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## Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Fo	or cal	endar year 2015 or tax year beginning	10/	01 , 2015, and e	nding		09/30,2016
١	Name :	of foundation			1	A Employer identific	ation number
	CHR	ISTOPHER L. MOSELEY FOUNDATI	ON			26-0	0144456
_		er and street (or PO box number if mail is not delivered		Room/	suite	B Telephone number	(see instructions)
	152	5 WEST WT HARRIS BLVD				336	5-747-8162
_	City or	town, state or province, country, and ZIP or foreign pos-	tal code				
						C If exemption application pending, check here.	on is
	CHA	RLOTTE, NC 28262				, ,	
G	Che	ck all that apply. Initial return	Initial return	of a former public c	harity	D 1 Foreign organization	ons, check here >
		Final return	Amended ret	urn		2 Foreign organization	
		Address change	Name change	Э		85% test, check he computation	
H	Che	ck type of organization. X Section 501(	c)(3) exempt private f	oundation	,	E If private foundation s	tatua was tarminated ——
$\perp$	_ s	ection 4947(a)(1) nonexempt charitable trust	Other taxable pri	vate foundation		under section 507(b)	
ī	Fair	market value of all assets at J Accou	unting method. X Ca	ash Accrual		F If the foundation is in	a 60-month termination
	end	of year (from Part II, col. (c), line Of	her (specify)				1)(B), check here . >
	16)	►\$ 2,621,060. (Part I, c	olumn (d) must be on ca	sh basis )			
P	art	Analysis of Revenue and Expenses (The	(a) Revenue and				(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net investment income	(	c) Adjusted net income	for charitable purposes
		may not necessarily equal the amounts in column (a) (see instructions) )	books	IIICOME	1	moonie	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check X if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments.	26.	2	6.		STMT 1
	4	Dividends and interest from securities	69,324.	66,55	1.		STMT 2
	5a	Gross rents		•			
	ь	Net rental income or (loss)					
ā	1	Net gain or (loss) from sale of assets not on line 10	-21,392.				
릁	b	Gross sales price for all assets on line 6a 719,850.					
evenue	7	Capital gain net income (from Part IV, line 2) .					
ž	8	Net short-term capital gain					
	9	Income modifications					'
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold .		r			
	С	Gross profit or (loss) (attach schedule)		·			
	11	Other income (attack sehedule) VED  Total. Add lines 1 through the	1,564.				STMT 4
_	12	Total. Add lines 1 through the	49,522.	66,57	7.		
	13	Compensation of officers, directors, trustees, etc  Other employee salaries and wages 1.7  Pension plans, employee benefits					
enses	14	Other employee salaries and wages 1.1.  Pension plans, employee benefits		NO		NONE	
ē	15	Pension plans, employee benefits		NO		NONE	<del></del>
×	16a	Legal fees (attach schedule) STMT. 5.  Accounting fees (attach schedule) 6.	8,267.	NO		NONE	8,267
e	b	Accounting tees (attach schedule)	1,000.	NO		NONE	1,000
Administrative Expe	C	Other professional fees (attach scheduler. 7.	30,397.	30,39	<del>/   _</del>		
tra	17	Interest		<u>-</u> -	<del>_</del>		
nis	18	Taxes (attach schedule) (see instructions). 8.	1,075.	93	<u>u . </u>		
Έ	19	Depreciation (attach schedule) and depletion.					
	20	Occupancy		<del></del>	NE -		
and	21	Travel, conferences, and meetings		NO NO		· NONE	
	22	Printing and publications	<del></del>	NONO	NR	NONE	
ing	23	Other expenses (attach schedule)	<del></del>	<del></del>	_+_		
Operating	24	Total operating and administrative expenses.	40 720	21 22	7	MONTH	0.000
De		Add lines 13 through 23	40,739.	31,32	<del>/                                    </del>	NONE	9,267 224,437
0	1	Contributions, gifts, grants paid	224,437.	21 20	<del></del>	MONTH	
-	26	Total expenses and disbursements Add lines 24 and 25	265,176.	31,32	<del></del>	NONE	233,704
	27	Subtract line 26 from line 12	01E CE4			{	
	ι	Excess of revenue over expenses and disbursements	-215,654.	35 35	<del>_                                    </del>		·
	l	Net investment income (if negative, enter -0-)	<u></u>	35,25	<del>-  </del>		<del></del>
	L	Adjusted net income (if negative, enter -0-).		l	. 1		

JSA For Paperwork Reduction Act Notice, see instructions.
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p.	art II	Balance Sheets description column should be for end-of-year	Beginning of year	Er	nd of year
_		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
Ī	1	Cash - non-interest-bearing			
Ų		Savings and temporary cash investments	1	58,86	58,864.
- !		Accounts receivable >		7 7 7 X X X X X	
)		Less allowance for doubtful accounts	3.0 . 0 . 3.0 . 3.0	465 145 - 14 14754 17861 1865	
i			PLOWER BY		
- {	4	Pledges receivable ►	erse e la la er e l		
ļ		Less allowance for doubtful accounts			
ı		Grants receivable			
ı	6	Receivables due from officers, directors, trustees, and other	1		1
Ì		disqualified persons (attach schedule) (see instructions)	j j		i
- 1		Other notes and loans receivable (attach schedule)	K.B. T. T. B. T. V.	79 Y 7 T T T T	ed 2 2 2 2 2 2 2 2 2
- {		Less: allowance for doubtful accounts ► NONE			
S			į į		
Assets	_	Inventories for sale or use			<del></del>
SS		Prepaid expenses and deferred charges	l i	<del></del>	<del></del>
4		Investments - U S and state government obligations (attach schedule)			
- 1		Investments - corporate stock (attach schedule) . STMT .9	1,395,686.	1,329,94	1,576,884.
-		Investments - corporate bonds (attach schedule) . STMT .11.	1,178,594.	1,013,26	<u> 985,312</u> .
- {	11	Investments - land, buildings, and equipment basis	141141a		
[		Less accumulated depreciation	[		
ı	12	(attach schedule) Investments - mortgage loans			
- 1	13	Investments - other (attach schedule) STMT .12.			
- 1	14	Land, buildings, and	2 1 1 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
- {		Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
		(attach schedule)	<del>   </del>		<del></del>
		Other assets (describe >)			
		Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item I)	2,618,563.	2,402,07	74. 2,621,060.
ł	17	Accounts payable and accrued expenses			
- [	18	Grants payable			4 1 2 V . V .
တ္က		Deferred revenue,			4.34.5.5.2.4
Liabilities		•	l I		1.244.111
園		Loans from officers, directors, trustees, and other disqualified persons.			<b>一学证据的分</b> 分类
.면		Mortgages and other notes payable (attach schedule)			- 47.45.44
-	22	Other liabilities (describe )			
- 1					
$\dashv$		Total liabilities (add lines 17 through 22)		NC NC	<u>)NE</u>
ı		Foundations that follow SFAS 117, check here . ▶			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted	1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<u>e</u>		Temporarily restricted			
-		Permanently restricted			
힏					
Net Assets or Fund		<del></del>	1		
히		check here and complete lines 27 through 31.	2 (10 5(2)	2 402 05	
(N		Capital stock, trust principal, or current funds	2,618,563.	2,402,07	74.
ě		Paid-in or capital surplus, or land, bldg, and equipment fund	<del></del>		
ŝ	29	Retained earnings, accumulated income, endowment, or other funds ${\ \ .\ \ \ }$			
7	30	Total net assets or fund balances (see instructions)	2,618,563.	2,402,07	74.
اگ	31	Total liabilities and net assets/fund balances (see			
_ ]		instructions)	2,618,563.	2,402,07	74.
P		Analysis of Changes in Net Assets or Fund Bala			
		I net assets or fund balances at beginning of year - Part		must agree with	<del></del>
•		of-year figure reported on prior year's return)			1 2 610 562
_				· · · · · · · · · · · · · · · · · · ·	2,618,563.
		r amount from Part I, line 27a		<del>-</del>	2 -215,654.
		er increases not included in line 2 (itemize) MUTUAL FUND			3 2,770.
		lines 1, 2, and 3		<u>.  </u> _	4 2,405,679.
5	Deci	eases not included in line 2 (itemize)  SEE STA	TEMENT 14		5 3,605.
		I net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (t	), line 30	6 2,402,074.
_					Form 990-PF (2015)

