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Form 990-PF

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

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

OMB No 1545-0052

| For | calendar year 2015 or tax year beginning | | , and ending | | |
|-----------------------------|---|------------------------------------|------------------------------|--|--|
| Nar | ne of foundation | | | A Employer identification | number |
| C | . D. SPANGLER FOUNDATION, | INC. | | 56-6061548 | 1 |
| | riber and street (or P O box number if mail is not delivered to street | address) | Room/sulte | B Telephone number | |
| | . O. BOX 36007 | | (704) 372- | 4500 | |
| | y or town, state or province, country, and ZIP or foreign p HARLOTTE, NC 282366007 | ostal code | | C if exemption application is p | ending, check here |
| | Check all that apply: Initial return | Initial return of a fo | ormer public charity | D 1. Foreign organizations | s, check here |
| | Final return | Amanded return | , | 1 | |
| | Address change | Name change | | Foreign organizations mo check here and attach co | eting the 85% test, proputation |
| H C | Check type of organization: X Section 501(c)(3) ex | | | E if private foundation sta | tus was terminated |
| 上 | Section 4947(a)(1) nonexempt charitable trust | | | under section 507(b)(1) | (A), check here 🕨 🔲 |
| | air market value of all assets at end of year J Accounti | = | X Accrual | F If the foundation is in a | |
| | | ther (specify) | hoan \ | under section 507(b)(1) | (B), check here $ ightharpoonup$ |
| | | 1 | | 4 1 4 10 | (d) Diebursements |
| Pa | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a),) | (a) Revenue and expenses per books | (b) Net investment Income | (c) Adjusted net income | for charitable purposes (cash basis only) |
| | 1 Contributions, gifts, grants, etc., received | | | | |
| | 2 Check X If the foundation is not required to attach Sch. B | | | | |
| | 3 Interest on savings and temporary cash investments | 11,852. | 11,852. | | Statement 1 |
| | 4 Dividends and interest from securities | 1,200,000. | 1,200,000. | ļ | Statement 2 |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) | 3,828,413. | | ļ | |
| E | 68 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 3,828,413. | 3,020,413. | | | |
| Revenue | 7 Capital gain net income (from Part IV, line 2) | | 3,828,413. | <u> </u> | |
| æ | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | | | | |
| | 10a and allowances | | | | |
| | b Leas Cost of goods sold | | | | |
| | c Gross profit or (loss) | | | | |
| | 11 Other income | 5,040,265. | 5,040,265. | 0. | |
| | 12 Total. Add lines 1 through 11 | 0. | 3,040,263. | 0. | 0. |
| | 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages | | | | |
| | 15 Pension plans, employee benefits | | | | |
| es | 16a Legal fees Stmt 3 | 1,550. | 0. | 0. | 1,550. |
| Expenses | b Accounting fees RECE SUME 4 | 2,600. | 0. | 0. | 2,600. |
| 菜 | c Other professional fees | | | | |
| ïVe | 17 Interest | 100 005 | | | |
| trat | | 100,805. | 0. | 0. | 0. |
| inis | | | | | |
| n b | 20 Occupandy OGDEN, UT | | | | |
| þ | 22 Printing and publications | | | <u> </u> | · |
| Operating and Administrativ | 23 Other expenses Stmt 6 | 300. | 0. | 0. | 300. |
| atin | 24 Total operating and administrative | | | | |
| ber | expenses. Add lines 13 through 23 | 105,255. | 0. | 0. | 4,450. |
| o | 25 Contributions, gifts, grants paid | 4,415,825. | | | 5,825,825. |
| | 26 Total expenses and disbursements. | 4 504 555 | _ | _ | |
| | Add lines 24 and 25 | 4,521,080. | 0. | 0. | 5,830,275. |
| | 27 Subtract line 26 from line 12; | 510 105 | ı | | |
| } | a Excess of revenue over expenses and disbursements | 519,185. | 5,040,265. | | |
|) | b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) | | 3,040,203. | 0. | <u> </u> |
| | - 1.0/Boros not income in nogental suital -o-) . | _! | | | L |

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015)

Form 990-PF (2015)

