Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

2016

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

		nue Service ► Information about Form 990-PF and its s	<u>eparate Instructions i</u>	s at www	<u>.irs.gov/forr</u>	n990pf. Open	to Public Inspection
		dar year 2016 or tax year beginning	, 2016, a	nd ending	,		, 20
Name of foundation					A Employer	identification number	
Joan G & Michael R Potter Foundation Number and street (or P.O. box number if mail is not delivered to street address) Room/suite					32-0238	3957	
Number and street (or P O box number if mail is not delivered to street address) Room/suite					B Telephone	number (see instructions))
_7	5 Ce	dar Hills Circle			(919)96	7-5474	
Cı	ty or to	wn, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pending,	check here ▶
C	hape:	l Hill, NC 27514			·		
G	Check	all that apply Initial return Initial return	of a former public chari	ty	D 1. Foreig	n organizations, check her	e ▶[
		Final return Amended re	tum		2 Famia	n organizations mostins th	a 950/ toot
		Address change Name chang				n organizations meeting th here and attach computati	
н_0	heck	type of organization X Section 501(c)(3) exempt priv	ate foundation		E If private	foundation status was term	ninated under
L	Sect		taxable private foundati	оп	section 5	07(b)(1)(A), check here	▶
I F	air ma	arket value of all assets at J Accounting method	X Cash	Accrual	F If the four	ndation is in a 60-month te	rmination
ε	end of	year (from Part II, col (c), Other (specify)				tion 507(b)(1)(B), check h	
	ne 16		e on cash basis)				
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		investment come	(c) Adjusted net	for charitable purposes
	,	the amounts in column (a) (see instructions))	books	14 11		income	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	33,217	· · · · · · · · · · · · · · · · · · ·			
	2	Check ▶ ☐ If the foundation is not required to attach Sch B			2 22		
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	56		56		
	5a	Gross rents					
	b	Net rental income or (loss)					
<u>a</u>	6a	Net gain or (loss) from sale of assets not on line 10			1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1 =	j je jedinity	
Revenue	Ь	Gross sales price for all assets on line 6a					
Š	7	Capital gain net income (from Part IV, line 2)					
œ	8	Net short-term capital gain		- 2 3 4 4			
	9	Income modifications		-, -			
	10a	Gross sales less returns and allowances				3 1 1 2 2 2	
	b	Less Cost of goods sold	はは多級の				
	С	Gross profit or (loss) (attach schedule)		7.3	4		
	11	Other income (attach schedule)					, , , -
	12	Total. Add lines 1 through 11	33,273		. 56		
_	13	Compensation of officers, directors, trustees, etc					
	14	Other employee salaries and wages					
20 suse	15	Pension plans, employee benefits					
2 4 Exper	16a	Legal fees (attach schedule)	·				
∞ □	b	Accounting fees (attach schedule)		ļ			
SCANNED MAY Operating and Administrative	С	Other professional fees (attach schedule)		ļ			
Z E	17	Interest					
	18	Taxes (attach schedule) (see instructions)					
W Ē	19	Depreciation (attach schedule) and depletion					
	20	Occupancy					
50	21	Travel, conferences, and meetings	447	ļ			447
3	22	Printing and publications					
W E	23	Other expenses (attach schedule) STM103	481				481
irat	24	Total operating and administrative expenses.					
ğ	}	Add lines 13 through 23	928				928
U	25	Contributions, grfts, grants paid	2,500	12 43	<u> \$9.855</u>		2,500
	26	Total expenses and disbursements. Add lines 24 and 25 .	3,428		0		3,428
	27	Subtract line 26 from line 12	27 32 36 8 27 32 4		도 Table 변화를 강 : John Miles		
	a	Excess of revenue over expenses and disbursements .	29,845	27 2 L		Branch Branch	
	ь	Net investment income (if negative, enter -0-)	A CONTRACTOR OF THE PARTY OF TH		56	E. T. J. S.	\$ 10-12 Sept. 1-21
		Adjusted not income (if negative enter -0-)	打造器 点乳 二氯氯化剂	1 - 1 4-	じゅうどく ライ	1 .	けい スタネジン

