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Department of the Treasury

Internal Revenue Service

DLN: 93491075003116

OMB No 1545-0052

Open to Public Inspection

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 instructions is at <u>www.irs.gov/form990pf</u>.

, and ending 12-31-2015

For	cale	ndar year 2015, or tax y	, a	and ending 12-31-2015				
	e of four	ndation MAN FOUNDATION INC				A Employer ide	entification numbe	er
	IL GOOD!	TARE FOOTBATION INC				56-6034757		
		street (or P O box number if mail is r	not delivered to street address)	Room/suite		B Telephone nun	nber (see instruction	s)
PC	BOX 104	40				(704) 633-5982		
		state or province, country, and ZIP or NC 28145	r foreign postal code			C If exemption	application is pendin	g, check here 🕨 🦵
G C	heck al	that apply Initial return	Initial return of a fo	rmer public charity				_
•	ireen an	Final return	A mended return	riner public ename,			ganizations, check h	
		Address chang	<u>-</u>			test, check	ganizations meeting chere and attach co	mputation
		pe of organization				E If private fou under section	ndation status was t i 507(b)(1)(A), chec	erminated k here
		et value of all assets at end	JAccounting method			F If the founda	tion is in a 60-mont	n termination
of	year <i>(fr</i>	rom Part II, col. (c),	Other (specify)	he on cach hacis			507(b)(1)(B), chec	
_		\$ 7,932,975		De OII Casii Dasis.)				
(The total of amounts in column necessarily equal the amounts in		Analysis of Revenue a (The total of amounts in columns (necessarily equal the amounts in co instructions))	b), (c), and (d) may not	Revenue and expenses per (a) books	(b)	Net investment income	Adjusted net (c) income	Disbursements for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, e	tc , received (attach					
		schedule)		155,276				
	2	Check 🕨 🦵 If the foundation	ıs not required to attach					
		Sch B						
	3	Interest on savings and temp	orary cash investments	5		5		
	4	Dividends and interest from s	ecurities	226,661		211,611		
	5a	Gross rents						
	Ь	Net rental income or (loss)						
Revenue	6a	Net gain or (loss) from sale of	f assets not on line 10	218,310				
	b	Gross sales price for all asse 1,021,988	ts on line 6a					
	7	Capital gain net income (from	Part IV, line 2)			218,310		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	ь	Less Cost of goods sold						
	c	Gross profit or (loss) (attach	schedule)					
	11	Other income (attach schedu	le)					
	12	Total.Add lines 1 through 11		600,252		429,926		
	13	Compensation of officers, dire						
	14	Other employee salaries and	wages					
ė\$	15	Pension plans, employee ben	efits					
Š H	16a	Legal fees (attach schedule).						
Expense	Ь	Accounting fees (attach sche	dule)					
	C	Other professional fees (attac	ch schedule)	9 39,307		39,307		
Admını strative	17	Interest	<u> </u>					
Str	18	Taxes (attach schedule) (see	instructions)	% 4,948				
	19	Depreciation (attach schedule	e) and depletion					
들	20	Occupancy						
and 4	21	Travel, conferences, and mee						
	22	Printing and publications		65 1				221
Operating	23	Other expenses (attach sche	-	281				281
erat	24	Total operating and administ	-	44 536		20.207		201
ă	25	Add lines 13 through 23		44,536 400,410		39,307		400,410
_	25 26	Contributions, gifts, grants pa	ŀ	400,410				400,410
		Total expenses and disbursen	nents.Add lines 24 and	444,946		39,307		400,691
	27	Subtract line 26 from line 12		4FE 200				
	a	Excess of revenue over exper Net investment income (if neg	L	155,306		390,619		
	b	Adjusted net income (If negat	• •			350,019		
Eor I		ork Reduction Act Notice, see i			C =	t No 11289V		990-PF (2015)

Рa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		(a) Fair Market Value		
	1	Cash—non-interest-bearing	(a) Book Value 24,764	(b) Book Value 1,724	(c) Fair Market Value 1,724		
	2	Savings and temporary cash investments	190,275	75,631	75,631		
		Accounts receivable	150,275	73,031	75,031		
	3	Less allowance for doubtful accounts					
		Pledges receivable					
	4	Less allowance for doubtful accounts					
	_						
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)					
		Less allowance for doubtful accounts -					
اع	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ą	10a	Investments—U S and state government obligations (attach schedule)	ule)				
	b	Investments—corporate stock (attach schedule)		4,220,727			
	C	Investments—corporate bonds (attach schedule)	1,990,851	2,109,337	2,109,337		
	11	Investments—land, buildings, and equipment basis 🟲					
		Less accumulated depreciation (attach schedule)					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	1,240,964	1,525,556	1,525,556		
	14	Land, buildings, and equipment basis 🕨					
		Less accumulated depreciation (attach schedule) 🟲					
	15	O ther assets (describe 🟲)					
	16	Total assets(to be completed by all filers—see the					
		ınstructions Also, see page 1, item I)	8,525,483	7,932,975	7,932,975		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
<u>~</u>	19	Deferred revenue					
abilities	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
기	22	Other liabilities (describe 🟲)					
	23	Total liabilities(add lines 17 through 22)		0			
		Foundations that follow SFAS 117, check here 🕨 🔽					
ş		and complete lines 24 through 26 and lines 30 and 31.					
핅	24	Unrestricted	8,525,483	7,932,975			
8	25	Temporarily restricted					
Fund Balances	26	Permanently restricted					
<u>.</u> 5		Foundations that do not follow SFAS 117, check here					
5		and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds					
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds					
ĕ	30	Total net assets or fund balances(see instructions)	8,525,483	7,932,975			
-	31	Total liabilities and net assets/fund balances(see instructions)	8,525,483	7,932,975			
Pa	rt III		ı				
1		Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must ad	ree			
_		with end-of-year figure reported on prior year's return)			8,525,483		
2		Enter amount from Part I, line 27a			155,306		
3		Other increases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	-747,814		
4		Add lines 1, 2, and 3			7,932,975		
5		Decreases not included in line 2 (itemize)		5	, ,,,,,,,		
6		Total net assets or fund balances at end of year (line 4 minus line 5)—Pa			7,932,975		