C. D. SPANGLER FOUNDATION, INC.

| | and Losses for Tax on it | | rincome | | | | |
|---|--|---|---|--|------------------------|--|---|
| (a) List and descr 2-story brick wa | ibe the kind(s) of property sold (e.g rehouse; or common stock, 200 sha | ., real estate, s. MLC Co.) | | (b) How ac P - Purch D - Dona | quired nase tion | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a Bank of America | a litigation set | tlemen | t | | | Various | 06/26/15 |
| | a litigation set | | | 1 | | Various | 06/26/15 |
| C | | | | | | | 10,20,20 |
| d | | | | | | ······································ | |
| е | | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis xpense of sale | | | (h) Gain or (los (e) plus (f) minus | |
| a 2,553,551. | | | | | | | 2,553,551 |
| b 1,274,862. | | | | | | | 1,274,862 |
| C | | | | | | · | |
| d | | | | | | | |
| 8 | | | | | | | |
| Complete only for assets showing | g gain in column (h) and owned by | the foundation | on 12/31/69 | | (1) | Gains (Col. (h) gai | in minus |
| (1) 5 4 1 1 (40 /04 /00 | (j) Adjusted basis | (k) Ex | cess of col. (I) | | | (k), but not less th | an -0-) or |
| (I) F.M.V. as of 12/31/69 | as of 12/31/69 | over | col. (j), if any | | | Losses (from col | . (n)) |
| a | | | | | | | 2,553,551. |
| b | | | | | | | 1,274,862. |
| C | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| | ∫ If gain, also enter | in Part I, line | 7 | | | | |
| 2 Capital gain net income or (net cap | | - in Part I, line | 7 | .] 2 | | | 3,828,413. |
| 3 Net short-term capital gain or (los- | s) as defined in sections 1222(5) an | id (6): | | | | | |
| If gain, also enter in Part I, line 8, | | , , | | } | | | |
| If (loss), enter -0- In Part I, line 8 | -1 | B 10 10 10 10 10 10 10 10 10 10 10 10 10 | | 1 3 1 | | | 0. |
| Part V Qualification U | | | | | ent inco | ome | |
| (For optional use by domestic private | foundations subject to the section 4 | 1940(a) tax on | net investment inc | come.) | | | |
| If section 4940(d)(2) applies, leave th | is part blank. | | | | | | |
| , ,,, | • | | | | | | [|
| Was the foundation liable for the sect | | | • | iod? | | • | Yes X No |
| If "Yes," the foundation does not quali | ach column for each year; see the ir | | | ntrice | | | |
| | | is a dedons bei | Ore making any en | | | | 787 |
| Base period years | (b) Adjusted qualifying dist | tributions | Net value of nor | (c) ncharitable-u | ise assets | Distr | (d) ibution ratio ivided by col. (c)) |
| Calendar year (or tax year beginnin 2014 | '9 <u>'''/ </u> | 2,120. | | 13,236 | | | .044262 |
| 2013 | | $\frac{2}{3}, \frac{12}{037}$. | | 98,84 | | | .037463 |
| 2013 | | $\frac{3,637}{0,639}$. | | $\frac{74,802}{74,802}$ | | | .058295 |
| 2012 | | $\frac{0,035}{0,439}$. | | $\frac{73,002}{87,758}$ | | | .068944 |
| 2010 . | | $\frac{3}{2}, \frac{13}{267}$. | | 20,209 | | | .049017 |
| 2010 - | | <u> </u> | | 20,20. | ,,555 | ' | .043017 |
| 2 Total of line 1, column (d) | | | | | | 2 | .257981 |
| 3 Average distribution ratio for the 5 | i-vear hase period - divide the total o | on line 2 hv 5 | or hy the number i | of vears | | - - | . 237301 |
| the foundation has been in existen | | m imo z by o, | or by the hamber t | oi yours | | 3 | .051596 |
| (10 Dulidation had book in existen | ico ii icos tilaii o yours , . | | • | | | * | |
| 4 Enter the net value of noncharitable | la-usa assate for 2015 from Part Y | line 5 | | | | 4 12 | 25,916,050. |
| 4 Litter the net value of nononanable | 10 100 100010 101 20 10 1101111 11117, 1 | | | •• | | 1 | 33,310,030. |
| 5 Multiply line 4 by line 3 | | | | | | 5 | 6,496,765. |
| 3 Manpy me 4 by me 3 | | ***** | | • •• | •• | | 0,430,703. |
| 6 Enter 1% of net Investment Incom | a (1% of Part I line 27h) | | | | | 6 | 50,403. |
| Citter 176 of flet investment incom | (170 017 at 1, 1110 270) | • | • | | | | 30,403. |
| 7 Add lines 5 and 6 | | | | | | 7 | 6,547,168. |
| , Aud intos o anu o | • | •• | | | • • • | | ~,J=1,100. |
| 8 Enter qualifying distributions from | Part YII Ilna 4 | | | | | 8 | 5,830,275. |
| | | 46 and | lata shat - · · · | | . , | | 3,030,213. |
| If line 8 is equal to or greater than | line 7, check the box in Part VI, line | io, and comp | ieie inat part using | ja 1% tax ra | ite. | | |

