

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

Internal Revenue Service

DLN: 93491131006446

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>.

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

	e of fou	ndation AROLD SMITH CHARITABLE		A Employer identif	fication number
	UST			56-6526359	
		street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number	(see instructions)
11	05 AIRPO	ORT ROAD		(828) 652-9443	
	or town, ION, NC	, state or province, country, and ZIP or foreign postal code 28752		C If exemption appl	lication is pending, check here 🕨 🦵
G C	neck al	that apply Initial return Initial return of a fo	rmer public charity	D 1. Foreign organiz	zations, check here
		Final return Amended return Address change Name change			izations meeting the 85%
н С к		pe of organization Section 501(c)(3) exempt private	foundation	test, check her	re and attach computation tion status was terminated
		4947(a)(1) nonexempt charitable trust \(\int\)Other taxable			7(b)(1)(A), check here
		et value of all assets at end JAccounting method	Cash 🔽 Accrual		is in a 60-month termination
		rom Part II, col. (c), \$ 4,836,300	be on cash basıs.)	under section 507	7(b)(1)(B), check here
	rt I	Analysis of Revenue and Expenses	· ·		Disbursements
Рα		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	Revenue and expenses per (I	Net investment b) income (c	Adjusted net for charitable purposes (d) (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach			
		schedule)			
	2	Check 🟲 🔽 if the foundation is not required to attach			
		Sch B			
	3	Interest on savings and temporary cash investments	207,375	207,375	
	4	Dividends and interest from securities	49,251	49,251	
	5a	Gross rents	29,250	29,250	
	b	Net rental income or (loss) 19,898			
₽	6a	Net gain or (loss) from sale of assets not on line 10			
Revenue	b	Gross sales price for all assets on line 6a			
쟌	7	Capital gain net income (from Part IV, line 2)		143	
	8	Net short-term capital gain			
	9	Income modifications			
	10a	Gross sales less returns and allowances			
	b	Less Cost of goods sold Gross profit or (loss) (attach schedule)			
	C	· · · · · · · · · · · · · · · · · · ·			
	11	Other income (attach schedule)	285,876	206.010	
	12	Total.Add lines 1 through 11	30,487	286,019	30,487
	13 14	Other employee salaries and wages	30,407		30,407
uñ.	15	Pension plans, employee benefits			
ŠΨ	16a	Legal fees (attach schedule)			
Expenses	b	Accounting fees (attach schedule)	% 3,475		3,475
	c	Other professional fees (attach schedule)	-		
ĕ	17	Interest			
and Administrative	18	Taxes (attach schedule) (see instructions)	% 8,424		8,424
II SI	19	Depreciation (attach schedule) and depletion			
<u>Ē</u>	20	Occupancy	900		900
A	21	Travel, conferences, and meetings			
and S	22	Printing and publications			
	23	- ·	27,194	17,603	9,591
Operating	24	Total operating and administrative expenses.			
ě		Add lines 13 through 23	70,480	17,603	52,877
ō	25	Contributions, gifts, grants paid	269,100		269,100
	26	Total expenses and disbursements. Add lines 24 and 25	339,580	17,603	321,977
	27	Subtract line 26 from line 12	337,300	17,005	321,977
	а	Excess of revenue over expenses and disbursements	-53,704		
	b	Net investment income (If negative, enter -0-)		268,416	
	С	Adjusted net income(If negative, enter -0-)			
For I	Paperw	ork Reduction Act Notice, see instructions.		at No 11289X	Form 990-PF (2015)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	<u> </u>
		should be for end-of-year amounts only (see instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	3,471	·	<u> </u>
	2	Savings and temporary cash investments	122,892	28,715	28,715
	3	Accounts receivable -			
		Less allowance for doubtful accounts -			
	4	Pledges receivable			
		Less allowance for doubtful accounts 🕨			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts -			
95	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	231,036		325,718
	С	Investments—corporate bonds (attach schedule)	3,899,683	3,947,386	4,054,864
	11	Investments—land, buildings, and equipment basis 🕨421,410			
		Less accumulated depreciation (attach schedule) ►32,255	398,507	389,155	421,410
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			_
	14	Land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) 🟲			_
	15	Other assets (describe 🟲)			_
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	4,655,589	4,601,885	4,836,300
	17	Accounts payable and accrued expenses			
	18	Grants payable			
bilities	19	Deferred revenue			
틏	20	Loans from officers, directors, trustees, and other disqualified persons			
Liat	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here 🕨 🦵			
Š.		and complete lines 24 through 26 and lines 30 and 31.			
Fund Balance	24	Unrestricted			
8	25	Temporarily restricted			
핕	26	Permanently restricted			
Ė		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	4,655,589	4,601,885	
¥	30	Total net assets or fund balances(see instructions)	4,655,589	4,601,885	
_	31	Total liabilities and net assets/fund balances(see instructions)	4,655,589	4,601,885	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree	
		with end-of-year figure reported on prior year's return)	, ,,	⁻	4,655,589
2		Enter amount from Part I, line 27a			-53,704
3		Other increases not included in line 2 (itemize)		3	•
4		Add lines 1, 2, and 3		4	4,601,885
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)—P		_	4,601,885
		, (, \- \ \- \ \ \ \ \ \ \ \ \ \ \ \ \ \		·

