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Form 990-PF Department of the Treasury

SCANNED ANY

Return of Private Foundation

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

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OMB No. 1545-0052

Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

Internal Revenue Service For calendar year 2015 or tax year beginning 07/01 , 2015, and ending 06/30.2016Name of foundation A Employer identification number PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 1525 WEST WT HARRIS BLVD 919-881-6497 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here. . . CHARLOTTE, NC 28262 G Check all that apply. Initial return Initial return of a former public charity 1 Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach Final return Amended return Address change Name change computation H Check type of organization. X Section 501(c)(3) exempt private foundation E 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 ... I Fair market value of all assets at J Accounting method X Cash 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 . 16) ▶ \$ 23,151,235 (Part I, column (d) must be on cash basis.) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (c) Adjusted net for charitable (b) Net investment total of amounts in columns (b), (c), and (d) expenses per purposes may not necessarily equal the amounts in income income books (cash basis only) column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) Interest on savings and temporary cash investments. STMT 495.149 492,768 Dividends and interest from securities Net rental income or (loss) 159.982 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 3,062,354 159,982. Capital gain net income (from Part IV, line 2) . 'n 8 Net short-term capital gain..... Income modifications . Gross sales less returns and allowances 10a b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) 4,687. STMT 4 4,687 Other income (attach schedule) 11 659,818 Total. Add lines 1 through 11 657,437 12 NONE NONE NONE 13 Compensation of officers, directors, trustees, etc... Expenses NONE 14 NONE Other employee salaries and wages 15 NONE NONE Pension plans, employee benefits 16a Legal fees (attach schedule) 2,000 NONE 2,000 b Accounting fees (attach schedule) STMT 5 NONE 181,779 181,779 c Other professional fees (attach scheduler. 6. 17 22,715 4,715 Taxes (attach schedule) (see instructions: 7. 18 Depreciation (attach schedule) and depletion. 19 20 NONE NONE 21 Travel, conferences, and meetings NONE NONE 22 Printing and publications 56,112 56,112 Other expenses (attach schedule) STMT. 8. Operating 23 24 Total operating and administrative expenses. 58,112. 262,606 186,494 NONE Add lines 13 through 23. ,186,656. ,186,656 Contributions, gifts, grants paid 25 Total expenses and disbursements Add lines 24 and 25 1,449,262 186,494 NONE 244,768 26 27 Subtract line 26 from line 12 -789,444 Excess of revenue over expenses and disbursements 470,943 b Net investment income (if negative, enter -0-)

JSA For Paperwork Reduction Act Notice, see instructions.
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c Adjusted net income (if negative, enter -0-). .

_	II	Polones Chasts	Attached schedules and amounts in the	Beginning of year	End	d of year
انا س	art II	Balance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng		1,096	
			cash investments		364,633	<u>364,633</u> .
		Accounts receivable				
		Less allowance for doub	otful accounts >			
	4	Pledges receivable ▶				
	1	Less allowance for doub	otful accounts >			<u> </u>
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other	1		
		disqualified persons (atta	ach schedule) (see instructions)			
	7	Other notes and loans re	eceivable (attach schedule)			× · · ·
		Less [,] allowance for doub	otful accounts NONE			
ţ	8	Inventories for sale or us	:e		<u> </u>	
Assets	9	Prepaid expenses and di	eferred charges			_ <u></u>
Ä	10a	Investments - U.S and state	government obligations (attac 6 2 Marula)	1,014,216.	1,006,75	
	ь	Investments - corporate	stock (attach schedule) . STMT .1.0.	9,830,190.	9,778,859	
	С	Investments - corporate	bonds (attach schedule) . STMT .11.	3,827,692.	3,169,18	5. 3,071,473.
i	11	Investments - land, building and equipment basis	s, >			
		Less accumulated deprecia (attach schedule)	ation >			
	12	·	loans			<u></u> _
	13	Investments - other (atta	ch schedule) STMT .13.	1,389,706.	1,385,143	3. <u>1,272,369</u> .
	14	Land, buildings, and equipment basis	>			* 4
		Less accumulated deprecia (attach schedule)	tion >	!		
	15	Other assets (describe	ASSETS HELD BY NORTHERN TRUST)	6,170,743.	6,159,754	<u>6,677,963</u> .
			completed by all filers - see the			
		instructions. Also, see pa	age 1, item ()	22,651,068.	21,865,429	5. <u>23,151,235</u> .
	17	Accounts payable and a	ccrued expenses			
	18	Grants payable				
Liabilities	19	Deferred revenue				
Ħ	20	Loans from officers, directo	rs, trustees, and other disqualified persons			
а	21	Mortgages and other no	tes payable (attach schedule)			_
=	22	Other liabilities (describe	e ▶)			
_	23		s 17 through 22)		NOI	NB
			low SFAS 117, check here . ▶			
ĕ		and complete lines 2	4 through 26 and lines 30 and 31.			
a	24					
Bal	24 25 26 27 28 29 30 31	Temporarily restricted				
펓	26	•				_
Ē			not follow SFAS 117, ► X			!
5	ĺ		plete lines 27 through 31.	22 651 060	21 065 42	
Š	27	•	apal, or current funds	22,651,068.	21,865,42	5.
set	28		land, bldg, and equipment fund	<u> </u>		_
As	29	•	ated income, endowment, or other funds	22 651 262	01 065 40	
e	30		d balances (see instructions)	22,651,068.	21,865,42	<u> </u>
Z	31		net assets/fund balances (see	22 651 060	21 065 42	
Б			ages in Net Assets or Fund Pal	22,651,068.	21,865,42	<u> </u>
_			nges in Net Assets or Fund Balances at beginning of year. Both		must save with	
1			palances at beginning of year - Part		•	22 (51 060
2			d on prior year's return)		_	
			line 27a		<u>2</u> 3	
			line 2 (itemize) ► SEE STA			
			alances at end of year (line 4 minus			

