SHELTON GORELICK FAMILY FOUNDATION	56-1	743194		Pa	ige <b>5</b>
	rt VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions).			11		<u>x</u>
	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person advisory privileges? If 'Yes,' attach statement (see instructions)			12		<u>x</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption a Website address N/A	ıpplicatio	nº[	13	Х	
14	The books are in care of ► JEFF GORELICK  Telephone r	0 - 7	04/55	$2/\overline{2}$	74	
	Located at 6836 MORRISON BLVD STE 330 CHARLOTTE NC ZIP + 4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here.	2821		N/Ā		<u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year	. • 15		<sub>1</sub>		N/A
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority ov bank, securities, or other financial account in a foreign country?	er a	[	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country					
Pa	ort 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.		Ŀ	ÿ	Yes	No
1	a During the year did the foundation (either directly or indirectly)	٦., ſ	l	٠,	ŀ	. Brog
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		X No	4		, , ,
	disqualified person?  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X No	3°,		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes [	XNo			3
	(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)?	Yes [	X No	,,		no quippenar quanta na
	(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 termination of government service, if terminating within 90 days.).	]Yes [	X No		, .	
	b If any answer is 'Yes' to 1a(1)-(6), did any 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)?	,		1 b	N	/ <u>A</u>
	Organizations relying on a current notice regarding disaster assistance check here.	►			'.	4
	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?			1 c		_X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).					٠ ;
	a At the end of lax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	Yes	ΧNο	ر در میشی	* *	
	If 'Yes,' list the years ► 20 , 20 , 20 , 20, 20			```\		,,
	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see instructions.)	)(2) 10		2 b	N	/2
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	ere		77,7		3.57
	► 20 , 20 , 20			5.94 2.5		
3	3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No	, ,		
	b 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 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.).			3 b	N	.(j. °  ∕A
,	a. Dut the foundation inviget during the year any amount in a manner that would repnardize its				14	
•	charitable purposes?,		• • • • • • • • • • • • • • • • • • • •	4 a		X
	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?			4 b		·x
	the tax year beginning in Acto.					

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Part VII-B   Statements Regarding Activiti		4/20 May be Requ	urea (continuea)		1 - (1)
5a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt		n (section 4945(e))?	TYes 🗓	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ic election (see section			No	
(3) Provide a grant to an individual for travel,		ourposes?		No A	
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charitable, etc, or		Yes X	]No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	, literary, or or animals?	Yes X	No	**,
b if any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excepting disaster assistance	tions		N/A
Organizations relying on a current notice rega		e check here	[		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Region 1.	sibility for the grant? ulations section 53 4945	 5-5(d).	N/A . Yes	] No	
6 a Did the foundation, during the year, receive an on a personal benefit contract?		••••	[Yes ]	No No	
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870				6b	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any proceed				N/A. 7b	
Part VIII Information About Officers, D					1 1
and Contractors					
1 List all officers, directors, trustees, foundation	n managers and their o	ompensation (see inst	ructions).		
(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	other a	se account, allowances
SCOTT GORELICK 6836 MORRISON BLVD STE 330 CHARLOTTE, NC 28211	Vice Preside 1.00 /month	0.	0.		0.
JEFF GORELICK 6836 MORRISON BLVD STE 330 CHARLOTTE, NC 28211	Vice Preside	0.	0.		0.
PAMELA GORELICK 6836 MORRISON BLVD STE 330	Vice Preside 1.00 /month	0.	0.		0.
CHARLOTTE, NC 28211					
2 Compensation of five highest-paid employees (o	ther than those included	on line 1 – see instructio	ns). If none, enter 'NON	 E.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	other a	se account, allowances
None					
Total number of other employees paid over \$50,00	0		,	<b>&gt;</b>	0