Part IV Capital Gains and Losses for Tax on Investment Income

Enter qualifying distributions from Part XII, line 4.

the Part VI instructions

		the kınd(s) of property sold (e g , r chouse, or common stock, 200 shs	How acquired P—Purchase (b) D—Donation	(6)	Date acquired mo , day, yr)	Date sold (d) (mo , day, yr)		
1a	See Additional Data	Table		(B) B Bonacion				
b								
С								
d								
e								
(e) Gross sales price	Depreciation allowe (f) (or allowable)		t or other basis expense of sale			n or (loss) (f) minus (g)	
	See Additional Data		(g) pius	expense of suic		(11) (2) pius	(1) 11111142 (9)	
<u></u> ь								
С								
d								
	mnlete only for assets s	showing gain in column (h) and own	ed by the foundation	n on 12/31/69		Counc (Col	(h) gain minus	
		Adjusted basis		cess of col (i)	\dashv ,		(h) gain minus ot less than -0-) or	
(i)	FMV as of 12/31/69	(j) as of 12/31/69		rcol (j), if any	(1)	1		
а	See Additional Data	Гable						
b								
С								
d								
е								
3	Net short-term capita	me or (net capital loss) al gain or (loss) as defined in section Part I, line 8, column (c) (see instri) ,	2		218,310	
	ın Part I, line 8 .		<u> </u>		3		29,494	
Part	V Qualification U	Jnder Section 4940(e) for I	Reduced Tax or	Net Investme	ent Ir	ncome		
	ional use by domestic p on 4940(d)(2) applies, l	private foundations subject to the s leave this part blank	ection 4940(a) tax	on net investmen	incom	ne)		
		e section 4942 tax on the distribut ot qualify under section 4940(e) D			erıod?		┌ Yes ┌ No	
1 Ent	er the appropriate amo	unt ın each column for each year, s	ee instructions befo	ore making any en	tries			
Base year (c	(a) period years Calendar or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha	rıtable-use assets		(d) Distribution (col (b) divided	n ratio	
, (2014	383,769		8,357,770		, , , , , , , , , , , , , , , , , , , ,	0 045918	
	2013	225,108		7,566,020			0 029752	
	2012	140,163		6,650,301			0 021076	
	2011	251,634		6,407,785			0 039270	
	2010	121,484		5,471,172			0 022204	
2		n (d)			2		0 158220	
3	the number of years t	ratio for the 5-year base period—di he foundation has been in existenc	e ıf less than 5 yea	rs	3		0 031644	
4	Enter the net value of	•	-	4		8,339,250		
5		3		<u> </u>	5		263,887	
6	Enter 1% of net inves	stment income (1% of Part I, line 2	27b) .		6		3,906	
7	Add lines 5 and 6.				7	<u></u>	267,793	