the Part VI instructions

	the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		How acquired P—Purchase (b) D—Donation		Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)
1a						
b						
с						
d						
e						
(e) Gross sales price	Deprectation allowe (f) (or allowable)		t or other basıs expense of sale			or (loss) (f) minus (g)
a						
b						
С						
d						
e						
Complete only for assets	showing gain in column (h) and owne	ed by the foundation	n on 12/31/69		Gains (Col	(h) gaın mınus
(i) F M V as of 12/31/69	A djusted basis (j) as of 12/31/69		cess of col (ı) r col (յ), ıf any	(1)		t less than -0-) or from col (h))
a						
b						
С						
d						
e						
· -	me or (net capital loss) { al gain or (loss) as defined in sectio	If gain, also enter If (loss), enter -0-ns 1222(5) and (6	· in Part I, line 7	2	:	143
If gain, also enter in in Part I, line 8	Part I, line 8, column (c) (see instru	ıctıons) If(loss), e • • • •	nter - 0 - • •	.		
Part V Qualification	Under Section 4940(e) for R	Reduced Tax on	Net Investme	ent I	ncome	
(For optional use by domestic If section 4940(d)(2) applies,	private foundations subject to the se leave this part blank	ection 4940(a) tax	on net investment	incor	me)	
	ne section 4942 tax on the distribut ot qualify under section 4940(e) Di		•	eriod	?	┌ Yes ┌ No
1 Enter the appropriate amo	ount in each column for each year, s	ee instructions befo	ore making any en	ries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncha	rıtable-use assets		(d) Distributio (col (b) divided	n ratio
2014	293,576		5,141,331			0 057101
2013	289,785		4,995,891			0 058005
2012	295,376		5,069,499			0 058265
2011	287,746 247,169		4,727,688 4,512,960			0 060864
2 Totalof line 1, colum			4,312,900	2		0 289004
3 A verage distribution	ratio for the 5-year base period—di the foundation has been in existence	vide the total on lin		3		0 057801
	of noncharitable-use assets for 2015		_	4		5,080,821
	e 3	-		5		293,677
- , ,	stment income (1% of Part I, line 2			6		2,684
		•		7		296,361
	ributions from Part XII, line 4		·	8		321,977
			<u> L</u>			321,377