Pai	rt IV Capital Gains	and Losses for Tax on Inve	estment Income			
	• (a) List and	d describe the kind(s) of property sold (e.g., real estate,	(b) How acquired	(c) Date	(d) Date sold
	2-story b	rick warehouse, or common stock, 200	shs. MLC Co.)	P - Purchase D - Donation	acquired (mo., day, yr.)	(mo , day, yr.)
1a	PUBLICLY TRADED	SECURITIES				
b	OTHER GAINS AND	LOSSES				
C						
d						
e						
	430	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	oss)
	(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini	
	3,026,026.		2,902,372.			123,654.
b	36,328.		2/302/3/2.			36,328.
c	30,320.					30,320.
d						
					- <u>-</u>	
е	Complete only for assets s	showing gain in column (h) and owned	by the foundation on 12/31/69			
	Complete only for assets s		'		Gains (Col. (h) ga (k), but not less t	
((i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Coi.	Losses (from co	
		45 51 12/5 1/65	Over con (j), it dily	<u> </u>		
<u>a</u>						123,654.
b						36,328.
<u> </u>						
d				ļ		
<u>e</u>						
2	Capital gain net income of		gain, also enter in Part I, line 7			
-		(п	(loss), enter -0- in Part I, line 7	2		<u> 159,982.</u>
3		in or (loss) as defined in sections 1				
		art I, line 8, column (c) (see ins				
	Part I, line 8		<u></u>	3		
Pai	rt V Qualification L	Inder Section 4940(e) for Red	uced Tax on Net Investment In	ncome		
Was		the section 4942 tax on the distrik	outable amount of any year in the b	ase perio	d?	Yes X No
IT "Y		not qualify under section 4940(e).				
1_		ount in each column for each year	, see the instructions before making	g any ent		
	(a) Base period years	(b)	(c)		(d) Distribution ra	atio
Cal	endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col (b) divided by	
	2014	1,102,487.	24,822,888.	ļ		0.044414
	2013	903,166.	23,853,947.			0.037862
	2012	764,289.	21,874,808.			0.034939
	2011	737,363.	20,551,040.			0.035880
	2010	669,287.	20,241,389.			0.033065
2	Total of line 1, column (c	1)		2		0.186160
3		o for the 5-year base period - divide				
-			s than 5 years	3		0.037232
	namber of years the loar	idation has been in existence in les	S than 5 yours			
A	Enter the net value of	ncharitable use access for 2015 for	om Part X, line 5	4	22	,373,604.
4	Enter the net value of no	nchantable-use assets for 2015 ff	oni Fart A, line 5	- - -	23	,3/3,001.
				-		070 246
5	Multiply line 4 by line 3			5		870,246.
						4 500
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		4,709.
7	Add lines 5 and 6			7		874,955.
8	Enter qualifying distribut	ions from Part XII, line 4		8		,244,768.
	If line 8 is equal to or g	reater than line 7, check the box	in Part VI, line 1b, and complete	that part		

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	<u>nstru</u>	ctions	<u>s)</u>
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		4,7	<u>09.</u>
	here \blacktriangleright X and enter 1% of Part 1, line 27b			
C	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		4,7	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			ONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		4,7	<u>09.</u>
6	Credits/Payments			
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 31,300.			
ь	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d		31,3	<u>00.</u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<u>26,5</u>	
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ 4,712. Refunded ▶ 11		<u>21,8</u>	<u> 179.</u>
_	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		Yes	No
	participate or intervene in any political campaign?	1a		<u> X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			17
	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.			v
	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers. > \$			٠.,
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			_v
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		^
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b 5		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-		^
_	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 By language in t			
	• 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	X	
-	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	
7 80	Enter the states to which the foundation reports or with which it is registered (see instructions)	_ -	 	
8a	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			
5	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
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,"	l		
	complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
_		rm 9 9	0-PF	(2015)

Par	t VII-A Statements Regarding Activities (continued)			
	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		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)	12		<u>x</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	X	
14	The books are in care of ► WELLS FARGO BANK NA Telephone no. ► (919) 881-	649	7	
17	Located at ► 150 FAYETTEVILLE STREET, RALEIGH, NC ZIP+4 ► 27601-1		<u>'</u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	· 🔲
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	· · · · · · · · · · · · · · · · · · ·	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			100
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)	15-4		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	- 1	¥.	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			4 2
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	33	. 1	
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		, deri	
	foundation agreed to make a grant to or to employ the official for a period after			1
	termination of government service, if terminating within 90 days.)	4	4	强
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		TOWN THE PARTY OF
	Organizations relying on a current notice regarding disaster assistance check here		17.	
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	à.		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		17	
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	7	. #	
	6e, Part XIII) for tax year(s) beginning before 2015?	H.		
	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)		1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		45)	
	all years listed, answer "No" and attach statement - see instructions.)	2b	1 7	X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		4	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	7 7 (N) %; 1	*	
	at any time during the year?	3.7	**	
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or	7		3
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			ç i
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	w 8/4		7 mg 1840
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		**	. 3.
	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		X
		8		23
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
		00	^ DE	10045