Rart VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
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	0
PartilX-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	
<u>N/A</u>	
2	
All other program-related investments. See instructions.	
3	
J	
Total. Add lines 1 through 3	0.
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see instructions.)	reign t	oundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:	<b>建</b>	
a Average monthly fair market value of securities	1 a	1,999,761.
<b>b</b> Average of monthly cash balances	1 b	6,885.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	2,006,646.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	<b>A</b>	
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	2,006,646.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3		
(for greater amount, see instructions)		30,100.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4		1,976,546.
6 Minimum investment return. Enter 5% of line 5	6	98,827.
PartXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operation and certain foreign organizations check here ► ☐ and do not complete this part.)	iting fo	undations
1 Minimum investment return from Part X, line 6	1	98,827.
2a Tax on investment income for 2015 from Part VI, line 5	A	
b Income tax for 2015 (This does not include the tax from Part VI) 2b		
c Add lines 2a and 2b	2 c	625.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	98,202.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	98,202.
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	98,202.
PartXII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes	49.	
a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	176,110.
b Program-related investments – total from Part IX-B	1 b	<del></del>
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)	3 a	
<b>b</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	176,110.
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	625.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	175,485.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for		210,400.
qualifies for the section 4940(e) reduction of tax in those years.	niualiof3	
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	Years prior t	0 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7		-			2015
2 Undistributed income, if any, as of the end of 2015		ļ			98,202
a Enter amount for 2014 only			1		
b Total for prior years 20, 20, 20		<del> </del>		0.	
3 Excess distributions carryover, if any, to 2015:		<del> </del>	0.		
a From 2010		j			
b rom 2011 33 200		ł	ì		
c From 2012 28,349.	,				
d From 2013	,	1		F	
e From 2014		1			-
f Total of lines 3a through e	158,558.			. !	,
Y'll I was a same division of 2015 from Part		. ,			,
a Applied to 2014, but not more than line 2a.	* * '.				
			1	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)	_	· ·	- : (\$ \$ )	y da la com	
d Applied to 2015 distributable amount	0.	· · · · · · · · · · · · · · · · · · ·			
e Remaining amount distributed out of cornus	77 000			(a) (b)	98,202.
5 Excess distributions carryover applied to 2015	77,908.				. ĝas
(If an amount appears in column (d), the same amount must be shown in column (a).)	\$0. D. D.	***		. <u>2244.53</u> ,	0
(a).)			. ]		200 1 W Y 12
6 Enter the net total of each column as		-			
indicated below:		2	1		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5.	236,466.			2 1 1 1 1	
b Prior years' undistributed income Subtract Inne 4b from line 2b	** >>	, 27, 52	<del></del>		
C Enter the amount of prior was all	7 7 7	_	0.		
				* No. 2 No.	
been issued, or on which the section 4942(a) tax has been previously assessed			· .		
d Subtract line 6c from line 6b Taxable			0.	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
amount - see instructions				37. 3.3	
e Undistributed income for 2014. Subtract line 4.5.4.	· · · · · · · · · · · · · · · · · · ·		0.		
line 2a Taxable amount — see instructions	enginte				
( Undistributed income to costs a cost				0.	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be			,		
distributed iii 2016.	·			70 S	
7 Amounts treated as d stributions out of corpus to satisfy requirements imposed by		**************************************		10000	0.
3000001 (7000)(1)(F) Or A9A9/A\/3\ /E1664.5-	<u> </u>	s			
may be required — see instructions)	0.	, ,	1		1841 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)					3, * 3, * 3
· · · · · · · · · · · · · · · · · · ·	37,899.				
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a		-		* * * * * * * * * * * * * * * * * * * *	
10 Analysis of line 9	198,567.				
a Excess from 2011 33, 200	}	, <del></del>			the second second
b Excess from 2012 28 349	1		1	· · · · · ·	
C Excess from 2013., 59 110	1			• *	
a Excess from 2014				.	• •
e Excess from 2015 77, 908.				·	. 1
BAA					