| | <u>-60615</u> | | Page 4 |
|---|--|-------------|---------------|
| Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 | - see in | structi | ons) |
| 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | | |
| Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1% | | 100, | 805. |
| of Part I, line 27b | | | |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 | | | 0. |
| 3 Add lines 1 and 2 | | 100, | |
| 4 Subtitle A (Income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | + | | 0. |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | _ | 100 | 805. |
| 6 Credits/Payments; | + | 100, | |
| a 2015 estimated tax payments and 2014 overpayment credited to 2015 | | | |
| | 1 | | |
| | | | |
| c Tax paid with application for extension of time to file (Form 8868) | 1 | | |
| d Backup withholding erroneously withheld 6d 6 | | 1 0 1 | 100 |
| 7 Total credits and payments. Add lines 6a through 6d | | 101, | 100. |
| 8 Enter any penalty for underpayment of estimated tax. Check here X If Form 2220 is attached | | | |
| 9 Tax due, If the total of lines 5 and 8 is more than line 7, enter amount owed | <u> </u> | | ~~- |
| 10 Overpayment, if line 7 is more than the total of lines 5 and 8, enter the amount overpaid . | | | 295. |
| 11 Enter the amount of line 10 to be: Credited to 2016 estimated tax > 0 • Refunded > 11 | | <u>_</u> _ | 295. |
| Part VII-A Statements Regarding Activities | | | |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | L | Ye | s No |
| any political campaign? | . [| 1a | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? | . [| 1b | _ X |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or | | | |
| distributed by the foundation in connection with the activities. | | | - |
| c Did the foundation file Form 1120-POL for this year? | | 1c | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | · · · · · · | | \top |
| (1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0. | ŀ | 1 | - |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | İ | ĺ |
| managers. ▶ \$ 0. | | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | x |
| If "Yes," attach a detailed description of the activities. | · - | | + |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | | | ĺ |
| bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | ľ | 3 | x |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | . ⊢ | 4a | $\frac{1}{x}$ |
| · · · · · · · · · · · · · · · · · · · | N/A | 4b | - |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? | `' `` | 5 | X |
| If "Yes," attach the statement required by General Instruction T. | - | | + |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | i | 1 | |
| By language in the governing instrument, or | ŀ | | 1 |
| By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law | İ | - 1 | |
| | ł | | 1 |
| remain in the governing instrument? | • … • | 3 X 7 X | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | · · | 7 X | |
| |] | | |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) | | ľ | ł |
| NC | | - [| 1 |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | - |
| of each state as required by General Instruction G? If "No," attach explanation | . <u>L</u> | 8b X | |
| 9 is the foundation claiming status as a private operating foundation within the meaning of section 4942(I)(3) or 4942(I)(5) for calendar | | | |
| year 2015 or the taxable year beginning in 2015 (see Instructions for Part XIV)? If "Yes," complete Part XIV | L | 9 | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | 10 | X |
| | Form | 990-PI | F (2015) |

| P | art VII-A Statements Regarding Activities (continued) | | | ago |
|---------|--|-----------------|--------------|--------------|
| | | \neg | Yes | No |
| 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 | 1 | x |
| 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) See Statement 11 | 12 | x | l |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address ► N/A | L 10 | | |
| 14 | The books are in care of C. D. SPANGLER FOUNDATION, INC Telephone no. > (704) | 372 | -45 | 00 |
| | Located at ▶1110 E. MOREHEAD ST., CHARLOTTE, NC ZIP+4 ▶2 | | | - |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in Illeu of Form 1041 - Check here | 0204 | | |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | i/A | _ |
| 18 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| 10 | securities, or other financial account in a foreign country? | 10 | 105 | |
| | See the instructions for exceptions and filling requirements for FinCEN Form 114. If "Yes," enter the name of the | 16 | L | X |
| | foreign country | | | |
| P | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | <u> </u> |
| <u></u> | File Form 4720 If any item is checked in the "Yes" column, unless an exception applies. | | W | NI |
| 1 | · · · · · · · · · · · · · · · · · · · | | Yes | NO |
| 14 | a 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) Page 1 and many to an abbandance of the sale o | į į | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | 1 | | |
| | a disqualified person? Yes X No | | | |
| | (3) Furnish goods, sorvices, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 1 | | |
| | (5) Transfer any Income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period after | | | |
| | termination of government service, if terminating within 90 days.) | 1 | | |
| 1 | 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 | | | |
| (| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | |
| | before the first day of the tax year beginning in 2015? | 1c | | 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)); | 1 1 | | |
| | a At the end of tax year 2015, dld the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | 1 1 | | |
| | hefore 2015? Yes X No | 1 1 | | |
| | If "Yes," list the years | | [| |
| ı | 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 | 1 1 | | |
| | 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. | | | |
| | ,,, | | - 1 | |
| 38 | a Did the foundation hold more than a 2% direct or Indirect Interest in any business enterprise at any time | 1 1 | - 1 | |
| | during the year? | | 1 | |
| 1 | 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 | | ł | |
| | 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.) | 3ь | | |
| 48 | a DId the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | \neg | |
| | had not been removed from Jeopardy before the first day of the tax year beginning in 2015? | 4ъ | | х |