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

400,691

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	040(0)	or 1018 so	0 020	19 of	the inct	ructio		age 4
			, OI 1310 SC	e pag	10 01	the mst	iuctio	113)	
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			}					
b	(attach copy of letter if necessary-see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V	check			1				3,906
D	here F and enter 1% of Part I, line 27b	, спеск		_)					,906
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations.	ations 6	enter 4% of	-					
2	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four enter -0-)	ndatıon	s only Othe	rs	2				
3	Add lines 1 and 2				3				 3,906
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fou enter -0-)	ındatıor	ns only Othe	rs	4				<u>, </u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	enter - 0			5				3,906
6	Credits/Payments								
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	,000					
b	Exempt foreign organizations—tax withheld at source	6b							
c	Tax paid with application for extension of time to file (Form 8868)	6c							
d	Backup withholding erroneously withheld	6d							
7	Total credits and payments Add lines 6a through 6d				7			:	1,000
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 if Form 3	2220 is	attached 🕏	5	8				39
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter $amount owed$.			•	9			- :	2,945
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount	nt over	paid	•	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax		Refunded	Þ	11				
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state $\frac{1}{2}$	e, or loc	al legislatioi	n or dı	d			Yes	No
	it participate or intervene in any political campaign?						1a		No
b	$\mbox{Did}\ \mbox{it}\ \mbox{spend}\ \mbox{more}\ \mbox{than}\ \mbox{\$100}\ \mbox{during}\ \mbox{the}\ \mbox{year}\ \mbox{(either}\ \mbox{directly}\ \mbox{or}\ \mbox{indirectly})$ for	politica	l purposes (s	see In	structi	ons			
	for definition)?						1b		No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	s and co	pies of any m	nateria	ls				
	published or distributed by the foundation in connection with the activities.								
C	Did the foundation file Form 1120-POL for this year?						1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) impo								
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers								
е	Enter the reimbursement (if any) paid by the foundation during the year for pol	litical e	xpenditure ta	ax imp	osed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been re	ported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in i	-	_	•		5			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf						3	\vdash	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more of	_					4a	\vdash	No
ь -	If "Yes," has it filed a tax return on Form 990-T for this year?						4b	\vdash	
5	Was there a liquidation, termination, dissolution, or substantial contraction du	iring the	e year?				5		No
_	If "Yes," attach the statement required by General Instruction T.	. 4.5.\							
6	Are the requirements of section 508(e) (relating to sections 4941 through 49 • By language in the governing instrument, or	945)sa	tisfied either	•					
	 By state legislation that effectively amends the governing instrument so the 	nat no n	nandatory du	rectio	ns				
	that conflict with the state law remain in the governing instrument?						6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year						⊢	163	
,	40.004		· · · ·		• •	<i>,</i> ,	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered ((see ins	structions)						
	FNC	00.55	L. LL - A · ·						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9						8b	Vac	
^	General (or designate) of each state as required by General Instruction G? If				(1)(2)		OD	Yes	
9	Is the foundation claiming status as a private operating foundation within the or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (s		_						
	If "Yes," complete Part XIV	- ce 1115t	יים בנוטווס וטו	. ait X		_	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes</i> ,	." attach	a schedule l	ıstına	their n	ames	أ		
	and addresses.	-		=			10		No

Par	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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			
14	The books are in care of ►ARTHUR L HATTAWAY JR Telephone no ►(704)) 633	-5982	
	Located at ▶120 1/2 N CHURCH ST SALISBURY NC ZIP+4 ▶28144	,		
4-				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here	• •		
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			
Par	t 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?			
	(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)? 🔽 Yes 🔽 No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundatıon agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Γ Yes $\overline{ hightarrow}$ 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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		
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))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years ▶ 20, 20, 20,			
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 any of the years listed in 2a, list the years here			
	▶ 20 <u>, 20</u> , 20 <u>, 20</u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
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.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b	1	No

Pai	rt VII-B	Statements Rega	irdii	ng Activities for	Wh	ich Form 4720	May	y Be Required <i>(Con</i> t	inue	ed)	
5a	During the	year did the foundatio	n pay	or incurany amoun	t to						
	(1) Carry (on propaganda, or othe	rwise	attempt to influenc	e leg	ıslatıon (section 494	45 (e	e)) [?]	√ No		
	(2) Influer	nce the outcome of any	spec	ific public election (see	section 4955), or to	car	ry			
	on, dire	ectly or indirectly, any	vote	r registration drive?				·			
	(3) Provid	e a grant to an individu	al fo	travel, study, or oth	ners	ımılar purposes?		☐ Yes 「	√ No		
		e a grant to an organiz									
	ın sect	cion 4945(d)(4)(A)? (s	ee in	structions)			•	\ \ Yes \	No		
		e for any purpose othe		- '	•				_		
		cional purposes, or for t							No		
b								exceptions described in			
								instructions)?		5b	
	=										
С		ver is "Yes" to question									
				responsibility for the grant?							
_		tach the statement requ									
6a		indation, during the year	-	•	-		•		- N-		
L		benefit contract?									No.
D	b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								•	6b	No
7-		6b, file Form 8870.	t	ha faundation a navt		nrahihitad tay ahali	+	rangation? Fyer	- Na		
	•	e during the tax year, w		•		•		ransaction? Yes • the transaction?		7b	
								n Managers, Highly			005
Pa		and Contractors	t Oi	incers, Directors	>, II	ustees, rounda	uo	ii Managers, migniy	Pall	u Ellipioy	ees,
1		cers, directors, trustee	s, fo	undation managers a	nd t	heir compensation (s	see i	instructions).			
				Title, and average	(c)	Compensation(If		(d)			
	(a) Nam	ne and address		hours per week	``	not paid, enter	ء ا	Contributions to employee benefit plans	(6)	Expense ac other allow	•
			(b)	devoted to position		-0-)		d deferred compensation	(0)	other anow	ances
GAIL	G SETTLE		VΡ			0		0			0
	BOX 1040		1 0	0							
	ISBURY, NC										
	REY V GOODMA	AN	7	RESIDENT/TR 00		0		0			0
	BOX 1040 ISBURY NO	281451040	"	J							
	AEL A GOODMA		SEC	RETARY		0		0			0
	30 X 1040	···	1 0					O			Ů
		281451040									
ARTH	UR L HATTAWA	AY JR	ASS	ST SEC		0		0			0
	30 X 1040		1 0	0							
		281451040	<u> </u>		<u> </u>				<u> </u>		
2	Compensati	ion of five highest-paid	i emį	oloyees (other than	thos	e included on line 1—	see	Contributions to	nter "	'NONE."	
		(a)		Title, and aver				employee benefit		Expense ac	count,
war		ess of each employee e than \$50,000	oaid	hours per we (b) devoted to pos		(c) Compensatio	n	plans and deferred	(e)	other allow	ances
								(d) compensation			
10 N	NE .			-							
									-		
				-							
				1							
Γot a	Inumber of	other employees paid	over	\$50.000					1		