Form 990-PF (2015) SHELTON GORELICK			\/!! A =====	56-174319	<del></del>
Part XIV Private Operating Foundation 1 a If the foundation has received a ruling or deter					N/A
is effective for 2015, enter the date of the r	uling .		• • •	<u></u> ►	
<b>b</b> Check box to indicate whether the foundation	<del></del>	erating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
<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					
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 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.			<del></del>		
Part XVI Supplementary Information (assets at any time during the	Complete this	part only if the	foundation had	\$5,000 or more	in
1 Information Regarding Foundation Manag		istructions.			
a List any managers of the foundation who have	contributed more ti	han 2% of the total co	ontributions received	by the foundation bef	ore the
close of any fax year (but only if they have	contributed more	than \$5,000) (See	section 507(d)(2))	•	
See Statement 9					
<b>b</b> List any managers of the foundation who own	10% or more of the	stock of a cornoration	n (or an equally large	nortion of the owner	shin of
a partnership or other entity) of which the	foundation has a 1	0% or greater inter	est	portion of the owner	5p 6.
			<del></del>		
2 Information Regarding Contribution, Gran					
Check here X if the foundation only mal	kes contributions to gifts, grants, etc	preselected charitab (see instructions) to	le organizations and o o individuals or orga	loes not accept unso nizations under oth	licited er conditions,
a The name, address, and telephone number or	e-mail address of t	he person to whom a	pplications should be	addressed:	
		•			
b The form in which applications should be s					
<b>b</b> The form in which applications should be s	ubmitted and info	rmation and materia	als they should inclu	de:	
~\A					
c Any submission deadlines:					
A) A					
d Any restrictions or limitations on awards, s	uch as by geograp	phical areas, charita	ible fields, kinds of i	nstitutions, or other	factors:
N A					
BAA	TE	EA0310L 10/13/15	·· <del></del>	F	orm <b>990-PF</b> (2015)

3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen		T
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
	substantial contributor	recipient		
Name and address (home or business)  a Paid during the year  See Statement 10	foundation manager or substantial contributor	recipient	contribution	
Tatal			▶ 3:	a 176,110
b Approved for future payment		1		170,110
Total			▶ 3	Ь

Part XVI-A	Analysis	s of Income	-Producing	<b>Activities</b>

	l lincolate				
Enter gross amounts unless otherwise indicated.  1 Program service revenue	(a) Business code	d business income (b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
			COUC		
	<del> </del>	***			· · · · · · · · · · · · · · · · · · ·
d					<del></del>
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					····
3 Interest on savings and temporary cash investments			14	21.	
4 Dividends and interest from securities			14	35,599.	
5 Net rental income or (loss) from real estate.	1,345		,	- 19,7° \$10,7° \$	**
a Debt-financed property					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property				<u> </u>	
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	44,912.	
9 Net income or (loss) from special events	l				
10 Gross profit or (loss) from sales of inventory	<del></del>				
11 Other revenue:			1321.V8	\$\$\$.\$\delta\	17 20 A AND
a Other Revenue	<u> </u>		14		767 1 477 478
_				0,2,0.	
ь с					
d	<del> </del>	<del></del>			
6			<u> </u>		
12 Subtotal. Add columns (b), (d), and (e)	(Als		£ 1783	88,808.	<del></del>
13 Total. Add line 12, columns (b), (d), and (e)					88,808.
is interested in the late of the contract of t					
				-	
(See worksheet in line 13 instructions to verify calculating	ons)			***************************************	
(See worksheet in line 13 instructions to verify calculations and the second section (See worksheet in line 13 instructions to verify calculations).	Accomp	lishment of Exemp	t Purp	oses	
(See worksheet in line 13 instructions to verify calculations and the second section (See worksheet in line 13 instructions to verify calculations).	Accomp	lishment of Exemp	t Purp	oses	
(See worksheet in line 13 instructions to verify calculations and the Relationship of Activities to the	Accomp	lishment of Exemp	t Purp	oses	
(See worksheet in line 13 instructions to verify calculations and the second section (See worksheet in line 13 instructions to verify calculations).	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	
Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exempt	Accomp	lishment of Exemp	t Purp	oses	