| Form 990-PF (2015) C. D. SPANGLER FOUNDATION | | | 56-60615 | 48 Page 6 |
|--|---|-----------------------------------|--|---|
| Part VII-B Statements Regarding Activities for Which | Form 4720 May Be I | Required (contin | ued) | |
| 5a During the year did the foundation pay or incur any amount to: | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | n 4945(e))? | 🗀 Ү | es 🗶 No | 1 1 |
| (2) Influence the outcome of any specific public election (see section 4955); o | or to carry on, directly or indir | | | 1 1 |
| any voter registration drive? | , ,, , | | es 🗓 No | 1 1 |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | L | es 🗶 No | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | | |
| 4945(d)(4)(A)? (see instructions) | | • | es 🗶 No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or | | | 1 1 |
| the prevention of cruelty to children or animals? | | | es 🛣 No | - } - { |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fall to qualify un | | in Regulations | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | , | | N/A | 5 b |
| Organizations relying on a current notice regarding disaster assistance check h | | | | 1 1 |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f | | | | 1 1 |
| expenditure responsibility for the grant? | , | I/A Y | es L No | |
| If "Yes," attach the statement required by Regulations section 53 494 | | | Ì | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | | |
| | | ۷ لـــا | es X No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | 6 b X |
| If "Yes" to 6b, file Form 8870. | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | | Yı | s X No | |
| b if "Yes," did the foundation receive any proceeds or have any net income attribu | | | | 7b |
| Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors | · | ınagers, Highly | y | |
| 1 List all officers, directors, trustees, foundation managers and their | | | | |
| (a) Name and address | (b) Tille, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other |
| (a) Haine and address | to position | enter -0-) | and deterred compensation | allowances |
| | | | | |
| | | | | _ |
| See Statement 12 | | 0. | 0. | 0. |
| | | | | |
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| | | | | |
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| | | | | |
| | | ļ | | |
| | | <u> </u> | | |
| | | | | |
| 2 Compensation of five highest-paid employees (other than those inc | luded on line 1) if none | enter "NONE " | | |
| 2 Compensation of the highest-paid employees joined than those inc | | enter NONE. | (d) Contributions to | (a) Expense |
| (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 | (e) Expense account, other allowances |
| NONE | gevoted to position | | cempensation | allowalices |
| NONE | | ļ | | |
| | | | | |
| | | 1 | | |
| | | | | |
| | | 1 | İ | |
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| | | | | |
| | | | | - |
| | | [| ĺ | |
| Total number of other employees paid over \$50,000 | | <u> </u> | > | 0 |
| | | | | |

| FOIM 990-PF (2015) C. D. SPANGLER FOUNDATION, INC. | | 6061548 Page |
|--|---------------------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued) | on Managers, Highly | |
| 3 Five highest-paid independent contractors for professional services. If none, enter | NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | (2) 1) po 51 051 105 | (O) Compositouro |
| HOND | 1 | |
| | | |
| | } | |
| | | |
| | 4 | |
| | | |
| | 1 | |
| | | |
| | - | |
| | <u> </u> | |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | > |
| | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produc | al Information such as the | Expenses |
| | , otc. | |
| 1 N/A | | |
| | | |
| _ | | |
| 2 | | |
| | | |
| | | |
| 3 | · · · · · · · · · · · · · · · · · · · | |
| | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lin | es 1 and 2 | Amount |
| 1 N/A | 33 7 4.13 2. | 7 477 (577 |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |
| Total Add lines 1 through 3 | | 0 |

Form **990-PF** (2015)

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

4940(e) reduction of tax in those years.