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

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	4940(e)	or 4948—s	ee nag	- 18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here		, 01 15 10 5	\ \	10 0.	the mot	ructio		
14	and enter "N/A" on line 1	- 1							
	Date of ruling or determination letter			\					
_	(attach copy of letter if necessary-see instructions)								
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V	V, check	<)	1			2	2,684
	here Fand enter 1% of Part I, line 27b								
С	All other domestic foundations enter 2% of fine 27b Exempt foreign organizations enter 4% of								
2	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable for	undation	ns only Oth	ers					
	enter -0-)	andacioi	is only our	C13	2				
3	Add lines 1 and 2				3				2,684
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fo	undatio	ns only Oth	ers	4				
5	enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less,	enter-	n_		5				
6	Credits/Payments	encer -	5	•	5				2,684
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	1	5,700					
b	Exempt foreign organizations—tax withheld at source	6b		3,700					
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				5,700
8	Enter any penalty for underpayment of estimated tax. Check here if Form				8				,,, 00
9	Tax due.If the total of lines 5 and 8 is more than line 7, enter amount owed			•	9				
10	Overpayment.If line 7 is more than the total of lines 5 and 8, enter the amount				10				3,016
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	3,016	Refunded		11				,010
	t VII-A Statements Regarding Activities	0,010							
1a	During the tax year, did the foundation attempt to influence any national, sta	te. or lo	cal legislatio	on or di	d			Yes	No
	it participate or intervene in any political campaign?				<u> </u>		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for	r politica	al purposes	(see In	structi	ons			
	for definition)?			` 			1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	es and co	opies of any	materia	ls				
	published or distributed by the foundation in connection with the activities.								
С	published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year?							No	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imp	osed du	iring the yea	r					
	(1) On the foundation \$ (2) On foundation managers	s 🟲 \$ _							
е	Enter the reimbursement (if any) paid by the foundation during the year for positive $\frac{1}{2}$	olitical e	expenditure	tax ımp	osed				
	on foundation managers 🕨 \$								
2	Has the foundation engaged in any activities that have not previously been \boldsymbol{r}	eported	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	ıts gov	erning instri	ıment,	articles	5			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a con	nformed	copy of the d	changes			3	\sqcup	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more	_					4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction of	during th	ie year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 4 • By language in the governing instrument, or	1945)sa	atisfied eithe	er					
	 By state legislation that effectively amends the governing instrument so 	that no	mandatory d	irectio	nc				
	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						-	165	
,	10.14		s, complete			//	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered			•			,	103	
Ju	NC	. (555 111							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form	990-PF	to the Attor	ney					
	General (or designate) of each state as required by General Instruction G^2 I						8b		
9	Is the foundation claiming status as a private operating foundation within the				(3)(3)				
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015	(see ins	tructions fo	Part X	ΊV)?				
	If "Yes," complete Part XIV						9		No
10	Did any persons become substantial contributors during the tax year? If "Year" $^{\prime\prime}$	s," attac	h a schedule	listing	their n	ames			
	and addresses.						10		No

Pal	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	<u> </u>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►MATT SMITH Telephone no ►(828)652	-9443	
	Located at 1105 AIRPORT RD MARION NC ZIP+4 28752			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
13	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
4.5				
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	ا ده	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			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			T
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 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? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes ✓ No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes ✓ No			
	(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)			
ь	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		
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			
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, 20, 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
D	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
ъ Б	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-ru		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Pai	Ti VIII Statements Rega	irding Activities for	Which Form 4720	May Be Required (Cont	inued)				
5a	During the year did the foundatio	n pay or incurany amoun	t to						
	(1) Carry on propaganda, or othe	rwise attempt to influence	e legislation (section 49	45(e))? 	No				
	(2) Influence the outcome of any specific public election (see section 4955), or to carry								
	on, directly or indirectly, any voter registration drive?								
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes Vo								
	(4) Provide a grant to an organiza		• •						
	in section 4945(d)(4)(A)? (s				. No				
	(5) Provide for any purpose other			, ,					
	educational purposes, or for t			Г Yes 🗟	. No				
b	If any answer is "Yes" to 5a(1)-(·		, ,					
-	Regulations section 53 4945 or				. 5b				
	Organizations relying on a currer								
_	If the answer is "Yes" to question								
	tax because it maintained expend				- No				
	If "Yes," attach the statement requ				110				
6a	Did the foundation, during the year			nramilime on					
oa	a personal benefit contract?			·	. No				
h	Did the foundation, during the year								
	If "Yes" to 6b, file Form 8870.	ar, pay premiums, unecci,	or manectry, on a perso	shar benefit contract	. OB NO				
7a	At any time during the tax year, w	was the foundation a party	to a probabiled tax chal	ter transaction?	, No				
	If yes, did the foundation receive	• •	•	·					
			-	ation Managers, Highly					
Pai	and Contractors	t Officers, Directors	s, Trustees, Touride	idon Hanagers, inginiy	raid Lilipioyees,				
1	List all officers, directors, trustee	s, foundation managers a	nd their compensation (see instructions).					
		Title, and average	(c) Compensation(If	(d)					
	(a) Name and address	hours per week	not paid, enter	Contributions to	Expense account,				
		(b) devoted to position	-0-)	employee benefit plans and deferred compensation	(e) other allowances				
TTAP	SMITH	TRUSTEE	30,487		0				
110!	5 AIRPORT RD	25 00	, , , , ,						
MАR	ION,NC 28752								
2	Compensation of five highest-paid	l employees (other than t	those included on line 1–	-see instructions). If none, er	nter "NONE."				
	(a)	Title, and aver	age	Contributions to	F				
Nar	ne and address of each employee			employee benefit plans and deferred	Expense account, (e) other allowances				
	more than \$50,000	(b) devoted to posi	tion	(d) compensation					
NON	IE								
[ota	I number of other employees hald								