orm 9	90-PF (2015)		_ 58-18	81092	Page 6
Part	Statements Regarding Activities f	or Which Form 4	720 May Be Req	uired (continued)	
5a	During the year did the foundation pay or incur any amoi (1) Carry on propaganda, or otherwise attempt to influer (2) Influence the outcome of any specific public ele- directly or indirectly, any voter registration drive?.	nce legislation (section ction (see section 4	1955), or to carry or	. Yes X No	
	 (3) Provide a grant to an individual for travel, study, or o (4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, che purposes, or for the prevention of cruelty to children 	charitable, etc., org	anization described in the second sec	Yes X No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the Regulations section 53.4945 or in a current notice regar Organizations relying on a current notice regarding disas	ding disaster assistan	ce (see instructions)?		5b
С	If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility for the if "Yes," attach the statement required by Regulations sed	foundation claim e	xemption from the t	ax	
6a b	Did the foundation, during the year, receive any fur on a personal benefit contract?	ds, directly or indire		. Yes X No	6b X
b		any net income attrib	utable to the transacti	on?	. 76
	Information About Officers, Director and Contractors		_		pioyees,
1_	List all officers, directors, trustees, foundation ma	nagers and their (b) Title, and average	compensation (see	instructions).	
	(a) Name and address	hours per week		(a) Contributions to	
		devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
		devoted to position	enter -0-)		
_		devoted to position	enter -0-)		
		devoted to position	enter -0-)		
		devoted to position	(if not paid, enter -0-)		
		devoted to position	(if not paid, enter -0-)		
		devoted to position	enter -0-)		
2	Compensation of five highest-paid employees	devoted to position	enter -0-)	and deferred compensation	other allowances
2	Compensation of five highest-paid employees "NONE."	devoted to position	enter -0-)	e 1 - see instruction	other allowances
		devoted to position	enter -0-)	and deferred compensation	other allowances
(a)	"NONE."	(other than those hours per week	e included on line (c) Compensation	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter
(a)	"NONE."	(other than those hours per week	enter-0-) e included on line	e 1 - see instruction (d) Contributions to employee benefit plans and deferred	ons). If none, enter
(a)	"NONE."	(other than those hours per week	e included on line (c) Compensation	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter
(a)	"NONE."	(other than those hours per week	e included on line (c) Compensation	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter
	"NONE."	(other than those hours per week	e included on line (c) Compensation	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter
(a)	"NONE."	(other than those hours per week	e included on line (c) Compensation	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter
(a)	"NONE."	(other than those hours per week	e included on line (c) Compensation	e 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	ons). If none, enter

Total number of other employees paid over \$50,000

NONE

3 Five hi	hest-paid independent contractors for professional services (see instructions). If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		NONE
NONE		NONE
		
	·····	
otal number	of others receiving over \$50,000 for professional services	NONE
Part IX-A	Summary of Direct Charitable Activities	
	ation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1NONE		
-		
-		
3		
-		
Part IX-B	Summary of Program-Related Investments (see instructions)	
1 NONE	wo largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
NONE		
2		
-		
All other prog	am-related investments See instructions.	
3 NONE		

	90-24 (2019) 29-1881032		rage O
Part	Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.)	ın foun	dations,
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	22,798,003.
	Average of monthly cash balances	1b	931,544.
	Fair market value of all other assets (see instructions)	1c	NONE
	Total (add lines 1a, b, and c)	1d	23,729,547.
	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	NONE
3	Subtract line 2 from line 1d	3	23,729,547.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
•	instructions)	4	355,943.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	23,373,604.
6	Minimum investment return. Enter 5% of line 5	6	1,168,680.
	XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating found		111001000:
	and certain foreign organizations check here and do not complete this part.)	iutions	
1	Minimum investment return from Part X, line 6	1	1,168,680.
2 a	Tax on investment income for 2015 from Part VI, line 5 2a 4,709.		
b	Income tax for 2015. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	4,709.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,163,971.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	1,163,971.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	1,163,971.
Part	XII 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	1,244,768.
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.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,244,768.
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	4,709.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,240,059.
·	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years.	iouiatiilt	y which the loundation

Pa	TO XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7		······································		1,163,971.
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			1,085,035.	
	Total for prior years 20_13_,20,20		NONE NONE		
3	Excess distributions carryover, if any, to 2015				
а	From 2010 NONE				
b	From 2011 NONE				
C	From 2012 NONE				
d	From 2013				
	From 2014 NONE	17017			
	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2015 from Part XII,				
	line 4 ▶ \$ 1,244,768.			1 005 025	
	Applied to 2014, but not more than line 2a			1,085,035.	
ь	Applied to undistributed income of prior years		NONE		
	(Election required - see instructions)		NOINE		
С	Treated as distributions out of corpus (Election	NONE			ę.
	required - see instructions)	NONE		<u> </u>	159,733.
	Applied to 2015 distributable amount	NONE			139,733.
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2015 .	NONE		A 3 604 C	NONE
3	(If an amount appears in column (d), the same	110111			, ,
_	amount must be shown in column (a))				4 . ,
6	Enter the net total of each column as indicated below:		, * ,		Ž.
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	NONE			: 7
	Prior years' undistributed income. Subtract				
	line 4b from line 2b	. ,	NONE		
c	Enter the amount of prior years' undistributed				, %
	ncome for which a notice of deficiency has been issued, or on which the section 4942(a)			**	* *
	tax has been previously assessed		NONE	***	<u> </u>
d	Subtract line 6c from line 6b. Taxable			3 , , , , , , , , , , , , , , , , , , ,	
	amount - see instructions		NONE	ří	<u> </u>
е	Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see				" ." ." .
	instructions		**		
f	Undistributed income for 2015, Subtract lines			* .	
	4d and 5 from line 1. This amount must be	* * *			
	distributed in 2016	\ \ \	* * * * * * * * * * * * * * * * * * *		1,004,238.
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	NONE	l:		
	required - see instructions)	NONE			
8	Excess distributions carryover from 2010 not	NONE	Ti.		
_	applied on line 5 or line 7 (see instructions)	NONE	<u> </u>		
9	Excess distributions carryover to 2016.	NONE			
10	Subtract lines 7 and 8 from line 6a	NONE			
	Analysis of line 9 Excess from 2011 NONE				
	Excess from 2012 NONE				
	Excess from 2013 NONE		1		
	Excess from 2014 NONE				
	Excess from 2015 NONE				
	mond				