Form 990-PF (2015)

6

| Part XIII Undistributed Income (see | (a) | (b) | (c) | (d) |
|--|-------------|---------------------|------------|-------------|
| i, | Corpus | Years prior to 2014 | 2014 | 2015 |
| 1 Distributable amount for 2015 from Part XI, line 7 | | | | 6,194,998 |
| 2 Underributed income, if any, as of the end of 2015. | | | | |
| a Enter amount for 2014 only | ĺ | | 5,545,733. | |
| b Total for prior years: | | 0. | | |
| 3 Excess distributions carryover, if any, to 2015: | | | | |
| a From 2010 | | | • | |
| b From 2011 | İ | | | |
| c From 2012 | | | | |
| d From 2013 | i | | | |
| e From 2014 | | | | |
| f Total of lines 3a through e | 0.1 | | | |
| 4 Qualifying distributions for 2015 from | | | | |
| Part XII, line 4: ▶\$ 5,830,275. | Ì | | | |
| a Applied to 2014, but not more than line 2a | | | 5,545,733. | |
| b Applied to undistributed income of prior | | | 3,343,733. | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| , | 0. | , | | |
| (Election required - see instructions) | | | | 284,542 |
| d Applied to 2015 distributable amount | 0. | | | 204,342 |
| e Remaining amount distributed out of corpus | 0.1 | | | 0 |
| Excess distributions carryover applied to 2015 (if an amount appears in column (d), the same amount must be shown in column (a),) | | | | 0 |
| 6 Enter the net total of each column as indicated below; | j | | | |
| 3 Corpus. Add lines 31, 4c, and 4e. Subtract line 5 | 0. | | | |
| b Prior years' undistributed income. Subtract | [| | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see Instructions | | 0. | | |
| e Undistributed income for 2014. Subtract line | j | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2015. Subtract | | | i | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2016 | | | <u></u> | 5,910,456 |
| 7 Amounts treated as distributions out of | | | İ | |
| corpus to satisfy requirements imposed by | | 1 | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2010 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2016. | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2011 | ļ | | | |
| b Excess from 2012 | | Ì | Ì | |
| c Excess from 2013 | j | | | |
| d Excess from 2014 | i | | i | |

e Excess from 2015

| Part XIV Private Operating F | SPANGLER FOU | | | | 61548 Page 1 |
|---|---------------------------|--|----------------------------|--|--------------------|
| \ | | | I-A, question 9) | N/A | |
| 1 a if the foundation has received a ruling of | | | | | |
| foundation, and the ruling is effective fo | | - • | ຺຺຺຺ ▶∟ ຺ | 10.000.00 | 15/5/5 |
| b Check box to Indicate whether the foun | | ing foundation described | | 4942(j)(3) or 4 | 942())(5) |
| 2 a Enter the lesser of the adjusted net | Tax year (a) 2015 | /h\2014 | Prior 3 years | (d) 2012 | (-) 7-4-1 |
| income from Part I or the minimum | (a) 2015 | (b) 2014 | (c) 2013 | (0) 2012 | (e) Total |
| investment return from Part X for | 1 | | | | } |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| e Qualifying distributions from Part XII, | | | | | } |
| line 4 for each year listed | | | <u> </u> | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of exempt activities | | | | | |
| e Qualifying distributions made directly | | | | T | |
| for active conduct of exempt activities. | | | | Ì | |
| Subtract line 2d from line 2c Gomplete 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(j)(3)(B)(ill) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | <u> </u> | <u> </u> | <u> </u> | | |
| Part XV Supplementary Info | | | if the foundation | n had \$5,000 or m | ore in assets |
| Information Regarding Foundation List any managers of the foundation whyear (but only if they have contributed recommendation) | no have contributed more | than 2% of the total cont section 507(d)(2).) | ributions received by the | e foundation before the clo | se of any tax |
| None | | | | | |
| b List any managers of the foundation who other entity) of which the foundation has | | | (or an equally large porti | on of the ownership of a p | artnership or |
| None | | | | | |
| 2 Information Regarding Contribut Check here ► X If the foundation of the foundation makes gifts, grants, etc. | only makes contributions | to preselected charitable | organizations and does | not accept unsolicited requ omplete items 2a b.c. and | ests for funds. If |
| a The name, address, and telephone num | <u> </u> | | | | |
| a The name, augross, and telephone num | iber of e-mail address of | ille person to whom appli | calions should be addre | 336 u. | |
| b The form in which applications should in | be submitted and informa | ation and materials they si | nould include: | | |
| c Any submission deadlines; | | | | | |
| d Any restrictions or limitations on award | s, such as by geographic | al areas, charltable fields, | kinds of institutions, or | other factors: | |
| | | | | | |

| 3 Grants and Contributions Paid During t | he Year or Approved for Future | Payment | | |
|--|--|--------------------------------------|----------------------------------|-------------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| | | | | |
| | | ļ | | |
| | 1.,, | | | |
| SEE ATTACHED STATEMENT | N/A | ALL PUBLIC CHARITIES | SEE STATEMENT | 5,825,82 |
| | | | | 3,023,023 |
| | | | | |
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| | | | | |
| | | | | |
| Total | | <u> </u> | ▶ 3a | 5,825,825 |
| Approved for future payment | | | | |
| | | | | |
| | | 1 | | |
| UNPAID PLEDGES | N/A | | | |
| MADE PRIOR | | | | |
| то 2015 | | | | 1,000,000 |
| | | | | |
| | | | | |
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| | | L | | |
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| | { | } | | |
| | | | | |
| | | 1 | | |
| | | | | |
| Total | | | ▶ 3b | 1,000,000 |