Part VIII Information About Officers, Directors, Trus and Contractors (continued)	tees, Foundation Managers, Hi	ghly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NON	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1		
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	A mount
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		<u></u>

Part X Minimum Investment Return

Pe	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	8,325,668
b	Average of monthly cash balances	1b	140,576
c	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	8,466,244
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	8,466,244
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	126,994
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,339,250
6	Minimum investment return. Enter 5% of line 5	6	416,963
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► and do not complete this part.)	taın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	416,963
2a	Tax on investment income for 2015 from Part VI, line 5 2a 3,906		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	3,906
3	Distributable amount before adjustments Subtract line 2c from line 1	3	413,057
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	413,057
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	413,057
Par	Qualifying Distributions (see instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	400,691
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
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	400,691
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	3,906
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	396,785
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIIII Undistributed Income (see instr	ructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				413,057
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			398,990	
	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2015				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
	From 2014				
	Total of lines 3a through e				
	Qualifying distributions for 2015 from Part				
_	XII, line 4 > \$ 400,691				
2	Applied to 2014, but not more than line 2a			398,990	
				330,330	
	Applied to undistributed income of prior years (Election required—see instructions)				
C	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2015 distributable amount				1,701
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015				
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable amount —see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions				
t	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				411,356
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)				
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.				
10	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2011 Excess from 2012				
	Excess from 2013 Excess from 2014				
е	Excess from 2015				

	Private Operating Foundat	•			19)	
1a	If the foundation has received a ruling or determ					
	foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization		ting foundation de		1 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		(e) Total
	investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
	year listed					
b 8	35% 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					
а	"Assets" alternative test—enter					
	(1) Value of all assets		1			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3		1			
-	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 $4942(j)(3)(B)(iii)$					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in
	assets at any time during the	<u>year—see ins</u>	tructions.)			
L a	Information Regarding Foundation Managers: List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation
	before the close of any tax year (but only if they					ideloli
b	List any managers of the foundation who own 10				large portion of th	е
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest		
	Total Control Control Control City	Cabalanak	:t- B			
2	Information Regarding Contribution, Grant, Gift					
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed	
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e	
C	Any submission deadlines					
_	A					
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 400,410 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	s			Page 1 3
Enter gross amounts unless otherwise indicated		ısıness income	Excluded by section	<u> </u>	(e) Related or exemp function income
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See Instructions)
a b					
c					
d e					
f g Fees and contracts from government agencies					
 Membership dues and assessments Interest on savings and temporary cash investments			14	5	
Dividends and interest from securities			14	226,661	
Net rental income or (loss) from real estate a Debt-financed property					
b Not debt-financed property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			14	218,310	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory .					
. Other revenue a b					
с					
d					
e 2 Subtotal Add columns (b), (d), and (e)				444,976	
Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify	calculations)			13	444,976
art XVI-B Relationship of Activities to					malia.
Explain below how each activity for whether the accomplishment of the foundation's instructions)					

Part	XVI	Information Re Noncharitable					sactions and	Relationships	With		
		organization directly or i	ndırectly :	engage ın	any of t	he following wit				Vac	l Na
		501(c) of the Code (othe	er than se	ction 501	(c)(3) o	rganızatıons) o	rın section 527,	relating to politic	al	Yes	No
_		tions?	dation to		ماطمعات		ation of				
		s from the reporting four h							1a(1)	No
		erassets							1a(No
` '		ansactions			• •				Ia(2)	NO
		es of assets to a noncha	ritable ev	emnt orga	nızatıor	1			1h(1)	No
		chases of assets from a									No
		tal of facilities, equipme								_	No
		nbursement arrangemer									No
		ns or loan guarantees.								_	No
		rmance of services or m									No
		of facilities, equipment, i									No
	_	swer to any of the above	_								_!
	ny tra	ods, other assets, or se ansaction or sharing arr (b) Amount involved	angement	, show in o	column		f the goods, othe		es received		ents.
(d) Line	110	(b) / intodite involved	(c) Harrie	or nonchan	ubic exe	mpt organization	(a) Description	or dansiers, dansaec	ions, and sharing	mangeme	51165
	_										
des	crıbe	undation directly or indi d in section 501(c) of th complete the following : (a) Name of organization	ne Code (d schedule		section		in section 527?.		otion of relationshi		VNo
Sign	the	der penalties of perjury, best of my knowledge a ormation of which prepar	ınd belief,	ıt ıs true,	correct	, and complete				based o	n all
Here	k	*****				2016-02-23	*****		return with the pr		
		Signature of officer or t	rustee			Date	Title		below (see instr)	•	
		Print/Type preparer's PAMELA P HIPP	name	Preparer	's Signa	ature	Date 2016-03-15	Check if self- employed ►	PTIN P007	37567	
Paid Prepa Use	arei	Firm's name PAMELA PHIPP CPAFirm's address		•			•	Firm's EIN ▶ 2	6-4300546		
Only		1175 BEE LINE LANE	Phone no (704)633-5982								