Pa	rt IV Capital Gains	and Losses for Tax on Inve	estment income			
	• •	d describe the kind(s) of property sold ( rick warehouse; or common stock, 200	O,,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr )
1a	PUBLICLY TRADED	SECURITIES		L		
Ь						
C						
<u>d</u>			<del></del>			
е				ļ	<u> </u>	L
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a	719,850.	<u> </u>	741,242.			-21,392.
_b				<u> </u>		
C		 				
<u>d</u>						
<u>e</u>	<del></del>	<del>                                     </del>				
	Complete only for assets s	showing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) ga	
	(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	col.	(k), but not less t Losses (from co	
a						-21,392.
b						
С						
_d_						
<u>e</u>		<u> </u>	<u>L</u>			
2	Capital gain net income		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-21,392.
3	Net short-term capital ga	in or (loss) as defined in sections 1	,			
	If gain, also enter in Pa	art I, line 8, column (c) (see ins	tructions). If (loss), enter -0- in			
	Part I, line 8	<u> </u>	<u></u>	3		
Pa	rt V Qualification L	Inder Section 4940(e) for Red	uced Tax on Net Investment In	ncome		
Wa			outable amount of any year in the bi Do not complete this part.	ase perio	d?	Yes X No
1	Enter the appropriate am	ount in each column for each year	, see the instructions before making	any ent	ries.	
Cal	(a) Base period years lendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col. (b) divided by	
	2014	158,684.	2,913,809.		(5) (5) (5) (5)	0.054459
	2013	190,092.	3,052,631.			0.062272
	2012	157,506.	2,915,386.			0.054026
	2011	126,309.	2,787,980.			0.045305
	2010	99,077.	2,694,720.			0.036767
					<del></del>	
2	Total of line 1, column (c	d)		2		0.252829
3		o for the 5-year base period - divide				
	number of years the four	ndation has been in existence if les	s than 5 years	3		0.050566
4	Enter the net value of no	ncharitable-use assets for 2015 fro	om Part X, line 5	4	2	,678,548.
5	Multiply line 4 by line 3		• • • • • • • • • • • • • • • • • • • •	5		135,443.
6	Enter 1% of net invoctors	ent income (1% of Part I, line 27b)		6		353
U						
7	Add lines 5 and 6		• • • • • • • • • • • • • • • • • • • •	7	<del></del>	135,796.
8	If line 8 is equal to or g	ions from Part XII, line 4	in Part VI, line 1b, and complete	8 that part	using a 1% ta	233,704. x rate. See the
	Part VI instructions.					