| art XVI-A Analysis of Income-Produc | cing Activitie | S | | | 061548 Pa |
|---|--|---------------------|--|---------------------------------|------------------|
| er gross amounts unless otherwise indicated. | | usiness income | Exclud | led by section 512, 513, or 514 | (e) |
| Program service revenue: | (a) Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exemp |
| à | _ | | 1 | | |
| b | ļ | | ├ ─ | | |
| <u> </u> | | | | - | |
| d | | · | | | |
| | | | 1 | | |
| | | | | | |
| g Fees and contracts from government agencies | | | | | |
| Membership dues and assessments | | | ├ | | |
| Interest on savings and temporary cash | 1 | | 14 | 11 052 | |
| investments Dividends and interest from securities | | | 14 | 11,852. | |
| | | | | 1,200,000. | |
| Net rental income or (loss) from real estate: | | | ╀╌┈┼ | | |
| a Debt-financed property | | | ├ ──┼ | | |
| | | | ├ | | |
| Net rental income or (loss) from personal | 1 | | 1 1 | 1 | |
| Property | | | ├─┤ | | |
| Other Investment Income | | | | | |
| Gain or (loss) from sales of assets other | 1 | | 18 | 3,828,413. | |
| han Inventory Net income or (loss) from special events | | | | 3,020,413.1 | |
| | } | | ┝╼┼ | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue: | 1 | | 1 1 | | |
| b | | | | | |
| | | | | | |
| c | | | | | |
| e | | | - | | |
| Subtotal Add columns (b), (d), and (e) | | 0. | | 5,040,265. | |
| T + 1 A 4 1 R - 40 10 /51 / - 11 1 / - 1 | <u> </u> | | | 13 | 5,040,2 |
| e worksheet in line 13 instructions to verify calculations.) | | | | | 3,010,2 |
| art XVI-B Relationship of Activities to | o the Accom | plishment of Ex | emnt | Purposes | |
| ne No. Explain below how each activity for which incom | | | | | liah |
| ile No. Explain below now each activity for which incom | ov orovidina funds | for such ournoses). | COILLING | neu importantiy to the accomp | isimient of |
| the foundation's exempt purposes (other than to | .,,, | | | | |
| the foundation's exempt purposes (other than t | | | | | |
| the foundation's exempt purposes (other than t | | | | | |
| the foundation's exempt purposes (other than i | | | | | |
| the foundation's exempt purposes (other than i | | | | | |
| the foundation's exempt purposes (other than it | | | | | |
| the foundation's exempt purposes (other than it | | | | | |
| the foundation's exempt purposes (other than it | | | | | |
| the foundation's exempt purposes (other than it | | | | | |
| the foundation's exempt purposes (other than it | | | | | |
| the foundation's exempt purposes (other than it | | | | | |
| the foundation's exempt purposes (other than it | | | | | |
| the foundation's exempt purposes (other than it | | | | | |
| the foundation's exempt purposes (other than it | | | | | |
| the foundation's exempt purposes (other than it | | | | | |

| Sign Here | Sign | William D. Conwellature of officer or trustee | 20, 7 5/11/15 | VICE | PRESIDENT | shown below (see instr.)? X Yes No | | |
|----------------------|------|---|----------------------|------------|----------------|-------------------------------------|--|--|
| | | Print/Type preparer's name | Preparer's signature | Date | Check if F | TIN | | |
| | | | 8: 40 04/ | 5/9/16 | self- employed | | | |
| Paid | | Brian W. Coffey | 4. | 1 | | P00859332 | | |
| Preparer Use Only | | Firm's name > Pricewaterho | Firm's EIN ► 13 | -4008324 | | | | |
| | | | | | | | | |
| | | Firm's address ▶214 N. Tryon Street, Suite 4200 | | | | | | |
| | | Charlotte, | Phone no. (70 | 4)344-7500 | | | | |