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

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
9373 384 ROYCE RD PENN MUT INV	Р	2010-03-24	2015-02-03
775 ORACLE CORP COM	Р	2013-08-27	2015-01-28
306 19 ARTISAN MIDCAP VALUE	Р	2013-11-21	2015-02-03
352 78 ARTISAN MIDCAP VALUE	Р	2012-12-19	2015-02-03
4398 827 ARTISAN MIDCAP VALUE	Р	2012-07-30	2015-02-03
517 866 ARTISAN MIDCAP VALUE	Р	2012-06-04	2015-02-03
112 49 ARTISAN MIDCAP VALUE	Р	2011-12-15	2015-02-03
1326 964 ARTISAN MIDCAP VALUE	Р	2011-10-04	2015-02-03
1600 PETSMART	Р	2014-03-12	2015-02-23
6330 NOBLE	Р	2014-12-11	2015-06-01

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

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
118,731		94,691	24,040
30,006		24,797	5,209
7,642		8,074	-432
8,805		7,348	1,457
109,795		90,000	19,795
12,926		10,000	2,926
2,808		2,142	666
33,121		25,000	8,121
132,636		110,961	21,675
104,299		96,480	7,819

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

Gains (Col (h) gain minus	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		
col (k), but not less than -0-) or (l) Losses (from col (h))	Excess of col (1) (k) over col (j), ıf any	Adjusted basıs (j) as of 12/31/69	(i) F M V as of 12/31/69
24,040			
5,209			
-432			
1,457			
19,795			
2,926			
666			
8,121			
21,675			
7,819			

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)			(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)	
800 ANTHEM			Р	2013-03-13	2015-06-29	
400 ANTHEM				2014-06-16	2015-06-29	
1000 QUALCOMM INC	OMM INC			2013-04-12	2015-07-30	
700 QUALCOMM INC	OMM INC			2013-08-27	2015-07-30	
3960 FIFTH THIRD BA	NCORP		Р	2013-10-30	2015-08-24	
50000 NC MED CARE	REV		Р	2005-12-16	2015-10-01	
m 990PF Part IV - Capita	al Gains and Losses for Ta	x on Invest	ment Income	- Columns e - h		
(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale		Gain (h) (e) plus (or (loss) (f) mınus (g)	
131,140		51,994		51,994 79,1		79,146
65,570			42,890	,	22,680	

(e) Gross sales price	Deprectation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
131,140		51,994	79,146
65,570		42,890	22,680
63,468		66,577	-3,109
44,428		46,529	-2,101
75,263		76,221	-958
50,000		49,974	26

75,263		76,221	-958
50,000		49,974	26
Form 990PF Part IV - Capita	l Gains and Losses for Ta	ax on Investment Income -	Columns i - I
Complete only for assets shown	ng gain in column (h) and owned	by the foundation on 12/31/69	Gains (Col (h) gain minus
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (1) (k) over col (1), if any	col (k), but not less than -0-) or (l) Losses (from col (h))
			79,146
			22,680
			-3,109
			-2,101
			-958
			26

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
ALL SOULS COUNSELING CENTER 35 ARLINGTON ST ASHEVILLE,NC 28801			OPERATING EXPENSES	1,000
ANNUAL GIVING FOR NCSU CAMPUS BOX 7511 RALEIGH,NC 276957511			ACADEMIC PROGRAM SUPPORT	15,000
APPLACHIAN REGIONAL HEALTHCARE FOUN PO BOX 2600 BOONE,NC 28607			SUPPORT MEDICAL FOUNDATION	3,000
ASEVHILLE BUNCOME COUNTY CHRISTAIN 30 CUMBERLAND AVE ASHEVILLE,NC 28801			CHARITY	1,000
ASHEVILLE ART MUSEUM 2 SOUTH PACK SQUARE ASHEVILLE,NC 28801			OPERATIONAL EXPENSES	1,000
ASHEVILLE HUMANE SOCIETY 14 FOREVER FRIEND LANE ASHEVILLE,NC 28806			OPERATIONAL EXPENSES	1,000
BILTMORE BAPTIST CHURCH 35 CLAYTON RD ARDEN,NC 28704			RELIGIOUS ORGANIZATION	15,000
BUDDIES PLACE CAT RESCUE PO BOX 123593 FORT WORTH,TX 76121			OPERATIONAL EXPENSES	6,000
CARING FOR CHILDREN INC PO BOX 19113 ASHEVILLE,NC 28815			OPERATIONAL EXPENSES	2,000
CATAWBA COLLEGE 2300 W INNES ST SALISBURY,NC 281442488			CAPITAL IMPROVEMENTS	100,000
CENTRAL UNITED METHODIST 27 CHURCH STREET ASHEVILLE,NC 28801			RELIGIOUS ORGANIZATION	61,000
COMMUNITY FOUNDATION OF NORTH TEXAX 306 W 7TH ST 1045 FORT WORTH,TX 76102			OPERATIONAL EXPENSES	1,000
COOK CHILDREN'S FOUNDATION 801 7TH AVENUE FORT WORTH,TX 76104			O PERATIO NAL EXPENSES	200
DALLAS CHILDRENS ADVOCACY CENTER 5351 SAMUEL BLVD DALLAS,TX 75228			OPERATIONAL EXPENSES	1,000
FIRST PRESBYTERIAN CHURCH 308 WEST FISHER STREET SALISBURY,NC 28144			RELIGIOUS ORGANIZATION	5,050
Total			▶ 3a	400,410