Page 2

Pa	art-II	Balance Sheets Attached schedules and amounts in the description column	Beginning or year	Efia o	year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	,1	Cash - non-interest-bearing	8,506	22,501	22,501
	2	Savings and temporary cash investments			
	3	Accounts receivable >			
	ĺ	Less allowance for doubtful accounts			
	4	Pledges receivable ▶			
	İ	Less allowance for doubtful accounts ▶			i e sa kelibera yii
	5	Grants receivable	 		
	6	Receivables due from officers, directors, trustees, and other			
	,				
	_	disqualified persons (attach schedule) (see instructions)		20 1 24 2 2 3 3 3 3	
	7	Other notes and loans receivable (attach schedule)		在自動性的	
ıΩ		Less allowance for doubtful accounts			
Assets	8	Inventories for sale or use		<u> </u>	<u></u>
155	9	Prepaid expenses and deferred charges			
•	10a	Investments - U.S. and state government obligations (attach schedule)	<u> </u>		
	ь	Investments - corporate stock (attach schedule) STM137		18,474	18,474
	C	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis ▶		A. S. 522 A. S.	
	1	Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)	- 		
	14	Land, buildings, and equipment basis		Q 33 - 27 -	1
	• •	Less accumulated depreciation (attach schedule)	Territor 7	1-5	Tr F
	15				
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the	1		
	 _	instructions Also, see page 1, item I)	8,506	40,975	40,975
	17	Accounts payable and accrued expenses		928	
G	18	Grants payable			
Ę.	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.e</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	928	
	}	Foundations that follow SFAS 117, check here X			
S	}	and complete lines 24 through 26 and lines 30 and 31.		ļ	
2	24	Unrestricted	8,506	40,047	
<u>a</u>	25	Temporarily restricted			
Ва	26	Permanently restricted		 	
Þ		Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31.			
or Fund Balances	27	Capital stock, trust principal, or current funds		{	
	1			 	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	<u> </u>	ļ	· 自然。例如
As	29	Retained earnings, accumulated income, endowment, or other funds			
Net	30	Total net assets or fund balances (see instructions)	8,506	40,047	化多类 新生物
Z	31	Total liabilities and net assets/fund balances (see		1	
_	- I	instructions)	8,506	40,975	N 4 1 8 2 2 2
	art III				T
		net assets or fund balances at beginning of year - Part II, column (a), line	• •		
		of-year figure reported on prior year's return)			8,506
		amount from Part I, line 27a		2	29,845
3	Other	r increases not included in line 2 (itemize)	···	3	
4	Add I	ines 1, 2, and 3		4	38,351
5	Decre	eases not included in line 2 (itemze)			
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, of	column (b), line 30	6	38,351
_					