5,825,825

FORM 990-PF, PART XV LINE 3a CONTRIBUTIONS PAID DURING THE YEAR

Total cash contributions made through 12/31/15

| Amariana Apadamu of Arta Pr Egiannas | To accept in adventional agreements | 10.000 |
|--|---|-----------------|
| American Academy of Arts & Sciences American Cancer | To assist in educational opportunities To assist health and human services | 10,000 200 |
| Arts & Science Council | Program Support | 165,000 |
| Ashley Hall School | To assist in educational opportunities | 2,500 |
| | - · | • |
| Boy Scouts of America Mecklenburg County Council Charlotte Ballet | Program Support | 15,000 |
| | Program Support | 25,000 |
| Charlotte Mecklenburg Library Foundation | Program Support | 5,000 |
| Charlotte Symphony Orchestra Children's Theatre of Charlotte | Program Support Program Support | 20,000 |
| Communities In Schools | To assist in educational opportunities | 10,000 |
| | | 10,000 |
| Community Building Initiative | Program Support | 5,000 |
| Crisis Assistance Ministry | Program Support | 20,000 |
| Darlington School | To assist in educational opportunities | 250,000 |
| Fidelity Charitable | Program Support | 500,000 |
| Harvard Business School | To assist in educational opportunities | 1,500,000 |
| Hopeway Foundation | Program Support | 100,000 |
| Jasper United Methodist Church | To assist in religious activities | 100 |
| Levine Children's Hospital | Program Support | 5,000 |
| 1.mville Foundation | Program Support | 2,500 |
| Matching Gifts For Education - Employees (National Gypsum) | To assist in educational opportunities | 2,218 |
| Matching Gifts For Education - Retirees (National Gypsum) | l'o assist in educational opportunities | 6,050 |
| The Metropolitan Museum of Art | Program Support | 9,252 |
| Myers Park Baptist Church | To assist in religious activities | 173,000 |
| National Association of Watch & Clock Collectors National Gallery of Art | Program Support Program Support | 1,000 |
| | To assist in educational opportunities | 2,500 |
| National Merit Scholarship Corporation North Carolina Business Leaders for Education | | 9,505 10,000 |
| Novant Health Presbyterian Medical Center | To assist in educational opportunities Program Support | - |
| Planned Parenthood Health South Atlantic | Program Support | 100,000 |
| Porter Gaud School | To assist in educational opportunities | 10,000 2,500 |
| The Potomac School | To assist in educational opportunities | 25,000 |
| Project Lift | To assist in educational opportunities | 1,400,000 |
| Project Thrive | To assist in educational opportunities | 200,000 |
| Read Charlotte | To assist in educational opportunities | 100,000 |
| Riding For (Muscular Dystrophy) Research | Program Support | 5,000 |
| Southminster Foundation | Program Support | 8,000 |
| TeachForAmerica | To assist in educational opportunities | 200,000 |
| Trees Charlotte Foundation | Program Support | 10,000 |
| UNC Foundation | To assist in educational opportunities | 7,500 |
| United Way of Central Carolinas | Program Support | 175,000 |
| Weilesley College | To assist in educational opportunities | 600,000 |
| Woodberry Forest School | To assist in educational opportunities | 10,000 |
| World Affairs Council | Program Support | 6,000 |
| YMCA of Greater Charlotte | Program Support | 105,000 |
| 1,7071 Of Ground Chillion | . rogium oupport | 105,000 |
| Employee Directed Gifts (Spangler Companies) | | |
| American Cancer Society | Program Support | 500 |
| Planned Parenthood South Atlantic | Program Support | 1,000 |
| St. Jude Children's Research Hospital | Program Support | 500 |
| Together for Israel, Inc. | Program Support | 1,000 |
| | | |

| Form 990-PF Intere | st on Savi | ngs and Tem | porary (| Cash In | vestments | Statement | |
|---|-----------------|------------------------------|--------------------------------------|------------|-------------------------------|-------------------------------|--|
| Source Bank of America US Treasury Bills Total to Part I, line 3 | | Reve | (a) Revenue Per Books 9,952. 1,900. | | (b) vestment come | (c) Adjusted Net Income | |
| | | | | | 9,952. 1,900. | 0 | |
| | | 1 | 1,852. | 2. 11,852. | | 0. | |
| Form 990-PF | Dividend | s and Inter | est from | m Secur | ities | Statement | |
| Source | Gross Amount | Capital Gains Dividend | Revenue | | (b) Net Inves ment Inco | • | |
| Bank of America | 1,200,000 | • | 0. 1,2 | 00,000. | 1,200,00 | 0. 0 | |
| To Part I, line 4 | 1,200,000 | • | 0. 1,200,000. | | 1,200,00 | 0. 0 | |
| Form 990-PF | | Legal | Fees | | | Statement | |
| Description | | (a) Expenses Per Books | (b) Net Invest- ment Income | | (c) Adjusted Net Incom | | |
| Legal Fees | | 1,550. | 0. | | | 1,550 | |
| To Fm 990-PF, Pg 1, ln 16a | | 1,550. | 0. | | | 0. 1,550 | |
| Form 990-PF | | Accounti | Accounting Fees | | Statement | | |
| Description | | (a) Expenses Per Books | (b Net In ment I | vest- | (c) Adjusted Net Incom | | |
| Accounting and Tax | _ | 2,600. | | 0. | | 0. 2,600 | |
| To Form 990-PF, Pg | 1, ln 16b | 2,600. | | 0. | | 0. 2,600 | |
| | = | | | | | | |