Par	t XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, questic	on 9)	NOT APPLICABLE
1a	If the foundation has foundation, and the ruling					,
h	Check box to indicate v	•	=)(3) or 4942(j)(5)
U	Check box to maicate v	Tax year	is a private operating	Prior 3 years		
2 a	Enter the lesser of the ad-		(b) 2014	(c) 2013	(d) 2012	(e) Total
	justed net income from Part I or the minimum investment	(a) 2015	(b) 2014	(6) 2013	(4) 2012	
	return from Part X for each					
	year listed					
b	85% of line 2a	ļ				
C	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made	-"				
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the				<u></u>	
_	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section					
h	4942(j)(3)(B)(i) "Endowment" alternative test-					
•	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed				<u> </u>	
С	"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)(m)					
	(3) Largest amount of sup- port from an exempt					
	organization (4) Gross investment income .					
Pai		ntary Information (Complete this part	only if the foundat	tion had \$5,000 o	r more in assets at
		uring the year - see		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1	Information Regarding	Foundation Manage	rs:		· · · · · · · · · · · · · · · · · · ·	
а	List any managers of	the foundation who	have contributed mor	e than 2% of the total	d contributions recei	ved by the foundation
	before the close of any	y tax year (but only if the	ney have contributed r	more than \$5,000). (Se	ee section 507(d)(2).)	
	NONE					
b	List any managers of	the foundation who	own 10% or more o	f the stock of a corp	oration (or an equal	y large portion of the
	ownership of a partner	rship or other entity) o	f which the foundatior	n has a 10% or greater	interest.	
	NONE					
	210212					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:		
	Check here ► X if	the foundation only	makes contributions	to preselected chari	table organizations	and does not accept
						or organizations under
	other conditions, com	plete items 2a, b, c, an	d d.			
a	The name, address, ar	nd telephone number o	or e-mail address of the	e person to whom app	lications should be ac	dressed.
b	The form in which app	olications should be su	bmitted and information	on and materials they	should include:	
C	Any submission deadl	ines:				
						
d	Any restrictions or l	imitations on awards	, such as by geogr	aphical areas, charita	ible fields, kinds of	institutions, or other
	factors:					

i

Part XV , Supplementary Information (continued)	oved for E	utura Paymont	Toge 11
3 'Grants and Contributions Paid Durin Recipient Name and address (home or business)	If recipient is an individual,	Foundation	dture rayment	
Name and address (home or husiness)	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				
SEE STATEMENT 44				1,186,656.
DEE BIRIEMENI 44				1,186,636.
				•
	i			
		Ì		
Total			<u></u> 3a	1,186,656.
b Approved for future payment				
				•
		1		
Total			▶ 3b	

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er gross amounts unless otherwise indicated.		ited business income	Excluded by	section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
rogram service revenue:			Example 1000		(See instructions.)
			 		
			<u> </u>		
			- - 		
			 		
Fees and contracts from government agencies					
Membership dues and assessments				·- †	
nterest on savings and temporary cash investments.					
lividends and interest from securities			14	495,149.	
let rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property · · · · · ·	l 1				
et rental income or (loss) from personal property.	1				
Other investment income					
ain or (loss) from sales of assets other than inventory			18	159,982.	
let income or (loss) from special events · · ·					
Gross profit or (loss) from sales of inventory					
Other revenue a					
FROM NORTHERN TRST		<u> </u>	1	4,687.	
·					
d					
•					
					
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	ulations.)				659,8
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculated the total columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculated the total columns (b), (d), and (e) Explain below how each activities to the columns (b), (d), and (e)	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculated the total columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculated the total columns (b), (d), and (e) Explain below how each activities to the columns (b), (d), and (e)	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities (e) Relationship (e)	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	uted importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	uted importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of	Exempt Purp	oses) of Part XVI-A contribu	uted importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activity	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	uted importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	uted importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	uted importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	uted importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities e No. Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	ited importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculated the XVI-B Relationship of Activities (e) Relationship (e)	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	uted importantly to
Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities Explain below how each activit	ulations.) s to the Ac	ccomplishment of income is reported to purposes (other than	Exempt Purp In column (en by providing	oses) of Part XVI-A contribu	uted importantly to

Form 990-Pf				58-188109			ge 13
Part XV	Exempt Orga	nizations	nsfers To and Transact	ions and Relations	hips With Nonchari		
ın se			engage in any of the followin section 501(c)(3) organization			Yes	No
a Tran	nsfers from the reportin	g foundation to a	a noncharitable exempt organ	ization of:]	
						↓	X
		• • • • • • • •		• • • • • • • • • • • • • • • • • • • •	<u>1a(2)</u>	-	X
	er transactions:	aharitahla ayam	nt organization		46.14		X
			pt organization				X
			assets				X
							X
(5) (Loans or loan guarante	es			<u>1b(5)</u>		X
			or fundraising solicitations .			4	X
			s, other assets, or paid employ			<u> </u>	X
valu	e of the goods, other	assets, or service	s," complete the following so ces given by the reporting fo ement, show in column (d) t	undation. If the founda	ition received less than	fair m	narket
(a) Line no.		, <u> </u>	oncharitable exempt organization	,	rs, transactions, and sharing arr	_	
	 	 		 	-	_	
			· · · · · · · · · · · · · · · · · · ·	-			
				 	··		
				<u> </u>			
							
							
	· ·	•	iliated with, or related to, on her than section 501(c)(3)) or	· · · · · · · · · · · · · · · · · · ·	_	es 🖸	 X No
<u>b</u> If "Y	es," complete the follo				15		
	(a) Name of organization	on	(b) Type of organization		Description of relationship		
	<u></u>	-	<u> </u>				
			-				-
_							
			ned this return, including accompanying sixpayer) is based on all information of which	preparer has any knowledge	May the IRS discu		return
Here	Signature of officer or trustee		10/17/2016 Date	Trustee Title	with the preparer (see instructions)?	shown Yes	below No
		BENEVOLENT_		· 			
Paid	Print/Type preparer's na		Preparens signature	Date	Check if PTIN	1216	72
Prepare	DERRICK PUCK		DAND			0316'	13
Use On	Titti Stiatile F 112		BANK, W.A. HARRIS BLVD. D1114-		Firm's EIN ▶ 94-308(<u>, , , , , , , , , , , , , , , , , , , </u>	
	• 1			0.60	Phone no. 800-691-8	3916	
	<u> </u>			<u></u>	Form 99		(2015)