here ► X and enter 1% of Part I, line 27b.  c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2  3 Add lines 1 and 2	Pari	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	3)
Date of rulenge determination letter 1.0 (0.4/2.006	1a	Exempt operating foundations described in section 4940(d)(2), check here			
here ► X and enter 1% of Part Line 27b  All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part Line 12, col. (b).  2 Tax under section 51 (domestic section 4947(s)(1) trusts and taxable foundations only. Others enter -0-)  3 3 353  3 46g lines 1 and 2  4 NON  5 Tax based on investment incomes. Subtract line 4 from line 3. If some read the collection of the standard of the collection of the collec					ال ـ
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of J Part I, line 17, col. (b).  2 Tax under section 511 (domestic section 4947(s)(1) trusts and taxable foundations only. Others enter -0-)	ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3	<u>53.</u>
Fart, Lines 12, col. (b).  2 Tox under section 511 (domestic section 4947(s)(1) trusts and taxable foundations only, Others enter -0  3 Add lines 1 and 2  3 3 3 3.53  4 Subtitle A (income) tax (domestic section 4947(s)(1) trusts and taxable foundations only Others enter -0  5 Tax based on investment incomes. Subtract lines 4 from line 3. If zero roles, enter -0  5 Tax based on investment incomes. Subtract lines 4 from line 3. If zero roles, enter -0  5 Tax based on investment incomes. Subtract lines 4 from line 3. If zero roles, enter -0  5 Tax based on investment incomes. Subtract lines 4 from line 3. If zero roles, enter -0  5 Tax based on investment incomes. Subtract lines 6 lines 5 and 8 in lines 6 lines		here 🕨 🗓 and enter 1% of Part I, line 27b			
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-1. 2 3	c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of $\mathcal I$	-		,
3 Add lines 1 and 2.  4 Subtite A (income) tax (demestic section 4947(a)(1) trusts and taxable foundations only. Others enter O-1.  5 Tax based on investment income. Subtract line 4 from line 3. If year or less, enter O-1.  5 Tax based on investment income. Subtract line 4 from line 3. If year or less, enter O-1.  5 Tax based on investment income. Subtract line 4 from line 3. If year or less, enter O-1.  5 Tax based on investment income. Subtract line 4 from line 3. If year or less, enter O-1.  5 Tax based on investment income. Subtract line 4 from line 3. If year or less, enter O-1.  6 Income of Control of the Subtract line 4 from line 3. If year or less, enter O-1.  6 Income of Control of Con		Part I, line 12, col. (b).			
Subtile A (income) law (domestic eaction 4947(a)(1) trusts and taxable foundations only Others enter -0-1	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	3	Add lines 1 and 2			
Exempt foreign organizations - tax withheld at source	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
a 2015 estimated tax payments and 2014 overpayment credited to 2015.  b Exempt foreign organizations - tax withheld at source.  c Tax paid with application for extension of time to file (Form 8866),  d Backup withholding erroneously withheld  c Total credits and payments. Add lines 5 and 10 store than file 7, enter amount owed.  7 1,072  B Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached  8 Tax due. If the total of lines 5 and 8 is more than file 7, enter amount owed.  9 Tour due file to the foundation are than file 7, enter amount owed.  9 Tour overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.  10 Tour overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.  11 Enter the amount of line 10 to be Credited to 2016 estimated tax.  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?.  15 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?.  16 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?.  18 During the tax year, did the foundation in difference or influence any national, state, or local legislation or did it participate or intervene in any political campaign?.  19 Did at spand more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?.  19 If the answer is 'Yes' to 1 a 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 and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the found	5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		3	<u>53.</u>
b Exempt foreign organizations - tax withheld at source  1 Tax paid with application for extension of time to file (Form 8866), 6c NONE  3 Rectified sources ywithheld  1 To Total credits and payments. Add lines 6a through 6d.  2 Tax due. If the total of lines 5 and 8 is more than file 7, other amount owed.  3 Tax due. If the total of lines 5 and 8 is more than file 7, other amount owed.  4 Tax due. If the total of lines 5 and 8 is more than file 7, other amount ower 20 to be Credited to 2016 estimated tax. Check here  5 Tax due. If the total of lines 5 and 8 is more than file 7, other amount owerpaid.  5 Tax due. If the total of lines 5 and 8 is more than file 7, other amount owerpaid.  5 Tax due. If the total of lines 5 and 8 is more than file 7, other amount owerpaid.  6 Tax due. If the total of lines 5 and 8 is more than file 7, other amount owerpaid.  7 Total credits and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.  7 Total credits and payments. If line 7 is more than file 7, other amount owerpaid.  8 Total Tax due. If the control of the 10 to Prodited to 2016 estimated tax line 7 is a feature of 10 to 10	6	Credits/Payments.			•
c Tax paid with application for extension of time to file (Form 8868).	а				
d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d . 7 1, 0.72 8 Enter any penalty for underpayment of estimated tax. Check here	b				:
8 Enter any penalty for underpayment of estimated tax. Check here	C	Ten pare that appropriate to the ten ten to the ten ten ten ten ten ten ten ten ten te			ŧ
8 Enter any penalty for underpayment of estimated tax. Check here	d	Backup withholding erroneously withheld			*
9 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed	7			1,0	<u>72.</u>
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.	8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
11 Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ 356, Refunded ▶ 11 363  Part VII.A Statements Regarding Activities  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition?  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  1b Did the foundation file form 1120-POL for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation ► \$ (2) On foundation flare provided to the IRS?  2 Has the foundation engaged in any activities that have not previously been reported to the IRS?  2 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 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  4 Did the foundation have unrelated business gross income of \$1,000 or more during the year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  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 the governing instrument or with which it is registered (see instructions) ▶  5 If the answer is "Yes" to line 7, has	9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
Part VII-A Statements Regarding Activities  1a Dung the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	10				
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?.  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?.  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities  c Did the foundation file Form 1120-POL for this year? .  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ [2] On foundation managers ▶ \$ [2] On foundation favore managers ₱ [2] On foundation favore managers ₱ [2] On foundation favore managers ₱ [2] On foundation fa	11	Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ 356. Refunded ▶ 11		3	<u>63.</u>
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?					
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<b> </b>	Yes	No
Instructions for the definition)?  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities  C Did the foundation file Form 1120-POL for this year?  d 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 foundation managers. ► \$  Has the foundation engaged in any activities that have not previously been reported to the IRS?  Has the foundation made any changes, not previously reported to the IRS?  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  Ab Did the foundation have unrelated business gross income of \$1,000 or more during the year?  Ab Did the foundation have unrelated business gross income of \$1,000 or more during the year?  Ab Uses there a liquidation, termination, dissolution, or substantial contraction during the year?  Ab The statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  By language in the governing instrument, or  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?  DE  DE  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  By State Instruction for the tax as 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 Pat XIV)? If "Yes," complete Pa			1a		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities  C Did the foundation file Form 1120-POL for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation ▶ \$	Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
published or distributed by the foundation in connection with the activities  c Did the foundation file Form 1120-POL for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ (2) On foundation managers ► \$  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$  2 Has the foundation engaged in any activities that have not previously been reported to the IRS?  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  4 Did the foundation have unrelated business gross income of \$1,000 or more during the year?  4 B  b If "Yes," has it filed a tax return on Form 990-T for this year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  ■ By language in the governing instrument, or  ■ 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?  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  Ba Enter the states to which the foundation reports or with which it is registered (see instructions)  ■ DE  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(i)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instruc		Instructions for the definition)?	1b		<u>X</u>
c Did the foundation file Form 1120-POL for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation ▶ \$		If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	:		į
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e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$	d				
foundation managers.  \$		· · · · · · · · · · · · · · · · · · ·			
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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	2				<u> X</u>
Incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_	,			
b If "Yes," has it filed a tax return on Form 990-T for this year?	3			-	Х
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Was there a liquidation, termination, dissolution, or substantial contraction during the year?.  If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  By language in the governing instrument, or  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?  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  Enter the states to which the foundation reports or with which it is registered (see instructions) ▶  DE  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  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," complete Part XIV.  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	4a		1		
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 state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	ъ				X
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  ■ By language in the governing instrument, or  ■ 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?	5				<u></u>
<ul> <li>By language in the governing instrument, or</li> <li>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?</li></ul>					
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?	В	·			-
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4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		<del>  </del>		
complete Part XIV	-				
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			ا و ا		Х
	10				
	10	· · · · · · · · · · · · · · · · · · ·	10		Х

Form	990-PF (20	26-0144456		P	age 5
Par	t 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	Y	'es	No
		Disaction 312(0)(10) in 100, dittori denotatio (600 metrosiono).	11		<u>X</u>
12		foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
		ad advisory privileges in 100, attack determine too metrosterior, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	12	7,7	<u> X</u>
13	Did the	Touridation comply with the public inspection requirements for its attractive size enemption approximation	13	X	
		address > N/A	11.60		
14		ss are in care of ► Wells Fargo Bank NA Telephone no ► (336) 747-8			
		at ▶ 1 W 4TH ST 6TH FLOOR, WINSTON SALEM, NC ZIP+4 ▶ 27101-38			1
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. •	
		r the amount of tax-exempt interest received or accrued during the year	TY	es	No
16		time during calendar year 2015, did the foundation have an interest in or a signature or other authority ank, securities, or other financial account in a foreign country?	16		Х
		ink, securities, or other infancial account in a loreign country?	12		<b>T</b>
		gn country			
Par	t VII-B			المسمم	
Tui		m 4720 if any item is checked in the "Yes" column, unless an exception applies.	Y Lea	/es	No
1a		he year did the foundation (either directly or indirectly)	<b>47.</b> 1		
		age in the sale or exchange, or leasing of property with a disqualified person? Yes X No	Alleria de la companya della companya de la companya de la companya della company		
		ow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		ualified person?		E	
	(3) Furi	ish goods, services, or facilities to (or accept, them from) a disqualified person?			2
		compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 🗓 No	2		4
		isfer any income or assets to a disqualified person (or make any of either available for		i F	
	the	benefit or use of a disqualified person)?			
	( <b>6</b> ) Agr	ee to pay money or property to a government official? (Exception. Check "No" if the			
	fou	idation agreed to make a grant to or to employ the official for a period after			
		ination of government service, if terminating within 90 days.)			1
b		inswer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations		7.7	
		55.454 (d)-5 of in a current notice regarding diseases assistance (see motification)	1b		
		ations relying on a current notice regarding disaster assistance check here		1 64	
C		foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	4		v
		t confected before the mat day of the tax year beginning in 2010 11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	1c	3	X
2		on failure to distribute income (section 4942) (does not apply for years the foundation was a private			i
	•	g foundation defined in section 4942(j)(3) or 4942(j)(5)):		į	
а		end of tax year 2015, did the foundation have any undistributed income (lines 6d and  XIII) for tax year(s) beginning before 2015?			
		Xiii) to tax you to seguring some several seve			
_		list the years			
L.		to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	-		2b		Х
c	•	provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
•		,			
3я		foundation hold more than a 2% direct or indirect interest in any business enterprise			
		me during the year?			
b		" did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			
		fied persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
		sioner 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			
	founda	ion had excess business holdings in 2015.)	3Ь		<u> </u>
		todification invest during the year any amount in a manner that week jeep and	4a		X
t		foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charital	10 20 200 100 100 100 100 100 100 100 10	4b   n 990		X