Part VIII Information About Officers, Directors, To and Contractors (continued)	rustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional serv	ices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional serv	ces	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Incluorganizations and other beneficiaries served, conferences convened, research paper		Expenses
1 INDIVIDUALS AND MCDOWELL TECHNICAL COMMUNITY C AMOUNTING TO 269,100 ADMINISTRATIVE EXPENSES 52,	321,977	
2		
3		
4		
Part IX-B Summary of Program-Related Investme	nts (see instructions)	
Describe the two largest program-related investments made by the foundation of	luring 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 2	No.	

Pa	(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.,	<u> </u>	
	purposes		
а	A verage monthly fair market value of securities	1a	4,538,798
b	A verage of monthly cash balances	1b	197,986
c	Fair market value of all other assets (see instructions)	1c	421,410
d	Total (add lines 1a, b, and c)	1d	5,158,194
e	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	5,158,194
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	77,373
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,080,821
6	Minimum investment return. Enter 5% of line 5	6	254,041
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.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	254,041
2a	Tax on investment income for 2015 from Part VI, line 5 2a 2,684		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	2,684
3	Distributable amount before adjustments Subtract line 2c from line 1	3	251,357
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	251,357
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	251,357
Par	t XII 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	321,977
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)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	321,977
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	2,684
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	319,293
	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 XIII Undistribute	d Income (see ınstr	uctions)			
			(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 201	5 from Part XI, line 7				251,357
2	Undistributed income, if any,	as of the end of 2015				
а	Enter amount for 2014 only.					
ь		, 20, 20				
	Excess distributions carryov					
а	From 2010	ĺ				
b	From 2011					
c	From 2012	31,780				
d	From 2013	45,618				
	From 2014	42,133				
f	Total of lines 3a through e.		119,531			
4	Qualifying distributions for 20	15 from Part				
	XII, line 4 🕨 \$					
а	Applied to 2014, but not mor					
ь	Applied to undistributed inco	me of prior years				
	(Election required—see instru	ctions)				
С	Treated as distributions out or required—see instructions).					
d	Applied to 2015 distributable					251,357
	Remaining amount distributed		70,620			
	Excess distributions carryov	·				
	(If an amount appears in colun	nn (d), the				
	same amount must be sh	own in column (a).)				
6	Enter the net total of each o	olumn as				
	indicated below:		400 454			
	Corpus Add lines 3f, 4c, and		190,151			
b	Prior years' undistributed inco					
_	line 4b from line 2b					
C	Enter the amount of prior year income for which a notice of d					
	been issued, or on which the s	•				
	tax has been previously asse	ssed				
d	Subtract line 6c from line 6b	Taxable amount				
	—see instructions					
е	Undistributed income for 201					
	4a from line 2a Taxable amo	unt—see				
f	Undistributed income for 201	6 Subtract				
-	lines 4d and 5 from line 1 Th					
	be distributed in 2015					0
7	Amounts treated as distributi					
	corpus to satisfy requirement	' '				
	section 170(b)(1)(F) or 4942 be required - see instructions					
8	Excess distributions carryove	•				
_	applied on line 5 or line 7 (see					
9	Excess distributions carryove		100 151			
	Subtract lines 7 and 8 from li	ne 6a	190,151			
	Analysis of line 9	1				
	Excess from 2011	34 700				
	Excess from 2012	31,780 45,618				
	Excess from 2013	42,133				
	Excess from 2014					
<u>e</u>	Excess from 2015	1 ,0,020				