Part IV Capital Gains a					
(a) List and describe 2-story brick warel	e the kind(s) of property sold (e.g., real clouse, or common stock, 200 shs MLC	estate, Co)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
a					
<u>b</u>					
<u>c</u>			<u> </u>		
d					
e			<u>i</u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus expe	other basis nse of sale		n or (loss) f) minus (g)
a					
b				. <u>.</u>	
C					
d					
e					
Complete only for assets show	ing gain in column (h) and owned b	by the foundation on	12/31/69	(I) Gains (Co	ol (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col	s of col (i) (j), if any	col (k), but not	t less than -0-) or rom col (h))
a					
b					
С					
d					
e					
Capital gain net income or (net	canital loss) • •	also enter in Part I, lii enter -0- in Part I, lii	,	2	
Net short-term capital gain or (loss) as defined in sections 1222(5		10 7		
If gain, also enter in Part I, line			1		
		• •	7	1 - 1	
Part I, line 8	<u> </u>	• • • • • • • •		3	·
Part I, line 8	nder Section 4940(e) for R	educed Tax on		ent Income	
Part I, line 8	<u> </u>	educed Tax on		ent Income	
Part I, line 8	nder Section 4940(e) for R te foundations subject to the section	educed Tax on		ent Income	
Part I, line 8 Part V Qualification Ur for optional use by domestic priva	nder Section 4940(e) for R te foundations subject to the section	educed Tax on		ent Income	
Part I, line 8 Part V Qualification Ur or optional use by domestic private section 4940(d)(2) applies, leave was the foundation tiable for the section 4940(d).	nder Section 4940(e) for R the foundations subject to the section this part blank ection 4942 tax on the distributable	educed Tax on on 4940(a) tax on ne	t investment incon	ent Income ne)	Yes N
Part I, line 8	nder Section 4940(e) for R the foundations subject to the section this part blank ection 4942 tax on the distributable ualify under section 4940(e) Do no	educed Tax on on 4940(a) tax on ne amount of any year of complete this part	t investment incon	ent Income	Yes N
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			2389			age 4
Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	e ir	ıstru	ction	s)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		*			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					5.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check					1
	here ▶ and enter 1% of Part I, line 27b	- [3	's 1,5	
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of		12-1 - 1 2 - 1	جَ ' يَ ا	1	`~,
	Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) .	<u>.</u>				0
3	Add lines 1 and 2	<u>, </u>				1
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . 4					0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	; <u> </u>				_1
6	Credits/Payments	-	7 7	- 47		37.7
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a					`
b	Exempt foreign organizations - tax withheld at source 6b		, e,	ميد	2	
C	Tax paid with application for extension of time to file (Form 8868) 6c		 	en jarn	van Persona	£.
d	Backup withholding erroneously withheld 6d		1	٠٠٠.		
7	Total credits and payments Add lines 6a through 6d	,				
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached 8	3				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	,				1
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0				
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ 1	1				
Par	rt 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			ij°	Yes	No
	participate or intervene in any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
	Instructions for the definition)?			1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				- Ş.	7
	published or distributed by the foundation in connection with the activities.				. 3.5°	3.5
С	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		:	1 ·	٠.	
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					13.5
	on foundation managers > \$			3 . 1		2
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			2, 1	7 ,	¥.
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			. s = 1		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.			27		-
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			,	7	
	By language in the governing instrument, or				1.5	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			- 5		
	conflict with the state law remain in the governing instrument?			6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time dunng the year? If "Yes," complete Part II, col (c), and Part XV			7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1 5	50 m	1
	NORTH CAROLINA			135		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				ريقي سر	1000
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	Х	<u>L</u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			113	JE 1. V	
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			1	1	
	complete Part XIV			9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses			10	v	1

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Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
,	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	. 11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	. 12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	. 13	X	
	Website address ► N/A			
14	The books are in care of ▶ Michael R Potter Telephone no ▶ 91	9-967-5	474	
	Located at ▶ 75 Cedar Hills Circle, Chapel Hill, NC ZIP+4 ▶ 275	514-162	6	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here			> []
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	. 16	<u></u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	-	7.	-
	the foreign country		: : : <u>:</u> : '	
Pa	rt 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)	5		Ì
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?)		-
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		}	
	disqualified person? Yes X No.) [3]		1 :
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No.)	1	1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	>		1. 1.
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	}. Z÷	1	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			5
	foundation agreed to make a grant to or to employ the official for a period after	-	10	
	termination of government service, if terminating within 90 days)) [] _ [1, -3	
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-	12.
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1b	 	
	Organizations relying on a current notice regarding disaster assistance check here	\[\]	1: 2	-
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	-	1.50	3
•	were not corrected before the first day of the tax year beginning in 2016?	. <u>1c</u>		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		183	
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	(:		-
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?	_ =-	1	
	6e, Part XIII) for tax year(s) beginning before 2016?	. 3-		1
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	2		1
~	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			1 - 1
	all years listed, answer "No" and attach statement - see instructions)	2b	1.7-	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		+	
_	b	-1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?		1 :	
ь	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or			- :
_	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	- }		- "
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		1.	
	foundation had excess business holdings in 2016.)	. 3b		σ .
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	. 4a	1	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1	1.	15
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	46		x