JSA

SECURITIES	
FROM	
INTEREST	
AND	1
DIVIDENDS	
1	ı
PART I	
990PF,	
FORM	1

DESCRIPTION 	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
2.950% 5/15/1	, 21	,21
AMERICAN EXPRESS 7.000% 3/19/18	4,200.	4,200.
1.000% 5/01/1 1.000% 5/03/1	707	70,
N GLOBAL HIGH INCOME FD #549	7,68	, 89
RE EMERG MKTS CR DB-INS	, 27	, 68
75	\vdash	٦,
OF MOVE SCOILE 2:030% 10/30/1	7.00	50,
1.900% $1/31/1$	42	4.24
O GL LISTED RE-Y #2065	, 83	, 83
4.450% 1	4	74
2.650% 10/26/2	0	9
	4	4
ERPRISE PRODUCTS 2.550% 10/1	Н	\vdash
HOME LN BK 0.875% 5/24/1	ς, _.	, 13
HOME LN BK 0.500% 9/28/1	4	4
NATL MTG ASSN 1.500% 11/30/2	9	95
NATL MTG ASSN 1.750% 6/20/1	, 27	, 27
.500% 5/15/2 vv an ac #663	∞	ωι
SINAI VAL DIV ED IS #662 CREDIT CO 3 000% 6/12/1	1, 5 7, 7, 6 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7	1, 5 7, 5 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7
5.250% 12/06) M	9,00
.650% 5/15/1	, 23	, 23
2.625% 1/31/1	1,57	1,57
FD INST #2011	, 05	20,
N-INST #2012	V -	777
2.250% $9/10$, 5 68 7	, 68
E & CO 6.000% 1/15/1	0	, 60
/C CORE PLUS-S #100	\mathbf{C}	, 85
LD FUND SS #3580	$^{\circ}$,42
10/17/2016 07:		

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

NET INVESTMENT INCOME	14,28	9,0	13,978.	, 34	, 90	, 54	6,31	ν, σ	77,	0	9	വ	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ر در در	97.	⊣თ	00,	86	, 19	9	, 22	2,0	9 0	\mathbf{x}	, 78	, 93	_
EVENUE AND PENSES	14,28	9,0	13,978.	, 34	90,	, 54	6,31	ω α	777	0	ō	വ	37	, 57		⊣ ത	. •	9	, 19	9	, 22	, 29	99	∞	, 78	, 93	\vdash
ΡŢ	RD EMERGING MKTS PTFL #638	I-Y #2608 00% 10/15/	FOREIGN BD FD USD H-INST #103	CO INC 4.500% 1/15/2	NTL FIN 3.875	INV R/E SEC-IS FUND 4934	AP FD-IN #4749	ING RATE INC FUND #1857	30% 3/20/ RATE #170	YCE PREMIER FUND W CLASS #566	RP 1.650% 9	P FUND INSTIT	UCHSTONE MID CAP FD Y #354	TREASURY NOTE 2.750% 2/15/1	TREASURY NOTE 3.125% 10/31/1	2500 700 %%	TREASURY NOTE 1.000% 9/30/1	TREASURY NOTE 1.625% 7/31/2	0 3.650% 9/14/1	CL-I #266	INS #31	OPE HEDGED E	W 2.230	ETW 2.150% 4/17/2	RATEGY	DVISER	ഥ

M SECURITIES	
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INTEREST	
AND	
DIVIDENDS	
H	II II
PART	
990PF,	
FORM	11 11

	NET	INVESTMENT	INCOME	1 1 1 1		492,768.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1	1 1 1 1 1 1 1 1 1	495,149.	
						TOTAL	
			DESCRIPTION	1 1 1 1 1 1 1 1 1 1			

58-1881092

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THE THE PROPERTY OF THE PROPER	JYOFF, =======

NET INVESTMENT INCOME	4,687.
REVENUE AND EXPENSES PER BOOKS	4,687. 4,687.
	TOTALS
	M NORTHERN TRUST
DESCRIPTION	OTHER INCOME FROM

ACCOUNTING FEES	
1	П
н	11
• •	ii
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PART	Ш
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<u>. </u>	ii
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	"

CHARITABLE PURPOSES	2,000.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	2,000.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC

Ŋ

NET INVESTMENT INCOME	103,779. 78,000. 181,779.
REVENUE AND EXPENSES PER BOOKS	103,779. 78,000. 181,779.
DESCRIPTION	CUSTODIAN & MANAGEMENT FEES INVESTMENT MANAGEMENT FEES TOTALS

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TAXES
1
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PART
990PF,
FORM

NET INVESTMENT	INCOME		4,450. 265.		4,715	
REVENUE AND EXPENSES	PEK BOOKS	18,000.	4,450.		22,7	
	DESCRIPTION	FEDERAL ESTIMATES - PRINCIPAL	FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONOUALIFIED	t	TOTALS	

7

EXPENSES
OTHER
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PART
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		REVENUE AND EXPENSES	CHARTTARI
DESCRIPTION		PER BOOKS	PURPOSES
OFFICE RENT		20,621.	20,621.
GRANT ADMIN FEES		30,819. 4.672.	30,819.
	1		5 8 1 1 5 1 5 1 1 1
	TOTALS	56,112.	56,112.

20,621. 30,819. 4,672.

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ENDING FMV	130,352. 133,540. 137,028. 127,940. 129,936. 100,746. 132,205. 132,205. 132,205. 1,020,287.
ENDING BOOK VALUE	129,448. 129,809. 136,424. 128,965. 131,895. 96,574. 127,532. 126,108. 1,006,755.
BEGINNING BOOK VALUE	129,448. 129,563. 129,809. 136,424. 131,538. 128,965. 131,895. 96,574.
	TOTALS
DESCRIPTION	3130A1NN4 FED HOME LN BK 3130A2T97 FED HOME LN BK 3135G0ZE6 FED NATL MTG ASSN 912828KD1 US TREASURY NOTE 912828PK0 US TREASURY NOTE 912828PK0 US TREASURY NOTE 912828QB9 US TREASURY NOTE 912828TR1 US TREASURY NOTE 912828TR1 US TREASURY NOTE 912828XM7 US TREASURY NOTE

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FORM 990PF, PART II - CORPORATE STOCK			
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DESCRIPTION		BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
1417256 1151130 1151150		34, 234,	1,200,000. 834,451. 998,095.	1,590,107. 910,191. 1,426,215.
CE PORCE POR CHEST NOT PROPERTY CHEST NOT PROPERTY CHEST NOT PROPERTY		4800004, 4800000000000000000000000000000	234,536. 248,577. 1,220,000. 695,000. 525,000. 1,475,000.	239,078. 304,457. 1,199,492. 829,004. 600,551. 649,745. 1,189,313.
3872172 4925K58 2914A81 0302171 0770G84		1 8 1 1 2 2 2 1	75,0	61,85 61,85 19,02 94,06
	TOTALS	9,830,190	9,778,859.	10,743,414.