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
GIRLS ON THE RUN OF WNC 50 S FRENCH BROAD ST SUITE 249 ASHEVILLE,NC 28801			O PERATIO NAL EXPENSES	1,000
GIVENS ESTATES 2360 SWEETEN CREEK RD ASHEVILLE, NC 28803			RELIGIOUS ORGANIZATION	100
GLADNEY CENTER FOR ADOPTION 6300 JOHN RYAN DRIVE FORT WORTH,TX 76132			O PERATIO NAL EXPENSES	500
GOODFELLOW FUND PO BOX 1870 FORT WORTH,TX 76101			O PERATIO NAL EXPENSES	500
GREENSBORO COLLEGE 815 WEST MARKET ST GREENSBORO,NC 28802			ACADEMIC PROGRAM SUPPORT	2,000
HEART OF THE CROSS PO BOX 1964 ASHEVILLE,NC 28802			RELIGIOUS ORGANIZATION	1,000
LEADERSHIP FORT WORTH PO BOX 11371 FORT WORTH,TX 76110			O PERATIO NAL EXPENSES	500
MICHAEL J FOX FOUNDATION GRAND CENTRAL STATION PO BOX 4777 NEW YORK, NY 101634777			RESEARCH	5,000
MISSION FOUNDATION PO BOX 5363 ASHEVILLE,NC 28813			SUPPORT MEDICAL FOUDATION	66,000
NC STATE UNIVERSITY STUDENT AID ASS PO BOX 37100 RALIEGH,NC 27627			ACADEMIC PROGRAM SUPPORT	10,000
REAL CHRISTIAN FOUNDATON PO BOX 180059 RICHLAND,MS 39218			CHARITY	5,000
SOUTHSIDE CHRISTIAN SCHOOL 2211 WOODRUFF RD SIMPSONVILLE,SC 29681			O PERATIO NAL EXPENSES	20,000
STAR OF HOPE MISSION PO BOX 1505 HOUSTON,TX 77251			O PERATIO NAL EXPENSES	200
ST ANDREWS UNIVERSITY 1700 DOGWOOD MILE LAURINBURG, NC 28352			EDUCATIONAL SUPPORT	1,000
ST FRANCIS EPISCOPAL DAY SCHOOL 335 PINEY POINT ROAD HOUSTON,TX 77024			EDUCATIONAL PROGRAMS	1,000
Total			▶ 3a	400,410

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	Тестріспе		
a Paid during the year				
THE CENTER FOR DISORDE 297 HAYWOOD ST ASHEVILLE,NC 28801			SUPPORT EDUCATION PROGRAMS	25,000
TARRANT AREA FOOD BANK 2525 CULLEN STREET FORT WORTH,TX 76107			OPERATIONAL EXPENSES	200
TARRANT COUNTY BAR FOUNDATION 1315 CALHOUN ST FORT WORTH,TX 76102			OPERATIONAL EXPENSES	500
TEXAS A&M UNIVERSITY - SCHOOL OF LA 1515 COMMERCE STREET FORT WORTH,TX 76102			ADADEMIC PROGRAM SUPPORT	500
TEXAS CHRISTIAN UNIVERSITY 2800 S UNIVERSITY DR FORT WORTH,TX 76129			ACADEMIC PROGRAM SUPPORT	5,000
TEXAS HEART INSTITUTE PO BOX 20345 HOUSTON,TX 77225			OPERATIONAL EXPENSES	200
THE AGRICULTURAL DEVELOPMENT FUND PO BOX 1505 FORT WORTH,TX 76101			OPERATIONAL EXPENSES	200
THE ARC OF COLLIN DALLAS & ROCKWAL 12700 HILLCREST RD SUITE 200 DALLAS,TX 75230			OPERATIONAL EXPENSES	1,500
THE COMMUNITY FOUNDATION - WOMEN FO 4 VANDERBILT PARK DR SUITE 300 ASHEVILLE,NC 28803			CHARITY	1,100
THE COMMUNITY FOUNDATION OF WNC PO BOX 1888 ASHEVILLE,NC 28802			OPERATIONAL EXPENSES	1,100
THE FIRST TEE OF FORT WORTH 1900 ROCKWOOD PARK DR N FORT WORTH,TX 76114			OPERATIONAL EXPENSES	500
THE NC ARBORETUM SOCIETY 100 FREDERICK LAW OLMSTED ASHEVILLE,NC 28806			OPERATIONAL EXPENSES	60
THE SALVATION ARMY PO BOX 1778 ASHEVILLE,NC 288021778			CHARITY	500
UNC-ASHEVILLE FOUNDATION ONE UNIVERSITY HEIGHTS CPO 3800 ASHEVILLE,NC 28804			ACADEMIC PROGRAM SUPPORT	1,000
UNC-TV PO BOX 600067			OPERATIONAL EXPENSES	1,000