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Par	t VII-	B Statements Regarding Activities	s for V	Vhich Form	4720	May Be F	Requir	ed (continued)	
5a	During	g the year did the foundation pay or incur any amo	ount to				_		上の 長根に
	(1) C	arry on propaganda, or otherwise attempt to influ	ence leg	jislation (sectio	n 4945(d	e)) [?]	[Yes X No	
	(2) In	ifluence the outcome of any specific public election	n (see s	ection 4955), 6	or to can	ry on,	_		
		rectly or indirectly, any voter registration drive?					[Yes X No	1、141、144。
		rovide a grant to an individual for travel, study, or	other si	milar purposes	1.24				
		rovide a grant to an organization other than a cha			一种意思				
	section 4945(d)(4)(A)? (see instructions)								
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational									
		urposes, or for the prevention of cruelty to childre					[Yes X No	
ь		answer is "Yes" to 5a(1)-(5), did any of the trans-			nder the	exceptions of	lescribe		35
		lations section 53 4945 or in a current notice rega							5b
	-	nizations relying on a current notice regarding dis	-					▶ □	
С		answer is "Yes" to question 5a(4), does the found				tax			
_		use it maintained expenditure responsibility for the					[Yes No	
		s," attach the statement required by Regulations	-	53 4945-5(d)			٠٠٠ ـ		
6a		ne foundation, during the year, receive any funds,				miums			
-		personal benefit contract?	-		pu, p.o		ſ	Yes X No	
b		ne foundation, during the year, pay premiums, dire			nersonal	benefit contr	act?		6b X
_		s" to 6b, file Form 8870.	city of it	idirectly, on a p	o o o i i i	DOTTON COTT	uot		1 2 2
79		y time during the tax year, was the foundation a pa	erty to a	prohibited tax	shelter t	ransaction?	ſ	Yes X No	
	-	s," did the foundation receive any proceeds or ha	-	•			r L		7b
	t VIII	_,						. Highly Paid	
		and Contractors	,	, .				,	, ,,
1 1	ist all d	officers, directors, trustees, foundation manage	ners and	their compe	nsation	(see instruc	tions).		
			(b) Trtie	e, and average		mpensation	(d)	Contributions to	(e) Expense account,
		(a) Name and address		s per week ed to position		ot paid, ter -0-)		oyee benefit plans ferred compensation	other allowances
Mi cl	ael	R Potter	Presid						
		Hills Circle, NC 27514		5.00		0		0	o
			Vice I	President				<u>-</u>	
		r Hills Circle, NC 27514		3.00		0		0	o
			Secre				<u> </u>		
		Cedar Hills Circle, NC 27514	Jecre.	1.00		0	ļ	0	o
			Freası				 	<u>-</u>	<u> </u>
		Cedar Hills Circle, NC 27514	II Cab	1.00		0		0	0
		nsation of five highest-paid employees (other	than the		n line 1		ctions)		<u> </u>
	NONE.		.,	,50 ,,,0,,000		000 11102 0	01.01.0,1		
								(d) Contributions to	
	(a) Nar	me and address of each employee paid more than \$50,	000	(b) Title, and a hours per w		(c) Comper	sation	employee benefit plans and deferred	(e) Expense account, other allowances
	• •			devoted to po		(-,		compensation	Outer allowarices
NON	 3								
								[1
				İ					
						}		}	
								 	
								1	}
				 		ļ — —		1	
Total	numb	er of other employees paid over \$50,000		 		h			0
. 0		or or other employees paid over woo, ood	<u>· · · · · </u>	 			• • • • •		<u> </u>

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32-0238957

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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 None	
	0
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	
EEA	Form 990-PF (2016)

3a

3b

4

3,428

3,428

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Amounts set aside for specific charitable projects that satisfy the