orm 9	990-PF (2015)		26-01	44456		Page 6
	t VII-B Statements Regarding Activities f	or Which Form 4				- Tuge U
5a	During the year did the foundation pay or incur any amo	unt to				
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes X No	,	
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry or	n,		
	directly or indirectly, any voter registration drive?			. Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes	·	. Yes X No	<b>,</b>	
	(4) Provide a grant to an organization other than a	charitable, etc., org	janization described i	n —		
	section 4945(d)(4)(A)? (see instructions)			, Yes X No	>	
	(5) Provide for any purpose other than religious, cl	aritable, scientific,	literary, or educationa			
_	purposes, or for the prevention of cruelty to children			. — —		
b	If any answer is "Yes" to 5a(1)-(5), did any of the		• •		, ,	
	Regulations section 53.4945 or in a current notice regar				·  <u>5b</u>	
	Organizations relying on a current notice regarding disas				$\Box$	
C	If the answer is "Yes" to question 5a(4), does the		•			
	because it maintained expenditure responsibility for the	=		Yes No	'	1
6a	If "Yes," attach the statement required by Regulations sec Did the foundation, during the year, receive any fur		anthe to now meanweet			
Va	on a personal benefit contract?			Yes X No	.	
ь	Did the foundation, during the year, pay premiums, direct				.   <sub>6ь</sub>	X
_	If "Yes" to 6b, file Form 8870	ay or manoony, on a	personal benefit contre		.   05	
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X No	,	,
Ь	If "Yes," did the foundation receive any proceeds or have					
Part	Information About Officers, Directo	rs, Trustees, Fou	ndation Manager	s, Highly Paid Em	ployees,	
1	and Contractors  List all officers, directors, trustees, foundation ma	nagers and their				<del></del>
1	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week	(c) Compensation (see	instructions). (d) Contributions to employee benefit plans	(e) Expens	e account,
	List all officers, directors, trustees, foundation ma	(b) Title, and average	compensation (see	instructions),	(e) Expens	e account, owances
ILLI	List all officers, directors, trustees, foundation ma (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (see	instructions). (d) Contributions to employee benefit plans	(e) Expens	se account, owances
ILLI W 4	List all officers, directors, trustees, foundation ma (a) Name and address  AM J MARTIN, ESQ.	(b) Title, and average hours per week devoted to position	compensation (see (c) Compensation (If not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation	(e) Expens	owances
ILLI W 4 RS M	List all officers, directors, trustees, foundation ma (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101	(b) Title, and average hours per week devoted to position SECRETARY-TREASU	compensation (see (c) Compensation (If not paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation	(e) Expens	owances
ILLI W 4 RS M W 4	List all officers, directors, trustees, foundation ma (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER	(b) Title, and average hours per week devoted to position SECRETARY-TREASU	(c) Compensation (from the paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation	(e) Expens	-0-
ILLI W 4 RS M W 4 R.OW	List all officers, directors, trustees, foundation material (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARRINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101	(b) Title, and average hours per week devoted to position SECRETARY-TREASU  BOARD MEMBER  BOARD MEMBER	(c) Compensation (from the paid, enter -0-)	instructions). (d) Contributions to employee benefit plans and deferred compensation	(e) Expens	-0-
ILLI W 4 RS M W 4 R.OW W 4	List all officers, directors, trustees, foundation material (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.	(b) Title, and average hours per week devoted to position SECRETARY-TREASU  BOARD MEMBER	(c) Compensation (see (f) Compensation (If not paid, enter -0-)	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-	(e) Expens	-0-
ILLI W 4 RS M W 4 R.OW W 4 AVID	List all officers, directors, trustees, foundation material (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARRINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.  TH ST D4000-062, WINSTON-SALEM, NC 27101	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER	(c) Compensation (see (f) Compensation (If not paid, enter -0-)	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  -0-	(e) Expens other all	-0- -0- -0-
ILLI W 4 RS M W 4 R.OW W 4 AVID W 4	List all officers, directors, trustees, foundation material (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER	(c) Compensation (see (f) Compensation (If not paid, enter -0-)	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  -0-	(e) Expens other all	-0- -0- -0-
ILLI W 4 RS M W 4 R.OW W 4 AVID W 4	List all officers, directors, trustees, foundation material (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARRINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.  TH ST D4000-062, WINSTON-SALEM, NC 27101  Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER	(c) Compensation (see (f) Compensation (If not paid, enter -0-)	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  -0-	(e) Expens other all	-000one, enter
ILLI W 4 RS M W 4 R.OW W 4 AVID W 4 2	List all officers, directors, trustees, foundation may  (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.  TH ST D4000-062, WINSTON-SALEM, NC 27101  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER (other than thos	compensation (see (c) Compensation (if not paid, enter -0-)  -0-  -0-  e included on line (c) Compensation	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  -10-	(e) Expens other allo ons). If no (e) Expens other allo	-00one, enter
ILLI W 4 RS M W 4 R.OW W 4 AVID W 4 2	List all officers, directors, trustees, foundation may  (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.  TH ST D4000-062, WINSTON-SALEM, NC 27101  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER (other than thos	compensation (see (c) Compensation (lf not paid, enter-0-)  -0-  -0-  e included on line	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  1 - see instruction  (d) Contributions to employee benefit plans and deferred	(e) Expens other allo ons). If no (e) Expens other allo	-000one, enter
ILLI W 4 RS M W 4 R.OW W 4 AVID W 4 2	List all officers, directors, trustees, foundation may  (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.  TH ST D4000-062, WINSTON-SALEM, NC 27101  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER (other than thos	compensation (see (c) Compensation (if not paid, enter -0-)  -0-  -0-  e included on line (c) Compensation	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  -10-	(e) Expens other allo ons). If no (e) Expens other allo	-00one, enter
ILLI W 4 RS M W 4 R.OW W 4 AVID W 4 2	List all officers, directors, trustees, foundation may  (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.  TH ST D4000-062, WINSTON-SALEM, NC 27101  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER (other than thos	compensation (see (c) Compensation (if not paid, enter -0-)  -0-  -0-  e included on line (c) Compensation	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  -10-	(e) Expens other allo ons). If no (e) Expens other allo	-00one, enter
ILLI W 4 RS M W 4 R.OW W 4 AVID W 4	List all officers, directors, trustees, foundation may  (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.  TH ST D4000-062, WINSTON-SALEM, NC 27101  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER (other than thos	compensation (see (c) Compensation (if not paid, enter -0-)  -0-  -0-  e included on line (c) Compensation	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  -10-	(e) Expens other allo ons). If no (e) Expens other allo	-00one, enter
ILLI W 4 RS M W 4 R.OW W 4 AVID W 4 2	List all officers, directors, trustees, foundation may  (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.  TH ST D4000-062, WINSTON-SALEM, NC 27101  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER (other than thos	compensation (see (c) Compensation (if not paid, enter -0-)  -0-  -0-  e included on line (c) Compensation	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  -10-	(e) Expens other allo ons). If no (e) Expens other allo	-00one, enter
ILLI W 4 RS M W 4 R.OW W 4 AVID W 4 2	List all officers, directors, trustees, foundation may  (a) Name and address  AM J MARTIN, ESQ.  TH ST D4000-062, WINSTON-SALEM, NC 27101  ARINA KAISER  TH ST D4000-062, WINSTON-SALEM, NC 27101  EN BRETT JONES  TH ST D4000-062, WINSTON-SALEM, NC 27101  K SOLACOFF, M.D.  TH ST D4000-062, WINSTON-SALEM, NC 27101  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position SECRETARY-TREASU BOARD MEMBER BOARD MEMBER BOARD MEMBER (other than thos	compensation (see (c) Compensation (if not paid, enter -0-)  -0-  -0-  e included on line (c) Compensation	instructions).  (d) Contributions to employee benefit plans and deferred compensation  -0-  -0-  -10-	(e) Expens other allo ons). If no (e) Expens other allo	-00one, enter