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FORM 990PF, PART II - CORPORATE BONDS

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CU PROVIDENT BENEVOLENT FOUNDATION-WACH

FORM 990PF, PART II - CORPORATE BONDS

ENDING FMV 	155, 60, 63, 217, 50, 50,	3,071,473.
ENDING BOOK VALUE	180,557. 59,937. 63,417. 218,388. 49,539. 64,991. 75,243.	3,169,185.
BEGINNING BOOK VALUE	180,557. 59,937. 63,417. 502,584.	3,827,692.
		TOTALS
DESCRIPTION	861647501 STONE HARBOR LOCAL M 884903BU8 THOMSON REUTERS CORP 92343VBP8 VERIZON COMMUNICATIO 94987W752 WF SHRT TRM HI YLD-I 172967KB6 CITIGROUP INC 747525AD5 QUALCOMM INC 91159HHL7 US BANCORP	

FORM 990PF, PART II - OTHER INVESTMENTS

•	08074101 000000101
ENDING FMV	513,659. 511,480. 88,809. 30,672. 127,749.
ENDING BOOK VALUE	552,830. 590,447. 87,398. 30,103. 124,365. 1,385,143.
BEGINNING BOOK VALUE	550,046. 579,302. 105,890. 30,103. 124,365. 1,389,706.
COST/ FMV C OR F	C C C C TOTALS
DESCRIPTION	GTC997004 GAI CORBIN MULTI STR SKY990001 SKYBRIDGE MULTI-ADVI 3137AQQD3 FED HOME LN MTG CORP 981464DG2 WORLD FINANCIAL NETW 981464DM9 WORLD FINANCIAL NETW

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FORM 990PF, PART III - O	THER INCREASES	IN NET	WORTH OR	FUND	BALANCES
DESCRIPTION		-=====		=====	AMOUNT
MUTUAL FUND TAX EFFECTIV	E DATE BEFORE :	ΓΥE			17,439.
PURCH ACCR INT POST BEFOR					1,031.
	TOTA	AL			18,470.

FORM 990PF,	PART II	II - OTHER	DECREASES	IN NET	WORTH OF	FUND BALANCES
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DESCRIPTION		AMOUNT
MUTUAL FUND TAX POSTING DATE AFTER PURCH ACCR INT EFFECTIVE AFTER TYE ACCR INT PAID CARRYOVER TAX COST ADJUSTMENT		13,900. 15. 18. 736.
	TOTAL	14,669.

GAINS AND LOSSES FROM PASS-THRU ENTITIES

NET SHORT-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

PARTNERSHIPS, TRUSTS, S CORPORATIONS

36,328.00

TOTAL NET SHORT-TERM GAIN OR LOSS (ROUNDED)

36,328.00

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CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SECOND HARVEST FOOD BANK OF METROLINA ADDRESS: 500B SPRATT STREET CHARLOTTE, NC 28206 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: BEDS FOR KIDS ADDRESS: 1800 CAMDEN ROAD SUITE 107-17 CHARLOTTE, NC 28203 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: CHARLOTTE LAB SCHOOL ADDRESS: 301 E 9TH STREET CHARLOTTE, NC 28202 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT

AMOUNT OF GRANT PAID

PC

16,000.

FOUNDATION STATUS OF RECIPIENT:

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CHARLOTTE RESCUE MISSION ADDRESS: PO BOX 33000 CHARLOTTE, NC 28233 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 20,000. RECIPIENT NAME: COMMUNITY SCHOOL OF THE ARTS ADDRESS: 345 NORTH COLLEGE STREET CHARLOTTE, NC 28202 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 4,680. RECIPIENT NAME: CATAWBA RIVERKEEPER FOUNDATION ADDRESS: 421 MINUET LANE SUITE 205 CHARLOTTE, NC 28217 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

PC

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______________________________ RECIPIENT NAME: BETHLEHIEM CENTER OF CHARLOTTE ADDRESS: 2702 NORFOLK AVENUE CHARLOTTE, NC 28203 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 7,500. AMOUNT OF GRANT PAID RECIPIENT NAME: HABITAT FOR HUMANITY OF CLT ADDRESS: 3815 LATROBE DRIVE CHARLOTTE, NC 28211 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: HOPE CHEST FOR WOMEN ADDRESS: PO BOX 5294 ASHEVILLE, NC 28813 **RELATIONSHIP:** NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

GENERAL SUPPORT

FOUNDATION STATUS OF RECIPIENT:

5,000.

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: LUTHERAN HOME - WINSTON SALEM ADDRESS: 849 WATERWORKS ROAD WINSTON SALEM, NC 27101 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID RECIPIENT NAME: THOMPSON CHILD & FAMILY FOCUS ADDRESS: 6800 SAINT PETERS LANE MATTHEWS, NC 28105 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: TURNING POINT ADDRESS: PO BOX 952

STATEMENT 20

MONROE, NC 28111

FOUNDATION STATUS OF RECIPIENT:

PURPOSE OF GRANT: GENERAL SUPPORT

RELATIONSHIP:

NONE

PC

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: UMAR - WESTERN NC ADDRESS: PO BOX 1558 HUNTERSVILLE, NC 28070 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: VERNER ADDRESS: 2586 RICEVILLE ROAD ASHEVILLE, NC 28805 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: GOOD SAMARITAN CLINIC OF JACKSON COUNTY ADDRESS: 293 HOSPITAL RD SUITE B SYLVA, NC 28779 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

5,000.

