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## 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.

OMB No 1545-0052

Department of the Treasury

Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www irs gov/form990pf For calendar year 2015 or tax year beginning 03/01 . 2015, and ending 02/29, 2016 Name of foundation A Employer identification number THE STOUT FAMILY FOUNDATION 20-4527293 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (336) 292-2917 PO BOX 22092 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here. . . GREENSBORO, NC 27420-2092 G Check all that apply Initial return Initial return of a former public charity 1 Foreign organizations, check here. Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change H Check type of organization X | Section 501(c)(3) exempt private foundation F. If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method X Cash I Fair market value of all assets at if the foundation is in a 60-month termination end of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . > 144,779. 16) ▶ \$ (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and total of amounts in columns (b), (c), and (d) (b) Net investment (c) Adjusted net for charitable expenses per may not necessarily equal the amounts in column (a) (see instructions) ) income income purposes books (cash basis only) 51,386 Contributions gifts, grants, etc., received (attach schedule). if the foundation is not required to attach Sch B. Check > 1 Interest on savings and temporary cash investments. 2,071 2,071 ATCH 1 Dividends and interest from securities . . . . b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 RECEIVED Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 0 1 8 2016 Net short-term capital gain, . . . . . Income modifications -Gross sales less returns and allowances . . . OGDEN. UT Less Cost of goods sold . Gross profit or (loss) (attach schedule) . . . . Other income (attach schedule) . . . . . . 53.458 2,072. Total. Add lines 1 through 11 . . . . . . . 12 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits . . . . . . Legal fees (attach schedule) . . . . . . . . 16 a 650. 650. b Accounting fees (attach schedule) . . . . . Administrative c Other professional fees (attach schedule). . . 21. 21 18 Taxes (attach schedule) (see instructions)[2]. 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings . . . . . and 22 6. 6. Operating 23 Other expenses (attach schedule) ATCH .3. . 24 Total operating and administrative expenses 677 677 Add lines 13 through 23. . . . . . . . . . . 3,950. 3,950 25 Contributions, gifts, grants paid . . . . . . 4,627. 677 0. 3,950. 26 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 48,831 Excess of revenue over expenses and disbursements . . 1,395 b Net investment income (if negative, enter -0-)

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Adjusted net income (if negative, enter -0-). .

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Form 990-PF (2015)



PartI	Balance Sheets description column should be for end-of-year		Beginning of year	End c	of year	
- arca		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	Cash - non-interest-beari	ing	_			
2	Savings and temporary	cash investments	3,651.	458.	458	
3	Accounts receivable ▶			-		
		btful accounts ▶				
4	Pledges receivable ▶					
	Less allowance for dou	146 I a				
5		· · · · · · · · · · · · · · · · · · ·				
6		officers, directors, trustees, and other	·· <del>=</del> ·· <del>-</del> ··- <del>··</del> ··- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·-	· · · · · · · · · · · · · · · · · · ·		
		tach schedule) (see instructions)				
7		receivable (attach schedule)				
		btful accounts ▶				
g a			-			
set 8		se				
Assets	·	eferred charges			<u> </u>	
104		e government obligations (attach schedule) e stock (attach schedule) ATCH 4	107,979.	160,003.	144,321	
			107,575.	100,003.	144,321	
11 °	Investments - corporate Investments - land, buildings and equipment basis	e bonds (attach schedule)				
	Less accumulated deprecia (attach schedule)	ation >				
12		loans				
13	Investments - other (atta	ach schedule)				
14	Land, buildings, and equipment basis	<b>&gt;</b>				
	Less accumulated deprecia (attach schedule)	ation				
15	Other assets (describe	·)				
16		completed by all filers - see the				
	instructions Also, see p	age 1, item l)	111,630.	160,461.	144,779	
17	Accounts payable and a	accrued expenses				
18	• •					
_						
₽ 20		ors, trustees, and other disqualified persons.				
[ 21 21		otes payable (attach schedule)				
Liabilities 20 21 22 22	= =	e ►				
	Other habilities (describe					
23	Total liabilities (add line	es 17 through 22)	0.	0.		
+==		low SFAS 117, check here . ▶				
တ္ထ		24 through 26 and lines 30 and 31.				
ğ	·	1				
Balances 25 25						
E 25	•					
힏 26	•					
Net Assets or Fund 1 26 27 28 29 30 31		not follow SFAS 117, ► X				
5		plete lines 27 through 31.			•	
g 27		cipal, or current funds		·	1	
28		r land, bldg , and equipment fund	111 500	2.50 4.51	1	
S 29	-	ulated income, endowment, or other funds	111,630.	160,461.		
30		d balances (see instructions)	111,630.	160,461.		
2 31		net assets/fund balances (see				
			111,630.	160,461		
		nges in Net Assets or Fund Balar			=	
		palances at beginning of year - Part II				
end	-or-year tigure reporte	ed on prior year's return)			111,630	
		line 27a			48,831	
				4	160,461	
5 Dec	creases not included in	· · ·		5		
			ine 5) - Part II, column (b		160,461	