EEA

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

_	990-PF (2016) Joan G & Michael R **TXIII: Undistributed Income (see instri	32-0238957 Page			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7	5 5 5 50 5	非 [1] 自 十九、	1 = 2 = 3 = 3 = 3	167
2	Undistributed income, if any, as of the end of 2016				Take a second
а	Enter amount for 2015 only				
b	Total for pnor years,,				
3	Excess distributions carryover, if any, to 2016				58, 188
a	From 2011		养到的企业		
b	From 2012		* " " " " " " " " " " " " " " " " " " "	13 4 10 5 5 1	
C	From 2013	北京ペラチャ			
d	From 2014				
е	From 2015				
f	Total of lines 3a through e				
4	Qualifying distributions for 2016 from Part XII,		医毛管闭氏炎		
	line 4 ▶ \$ 3,428	100多年 沙德			
а	Applied to 2015, but not more than line 2a				
þ	Applied to undistributed income of prior years			14 22 3 3 3	
	(Election required - see instructions)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
С	Treated as distributions out of corpus (Election		(1) A. A. A. A. A. A. A. A. A. A. A. A. A.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
_	required - see instructions)	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 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
d	Applied to 2016 distributable amount	 			167
e	Remaining amount distributed out of corpus	3,261			
5	Excess distributions carryover applied to 2016				
	(If an amount appears in column (d), the same amount must be shown in column (a))	The state of the		[문제공인 최기	\$ 25 x x x x
6	Enter the net total of each column as	【套菱形式图			
·	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5 .	3,261			
b	Prior years' undistributed income Subtract	3,20			
_	line 4b from line 2b	[출경화목사]	:		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has	为自致过去。		以"秦"等于"京"的	
	been issued, or on which the section 4942(a)	13 35 33			
	tax has been previously assessed			1 1 1 2 2 2 5	
ď	Subtract line 6c from line 6b Taxable	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			f 32 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	amount - see instructions				12775
e	Undistributed income for 2015 Subtract line		1, 14(1) 150		
	4a from line 2a Taxable amount - see	[일시] 항 속 성기	100 12 2 3		
	instructions	1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			<u> </u>
f	Undistributed income for 2016 Subtract lines				
	4d and 5 from line 1 This amount must be	The state of the s		[1] 新兴 · 高兴 · [4]	}
	distributed in 2017			31 7 7 1 1 1 1 1 1 1 1	0
7	Amounts treated as distributions out of corpus		[唐] "香泽	[17 考: <u>2</u> :-255])。	
	to satisfy requirements imposed by section	}	1章大学	1 3 4 2 5 5	
	170(b)(1)(F) or 4942(g)(3) (Election may be				
_	required - see instructions)				
8	Excess distributions carryover from 2011 not		1 3 St. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 3 2 7 7 3
^	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	2.00	[1] 经基金金	13 5 5 5 5 5 5 5 F	国家建筑着作
10		3,261			<u> </u>
10	Analysis of line 9 Excess from 2012	150年度的議員		信念是读到这	1 2 2 3 3 3 3 2
a h	Excess from 2012		化多的多层型	HE STEET	NYS 整直基準
D	Excess from 2014	横续接着的点			13 15 5 5 5
4	Excess from 2015	机造工家主流	(新年於清清)	医多类乳管 医	14 \$ 3\$ 3
u a	Excess from 2016		医大学医验证		
	2,40	Market To the Electrical States	1	Allert Barrier Barrier	1 · · · · · · · · · · · · · · · · · · ·

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Par	XIV Private Operating Four	dations (see inst	ructions and Part '	VII-A, question 9)				
1a	If the foundation has received a ruling or	determination letter that	at it is a private operatir	ng				
	foundation, and the ruling is effective for		•		>			
b.	Check box to indicate whether the foundation			ed in section		4942(j)(3) or	П	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years			_	
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014		(d) 2013		(e) Total
	each year listed							
ь	85% of line 2a							
					t			
С	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 alternative test relied upon							
а	"Assets" alternative test - enter (1) Value of all assets	1						
	(2) Value of assets qualifying under section 4942(i)(3)(B)(i)							
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					1,, 1,2,0		
_	•				H			
C	"Support" alternative test - enter (1) Total support other than gross							
	investment income (interest,							}
	dividends, rents, payments on				1			j
	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)		1					
		<u> </u>			╁			
	(3) Largest amount of support from an exempt organization							
	(4) Gross investment income							
Part	XV Supplementary Informa			e foundation had	 \$	5,000 or mo	ore	in assets at
	any time during the yea		ns.)	LOUIS TES				
1	Information Regarding Foundation M	•						
а	List any managers of the foundation who before the close of any tax year (but on					he foundation		
	belore the close of any tax year (but on	ly it tiley have continue	ted more than \$5,000)	(See Section 507 (d)(2)	, ,			
Ь	List any managers of the foundation wh				e po	ortion of the		
	ownership of a partnership or other enti	iy) of which the founda	ilion has a 10% or grea	iter interest				
2	Information Regarding Contribution,							
	Check here \blacktriangleright X if the foundation on							
	unsolicited requests for funds If the fou		rants, etc (see instruction	ons) to individuals or o	rga	nizations under	T	
	other conditions, complete items 2a, b, c							
а	The name, address, and telephone num	iber or e-mail address	of the person to whom	applications should be	add	dressed		
L	The face in which are Barrier of							
b	The form in which applications should be	e submitted and inform	tation and materials the	ey snould include				
c	Any submission deadlines							· · · · · · · · · · · · · · · · · · ·
	Any restrictions or limitations on averda	s such as hy assares	ucal areas charitable 5	olds kinds of institution		or other		
d	Any restrictions or limitations on awards factors	s, such as by geograph	ncai areas, criafiladie Ti	ะเนอ, หแกนร OI เกรมเนนิOI	15, (JI OUI C I		