58-1881092 CU PROVIDENT BENEVOLENT FOUNDATION-WACH FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: MATTHEWS HELP CENTER ADDRESS: PO BOX 91 MATTHEWS, NC 28106 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 5,000. AMOUNT OF GRANT PAID RECIPIENT NAME: CLASSROOM CENTRAL INC ADDRESS: 2116 WILKINSON BLVD CHARLOTTE, NC 28208 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 15,000. AMOUNT OF GRANT PAID RECIPIENT NAME: COMMUNITY SERVICES OF SWAIN INC ADDRESS: PO BOX 812 BRYSON CITY, NC 28713 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 20,000. AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: PAT'S PLACE CHILD ADVOCACY CENTER INC ADDRESS: 1819 EAST BLVD CHARLOTTE, NC 28203 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 20,000. RECIPIENT NAME: SHELTER HEALTH SERVICES ADDRESS: 534 SPRATT STREET CHARLOTTE, NC 28206 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 10,000. AMOUNT OF GRANT PAID RECIPIENT NAME: LIFE CHALLENGE OF WESTERN NC INC ADDRESS: P O BOX 2553 CULLOWHEE, NC 28723 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

58-1881092 CU PROVIDENT BENEVOLENT FOUNDATION-WACH FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: AUTISM SOCIETY OF NC INC ADDRESS: 505 OBERLIN ROAD STE 230 RALEIGH, NC 27605 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: CRISIS CONTROL MINISTRY INC ADDRESS: 200 EAST TENTH STREET WINSTON SALEM, NC 27101 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 15,000. AMOUNT OF GRANT PAID RECIPIENT NAME: CROSSROADS CORP. FOR AFFORDABLE HOUSING ADDRESS: 3242 COMMONWEALTH AVE CHARLOTTE, NC 28205 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 30,000. CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: BABY BUNDLES ADDRESS: PO BOX 12303 CHARLOTTE, NC 28220 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC RECIPIENT NAME: CAROLINAS CARE PARTNERSHIP ADDRESS: 7510 E INDEPENDENCE BLVD CHARLOTTE, NC 28227 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 13,000. RECIPIENT NAME: CHARLOTTE BILINGUAL PRESCHOOL INC ADDRESS: 4019 CENTRAL AVE CHARLOTTE, NC 28205 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

58-1881092 CU PROVIDENT BENEVOLENT FOUNDATION-WACH FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: STOKES COUNTY ARTS COUNCIL ADDRESS: P O BOX 66 DANBURY, NC 27016 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: GIVENS ESTATES INC ADDRESS: 2360 SWEETEN CREEK RD ASHEVILLE, NC 28803 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 15,000. AMOUNT OF GRANT PAID RECIPIENT NAME: AMERICAN NATIONAL RED CROSS CAROLINA PIEDMONT REGION ADDRESS: 2425 PARK ROAD CHARLOTTE, NC 28203 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: R BRUCE IRONS CAMP FUND ADDRESS: 725 PROVIDENCE RD STE 326 CHARLOTTE, NC 28207 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 20,000. AMOUNT OF GRANT PAID RECIPIENT NAME: SAFE ALLIANCE - FKA UNITED FAMILY SERVICES ADDRESS: 601 E 5TH ST SUITE 400 CHARLOTTE, NC 28202 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 20,000. RECIPIENT NAME: METROLINA ASSN FOR THE BLIND ADDRESS: 704 LOUISE AVENUE CHARLOTTE, NC 28204 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

58-1881092 CU PROVIDENT BENEVOLENT FOUNDATION-WACH FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: YWCA CENTRAL CAROLINAS ADDRESS: 3420 PARK ROAD CHARLOTTE, NC 28209 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: UNITED WAY OF ASHEVILLE AND BUNCOMBE COUNTY ADDRESS: 50 SOUTH FRENCH BROAD AVE ASHEVILLE, NC 28801 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 14,500. AMOUNT OF GRANT PAID RECIPIENT NAME: FLORENCE CRITTENTON SERVICES, INC ADDRESS: P O BOX 36392 CHARLOTTE, NC 28236 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: MINT MUSEUM OF ART INC ADDRESS: 500 S TRYON ST CHARLOTTE, NC 28202 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: JUNIOR ACHIEVEMENT OF CENTRAL CAROLINAS ADDRESS: 201 SOUTH TRYON ST CHARLOTTE, NC 28202 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: RECIPIENT NAME: MENTAL HEALTH ASSOC OF CENTRAL CAROLINAS ADDRESS: 3701 LATROBE DRIVE CHARLOTTE, NC 28211 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CHARLOTTE SPEECH AND HEARING CENTER ADDRESS: 210 EAST WOODLAWN RD CHARLOTTE, NC 28217 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: LIFESPAN INC ADDRESS: 200 CLANTON ROAD CHARLOTTE, NC 28217 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: SPECIAL OLYMPICS NORTH CAROLINA, INC ADDRESS: 2200 GATEWAY CENTRE BLVD MORRISVILLE, NC 27560 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CABARRUS MEALS ON WHEELS ADDRESS: 1701 SOUTH MAIN ST KANNAPOLIS, NC 28081 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 17,000. RECIPIENT NAME: PISGAH LEGAL SERVICES ADDRESS: PO BOX 2276 ASHEVILLE, NC 28802 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: FRIENDSHIP TRAYS INC ADDRESS: 2401A DISTRIBUTION STREET CHARLOTTE, NC 28203 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 20,000. CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: KINDERMOURN ADDRESS: 1320 HARDING PLACE CHARLOTTE, NC 28204 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: LUTHERAN FAMILY SERVICES IN THE CAROLINAS ADDRESS: P O BOX 947 SALISBURY, NC 28145 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 7,500. RECIPIENT NAME: COUNCIL FOR CHILDRENS RIGHTS INC ADDRESS: 601 E 5TH ST STE 200 CHARLOTTE, NC 28202 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: ASHEVILLE AREA HABITAT FOR HUMANITY ADDRESS: 33 MEADOW ROAD ASHEVILLE, NC 28803 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: CRISIS ASSISTANCE MINISTRY ADDRESS: 500 A SPRATT STREET CHARLOTTE, NC 28206 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: MENS SHELTER OF CHARLOTTE INC ADDRESS: 1210 N TRYON ST CHARLOTTE, NC 28206 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: HOSPITALITY HOUSE OF CHARLOTTE ADDRESS: 1400 SCOTT AVENUE CHARLOTTE, NC 28203 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 15,000. AMOUNT OF GRANT PAID RECIPIENT NAME: ROWAN HELPING MINISTRIES ADDRESS: 226 N LONG STREET SALISBURY, NC 28144 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: HOMEWARD BOUND OF W NC INC ADDRESS: 218 PATTON AVENUE ASHEVILLE, NC 28801 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: EAST STOKES OUTREACH MINISTRY ADDRESS: 301 W THIRD STREET CHARLOTTE, NC 28236 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: THE LEARNING COLLABORATIVE ADDRESS: 3045 NORTH DAVIDSON ST CHARLOTTE, NC 28205 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 57,250. RECIPIENT NAME: CATHERINES HOUSE ADDRESS: PO BOX 1633 BELMONT, NC 28012 RELATIONSHIP: NC PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID

58-1881092 CU PROVIDENT BENEVOLENT FOUNDATION-WACH FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: HOUSE OF MERCY INC ADDRESS: 701 MERCY DRIVE BELMONT, NC 28012 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 6,000. AMOUNT OF GRANT PAID RECIPIENT NAME: GROWING TOGETHER PRESCHOOL ADDRESS: 3301 BOULDER COURT RALEIGH, NC 27607 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 10,000. AMOUNT OF GRANT PAID RECIPIENT NAME: CHRIST OUR SHEPHERD MINISTRIES INC ADDRESS: 226 WEST JOHN ST MATTHEWS, NC 28105 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC 10,000.

AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CAROLINAS FREEDOM FOUNDATION ADDRESS: 2718 PHILLIPS GATE DRIVE CHARLOTTE, NC 28210 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: COMMUNITY CULINARY SCHOOL OF CHARLOTTE ADDRESS: 2401- A DISTRIBUTION ST CHARLOTTE, NC 28203 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 13,275. RECIPIENT NAME: CHILDREN & FAMILY RESOURCE CENTER OF HENDERSON CTY ADDRESS: 851 CASE ST HENDERSONVILLE, NC 28792 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 10,000. AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: FREEDOM SCHOOL PARTNERS INC ADDRESS: PO BOX 37363 CHARLOTTE, NC 28237 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: CABARRUS COOPERATIVE CHRISTIAN MINISTRY ADDRESS: 246 COUNTRY CLUB DR CONCORD, NC 28025 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: BROOKSTONE SCHOOL OF MECKLENBURG COUNTY ADDRESS: P O BOX 18809 CHARLOTTE, NC 28218 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000.

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: BIG BROTHERS AND BIG SISTERS OF CHARLOTTE ADDRESS: 3801 E INDEPENDENCE BLVD CHARLOTTE, NC 28205 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: CHARLOTTE COMM HEALTH CLINIC INC ADDRESS: 8401 MEDICAL PLAZA DR STE 300 CHARLOTTE, NC 28262 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: WS INDUSTRIES FOR THE BLIND INC ADDRESS: 7730 N POINT BLVD WINSTON SALEM, NC 27106 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: FOUNDATION FOR THE CAROLINAS ADDRESS: 220 N TRYON STREET CHARLOTTE, NC 28202 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: ASHEVILLE ART MUSEUM ADDRESS: P O BOX 1717 ASHEVILLE, NC 28802 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 7,500. RECIPIENT NAME: THE SALVATION ARMY ADDRESS: 1424 NORTHEAST EXPRESSWAY ATLANTA, GA 30329 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: HOPE HAVEN INC ADDRESS: 3815 NORTH TRYON STREET CHARLOTTE, NC 28206 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: MANNA FOOD BANK INC ADDRESS: 627 SWANNANOA RIVER RD ASHEVILLE, NC 28805 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 22,000. RECIPIENT NAME: HABITAT FOR HUMANITY OF DURHAM ADDRESS: 215 N CHURCH ST DURHAM, NC 27701 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 10,000.

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: THE CANCER SUPPORT COMMUNITY EAST TENNESSEE INC ADDRESS: 2230 SUTHERLAND AVENUE KNOXVILLE, TN 37919 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: 15,500. AMOUNT OF GRANT PAID RECIPIENT NAME: A CHILDS PLACE OF CHARLOTTE INC ADDRESS: PO BOX 33302 CHARLOTTE, NC 28233 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: LATIN AMERICAN COALITION ADDRESS: 4938 CENTRAL AVENUE CHARLOTTE, NC 28205 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000.

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CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SUPPORTIVE HOUSING COMMUNITIES INC ADDRESS: 2120 N DAVIDSON ST CHARLOTTE, NC 28205 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: CHILDRENS CENTER OF THE CUMBERLANDS ADDRESS: P O BOX 4314 ONEIDA, TN 37841 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC15,000. AMOUNT OF GRANT PAID RECIPIENT NAME: ON EAGLES WINGS MINISTRIES INC ADDRESS: PO BOX 38587 CHARLOTTE, NC 28278 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

CU PROVIDENT BENEVOLENT FOUNDATION-WACH 58-1881092 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: RECREATION EXPERIENCES MISSION & MINISTRIES ADDRESS: 53 RED OAK SCHOOL RD WEAVERVILLE, NC 28787 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: WINSTON SALEM STREET SCHOOL ADDRESS: 415 W CLEMMONSVILLE RD WINSTON SALEM, NC 27127 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: GOOD SAMARITAN MEDICAL CLINIC ADDRESS: PO BOX 537 CHESTER, SC 29706 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 6,000.

1,186,656.

TOTAL GRANTS PAID:

Tax ID Tax Due - 990PF Over Payment Prep Code	NEVOLENT FOUNDATION-WACH 58-1881092 0.00 26,591 00 501	41-0944654 0 0 0 3,536 00 485
Account Name	1 7006 2760 0002 3334 3099 1019007093 CU PROVIDENT BENEVOLENT FOUNDAT	11131400 AHS FOUNDATION
Cert Mail Num - Fed Ac	1 7006 2760 0002 3334 3099 10	2 7006 2760 0002 3334 3099