Page 3

Pa	rt'IV Capital Gains	and Losses for Tax on Inve	estment Income			
		d describe the kind(s) of property sold (e	e g , real estate,	(b) How acquired	(c) Date	(d) Date sold
	2-story be	rick warehouse, or common stock, 200 s	shs MLC Co)	P - Purchase D - Donation	acquired (mo , day, yr )	(mo , day, yr )
1a			<del></del>			
b						
C						_
d						
е						
	(a) Cross sales area	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	ss)
	(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) minu	ıs (g)
a						
b						
_c					- <u></u>	
d						
<u>e</u>						
	Complete only for assets	showing gain in column (h) and owned	d by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of cot (i)	col	(k), but not less t	
	(1) 7 111 4 43 01 12/01/05	as of 12/31/69	over col (j), if any		Losses (from co	i (n))
<u>a</u>						
_b						
c						
_ <u>d</u>					<del></del>	
<u>e</u>						
2	Capital gain net income of	or (net capital loss)	gain, also enter in Part I, line 7 $- \chi^{\pm}$	_		
	. •	, i i i i i i i i i i i i i i i i i i i	(loss), enter -0- in Part I, line 7	2		<del></del>
3		ain or (loss) as defined in sections 1				
	-	art I, line 8, column (c) (see inst	1			
		Index Costion 4040(a) for Doc	<del> </del>	3		
		Jnder Section 4940(e) for Rec				
(1-0	or optional use by domestic	c private foundations subject to the	e section 4940(a) tax on het investi	nent incor	ne)	
16.0	action 4040(d)(2) analisa	loove this port blook				
11 5	ection 4940(d)(2) applies,	leave this part blank				
Ma	s the foundation liable for	the section 4942 tax on the distrib	utable amount of any year in the hi	ase nerior	12	Yes X No
		not qualify under section 4940(e)		ase period	·	] 163 [X] 110
<u></u>		nount in each column for each year		n any enti	2917	
÷	(a)	(b)	(c)	J criy crit	(d)	
Ca	Base period years itendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets	l i	Distribution ra (col (b) divided by	
	2014	950.	106,235.		( (-,	0.008942
	2013	6,510.	86,301.			0.075434
_	2012	6,545.	55,616.			0.117682
	2011	6,348.	54,840.		=	0.115755
_	2010	8,650.	59,349.		•	0.145748
	· · · · · · · · · · · · · · · · · · ·					
2	Total of line 1, column (d	l) <i></i>		2		0.463561
3		for the 5-year base period - divide				
•	_	ndation has been in existence if les	•	3		0.092712
	The state of the s		,			
4	Enter the net value of no	ncharitable-use assets for 2015 fro	om Part X. line 5	4		124,512.
•						
5	Multiply line 4 by line 3			5		11,544.
•						
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		14.
•						<del></del>
7	Add lines 5 and 6			7		11,558.
					·	
8	Enter qualifying distribution	ons from Part XII, line 4		8		3,950.
	If line 8 is equal to or gi	reater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ıction	s)
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)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check			28.
	here ▶ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J			
	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			
3	Add lines 1 and 2			28.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			28.
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			_
7	Total credits and payments Add lines 6a through 6d			<u>0.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			28.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		-	
11 Doc	Enter the amount of line 10 to be Credited to 2016 estimated tax   Refunded   11			
	t VII-A Statements Regarding Activities	· · · · ·		1
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	4-	Yes	No X
	participate or intervene in any political campaign?	1a		<del></del>
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1b		х
	Instructions for the definition)?	10	<del>                                     </del>	
	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	1c		x
	Did the foundation file Form 1120-POL for this year?			<u> </u>
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation ▶ \$		•	
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on		ĺ	ļ
•	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
-	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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	ĺ	х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Х
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			
	By language in the governing instrument, or			ł
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			•
	conflict with the state law remain in the governing instrument?	6	Х	<u> </u>
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_	Х	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			ļ
	NC		1	İ
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 <sup>2</sup> If "No," attach explanation	8b	X	<del> </del>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"		ĺ	.,
	complete Part XIV	9	-	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			v
	names and addresses	10	0.05	X

Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ RALPH D. STOUT, JR Telephone no ▶ 336-292	-291	7	
	Located at ▶41 STURBRIDGE LANE GREENSBORO, NC ZIP+4 ▶ 27408			
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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country ▶	Ì		
Pai	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)?			
	(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)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		İ	
	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		Х
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?			i
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			]
	all years listed, answer "No" and attach statement - see instructions )	2b		Х
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
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		Х
	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		Х

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3 NONE

Total. Add lines 1 through 3

All other program-related investments. See instructions

Part	* Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundations,	,
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	122,983.
	Average of monthly cash balances	1b	3,425.
С	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	126,408.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	126,408.
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	1,896.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	124,512.
6	Minimum investment return. Enter 5% of line 5	6	6,226.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ □ and do not complete this part )	dations	
1	Minimum investment return from Part X, line 6	1	6,226.
2 a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI).	1	
	Add lines 2a and 2b	2c	28
3	Distributable amount before adjustments Subtract line 2c from line 1	3	6,198.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	6,198.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	6,198.
	Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	3,950.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	<b>!</b>	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,950.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,950.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	alculating whether t	he foundation

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Part XIII Undistributed Income (see instruc	tions)			<u> </u>
Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
line 7				6,198.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only	İ			
b Total for prior years 20 13 ,20 12 ,20 11				
3 Excess distributions carryover, if any, to 2015				
a From 2010 5,683.	İ			
b From 2011 3,610.				
c From 2012 3,774.				
d From 2013 2,210.				
e From 2014				
f Total of lines 3a through e	15,277.			
4 Qualifying distributions for 2015 from Part XII,			· · · · · · · · · · · · · · · · · · ·	
line 4 ▶ \$ 3,950.				
a Applied to 2014, but not more than line 2a				
b 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				3,950.
e Remaining amount distributed out of corpus				3,750.
5 Excess distributions carryover applied to 2015.	2,248.			2,248.
(If an amount appears in column (d), the same				
amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	13,029.			
	<u> </u>	***	· · · · · · · · · · · · · · · · · · ·	
b 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				
e Undistributed income for 2014 Subtract line				
4a from line 2a Taxable amount - see				
instructions		<del>-  </del>		
f Undistributed income for 2015 Subtract lines				
4d and 5 from line 1 This amount must be distributed in 2016				
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)	3,435.			
9 Excess distributions carryover to 2016.			-	
Subtract lines 7 and 8 from line 6a	9,594.			
10 Analysis of line 9				
a Excess from 2011		}		
b Excess from 2012				
c Excess from 2013 2,210 .				
d Excess from 2014				
e Excess from 2015				

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NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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art XV Supplementary Information	(CONTINUED)	annad far i P	4a Da.ur4	
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	Ing the Year or Appl	roved for Fu	ture Payment	T
Name and address (home as hyamas)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a raid during the year				
ATCH 6				
		ļ		
Total	· · · · · · · · · · · · · · · · · · ·	<del></del>		3,95
<b>b</b> Approved for future payment				
		1		
	<u>L</u>	<u></u>		
Total				