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

(b) Type of service	(c) Compensation
_	NONE
_	INOINE
_	
_	
<u>.</u>	NONE
tistical information such as the number of	Expenses
)	
nes 1 and 2	Amount
	,
	itistical information such as the number of

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn foundations,	-
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
a	Average monthly fair market value of securities	1a	-2,630,228.
b	Average of monthly cash balances	1b	89,110.
C	Fair market value of all other assets (see instructions),	1c	NONE
d	Total (add lines 1a, b, and c)	1d	2,719,338.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	2,719,338.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	40,790.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,678,548.
6	Minimum investment return. Enter 5% of line 5	6	133,927.
Part	XI 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	133,927.
2 a	Tax on investment income for 2015 from Part VI, line 5 2a 353.		
b			
c	Add lines 2a and 2b	2c	353.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	133,574.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	133,574.
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	133,574.
	XII Qualifying Distributions (see instructions)	,	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	_	000 504
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	233,704.
Ь	Program-related investments - total from Part IX-B	1b	<del></del>
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.		
а	Suitability test (prior IRS approval required)	3a	NONE
b	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	233,704.
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	353 <i>.</i>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	233,351.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculated for the section 4940(e) reduction of tax in those years.	lculating whether	the foundation

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Page 9

Distributable amount for 2015 from Part XI,   Gorpus   Vaars prior to 2014   2015	Pa	art XIII Undistributed Income (see insti	ructions)			age o
1 Distributable amount for 2015 from Part XI, line 7  2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only.  2 Undistributed income of a descributions carryover from 2012 NONE  5 From 2010 NONE  6 From 2011 NONE  6 From 2011 NONE  7 Total of lines 3a through e.  Collability distributions carryover and stributions of 2015 from Part XII, line 4 ≥ \$233,704.  Applied to undistributed from 6 from 2015 NONE  6 Applied to undistributed from 6 from 2015 from Part XII, line 4 ≥ \$233,704.  Applied to undistributed from 6 from 2015 from Part XII, line 4 ≥ \$233,704.  Applied to undistributed from 6 from 2015 from Part XII, line 4 ≥ \$233,704.  Applied to undistributed from 6 from 2015 from Part XII, line 4 ≥ \$233,704.  Applied to undistributed from 6 from 2015 from 20		-	(a)	(b)	(c)	(d)
2 Undestributed recome, if any, as of the and of 2015 a Entrea ranum for 2014 only.  b Total for prior varia 20 13 _ 20 20	1		Corpus	Years prior to 2014	-	
2 Undistributed income, if any, as of the end of 2015 a From 2010		line 7				133 574
b Total for prevyears 20 13 20 20  a Excess distributions carryover, if any, to 2015 a From 2010 NONE b From 2011 NONE c From 2013 NONE d From 2013 NONE d From 2013 NONE d From 2013 NONE 1 Total of lines 3a through e 1 Cualifying distributions for 2015 from Part XII, line 4 ▶ \$ 233,704  a Applied to 2014, but not more than line 2a. b Applied to 2014 subtractions of corpus (Election required -see instructions).  1 Total of subtractions of corpus (Election required -see instructions).  2 Excess first provisors of the same be Enter the net total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Phor years' undistributed income. Subtract line 6 from line 2.  c Corpus Add lines 3f, 4c, and 4e Subtract line 6 from line 2.  a Corpus Add lines 3f, 4c, and 4e Subtract line 6 from line 2.  c Corpus Add lines 3f, 4c, and the subtract line 6 from line 2.  c Corpus Add lines 3f, 4c, and the subtract line 6 from line 2.  c Corpus Add lines 3f, 4c, and the subtract line 6 from line 2.  c Corpus Add lines 3f, 4c, and the subtract line 6 from line 2.  c Corpus Add lines 3f, 4c, and the subtract line 6 from line 6 from line 1. This amount must be distributed income for 2015. Subtract line 4 line from line 1. This amount must be distributed income for 2015. Subtract line 4 line 6 from line 1. This amount must be distributed in 2016.  4 Mounts treated as distributions out of corpus to statisfy requirements imposed by section 170(b)(1)(f) or 4942(g)(3) (Election may be required -see instructions).  NONE  8 Excess from line 1. This amount must be distributed in 2016.  6 Excess from 2011 NONE  6 Excess from 2011 NONE  6 Excess from 2014 NONE  6 Excess from 2014 NONE  6 Excess from 2014 NONE	2	Undistributed income, if any, as of the end of 2015				
B Teatl for prior years (20 13 , 20 , 20	i	Enter amount for 2014 only			31.649	
3 Excess distributions carryover, if any, to 201s a From 2010 NONE b From 2011 NONE c From 2012 NONE c From 2013 NONE c From 2014 NONE c 2015, from Part XII, line 4 ▶ \$ 233, 704 NONE c 213, but not more than line 2a Applied to 2014, but not more than line 2a NONE c 213, but not more than line 2a NONE c 213, but not more than line 2a NONE c 213,	1	Total for prior years 20_13_,20,20		NONE	31/015.	
b From 2011						
c From 2012 . MONE d From 2013 . NONE e From 2014 . NONE f Total of lines 3a through e	a	From 2010 NONE				
d From 2013 . NONE 6 From 2014 . NONE 1 Total of lines 3a through e . NONE 1 Total of lines 3a through e . NONE 2 33, 704 . 3 Applied to 2014, but not more than line 2a . 31, 649.  A Applied to 2014, but not more than line 2a . 31, 649.  A Applied to 2014, but not more than line 2a . 31, 649.  A Applied to 2015 distributions control of corpus (Election required - see instructions) . NONE 2 Treated as distributions out of corpus (Election required - see instructions) . NONE 3 Applied to 2015 distributiable amount	ı	From 2011 NONE				
e From 2014	•	From 2012 NONE				
Total of lines 3a through e	•	From 2013 NONE				
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 233,704.  a Applied to 2014, but not more than line 2a	6	From 2014 NONE				
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 233,704.  a Applied to 2014, but not more than line 2a	f	Total of lines 3a through e	NONE			
In el № \$ 233,704.  a Applied to 2014, but not more than line 2a						
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.  e Remaining amount distributed out of corpus.  5 Excess distributions carryover applied to 2015. (If an amount appears in column (a), the same amount must be shown in column (a) to end the net total of each column as indicated below:  a Corpus Add Innes 3f, 4c, and 4e Subtract line 5  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 .  d Undistributed income for 2014, Subtract lines 4d and 5 from line 1. This amount must be distributed in cone for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in cone 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 salisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) .  NONE  8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) .  NONE  9 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions) .  NONE  9 Excess distributions carryover to 2016. Subtract lines 4 and 5 from line 6a	a				31.649.	
c Treated as distributions out of corpus (Election required - see instructions)  A Applied to 2015 distributable amount	t	Applied to undistributed income of prior years				
required -see instructions). NONB  d Applied to 2015 distributions carryover applied to 2015.  Excess distributions carryover applied to 2015.  Excess distributions carryover applied to 2015.  Enter the net total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b  Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 494(2) at xh has been previously assessed  d Subtract line 6c from line 6b. Taxable amount -see instructions.  d 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.  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).  Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).  NONE  Excess distributions carryover to 2016.  Subtract lines 7 and 8 from line 6a  Analysis of line 9.  Excess from 2011  NONE  NONE  133,574.  68,481.  133,574.  68,481.  NONE  1000  68,481.  NONE  1000  1				NONE		
d Applied to 2015 distributable amount.  e Remaining amount distributed out of corpus.  Excess distribitions carryover applied to 2015.  If an amount appears in column (a), the same amount must be shown in column (a).  Enter the net total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5  b Prior years' undistributed income. Subtract line 4 from line 2b.  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.  d Undistributed income for 2014. Subtract line 4 a 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.  Amounts treated as distributions out of corpus to salisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).  Amounts treated as distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).  NONE  Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).  NONE  Excess distributions carryover to 2016.  Subtract lines 7 and 8 from line 6a.  O Analysis of line 9.  a Excess from 2011.  NONE  Excess from 2011.  NONE  133, 574.  NONE  NONE  NONE	C	Treated as distributions out of corpus (Election		İ		
e Remaining amount distributed out of corpus.  5 Excess distributions carryover applied to 2015. (If an amount appears in column (a), the same amount must be shown in column (a) as indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b			NONE			
5 Excess distributions carryover applied to 2015. Iff an amount appears in column (d), the same amount must be shown in column (d).  6 Enter the net total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4 from line 2b						133,574.
(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  b Prior years' undistributed income. Subtract line 4b from line 2b						
a Enter the net total of each column as indicated below:  a Corpus Add Ines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b	5	If an amount appears in column (d) the same	NONE			NONE NONE
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b		amount must be shown in column (a) )			•	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b	6		İ			
b Prior years' undistributed income. Subtract line 4b from line 2b			60.401			
line 4b from line 2b	а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	68,481.			
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	b			77077		
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	С	Enter the amount of prior years' undistributed		NONE		
tax has been previously assessed		income for which a notice of deficiency has				1
d Subtract line 6c from line 6b. Taxable amount-see instructions		been issued, or on which the section 4942(a)		NONE		
amount - see instructions				NONE		<del></del>
e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instructions	а			NONE		
4a from line 2a. Taxable amount - see instructions	е	Undistributed income for 2014. Subtract line		NONE		
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016		4a from line 2a. Taxable amount - see				
4d and 5 from line 1. This amount must be distributed in 2016			-			
distributed in 2016	f	Undistributed income for 2015. Subtract lines				
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)		distributed in 2016				MONT
to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	7					NONE
170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)						
required - see instructions)						
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)			NONE			
applied on line 5 or line 7 (see instructions)	8					
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a			NONE			
Subtract lines 7 and 8 from line 6a						
0 Analysis of line 9. a Excess from 2011			68,481.			
b Excess from 2012 NONE c Excess from 2013 NONE d Excess from 2014 NONE	0	Analysis of line 9.				
<b>c</b> Excess from 2013						
d Excess from 2014 NONE						
e Excess from 2015 68,481.						
	е	Excess from 2015 68,481.				