orm 990-F				FOUNDATION			56-174		Pa	ge 13
Part XVI	Information Reg Exempt Organiz	arding Tranations	nsters To a	nd Transactio	ns and F	Relationsh	ips With Nonch	aritable		
1 Did the description	ne organization directly ribed in section 501(c) on g to political organizati	or indirectly e	ngage in any ther than sect	of the following wion 501(c)(3) orga	ith any oth inizations)	ner organizat or in section	ion 1 527,		Yes	No *
a Trans	sfers from the reporting	foundation to	a noncharitab	ole exempt organi	zation of				٠٠	
	Cash			• • • • • • •	•	•		1 a (1)		<u> </u>
	Other assets		•• ••••	•• ••				1 a (2)	, , , , , , , , , , , , , , , , , , ,	X
	r transactions: sales of assets to a non-	aharitabla aya	mnt organizat	400				1 b (1)	ă	` <u>.</u> _
	Purchases of assets from				•	••		1 b (2)		<u> </u>
	Rental of facilities, equip						*************	1 b (3)		X
• • •	Reimbursement arranger							1 b (4)		$\frac{x}{X}$
٠.	oans or loan guarantee		• • • • • • • • • • • • • • • • • • • •					1 b (5)		X
	Performance of services		ip or fundraisi	ing solicitations .		• • •		1 b (6)		X
	ing of facilities, equipme					,		1 c		Х
<b>d</b> If the the go	answer to any of the a oods, other assets, or ser ransaction or sharing a	bove is 'Yes,' vices given by rrangement, sl	complete the the reporting for how in column	following schedul oundation If the for or (d) the value of	e Column undation rec the goods,	(b) should a ceived less the other assets	lways show the fair an fair market value ii s, or services receivi	market val	ue of	
(a) Line no.	(b) Amount involved	(c) Name o	of noncharitable e	xempt organization	(d)	Description of tr	ansfers, transactions, and	sharing arrai	ngement	S
N/A										
							····			
	<u> </u>				<del> </del>	<del></del>				
					-					
					<del></del>					
				<del></del>	<del> </del>			······································		
<del></del>					<del></del>					
							··			
		· · · · · · · · · · · · · · · · · · ·			1	<del></del>				
2 a le the	foundation directly or inc	directly affiliate	d with or relate	ed to, one or more	tax-exempt	organizations				
desc	ribed in section 501(c) on es,' complete the following	of the Code (o ing schedule.	ther than sect	tion 501(c)(3)) or	in section :	52/?		·· [Yes	<b>X</b>	No
	(a) Name of organizati	on	(b) Ty	ype of organization	n		(c) Description of re	lationship		
N/A						<del></del>				
		······································			<del></del> -					
·····			<u> </u>				······································			
			<u> </u>							
Cor	der penalties of perjury, I declar rect, and complete Declaration	re that I have exam	ned this return, in than taxpayer) is t	ncluding accompanying based on all information	schedules and of which prep	statements, and parer has any kn	to the best of my knowled	ge and belief	rt is true,	<del></del>
Sign	$\sqrt{\Lambda}$		1	<i>a</i> .				May the this retur		
Here	- ///-	4 X	UYI	>-10-/		up/se	<u>٠</u>	preparer (see ipsi	shown b (uclions)	clow
5	signature of office or trustee	J	V	Date	Titl	le			Yes	No

TEEA0503L 10/13/15

RSM US LLP
4725 Piedmont Row Drive, Suite 300

Charlotte, NC 28210

5.5.16

Check self employed

Phone no.