| | Taxes | | | Statement 5 | | |
|---|------------------------------|-----------------------------------|------------------------------|---|-----------------|--|
| Description | (a) Expenses Per Books | (b) Net Invest- ment Income | (c) Adjusted Net Incom | | | |
| EXCISE TAX - CURRENT | 100,805. | 0. | (| 0. | 0. | |
| To Form 990-PF, Pg 1, ln 18 | 100,805. | 0. | (| . 0 | | |
| orm 990-PF Other Expenses | | | | Statement | | |
| Description | (a) Expenses Per Books | (b) Net Invest- ment Income | (c) Adjusted Net Incom | (d) Charitable Purposes | | |
| Bank service charge | 300. | 0. | (| 0. 3 | | |
| To Form 990-PF, Pg 1, ln 23 | 300. | 0. | | 0. 3 | 300. | |
| | | | | | | |
| Form 990-PF Other Decrease | es in Net As | sets or Fund | Balances | Statement | 7 | |
| Form 990-PF Other Decrease Description | es in Net As | sets or Fund | Balances | Statement Amount | 7 | |
| | | | <u>-</u> | | | |
| Description Decrease in unrealized gains | net of defe | | <u>-</u> | Amount | 00. | |
| Description Decrease in unrealized gains (SFAS 124) | net of defe | rred excise t | <u>-</u> | Amount 6,232,8 | 00. | |
| Description Decrease in unrealized gains (SFAS 124) Total to Form 990-PF, Part II | net of defe | rred excise to | <u>-</u> | Amount 6,232,8 6,232,8 | 00. | |
| Description Decrease in unrealized gains (SFAS 124) Total to Form 990-PF, Part II | net of defe | rred excise to | - - - - | Amount 6,232,8 6,232,8 Statement Fair Marke | 00. 00. 8 | |

| Form 990-PF | Other Assets | | Statement 9 |
|---|-------------------------------|---------------------------|----------------------|
| Description | Beginning of Yr Book Value | End of Year Book Value | Fair Market Value |
| INTEREST RECEIVABLE EXCISE TAX RECEIVABLE | 964. 44. | 0. 295. | 0. 295. |
| To Form 990-PF, Part II, line 15 | 1,008. | 295. | 295. |
| orm 990-PF Other Liabilities | | | Statement 10 |
| Description | | BOY Amount | EOY Amount |
| DEFERRED EXCISE TAX | | 1,686,403. | 1,559,203. |
| DELEKKED ENCIDE IIM | | | |
| Total to Form 990-PF, Part II, li | .ne 22 | 1,686,403. | 1,559,203. |

Explanation

The foundation made a distribution to a Fidelity Charitable donor advised fund which is included in the foundation's qualifying distributions. Fidelity Charitable and the donor advised fund cannot expend funds for any purpose other than the exempt purposes described in Section 170(c)(2)(B).

| Form 990-PF Part VIII - Li Trustees an | | Statement 1 | | |
|---|--------------------------|-------------------|---------------------------------|----|
| Name and Address | Title and Avrg Hrs/Wk | Compen- sation | Employee Ben Plan Contrib | |
| MEREDITH R. SPANGLER PO BOX 36007 CHARLOTTE, NC 28236 | CHAIRMAN 0.00 | 0. | 0. | 0. |
| C.D. SPANGLER, JR. PO BOX 36007 CHARLOTTE, NC 28236 | DIRECTOR 0.00 | 0. | 0. | 0. |
| W. D. CORNWELL, JR. PO BOX 36007 CHARLOTTE, NC 28236 | VP/SEC/TR/DIR 0.00 | 0. | 0. | 0. |
| ANNA SPANGLER NELSON PO BOX 36007 CHARLOTTE, NC 28236 | VP/DIRECTOR 0.00 | 0. | 0. | 0. |
| ABIGAIL R. SPANGLER PO BOX 36007 CHARLOTTE, NC 28236 | DIRECTOR/PRES 0.00 | 0. | 0. | 0. |
| CINDY L. MARR PO BOX 36007 CHARLOTTE, NC 28236 | VP/ASST SEC 0.00 | 0. | 0. | 0. |
| STEPHEN W. DIXON PO BOX 36007 CHARLOTTE, NC 28236 | ASST SEC 0.00 | 0. | 0. | 0. |
| Totals included on 990-PF, Page | 6, Part VIII | 0. | 0. | 0. |