Form 990-PF (2015)

Pa	rt XIV Private Ope	erating Foundations	s (see instructions ar	nd Part VII-A, questic	on 9)		NOT	APPLICABL:
	If the foundation has							
	foundation, and the ruling	ıs effective for 2015, en	ter the date of the ruling		▶			
h	Check box to indicate					4942(j)	(3) or	4942(j)(5)
_		Tax year		Prior 3 years		10 15 17	1-7 1	1
2a	Enter the lesser of the ad-		(b) 2014		(4) 20	12		(e) Total
	justed net income from Part for the minimum investment	(a) 2015	(b) 2014	(c) 2013	(d) 20	12		
	return from Part X for each							
	year listed							
b	85% of line 2a							
c	Qualifying distributions from Part							
Ī	XII, line 4 for each year listed				1	ľ		
d	Amounts included in line 2c not							
	used directly for active conduct							
	of exempt activities				<del></del>			
e	Qualifying distributions made directly for active conduct of							
	exempt activities Subtract line	1			Į.	l		
•	2d from line 2c	<del></del>						
3	Complete 3a, b, or c for the alternative test relied upon							
а	"Assets" alternative test - enter							
	(1) Value of all assets							
	(2) Value of assets qualifying							
	under section 4942(j)(3)(B)(i)		<u>'</u>		]			
b	"Endowment" alternative test-			<u>-</u>				<del></del>
	enter 2/3 of minimum invest-							
	ment return shown in Part X,							
_	line 6 for each year listed			<del></del>	-			<del></del>
С	"Support" alternative test - enter				į.		l	
	(1) Total support other than gross investment income	i						
	(interest, dividends, rents,							
	payments on securities loans (section 512(a)(5)),							
	or royalties)							
	(2) Support from general public and 5 or more							
	exempt organizations as			,				
	provided in section 4942 (j)(3)(B)(iii)							
	(3) Largest amount of sup-	· <del>-</del>			_			<del></del>
	port from an exempt organization							
	(4) Gross investment income							-
Pa	rt XV Supplemen	tary Information (	Complete this part	only if the foundat	tion had \$5	5.000 or	more	in assets at
		uring the year - see		,,,,,		,,,,,,,		
1	Information Regarding	<u>-</u>						
	List any managers of	•		e than 2% of the tota	el contributio	ns receiv	ed by t	he foundation
	before the close of any						ou by t	no toditadion
			•					
	N/A List any managers of	the foundation who	outp. 100/ or more of	taba akadi af a asan			. 1	
D	ownership of a partner					in equaliy	large	portion of the
	Ownership of a partiler	sinp of other entity/ of	willon the loundation	nas a 10% or greater	merest.			
	N/A Information Regarding		··					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:				
	Check here ► X If t	he foundation only	makes contributions	to preselected chara	table organi	zations a	nd doe	s not accept
	unsolicited requests for	or funds. If the found	atıon makes gifts, gra	ints, etc. (see instruct	tions) to ind	ivıduals o	r organ	izations under
	other conditions, comp	olete items 2a, b, c, an	d d.					
a	The name, address, an	d telephone number o	r e-mail address of the	person to whom app	lications sho	uld be add	ressed	:
b	The form in which app	lications should be sul	omitted and information	on and materials they	should includ	le.		
				•				
	Any submission deadli	nes:		<del></del>				
Ü	, ary submission deduit							
<del>_</del> ,	Any restrictions of le	mitations on oursele	cuch as he seems	nhinal arass sheets	blo fields	kinda -f	inatiti it	ana ar ath : ::
đ	Any restrictions or li	iiiitations on awards	, such as by geogra	ipilicai areas, charita	ivie fielas, 1	KINUS OT	ınstituti	ons, or other