Firms EIN - 42-0714325

P00366166

Form 990-PF (2015)

704-442-3847

Here

Paid

BAA

Preparer Use Only

Firm's address

Print/Type preparer's name

MICHAEL RADFORD

# 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 at www.irs.gov/form990.

Employer identification number

OMB No. 1545 0047

Organization type (check one): Filers of:	_	
Filers of:		
	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organizatio	n
	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 trea	ited 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) orga	nization 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 property) from any one contributor. Comple	, or 990-PF that received, during the year, con- le Parts I and II. See instructions for determini	tributions totaling \$5,000 or more (in money or ng a contributor's total contributions
Special Rules		
For an organization described in section 50 under sections 509(a)(1) and 170(b)(1)(A)(vi), received from any one contributor, during the Form 990, Part VIII, line 1h, or (ii) Form 990.	I (c)(3) filing Form 990 or 990-EZ that met the shal checked Schedule A (Form 990 or 990-EZ), Pale year, total contributions of the greater of (1) D-EZ, line 1. Complete Parts I and II.	33-1/3% support test of the regulations art II, line 13, 16a, or 16b, and that \$5,000 or (2) 2% of the amount on (i)
For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to	l (c)(7), (8), or (10) filing Form 990 or 990-EZ t than \$1,000 <i>exclusively</i> for religious, charitable children or animals. Complete Parts I, II, and	hat received from any one contributor, s, scientific, literary, or educational III.
during the year, contributions exclusively to \$1,000. If this box is checked, enter here the charitable, etc., purpose. Do not complete a	1(c)(7), (8), or (10) filing Form 990 or 990-EZ to religious, charitable, etc., purposes, but no sue total contributions that were received during any of the parts unless the <b>General Rule</b> applied etc., contributions totaling \$5,000 or more of	uch contributions totaled more than the year for an exclusively religious, es to this organization because
Caution. An organization that is not covered by 990-PF), but it must answer 'No' on Part IV, Irr Part I, line 2, to certify that it does not meet the BAA For Paperwork Reduction Act Notice, see the Instru	e 2, of its Form 990; or check the box on line to the filling requirements of Schedule B (Form 990,	H of its Form 990-EZ or on its Form 990-PF.

Schedule	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of Part I
Name of org	anization ON GORELICK FAMILY FOUNDATION	, , ,	743194
	Contributors (see instructions). Use duplicate copies of Part I if additional space		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SHELTON GORELICK		Person X Payroll
	6836 Morrison Blvd Ste 330	\$15,519.	Noncash
	CHARLOTTE , NC 28211		(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 Complete Part II for noncash contributions 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 Complete Part II for noncash contributions )
DAA	TEFA0702 10/12/15	Schodula B (Form 99	n 990-F7 or 990-PE (2015)

(a) No. trom 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
		-	
			•
		\$	
		7.3	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		· <b>1</b>	
		\$	
(a) No	(b)	6)	(4)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-	
		`]\$	
(a) No	(b)	(6)	(4)
(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> \$	
		- <b>1</b>	