	m 990-PF (2015)					Page 10
	Part XIV Private Operating Foundat	t ions (see ınstru	ictions and Part	: VII-A, question	9)	
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	is a private operat	ing foundation de	scribed in section	√ 4942(j)(3) or	「4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2015	(b) 2014	Prior 3 years (c) 2013	(d) 2012	(e) Total
	investment return from Part X for each year listed	(a) 2013	(6) 2014	(6) 2013	(u) 2012	
b	85% of line 2a					
C	Qualifying distributions from Part XII, line 4 for each year listed					
d	A mounts included in line 2c not used directly for active conduct of exempt activities					
е	Q ualifying 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					
	(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)					
	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					
Ρā	rt XV Supplementary Information (e organization	n had \$5,000 o	r more in
-	assets at any time during the	year—see inst	ructions.)			
1 a	Information Regarding Foundation Managers: List any managers of the foundation who have complete the close of any tax year (but only if they					ation
b	List any managers of the foundation who own 10		·		large portion of th	e
	ownership of a partnership or other entity) of wh	nen me louiluation	1145 4 10 70 OF GE	sater milerest		
	Tuformation Describer Contribution Count Cit	t Lasa Cabalawahi	t- D			
2	Information Regarding Contribution, Grant, Gif					
	Check here \(\backsim \) If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and c		is, etc (see mstri	uctions) to marviat	iais or organization	is under
		•				
а	The name, address, and telephone number or e	-mail address of th	ne person to whom	n applications shou	ıld be addressed	
	MATT SMITH					
	1105 AIRPORT RD					
	MARION, NC 28752					
	(828) 652-9443					
b	The form in which applications should be subm	itted and informati	on and materials t	they should include	e	
	SEE ATTACHED APPLICATION					
c	Any submission deadlines APRIL 2 EACH YEAR					
d	Any restrictions or limitations on awards, such factors	as by geographica	al areas, charitabl	e fields, kinds of ir	nstitutions, or othe	r

SEE ATTACHED APPLICATION

Part XV Supplementary Information(continued)

3 Grants and Contributions Paid During the 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	A mount				
a Paid during the year	of Substantial Contributor							
SEE ATTACHED SEE ATTACHED SEE ATTACHED, NC 28752	NONE	INDIVIDUAL	SCHOLARSHIPS COLLEGE	179,000				
MCDOWELL TECHNICAL COLLEGE 54 COLLEGE DRIVE MARION,NC 28752	NONE	COLLEGE	SCHOLARSHIP	90,100				
b Approved for future payment	T		► 3a	269,100				

Part XVI-A Analysis of Income-Produc	ing Activitie	s			Page 1 2
Enter gross amounts unless otherwise indicated		isiness 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 2 Membership dues and assessments 3 Interest on savings and temporary cash 					
Investments			14 14	207,375 49,251	
Net rental income or (loss) from real estate Debt-financed property					
b Not debt-financed property			16	19,898	
property					
7 Other investment income			18		
9 Net income or (loss) from special events0 Gross profit or (loss) from sales of inventory					
1 Other revenue a b					
c					
d e					
2 Subtotal Add columns (b), (d), and (e). 3 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify			:	276,524 13	
Part XVI-B Relationship of Activities to		plishment of I	Exempt Purpos	es	
Explain below how each activity for wh the accomplishment of the foundation's instructions)					

Part XVI	Information Re Noncharitable				actions and I	Relationships	With		
	organization directly or i	ndırectly eng	gage in any of t	he following with				Yes	No
organizat	tions?								
a Transfers	s from the reporting four	ndation to a	noncharıtable e	exempt organiza	tion of				
(1) Cas	h							1a(1)	No
(2) Oth	erassets							1a(2)	No
b Other tra	ansactions								
(1) Sale	es of assets to a noncha	rıtable exem	ipt organizatior	n				1b(1)	No
(2) Purc	chases of assets from a	noncharitab	le exempt orga	inization				1b(2)	No
(3) Rent	tal of facilities, equipme	nt, or other a	assets					1b(3)	No
(4) Rein	nbursement arrangemer	nts						1b(4)	No
(5) Loar	ns or loan guarantees.							1b(5)	No
(6)Perfo	rmance of services or m	embership o	r fundraising s	olicitations				1b(6)	No
c Sharing o	of facilities, equipment,	maılıng lısts	, other assets,	or paid employe	es		[1c	No
of the go in any tra	swer to any of the above ods, other assets, or se ansaction or sharing arr	rvices given angement, s	by the reportion to the by the reportion how in column	ng foundation If (d) the value of	the foundation r the goods, other	eceived less than assets, or servio	n fair marke ces receive	t value d	
(a) Line No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	(d) Description	of transfers, transact	ions, and shai	ing arrangeme	nts
describe	undation directly or indi d in section 501(c) of th complete the following (a) Name of organization	ne Code (oth schedule	er than section		n section 527?.		otion of relatio		No
the	der penalties of perjury, best of my knowledge a prmation of which prepar ******	and belief, it	ıs true, correct				nn taxpayer May th return with th		n all
	Signature of officer or t	rustee		Date	Title			str)? Yes	No
	Print/Type preparer's ALFRED M SHIVER CPA		reparer's Sıgn	ature	Date 2016-05-06	Check if self- employed ►	PTIN PO	0182145	
Paid Preparer Use	Firm's name ALFRED M SHIVER C	PA PA			1	Firm's EIN ► 5	6-1319330)	
Only	260 EAST COURT ST	TREET MARI	ON, NC 287!	52		Phone no (828	3)652-731	9	