3 Grants and Contributions Paid Duri			<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
W JERSEY INSTITUTE OF TECHNOLOGY		1		
3 BROAD NEWARK NJ 07102	NONE	PC	GENERAL SUPPORT	24,437
e Children's Hosiptal of Philadelphia O PENN SQUARE EAST Philadelphia PA 19107	NONE	PC	GENERAL SUPPORT	50,000
o rama agonna anai rhiitadeiphia in 1910/	HOND	PC	GENERAL SUFFORT	50,000
USTEES OF THE UNIVERSITY OF PENNSYLVANIA				
51 WALNUT STREET Philadelphia PA 19104	NONE	PC	GENERAL SUPPORT	50,000
iversity of Maryland Medical SOUTH GREEN ST Baltimore MD 28110	NO.177	20. 7	diameter dupper	FA AA4
SOUTH GREEN ST BAILTIMOTE MD 28110	NONE	SO I	GENERAL SUPPORT	50,000
eveland Clinic				
00 EUCLID AVE NO H-18 Cleveland OH 44195	NONE	PC	GENERAL SUPPORT	50,000
	İ			
_Total	<del> </del>	<u> </u>	▶ 3a	224,43
b Approved for future payment		<del>                                     </del>	Jan Sa	241,13
,,				
			}	
			}	
			i i	

JSA 5E1491 1.000

Part XVI-A Analysis of Income-Produ	cing Activi	illes			
Enter gross amounts unless otherwise indicated.	Unrelate (a)	d business income (b)	Excluded by se	ection 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions.)
ab	<del>  -</del>		<del></del>		
	<del>  -</del>		<del></del>		
d					<del></del>
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			_		
3 Interest on savings and temporary cash investments -	<b></b>		14	26.	
4 Dividends and interest from securities	<b></b>		14	69,324.	
5 Net rental income or (loss) from real estate	<del> </del>				
a Debt-financed property	<del>  -</del>		<del></del>		<del></del>
b Not debt-financed property	<del> </del>			<del></del>	
6 Net rental income or (loss) from personal property.	<del> </del>				
7 Other investment income	<del> </del>		18	-21,392.	
<ul><li>8 Gain or (loss) from sales of assets other than inventory</li><li>9 Net income or (loss) from special events · · ·</li></ul>		<del></del>	+=+		
O Gross profit or (loss) from sales of inventory					<del></del>
11 Other revenue a					
b GRANT RECOVERY			3	1,564.	
c					
d					
e	ļ				
12 Subtotal Add columns (b), (d), and (e)	<u> </u>			49,522.	49,522
Explain below how each activit accomplishment of the foundation					
		<del></del>		· · · · · · · · · · · · · · · · · · ·	
		NOT APPLICAE	BLE	<del></del>	
<del> </del>					
		<del></del>			
		<del></del>			
		<del></del>			
AZL		<u></u>			Form 990-PF (2

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Form 990-PF (	(2015)			26-0144456		Pa	ge 13
Part XVII	Information F Exempt Orga	Regarding 1 mizations	Fransfers To and Transact	ions and Relationships With No	ıcharit	table	•
in sec				ng with any other organization described ns) or in section 527, relating to political		Yes	No
_		g foundation	to a noncharitable exempt organ	nization of:	-	4	i
							X
	ther assets	• • • • • •		• • • • • • • • • • • • • • • • • • • •	. 1a(2)		·X
		ncharitable exe	empt organization		16(1)		х
(2) Pu	irchases of assets fro	m a noncharit	able exempt organization		1b(2)		Х
(3) Re	ental of facilities, equi	pment, or oth	er assets		15(3)		Х
				• • • • • • • • • • • • • • • • • • • •			X
(6) Pe	erformance of service:	s or members!	hip or fundraising solicitations		1b(8)		X
c Sharin	ng of facilities, equipm	nent, mailing (	ists, other assets, or paid emplo-	yees	10		Х
d If the	answer to any of th	ne above is "	Yes," complete the following s	chedule. Column (b) should always show	w the f	air m	arket
value value	of the goods, other	assets, or ser r sharing arra	vices given by the reporting for	undation. If the foundation received less he value of the goods, other assets, or	than f	air m	arket
(a) Lina no.	(b) Amount Involved		f noncheritable exempt organization	(d) Description of transfers, transactions, and shu			
	<del></del>						
			<del></del>				
	• • • • • • • • • • • • • • • • • • • •				····-		
-							
		i —					
			·				
				e or more tax-exempt organizations			3
	ped in section 501(c) "complete the follow			in section 527?	] Yes	8 [_X	No
D II 168,	(a) Name of organization		(b) Type of organization	(o) Description of relation	ship		
	<del></del>						
			nined this return, including accompanying so texpeyer) is based on all information of which p	hedules and statements, and to the best of my knowleds	e and bei	llof, it i	s true,
Sign 📐	112. 86	<b>4</b> •		May the IR	discuss	this r	aturn
Here -	nature of officer or trustee	1=	Date   201	Secretary/Treas with the pr			~ I
	LLIAM J. MART	IN, ESO.	<b>/</b>	Title (see instruction	" [A]	163	N∘
Paid	Print/Type preparer's nan		Preparer's sprature	Date Check If	TIN		
raid Preparer	TAMMY RENAUD		1 VOX M		P0104		<u>8</u>
Use Only		LLS FARGO			<u> 30807</u>	71	
Cae Only		25 W W.T. ARLOTTE,	HARRIS BLVD. D1114-0 NC 282	<b>b</b>	91-89	16	
					m 990-		2016)

INTEREST ON TEMPORARY CASH INVESTMENTS	
CASH	
TEMPORARY	
NO	
INTEREST	
1	
PART I	
ORM 990PF,	
FORM	

NET INVESTMENT INCOME	1 1 1 1 1	26.	26.	
REVENUE AND EXPENSES PER BOOKS		26.	26.	H H H H H H H H
			TOTAL	
DESCRIPTION	1 1 4 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SECURED MARKET DEPOSIT ACCOUNT		

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

REVENUE NET AND INVESTMENT PER BOOKS INCOME	74. 2,60 85. 2,48 40. 1,64 94. 2,08 30. 1,43	u $ u$ $ u$ $ u$ $ u$ $ u$ $ u$ $ u$	, 252. , 076. 913. 869.	,517. ,534. ,367. ,532. ,387. ,273. ,273. ,513. ,513. ,513. ,513. ,513. ,513.	746. 773. 662. 77. 77. 77. 77. 77. 77. 77.
DESCRIPTION	ABERDEEN GLOBAL HIGH INCOME FD #5497 DODGE & COX INT'L STOCK FD #1048 DODGE & COX STOCK FUND #145 EATON VANCE FLOATING RATE FD-I #924 FEDERATED STRAT VAL DIV FD IS #662	ING MARKETS ETF D-CAP ETF 00 ETF TR PTFL #63	S SAYLES BOND FD INSTL #11 N STANLEY INS INTN RE I #8 N LIMITED TERM MUNI BD R 1 LOW DURATION FD I #36	L RETN FD II INST #153  DURATION II-INSTL 107  IGN BD FD USD H-INST #103  RETURN FUND-INST #122  G MKTS BD-INST #137  ODITY REAL RET STRAT-I#45  PREFERRED SEC-INS #4929	VAL EV-1 # -I #5855 JST NATIONAL R NA #604 - ADV #604 FD-ADV #61 S AG LDN BR