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Part XVI-A Analysis of Income-Produ nter gross amounts unless otherwise indicated		ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a					
b					
С					
d					
e			1		
f					
g Fees and contracts from government agencies	·				
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	1.	
Dividends and interest from securities			14	2,071.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property.					
Other investment income					
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events				•	
Gross profit or (loss) from sales of inventory.				,	
Other revenue a				•	· · · · ·
b					
С					
d					
d					
e				2,072.	
e 2 Subtotal Add columns (b), (d), and (e)					
e	ulations )	ccomplishment of E	xempt Pur		2,072.
e Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072 uted importantly to th
Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072.
e Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072 uted importantly to th
2 Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072.
2 Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072.
e Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072.
e Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072 uted importantly to th
e Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072.
2 Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072.
e Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072.
2 Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072.
e Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072. uted importantly to th
e Subtotal Add columns (b), (d), and (e)	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072. uted importantly to th
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 calcular table.  Part XVI-B Relationship of Activities  Line No. Explain below how each activity	ulations) s to the A	ccomplishment of Ex	xempt Pur	ooses e) of Part XVI-A contrib	2,072.

Part	: XVII	Information R Exempt Organ		ansfer	s To and	Transact	ions an	d Relationship	s With None	chari	table	)
1	Did' the	e organization direct	ly or indirectly	engage	in any of t	he followin	g with ar	ny other organiza	tion described		Yes	No
	ın sect	ion 501(c) of the Co	ode (other than	section	501(c)(3)	organization	ns) or in s	section 527, relati	ng to political			Į
	-	zations?										<u> </u>
		ers from the reportin	-									
		sh								1a(1)		X
		ner assets								1a(2)		X
		transactions										Х
	(1) Sai	les of assets to a no	ncharitable exe	empt orga	anization		• • • • •			1b(1)		<u>X</u>
	(2) Pui	rchases of assets fro	om a nonchant	able exer	npt organiz	ation				1b(2)		- X
		ntal of facilities, equi imbursement arrang										X
		ans or loan guarantee										- <del></del>
		rformance of service										X
		g of facilities, equipn										X
		answer to any of th									fair m	arket
		of the goods, other										
		n any transaction or		_	-	-						
(a) Lir	ne no	(b) Amount involved	(c) Name of	noncharita	ble exempt org	anization	(d) Des	scription of transfers, tr	ansactions, and shai	ing arra	ingeme	nts
		N/A				•	N/A					
_												
						_			·			
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22	ls the	foundation directly	or indirectly at	ffiliated	with or rel	ated to on	e or mor	ro tay ayamat ara	anizatione			
		ped in section 501(c)							amzations	T ve	es X	חער
		" complete the follo		, , , , , , , , , , , , , , , , , , ,	.,	o	0000.0			· `		]
		(a) Name of organization			(b) Type of	organization		(c) De	scription of relations	hip		
				N/A								
										_		
	_,		<del></del>									
		penalties of perjury, I decla t, and complete Declaration of							best of my knowledg	e and b	elief, it	is true
Sign							<b>N</b>		May the IRS	discus	s this	retum
Here		ALPH D. STOUT	, JR		07/06/2	016	DIRE	CTOR	with the pro	parer :	shown	
.516	Sign	ature of officer or trustee	11		Date		Title		(see instruction	s)? <u>X</u>	Yes	No
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aid		Print/Type preparer's na		Prep	arer's signatur	stee	eel !	Date / 7/16	CIICCK	TIN	2074	٥
	arer	DAVID F LEEPE		J C DII	MLEY, L	ID TO		1/1/10		2001		<del>9</del>
	Only		EPER, KEAN 25 N. ELM					Firm	s EIN ▶ 56-13	,,,,,,	<u> </u>	<del></del>
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Phone no 336-274-3700

GREENSBORO, NC

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

## Schedule of Contributors

OMB No 1545-0047

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

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990 Internal Revenue Service Employer identification number Name of the organization THE STOUT FAMILY FOUNDATION 20-4527293 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization THE STOUT FAMILY FOUNDATION Employer identification number 20-4527293