TY 2015 Accounting Fees Schedule

Name: WILLIAM HAROLD SMITH CHARITABLE

TRUST

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ALFRED M SHIVER PA, CPA TAX PRE	3,475			3,475

	efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491131006446
•			

TY 2015 Investments Corporate Stock Schedule

Name: WILLIAM HAROLD SMITH CHARITABLE

TRUST

Name of Stock	End of Year Book Value	End of Year Fair Market Value
RAYMOND JAMES -REIT	63,273	82,992
RAYMOND JAMES-STOCKS	167,763	242,726

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491131006446

TY 2015 Investments Corporate Bonds Schedule

Name: WILLIAM HAROLD SMITH CHARITABLE

TRUST

Name of Bond	End of Year Book Value	End of Year Fair Market Value
VARIOUS-RAYMOND JAMES	3,947,386	4,054,864

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491131006446

TY 2015 Investments - Land Schedule

Name: WILLIAM HAROLD SMITH CHARITABLE

TRUST

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
HOUSE LAND	421,410	32,255	389,155	421,410

TY 2015 Other Expenses Schedule

Name: WILLIAM HAROLD SMITH CHARITABLE

TRUST

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RENTAL HOUSES MCDOWELL CO				
INVESTMENT DEPRECIATION	9,352	9,352		
EXPENSES				
OFFICE SUPPLIES	3,537			3,537
ADMINISTRATIVE EXPENSE	5,954			5,954
RENTAL HOUSE EXPENSES	8,251	8,251		
BROCHURE	100			100

TY 2015 Taxes Schedule

Name: WILLIAM HAROLD SMITH CHARITABLE

TRUST

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES	8,424			8,424

Additional Data

Software ID:

Software Version:

EIN: 56-6526359

Name: WILLIAM HAROLD SMITH CHARITABLE

TRUST

William Harold Smith Charitable Trust Form 990PF Pg 11 PART XV (3) Contributions 56-6526359

University of North Carolina at Chapel Hill

Kayla Megan Bailey	\$2,000
Mary Elizabeth Greene	\$2,000

University of North Carolina at Charlotte

Daniel Lee Maney	\$1,000
Amber Nicole Stanley	\$3,000
Christopher Adam Warren	\$1,000

University of North Carolina at Pembroke

Hannah Brooke Stockton	\$2,500
Hamidii Diooko Stocktoii	$\Psi = V \cup V$

Warren Wilson College

Shelby Jean Gordon	\$1,000
Alixandrea L. Williams	\$2,000

Western Carolina University

TT USTON THE CHAT OF STOY	
Kassie Leigh-Ann Brackett	\$2,000
Stephanie Dawn Branch	\$2,000
Noah Allan Dunham	\$1,000
Ethan Wayne Freeman	\$1,000
Matthew Aaron Holda	\$2,000
Lindsey Paige Frank	\$3,000
Tiffany Mae Branch	\$2,000
Megan Grace Moore	\$2,000
Macy Ellen Ruiz	\$3,000
Matthew Thomas Robbins	\$2,000
Shannon Rock	\$3,000

	TOTAL	\$181,000	
McDowell Tech 24v		+ 2000	
McDowell Tech. Colle	? e	+ 90 100	_
Less Returned	,	<u> </u>	7
	1	269.100	_