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SECURITIES
FROM
INTEREST
AND
DIVIDENDS
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PART :
990PF,
FORM

	NET	INVESTMENT	INCOME	1 1 1 1 1	2,283.	345.	3,307.	2,307.	. 624.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	66,551.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1	2,534.	345.	3,307.	2,307.	624.	1 1 1 1 1 1 1 1 1 1 1	69,324.	
											TOTAL	
			DESCRIPTION		VANGUARD REIT VIPER	WELLS FARGO SP S/C VA-IS #4143	WELLS FARGO DIS US CR-IS #4102	WF SHRT TRM HI YLD-INS #3170	WF ULTR SHORT-TRMINCOME-I#3104			

FORM 990PF, PART I - OTHER INCOME 

> REVENUE AND

DESCRIPTION -----

**EXPENSES** PER BOOKS -----

TOTALS

1,564.

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FEES	11 11 11 11
LEGAL	11 11 11 11 11 11 11 11 11 11 11 11 11
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PART	11 11 11 11
990PF,	
FORM 9	1) 11 11 11 11

CHARITABLE PURPOSES	7,312. 955. 8,267.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	7,312. 955
DESCRIPTION	LEGAL FEES - INCOME (ALLOCABLE NON-ALLOCABLE LEGAL FEES TOTALS

ACCOONTING FEED	11 11 11 11 11 11 11 11 11	
1	 	
<b>-</b>	    	
PAKI		
FORM YYOFF,		

CHARITABLE PURPOSES	! ! ! ! !	1,000.	1,000.	
ADJUSTED NET INCOME	1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NONE	
NET INVESTMENT INCOME	1 1 1 1		NONE	
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1 1	1,000.	1,000.	
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	TAX PREPARATION FEE (NON-ALLOC	TOTALS	

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- OTHER PROFESSIONAL FEES

FORM 990PF, PART I

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STATEMENT

27,910. 2,487. PER BOOKS EXPENSES REVENUE AND CUSTODIAN & MANAGEMENT FEES (A INVESTMENT MGMT FEES-SUBJECT T TOTALS DESCRIPTION

27,910. 2,487.

INVESTMENT INCOME 30,397.

30,397. 

26-0144456

FORM 990PF, PART I - TAXES

NET INVESTMENT INCOME	782. 148.
REVENUE AND EXPENSES PER BOOKS	145. 782. 148. 
DESCRIPTION	FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED

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STOCK
CORPORATE
ı
II
PART
990PF,
FORM

ESCRIPTION 4315J837 AR	
4315J837 AR	
2000 2001	ARTIO INTERNATIONAL CENTURY SMALL CAP SE DODGE & COX INT'L ST EII INTERNATIONAL PR FEDERATED STRAT VAL FIRST EAGLE OVERSEAS GOLDMAN SACHS GRTH O ISHARES MSCI EMERGIN ISHARES MSCI EAFE ET ISHARES RUSSELL 2000 ISHARES RUSSELL MID- ISHARES RUSSELL MID- ISHARES RUSSELL MID- ISHARES RUSSELL MID- ISHARES RUSSELL PROFI  OPPORGAN INTREPID VA LAZARD EMERGING MKTS NEUBERGER BERMAN REA OPPENHEIMER COM STR RIDGEWORTH CEREDX M/ T ROWE PRICE BLUE CH SPDR & P 500 ETF T WELLS FARGO SP S/C V WELLS FARGO ADV DS U TEMPLETON FOREIGN FD
56219106 DO 1744J317 MO 8463X863 SP 70297801 ML	GE & COX STOCK F GAN STANLEY INS R DJ WILSHIRE IN ELEMENTS ROGERS RACS ALERIAN MLP

ENDING FMV	22,960	21,784	22,470 221,738 87,160 86,947	50,064	53,272 181,475 129,780 34,246	76,485 105,068 80,962 49,186 20,855
ENDING BOOK VALUE	25,000.	. 20, 000.	24,442. 209,458. 44,323. 55,158.	66,062.	42,538. 87,873. 70,309. 25,000.	71,222. 107,565. 79,715. 50,000. 22,303.

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MOSELEY F
ij
CHRISTOPHER

26-0144456

FORM 990PF, PART II - CORPORATE STOCK

ENDING FMV	49,916. 79,280. 47,707. 52,446. 49,204. 17,798. 36,081. 1,576,884.
ENDING BOOK VALUE	51,000. 85,337. 42,219. 50,000. 50,000. 15,420. 35,000.
	TOTALS
DESCRIPTION	06738C778 BARCLAYS BANK PLC IP 416645687 HARTFORD MIDCAP FUND 81369Y506 AMEX ENERGY SELECT S 90267B682 ETRACS ALERIAN MLP U 922908553 VANGUARD REIT VIPER 00770G847 JOHCM INTERNATIONAL 19765Y688 COLUMB SEL LGE CAP G 22544R305 CREDIT SUISSE COMM R 722005667 PIMCO COMMODITY REAL

FORM 990PF, PART II - CORPORATE BONDS

ENDING FMV	24,328. 50,570. 49,329. 125,151. 94,713. 243,807. 56,060. 82,376. 35,899. 51,772. 70,970. 40,162. 19,990. 40,185.
ENDING BOOK VALUE	24,230. 61,126. 49,849. 125,000. 95,000. 244,258. 82,075. 43,286. 60,859. 72,285. 40,000. 1,013,266.
	TOTALS
DESCRIPTION	94975P843 WELLS FARGO ADV S/T 949917744 WF ULTR SHORT-TRMINC 04315J860 ABERDEEN GLOBAL HIGH 277911491 EATON VANCE FLOATING 52469E807 WESTERN ASSET SHRT-T 693390551 PIMCO TOTAL RETN FD 693390791 PIMCO TOTAL RETN FD 693391104 PIMCO FOREIGN BD FD 693391104 PIMCO FOREIGN BD FD 693391559 PIMCO EMERG MKTS BD- 76628T645 RIDGEWORTH SEIX HY B 880208400 TEMPLETON GLOBAL BON 94987W752 WF SHRT TRM HI YLD-I 543495840 LOOMIS SAYLES BOND F 693390304 PIMCO LOW DURATION F 74253Q416 PRINCIPAL PREFERRED

CHRISTOPHER L. MOSELEY FOUNDATION

ω II	
, PART II - OTHER INVEST ====================================	11149 990179 990179 991109 991109 991109 99127 99129 99129 99129 99129 99129 99129 99129 99129 99129 99129 99129 99129

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COST/ FMV CORF

TOTALS

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CHRISTOPHER L. MOSELEY FOUNDATION

DESCRIPTION

76628T645 RIDGEWORTH SEIX HY B

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FORM 990PF,	PART III - OTHE	R DECREASES IN	NET WORTH OR	FUND BALANCES
=========		============	===========	==========

DESCRIPTION AMOUNT ------MUTUAL FUND TAS EFFECTIVE POST TYE 3,599. ROUNDING 6. TOTAL 3,605.