Recipient	If recipient is an individual,	Foundation	Purpose of grant or	A mount
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
UNITED WAY OF ASHEVILLE 50 S FRENCH BROAD AVE ASHEVILLE,NC 28801			CHARTIABLE	26,500
WATAUGA HUMANE SOCIETY 312 PAWS WAY BOONE,NC 28607			OPERATIONAL EXPENSES	5,000
YOSEF PO BOX 32025 BOONE,NC 28608			SCHOLARSHIPS	3,500
Total				400,410

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TY 2015 Investments Corporate Bonds Schedule

Name: THE GOODMAN FOUNDATION INC

Name of Bond	End of Year Book Value	End of Year Fair Market Value
LOOMIS SAYLES BOND FUND	70,818	70,818
LORD ABBETT HIGH YIELD I	188,648	188,648
METROPOLITAN WEST HIGH	17,493	17,493
METROPOLITAN WEST TOTAL	490,585	490,585
OPPENHEIMER INTL BOND FD	211,697	211,697
PIMCO LOW DURATION FUND	548,316	548,316
TEMPLETON GLOBAL BOND	235,132	235,132
VANGUARD INFLATION	346,648	346,648

DLN: 93491075003116

TY 2015 Investments Corporate Stock Schedule

Name: THE GOODMAN FOUNDATION INC

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AETNA INC 1170 SHS	126,500	126,500
AFLAC INC QTY 1700 SHS	101,830	101,830
ANTHEM INC 1200 SHS		
APPLE INC 1610 SHS	169,469	169,469
AT&T INC NEW 1850 SHS	63,659	63,659
BED BATH & BEYOND 1330 SHS	64,173	64,173
BLACK ROCK INC 400 SHS	136,208	136,208
CARY NC 4%20	92,973	92,973
CHEVRON CORPORATION 1145 SHS	103,004	103,004
CISCO SYSTEMS INC 5250 SHS	142,564	142,564
CVS CAREMARK CORP 1770 SHS	173,053	173,053
CARDINAL HEALTH INC 770 SHS	68,738	68,738
DEERE & CO 1200 SHS	91,524	91,524
DISCOVER FINANCIAL SVCS 1500 SHS	80,430	80,430
DOVER CORPORATION 1545 SHS	94,724	94,724
EMERSON ELECTRIC CO 1380 SHS	66,005	66,005
EXXON MOBIL CORPORATION 900 SHS	70,155	70,155
FIFTH THIRD BANCORP 3960 SHS		
GENERAL ELECTRIC CO 4200 SHS	130,830	130,830
HOME DEPOT INC 730 SHS	96,543	96,543
INTEL CORP 4830 SHS	166,394	166,394
JOHNSON & JOHNSON 1010 SHS	103,747	103,747
JPMORGAN CHASE & CO 1860 SHS	122,816	122,816
KINDER MORGAN INC 3800 SHS	56,696	56,696
MICROSOFT CORP 2910 SHS	161,447	161,447
NOBLE CORP PLC 6330 SHS		
NORDSTROM INC 1500 SHS	74,715	74,715
NORTH CAROLINA 5.25%20	95,515	95,515
NORTH CAROLINA 5.875%35		
ORACLE CORPORATION 775 SHS		

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ORACLE CORPORATION 2695 SHS	98,448	98,448
PAYCHEX INC 2315 SHS	122,440	122,440
PEPSICO INCORPORATED 1600 SHS	159,872	159,872
PETSMART 1600 SHS		
PNC FINL SERVICES GP INC 1250 SHS	119,138	119,138
PROCTER & GAMBLE 1025 SHS	81,395	81,395
PRUDENTIAL FINANCIAL INC 1250 SHS	101,763	101,763
QUALCOMM INC 1700 SHS		
RIO TINTO PLC SPON ADR F 2540 SHS	73,965	73,965
STRYKER CORP 1120 SHS	104,093	104,093
SYSCO CORPORATION 2110 SHS	86,510	86,510
TAIWAN SEMICONDUCTOR ADRF 4820 SHS	109,655	109,655
TIME WARNER INC NEW 2310 SHS	149,388	149,388
TOTAL S A ADR F 1650 SHS	74,168	74,168
TRAVELERS COMPANIES 730 SHS	82,388	82,388
UNIVERSITY NC WILM 5%22	92,551	92,551
VERIZON COMMUNICATIONS 550 SHS	25,421	25,421
WAL-MART STORES INC 1400 SHS	85,820	85,820

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TY 2015 Investments - Other Schedule

Name: THE GOODMAN FOUNDATION INC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
AMERICAN FD EUROPACIFIC FUND	FMV	226,661	226,661
ARTISAN MID CAP VALUE FD	FMV		
DELAWARE SMALL CAP VALUE	FMV	185,341	185,341
MATTHEWS PACIFIC TIGER FUND	FMV	125,856	125,856
OPPENHEIMER DEVLEOPING FUND	FMV	100,857	100,857
ROYCE PA MUTUAL FUND	FMV		
ISHARES TR S&P GLOBAL FUND	FMV	46,859	46,859
ISHARES RUSSELL 2000	FMV	108,115	108,115
SPDR S&P BIOTECH ETF	FMV	124,254	124,254
VANGUARD MSCI EMERGING FUND	FMV		
WISDOMTREE INTERNATIONAL	FMV	265,097	265,097
WISDOMTREE MIDCAP	FMV	276,954	276,954
WISDOMTREE TRUST FUND	FMV	65,562	65,562