269,100 Scholerships Pd/Contributions

William HeroldSmith Charitable Trust Pg 11 PART XV (3) Contributions 56-6526359

1	2	-3	1-	I	5
---	---	----	----	---	---

Jakan McDaniel Jamison	\$2,000
Kaitlyn Ranae Thomas	\$2,000

North Carolina State University

Hunter Pate Wainwright	\$1,000
Emma Delane Anderson	\$3,000
Heath Scott Anderson	\$2,000
Nicholas Scott Beam	\$2,000
Phillip Anthony Hagarty	\$1,000
Andrew Michael Hensley	\$5,000
Anna Renee Jackson	\$3,000

North Greenville University

Makayla Rebekah Davis	\$5,000
Makayia Kebekali Davis	\$2. 00

Pfeiffer University

Brandy Elizabeth H	olley \$2,00	00

Salem Colllege

Sarah K.	Turner	\$2,000

Shepherds Theological Seminary

Erica Caitlin Roland	\$2,000

University of North Carolina at Asheville

Johnathan Lowell Hobbs	\$2,000
Rhapsody Jade Taylor	\$3,000

William Harold Smith Choritoble Trust PART XV(3) Contributions

12-31-15

Form 990 PF

7811

Brianna Marie Tipton \$1,000 **King University** Daniel Juston Blake \$2,000 Lees McRae College Caleb Boone Smith \$3,000 **Lenoir Rhyne University** Emily Elizabeth Edwards \$3,000 Lanna Marie McKinney \$2,000

N	<u>Iars</u>	Hill	Un	ive	rsity
τ,	- 1.		•	-	• -

<u> </u>	
Yuliana Trejo Arriola	\$3,000
Nicholas McKinney Bingham	\$3,000
Shania Alisse Conley	\$3,000
Ethan Gregory Jones	\$4,000
Elaina Deonne Jhant	\$6,000
Elisabeth Grace Johnson	\$2,000
Stanley Joseph Holloway	\$1,000
Jamie Alexus Kelly	\$3,000
Jose Pedro Leon-Perez	\$3,000
Savannah Leona Spratt	\$5,000

Meredith College

Jessica Elizabeth Tucker \$4,000

Montreat College

William.	Harold Smith Charitable Trust Port XV (3) Contributions 12-31-15
Appalachian State University	
Taylor Caitlin Bailey	\$1,000
Abigale Taylor Crawley	\$3,000
Megan Elizabeth Foster	\$5,000
Brittany Michelle Foster	\$2,000
Sarah Hannah Hamilton	\$4,000
Marie Elizabeth Hollifield	\$4,000
Katie Elizabeth McPeters	\$3,000
Levi Michael Pittman	\$4,000
Kiersten Taylor Proctor	\$1,000
Lauren Gray Roquemore	\$500
Campbell University Tara Nicole Ollis	\$5,000
<u>Converse College</u> Jessica Danielle Massey	\$1,000
East Carolina University Alexander Meacham Barham Katie Nicole Parker	\$1,000 \$3,000

\$4,000

\$4,000

\$4,000

\$3,000

\$3,000

\$3,000

Gardner Webb University

Cailtin Savannah Lanning

Rachel Ann McKinney

Riley Kate Robinson

Hannah Brooke Silver

Jonathan Edward Rhyne

Hannah Joy Wilson

990PF Pg 11

THE WILLIAM HAROLD SMITH CHARITABLE TRUST

The William Harold Smith Charitable Trust was established to provide financial assistance to students who are graduating from McDowell High School and are accepted for admission to a post-secondary institution.

Awards will be based on the following criteria:

- Financial need of the student
- · Overall character and reputation of the student
- Scholastic achievement
- Participation in school, community or church activities

Payment of award will be made directly to the institution that the student will be attending. Amount of the award will not exceed the cost of attendance, when combined with awards from all other sources.

The student may reapply for financial assistance from this Trust each year provided be/she demonstrates through grades and achievement a serious attitude toward obtaining a degree. The minimum requirements are:

- 30 credit hours per academic year
- Cumulative GPA of 3.0

APPLICATION DEADLINE IS APRIL 2,

This application becomes complete <u>only</u> when you have returned the following to your high school counselor by April 2:

- This completed and signed application.
- Write an essay describing a meaningful experience you had while
 participating in a school, community, or church activity which influenced
 your personal aspirations, educational and career goals. You may also
 include any other information that the committee should know when
 considering your application.
- · A copy of your McDowell High School transcript.
- A copy of your parent's IRS form 1040 and their W-2 forms.