TEEA0703L 10/12/15

Name of organization	•	
CULT TON CODELICY	CAMTIV	COUNDATION

1 to 1 of Part III
Employer identification number
56-1743194

311111101	- dolument manifer room	4 11 11		ile al in an alice CO1/-\/T\ (0)				
Pärt III	Exclusively religious, charitable, et	c., contributions to organ	nizations d	escribed in section 501(c)(/), (8),				
	or (10) that total more than \$1,000 for the following line entry. For organizations of	ne year from any one contrib	lutor. Complet	e columns (a) through (e) and				
	contributions of \$1,000 or less for the year	Enter this information once Se	n oi <i>exclusive</i>	s) P S				
	Use duplicate copies of Part III if additional	space is needed.	o manachom					
(2)	(b)		T i	(d) Description of how gift is held				
(a) No. from	Purpose of gift	(c) Use of gift		Description of how gift is held				
Part I								
	N/A							
		(e) Transfer of gift						
	Transferee's name, addres	s, and ZIP + 4	Rela	tionship of transferor to transferee				
			<del></del>					
(0)	(b)	(6)		ക				
(a) No. from	Purpose of gift	(c) Use of gift		(d)  Description of how gift is held				
Part I								
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4			tionship of transferor to transferee				
(a)	(b)	(c) Use of gift	<del> </del>	(d) Description of how gift is held				
(a) No. from Part I	Purpose of gift	Use of gift		Description of now gift is neig				
Parti								
		<b></b>						
		<del> </del>						
		(A)						
		(e) Transfer of gift						
	Transferee's name, addres	ss, and ZIP + 4	Rela	ationship of transferor to transferee				
			L					
			L					
			L					
			l					
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
Part I	Furpose or gift	030 or gint						
		1						
				I				
	(e) Transfer of gift							
			Del-	ationship of transferor to transferor				
	Transferee's name, addre	55, and ZIF + 4	Kei:	ationship of transferor to transferee				
		<del>-</del>	L					
			Cale	adula P (Form 990 990 F7 or 990 PF) (2015)				
BAA			5CN(	edule B (Form 990, 990-EZ, or 990-PF) (2015)				

2015	Fede	ral State	ments		Page 1
	SHELTON GOR	ELICK FAMI	Y FOUNDATIO	N	56-174319
Statement 1 Form 990-PF, Part I, Li Other Income	ine 11				
Other Revenue			(a) Revenue per Books  8,276.	8,276.	(c) Adjusted Net Income
Statement 2 Form 990-PF, Part I, L Accounting Fees	ine 16b				
ACCOUNTING FEES	<del></del> -	(a) Expenses per Books 2,257. 2,257.	Income \$ 2,257	Adjusted Net Income	(d) Charitable Purposes \$ 0.
Statement 3 Form 990-PF, Part I, L Other Professional Fe	ine 16c es				
. '		(a) Expenses per Books	Income	Net Income	(d) Charitable Purposes
ACL	******	6,030. 15. 16,621.	6,030 15 16,621	•	\$ 0.
Statement 4 Form 990-PF, Part I, L Taxes	ine 18			and the second s	
	_	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Federal FOREIGN TAXES	\$ Total \$	659	•		\$ 0.

Total §

0.

20	4	_
ZU	1	_

### **Federal Statements**

Page 2

#### SHELTON GORELICK FAMILY FOUNDATION

56-1743194

Statement 5
Form 990-PF, Part II, Line 10b
<b>Investments - Corporate Stocks</b>

Corporate Stocks	Valuation <u>Method</u>	 Book <u>Value</u>	F	air Market Value
SUNTRUST 9710 SUNTRUST 1430	Mkt Val Mkt Val	\$ 1,458,787. 258,444.	\$	1,458,787. 258,444.
	Total	\$ 1,717,231.	\$	1,717,231.

#### Statement 6 Form 990-PF, Part II, Line 13 Investments - Other

	Valuation <u>Method</u>	 Book Value	Fa	ir Market Value
Other Investments				
ACL ALTERNATIVE FUND INVESTMENT	Mkt Val	\$ 122,726.	\$	122,726.
	Total	\$ 122,726.	\$	122,726.

#### Statement 7 Form 990-PF, Part III, Line 5 Other Decreases

Unrealized Losses	 	. <u>\$</u> 1 \$	146,197. 146,197.
	1000		110/12/1

# Statement 8 Form 990-PF, Part IV, Line 1 Capital Gains and Losses for Tax on Investment Income

					(b) I	How	(c) Date	(d) Date
Item		(a) Des	scription		Acqui	red	Acquired	Sold
1	Suntrust Se	e Attache	d		Purcha	ased	Various	Various
2	Suntrust Se	e Attache	đ		Purcha	ased	Various	Various
3	Suntrust Se	e Attache	đ		Purcha	ased	Various	Various
4	Suntrust Se	e Attache	đ		Purcha	ased	Various	Various
5	Suntrust Se	e Attache	d		Purcha	ased	Various	Various
6	Suntrust Se				Purcha	ased	Various	Various
ž	ACL ALTERNA			D	Purcha	ased	Various	Various
8	Capital Gai							
		(5)	(-)	<b>(</b> 15.)	(4)	(4)	(1-1	(1)
	(e)	(I)	(g)	(h)	(i)	(†)	(k)	(±) [