EEA

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Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Grants and Contributions Paid During to		d for Future P	ayment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor			
a Paid during the year			1	
Partners In Health	1	Ì		
800 Boylston Street Sutie 400				
Boston, MA 02199		PC	Hospital Care	1,000
Table			Meals For	
209 east Main Street			Elementary School	
Carrboro, NC 27510		PC	Children	1,000
Habitat For Humanity				
88 Vilcom Center		7.0	Trans Building	050
Chapel Hill, NC 27514	}	PC	Home Building	250
Catholic Relief Services		}		
228 W Lexingon Street			Emergency	
Baltimore, MD 21201		PC	Services	250
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			1	
Total		<u> </u>		2,500
b Approved for future payment		}		
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	1			
	ļ			

-	ss amounts unless otherwise indicated	Unrelate	d business income	Excluded by s	ection 512, 513, or 514	(e)
•		(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemple function income (See instructions
f Progr	ram service revenue	code		<u> </u>	····	
a N	Ione				<u> </u>	<u> </u>
ь _				-		
° –				ļ		
				<u> </u>		
				 		
f _				 		 -
	ees and contracts from government agencies			-		
	bership dues and assessments			 	***	-
	est on savings and temporary cash investments . ends and interest from secunties			 		
	ental income or (loss) from real estate					
	ebt-financed property		3,500,000		 	
	ot debt-financed property			 	 	
	ental income or (loss) from personal property	ļ		 		
	r investment income		 	 		+
	or (loss) from sales of assets other than inventory	}- 	 	 		
	ncome or (loss) from special events			 		
	s profit or (loss) from sales of inventory			†		†
	-			1		
b		<u> </u>				
_ —				1		
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· –				-		-
Δ.		1	i	1	J	1
e _	ntal Add columns (b) (d) and (e)					
Subto	otal Add columns (b), (d), and (e)				12	
Subto	I. Add line 12, columns (b), (d), and (e)				13	
Subto	I. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to venty calculations)					
Subto	I. Add line 12, columns (b), (d), and (e)ksheet in line 13 instructions to venfy calculations) VI-B Relationship of Activities to the	Accomp	lishment of Exc	empt Purpo	ses	tho
Subto	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
Subto Total ee work	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
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Subto	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
Subto	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
Subto	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
Subto	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
Subto	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
Subto	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
Subto	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
2 Subto 3 Total See word Part X	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	
2 Subto 3 Total See word Part X	I. Add line 12, columns (b), (d), and (e)	Accompl	lishment of Exerted in column (e) of	empt Purpo	ses tributed importantly to	

Joan G & Michael R Potter Foundation 32-0238957 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of 1a(1) 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) X 1b(3) (4) Reimbursement arrangements 1b(4) 1b(5) X (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no (b) Amount involved Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return President Here (see inst.)? Print/Type preparer's name Date Preparer's signature Check Paid self-employed

Firm's EIN

Phone no

Preparer

Use Only

Firm's name

Firm's address

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs gov/form990.