Mr. Smith, a resident and business owner in McDowell County, died in 1997. In his Last Will and Testament, he established this Trust, which will benefit the residents of McDowell County indefinitely.

The William Horold Smith Charitable Trust 56-6526359 APPLICATION FORM PARTXV FORM 990 PF

NAMEFIRST	MIDDLE	LAST
MAILING ADDRESS	·····	
PHONE	BIRTHDATE	
WHAT UNIVERSITY DO YOU		
WHAT MAJOR DO YOU PLAN	TO PURSUE?	
SAT SCORE	GPA(CLASS RANK
MILY INFORMATION		
NAME OF FATHER/GUARDIAN	EMPLOYER	ANNUAL INCOME
NAME OF MOTHER/GUARDIAN	EMPLOYER	ANNUAL INCOME
LIST NAME AND AGE OF ANY O	THER MELATIVES LIVING AT	HOME.
ADJUSTED GROSS INCOME (F		
PLICATION CHECKLIST Do not use staples and do not fold a when you have returned the following the composition of the compositi	FROM FORM 1040) Interpretation of the attached papers. This age ing to the McDowell High School of LETED AND SIGNED APPLICA PT ARENT'S IRS FORM 1040 (pages ARENT'S W-2 FORMS	oplication becomes compilete on Guidance Department by <u>April</u> ATION s 1 & 2 only)
PLICATION CHECKLIST Do not use staples and do not fold a when you have returned the following the THIS COMP ESSAY TRANSCRIF COPY OF PA	EROM FORM 1040) Interpretation of the attached papers. This appropriate the McDowell High School of LETED AND SIGNED APPLICATED AND SIGNED APPLICATED ARENT'S IRS FORM 1040 (pages ARENT'S W-2 FORMS ATION ON THIS FORM IS TRUE AND THE INFORMATES, FAFSA FORMS, STUDENT AID RESTRUSTE. I UNDERSTAND THAT IS	oplication becomes compilete on Guidance Department by April ATION S 1 & 2 only) ND ACCURATE TO THE BEST OF THE

TOR STUDENTS RE-APPLY ING PART XV FORM 990 PF

WILLIAM HAROLD SMITH EDUCATIONAL TRUST APPLICATION FOR FINANCIAL AID 56-6526359

NAMEFIRS			
			LAST
SOCIAL SECURITY NUM	[BER		
HOME ADDRESS			
HOME PHONE	CELL	ЕМА	AIL
YOUR ADDRESS AT SCH	ool		
COLLEGE/UNIVERSITY			
WHAT IS YOUR MAJOR?	,		
WILL YOU LIVE IN ON C	AMPUS OR OFF CAN	MPUS HOUSIN	NG?
CUMULATIVE GPA	CUMULA	TIVE CREDIT	HOURS
FAMILY INFORMATION			
FATHER	EMPLOYE	ER	ANNUAL INCOME
MOTHER	EMBLOVI	ER	ANNUAL INCOME
LIST NAME AND AGE OF ANY			ANNUAL INCOME
financial aid that you will If you are applying for the educational and career adetail any unusual circum reapplying for aid from that you want the Selection Furnish a current transcassoring 2008 semester. Include a copy of your pathology of your pathology are applying for aid from the selection of the select	receive from any other sound first time to this Trust, we goals. Also, describe why instances or extraordinary exhits Trust, the essay is not in Committee to know when ript showing all your graderent's IRS FORM 1040, payrent's W-2 forms.	write an essay desc you need financia expenses that may a required unless th n considering your des from the curr ges I and 2.	ent academic year, including the signed this application form.
ACCURATE TO THE BEST (INFORMATION, WHICH MA	OF MY KNOWLEDGE. I AY INCLUDE COPIES O EPORTS, OR ANY OTH AT MY APPLICATION	I AGREE TO PE OF ADDITIONA ER INFORMAT WILL <u>NOT</u> BE	ROVIDE PROOF OF THE L TAX FORMS, FAFSA TION REQUESTED BY THIS CONSIDERED IF <u>ANY</u> OF
CICALA TUDE			D. C. T. C.