Part I	Contributors (see instructions) Use duplicate cop	oles of Part I if additional space is ne	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RALPH D STOUT, JR REV. TRUST  41 STURBRIDGE LANE  GREENSBORO, NC 27408	\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization THE STOUT FAMILY FOUNDATION

Employer identification number

20-4527293

Part II	Noncash Property (see instructions) Use duplicate copies	of Part II if additional space is nee	ded 
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	900 SH. PNY STOCK		
		\$\$.	12/29/2015
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<del></del>

Name of organization THE STOUT FAMILY FOUNDATION

Employer identification number

20-4527293

the f cont Use	that total more than \$1,000 for	tions completing Part III, ent ne year (Enter this informat	ations described in section 501(c)(7), (8), or ontributor. Complete columns (a) through (e) a ter the total of exclusively religious, charitable, con once See instructions) > \$	
No om art l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-				
		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
No om art l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
_   _				
		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee	
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
_   _				
I		(2) 7-2-5		
			-	
	Transferee's name, address, a	(e) Transfer of gift nd ZIP + 4	Relationship of transferor to transferee	

ATTACHMENT 1 PAGE 18

## ATTACHMENT 1

# FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	1,433. 638.	2,071.
REVENUE AND EXPENSES PER BOOKS	1,433. 638.	2,071.
		TOTAL
DESCRIPTION	LINCOLN FINANCIAL GROUP PIEDMONT NATURAL GAS	

ATTACHMENT 2 PAGE 19

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## FORM 990PF, PART I - TAXES

REVENUE	AND	EXPENSES	PER BOOKS
			DESCRIPTION

TOTALS

EXCISE TAX

NET	INVESTMENT	INCOME	21.
AND	EXPENSES	PER BOOKS	21.

ATTACHMENT 3

## FORM 990PF, PART I - OTHER EXPENSES

	NET	INVESTMENT	INCOME	.9		9	
REVENUE	AND	EXPENSES	PER BOOKS	.9	1	9	
						TOTALS	
			DESCRIPTION	POSTAGE			

20-4527293

## FORM 990PF, PART II - CORPORATE STOCK

ENDING <u>EMV</u>	61,587. 82,734. 144,321.	
ENDING BOOK VALUE	93,197. 66,806. 160,003.	
BEGINNING BOOK VALUE	93,197. 14,782. 107,979.	
DESCRIPTION	1,686 SH LINCOLN NATIONAL CORP 1,393 SH PIEDMONT NATURAL GAS TOTALS	

1072

ATTACHMENT 5 PAGE 22

DDI1LG L070 7/7/2016

ATTACHMENT 5

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES PART VIII FORM 990PF,

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

RALPH D STOUT, JR 41 STURBRIDGE LANE

GREENSBORO, NC 27408

SOLE DIRECTOR

CAROL R. JOHNSTON

4535 WEST MARKET STREET GREENSBORO, NC 27407

SECRETARY

20-4527293

## FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT	2,750	750	200	250
PURPOSE OF GRANT OR CONTRIBUTION	PROVIDE ASSISTANCE FOR RESEARCH AND TREATMENT OF CANCER	PROVIDE ASSISTANCE FOR GENERAL HOSPICE ACTIVITIES	PROVIDE FOR RESEARCH AND CURE OF JUVENILE DIABETES	PROVIDE THERAPY FOR DISABLED CHILDREN
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A	N/A	N/A	N/A
RECIPIENT NAME AND ADDRESS	DUKE CANCER CENTER 20 DUKE MEDICINE CIRCLE DURHAM, NC 27710	HOSPICE FOUNDATION OF GREATER GREENSBORO 2500 SUMMIT AVENUE GREENSBORO, NC 27405	JUVENILE DIABETES RESEARCH FOUNDATION 312 N EUGENE STREET, STE D GREENSBORO, NC 27401	GREENSBORO CEREBAL PALSY ASSOCIATION 3205 E WENDOVER AVENUE GREENSBORO, NC 27405

TOTAL CONTRIBUTIONS PAID

3,950

PAGE 23 ATTACHMENT 6