TY 2015 Other Expenses Schedule

Name: THE GOODMAN FOUNDATION INC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
BANK SERVICE CHARGES	281			281

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TY 2015 Other Increases Schedule

Name: THE GOODMAN FOUNDATION INC

Description	Amount
UNREALIZED GAIN/LOSS ON SECURITIES	-747,814

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TY 2015 Other Professional Fees Schedule

Name: THE GOODMAN FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVISOR FEES	39,307	39,307		

TY 2015 Taxes Schedule

Name: THE GOODMAN FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	4,948			

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DLN: 93491075003116

EN. 93491073003110

OMB No 1545-0047

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

2015

Employer identification number

THE GOODMAN FOUNDATION INC		56-6034757
Organization type (che	ck one)	
Filers of:	Section:	
Form 990 or 990-EZ	「 501(c)() (enter number) organization	
		a private foundation
Form 990-PF	▽ 501(c)(3) exempt private foundation	
		vate foundation
	□ 501(c)(3) taxable private foundation	
Note. Only a section 501 General Rule For an organiza	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the Ge stion filing Form 990, 990-EZ, or 990-PF that received, during the y from any one contributor. Complete Parts I and II. See instructions	year, contributions totaling \$5,000 or more (in money or
Special Rules		
under sections 50 received from an	on described in section 501(c)(3) filing Form 990 or 990-EZ that n 09(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99 y one contributor, during the year, total contributions of the great or (ii) Form 990-EZ, line 1 Complete Parts I and II	90 or 990-EZ), Part II, line 13, 16a, or 16b, and that
during the year, to	on described in section 501(c)(7), (8), or (10) filing Form 990 or 9 otal contributions of more than \$1,000 exclusively for religious, con of cruelty to children or animals Complete Parts I, II, and III	
during the year, of this box is checked purpose Do not of	con described in section $501(c)(7)$, (8) , or (10) filing Form 990 or 90 contributions $exclusively$ for religious, charitable, etc., purposes, ed, enter here the total contributions that were received during the complete any of the parts unless the General Rule applies to this ole, etc., contributions totaling \$5,000 or more during the year	but no such contributions totaled more than \$1,000 If ne year for an exclusively religious, charitable, etc, s organization because it received nonexclusively
Caution. An organization	n that is not covered by the General Rule and/or the Special Rules	s does not file Schedule B (Form 990,

990-EZ, or 990-PF)

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

Name of organization
THE GOODMAN FOUNDATION INC

Employer identification number 56-6034757

Part I	Contributors (see instructions) Use duplicate copies of Part Life	additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
140.	realite, address, and Zii 1-4	Total contributions	Person	
1	AGGREGATE RESOURCES LLC PO BOX 425	\$ 23,732	Payroll	Г
	SWANNANOA, NC 28778		Noncash	Г
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
2	B V HEDRICK GRAVEL & SAND COMPANY		Person	 ঘ
	PO BOX 1040	0.00.707	Payroll	Г
		\$ 80,797	Noncash	г
	SALISBURY, NC 28145		(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
3			Person	ᅜ
	MATERIAL SALES COMPANY PO BOX 1040	\$ 8,846	Payroll	Г
	SALIBURY, NC 28145	φ 0,040	Noncash	Г
	SALIBORT, NC 20143		(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
4			Person	ᅜ
	CUMBERLAND GRAVEL SAND COMPANY PO BOX 425	\$ 20,425	Payroll	Г
	SWANNANOA, NC 28778	<u>+ = 1, 1= 2</u>	Noncash	Г
			(Complete Part II f contributions)	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
5			Person	ᅜ
	SOUTHERN CONCRETE MATERIALS PO BOX 1040		Payroll	Г
		\$ 21,476	Noncash	_
	SALISBURY, NC 28145		(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
			Payroll	Г
			Noncash	Г
			(Complete Part II f	or noncash

Name of organization THE GOODMAN FOUNDATION INC		Employer identification no	ımber
THE GOODMAN F	OUNDATIONING	56-6034757	
reit. II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed	•	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(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

Schedule B (Form 990, 990-EZ, or 990-F	F)	(201	5)
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hedule B (Form 990,	990-EZ, or 990-PF) (2015)		Page 4
me of organization E GOODMAN FOUI	NDATION INC		Employer identification number
total more line entry. of \$1,000 o	than \$1,000 for the year from any o	one contributor. Complete co III, enter the total of exclusive mation once. See instruction	ibed in section 501(c)(7), (8), or (10) that olumns (a) through (e) and the following ely religious, charitable, etc., contributions ins.) ► \$
(a) o.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
· -	Transferee's name, address, an	(e) Transfer of gi	ft Relationship of transferor to transferee
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gi	ft Relationship of transferor to transferee
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
. =	T ()	(e) Transfer of g	
-	Transferee's name, address, an		Relationship of transferor to transferee
(a) o.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gi d ZIP4	ft Relationship of transferor to transferee
-	-		
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