OMB No 1545-0047

2016

Name (of the organization			Employer identification number					
Joan G & Michael R Potter Foundation 32-0238957									
Organization type (check one)									
		_							
Filers o	of:	Section:							
Form 9	90 or 990-EZ	501(c)() (enter number) organization						
		4947(a)(1)	nonexempt charitable trust not treated as a private foundation						
		527 politica	lorganization						
Form 9	90-PF	∑ 501(c)(3) ex	kempt private foundation						
		4947(a)(1)	nonexempt charitable trust treated as a private foundation						
		501(c)(3) ta	xable private foundation						
Check	ıf your organization is cove	ered by the Gene	ral Rule or a Special Rule.						
	Only a section 501(c)(7), (8	•	ration can check boxes for both the General Rule and a Specia	al Rule See					
Genera	al Rule								
5 3	F	F 000 000 F	7 000 DE the beauty of the transfer of the	#5 000					
X		perty) from any or	Z, or 990-PF that received, during the year, contributions totaling ne contributor. Complete Parts I and II. See instructions for deter						
Specia	l Rules								
			144 VO) 511						
Ц	-		11(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support						
			70(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ) y one contributor, during the year, total contributions of the gre						
			n 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete F	* *					
	ψο,000 οι (Σ) Σ / οι αις α	inodin on (i) i on	1 330, 1 art viii, inte 111, or (ii) 1 oith 330-LL, line 1 oomplete i						
П	For an organization descr	ibed in section 50	on (c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	n any one					
_			ions of more than \$1,000 exclusively for religious, charitable, s						
	-		prevention of cruelty to children or animals Complete Parts I, II						
	For an organization descr	ribed in section 50	11(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	n any one					
	contributor, during the ye	ear, contributions	exclusively for religious, charitable, etc , purposes, but no such	1					
	contributions totaled more	e than \$1,000 If tl	nis box is checked, enter here the total contributions that were re	eceived					
	during the year for an exc	clusively religious	, charitable, etc , purpose Don't complete any of the parts unle	ess the					
		_	because it received nonexclusively religious, charitable, etc., c						
	totaling \$5,000 or more de	uring the year .		▶ \$					
O41 =	m. An accomination that !	-14	Constal Bullo and/or the Constal Bullot described Co. 1. 1. 5	2.45 000					
			General Rule and/or the Special Rules doesn't file Schedule E						
			art IV, line 2, of its Form 990, or check the box on line H of its meet the filing requirements of Schedule B (Form 990, 990-EZ,						
	. ,	,							

Name of organization

Joan G & Michael R Potter Foundation

Employer identification number 32-0238957

Part I	Contributors (See instructions). Use duplicate copi	es of Part I if additional space is r	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Michael Q Potter c/o 75 Cedar Hills Circle Chapel Hill, NC 27514	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Michael R Potter 75 Cedar Hills Circle Chapel Hill, NC 27514	\$8,761	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Joan G Potter 75 Cedar Hills Circle Chapel Hill, NC 27514	\$ 7,456	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

Joan G & Michael R Potter Foundation

Employer identification number

32-0238957

Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) 235 Shares BPTRX 2 8,761 11-23-2016 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) 200 Shares BPTRX 3 7,456 11-23-2016 (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions)

	Federal Supporting Statements	2016 PG01
Name(s) as shown on return		FEIN
Joan G & Mid	chael R Potter Foundation	32-0238957
	Form 990PF - Part II - Line 10(b) Investments: Corporate Stock Schedule	Statement #137
Category	BOY Book V	Value EOY FMV
Corporate Stock	:	18,474 18,474
Totals	18	8,474 18,474

			Federal Su	Federal Supporting Statements	nents		
Revenue Net I - Line 23 - Other Expenses Schedule and excenses 481 481 481 0 481 481 481	Name(s) as shown on return		5	8		Z016 PG01 Your Social Security Number	
Form 89026 . 2mr 1 - Libe 21 - Other Enganses Schedule Bavenine	Joan G & Michael R Potter Foundati	uoı				32-0238957	
Revenue Net Adjusted Charitable and expenses investment net income purpose and expenses and expe		Form 990PF		. Other Expenses Sche	edule	Statement #103~	
461 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Description	Revenue and expenses.	Net investment		Charitable purpose		
	Other Expenses Totals	481	0	0	481		
	•						