	(e) Gross	(f) Deprec.	(g) Cost	(h) Gain	(i) FMV	(j) Adj. Bas.	(k) Excess	(1) Gain
Item	Sales	Allowed	Basis	(Loss)	12/31/69	12/31/69	(i) - (j)	(Loss)
1	4,905.	112201100	4,920.	-15.				\$ -15.
2	59,964.		35,606.	24,358.				24,358.
รั	12,770.		6,075.	6,695.				6,695.
4	7,188.		7,455.	-267.				-267.
5	163,400.		155,826.	7,574.				7,574.
6	37,473.		52,801.	-15,328.				-15,328.
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# **Federal Statements**

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#### SHELTON GORELICK FAMILY FOUNDATION

56-1743194

Statement 8 (continued)
Form 990-PF, Part IV, Line 1
Capital Gains and Losses for Tax on Investment Income

Gross Deprec. Cost Gain FMV Adj. Bas. Excess Ga	ain
Item <u>Sales Allowed Basis (Loss) 12/31/69 12/31/69 (i)-(j) (Loss)</u>	oss)
7 5,022. 0. 5,022. \$ 5	5,022.
8	6,873.
Total 🕏 4	4,912.

Statement 9 Form 990-PF, Part XV, Line 1a Foundation Managers - 2% or More Contributors

SCOTT GORELICK JEFF GORELICK PAMELA GORELICK

Statement 10 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amou	nt
FOUNDATION OF SHALOM PARK CHARLOTTE NC	N/A ,	EXEMPT	CHARITABLE	\$ 30	,000.
JEWISH COMMUNITY CENTER CHARLOTTE NC	N/A	EXEMPT	CHARITABLE	15	,000.
THE PENLAND SCHOOL PENLAND NC	N/A	EXEMPT	CHARITABLE	12	,500.
JEWISH FEDERATION CHARLOTTE CHARLOTTE NC	N/A	EXEMPT	CHARITABLE	35	,000.
TEMPLE ISRAEL CHARLOTTE NC	N/A	EXEMPT	CHARITABLE	6	,000.
LEVINES CHILDRENS HOSPITAL CHARLOTTE NC	N/A	EXEMPT	CHARITABLE	37	,500.
BBYO WASHINGTON DC 20006	N/A	Exempt	CHARITABLE	3	750.
FOUNDATION FOR THE CHARLOTTE JEWISH COMM CHARLOTTE NC	N/A	EXEMPT	CHARITABLE	1	,000.

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	SHELTON GORELICK FAMILY FOUNDATION	56-1743194

Statement 10 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose Grant	of 	Amount
PROVIDENCE DAY SCHOOL CHARLOTTE NC	N/A	EXEMPT	CHARITABLE	\$	10,000.
Matat Mordechai 142 Rodney Street Brooklyn NY 11211	N/A	EOF	Charitable		10,000.
Thank Israeli Soldiers PO Box 644375 Pittsburgh PA 15264	N/A	EOF	Charitable		10,000.
Ezrat Israel 806 Eastern Pkwy Brooklyn NY 11213	N/A	EOF	Charitable		4,360.
Mayanot Institution	N/A	EOF	Charitable		1,000.
				Total 🖺	176,110.

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	SHELTON GORELICK FAMILY FOUNDATION	56-1743194
Other Income Producing Interest on savings & ca	ı Activities sh investments	
	Total	\$ 21. \$ 21.