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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Informat	Do not enter : tion about For	social security numbers on m 990-PF and its separate	this form as it may be mainstructions is at WWW.IR	ade public. s.gov/form990pf.	Open to Public Inspection
For calendar year 2016 or tax year beginning		ooo 11 and 110 departed	, and ending		open to realism inspection
Name of foundation				A Employer Identification	number
C. D. SPANGLER FOUNI				56-6061548	
P. O. BOX 36007	delivered to street	address)	Room/suite	B Telephone number (704) 372-	4500
City or town, state or province, country, and Z CHARLOTTE, NC 28236		ostal code	-	C if exemption application is p	ending, check here
G Check all that apply: Initial retuin		Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
Final retur	n	Amended return			
Address c		Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
		cempt private foundation		E If private foundation sta	tus was terminated
Section 4947(a)(1) nonexempt charitab		Other taxable private founda		under section 507(b)(1)	(A), check here
I Fair market value of all assets at end of year	1 —	-	X Accrual	F If the foundation is in a (
(from Part II, col. (c), line 16)		ther (specify) imn (d) must be on cash t	nacie)	under section 507(b)(1)	(B), check here
Part Analysis of Revenue and Expense			(b) Net investment	(a) Admeted and	(d) Disbursements
(The total of amounts in columns (b), (c), a necessarily equal the amounts in column	ind (d) may not	(a) Revenue and expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., rece	``` — — —	125,470,000.			(445.1 446.1 511)
2 Check if the foundation is not required					
Interest on savings and temporary cash investments		92,671.	92,671.		Statement 1
4 Dividends and interest from securities	es	1,950,006.	1,950,006.		Statement 2
5a Gross rents					
Net rental income or (loss)					
68 Net gain or (loss) from sale of assets not or	line 10				
assets on line 6a				<u></u>	
7 Capital gain net Income (from Part IV, line 2	2)		0.		<u> </u>
8 Net short-term capital gain					
9 Income modifications EVED 10a and allowances	•			 	
1 1 1 1 1	၂၀၂ –				
c Gross profit or (loss) 1 6 2017		 			
11 Other, ricome	RS-0				
12 Total. Add-imps - through 11 1 1	*	127,512,677.	2,042,677.	0.	
13 Compensation of Affice's circolors, truste-	a_etcs=	0.	0.	0.	0.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
9 16a Legal fees					
b Accounting fees St	tmt 3	11,000.	0.	0.	11,000.
c Other professional fees					
17 Interest		40.054		ļ	ļ
18 Taxes Si	tmt 4	40,854.	0.	0.	0.
19 Depreciation and depletion				 	<u> </u>
b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications			<u> </u>		
22 Printing and publications					
22 Other expenses Si	tmt 5	300.	0.	0.	300.
23 Other expenses S1 24 Total operating and administrative expenses. Add lines 13 through 23					
expenses. Add lines 13 through 23		52,154.	0.	0.	11,300.
25 Contributions, gifts, grants paid		5,661,518.			6,661,518.
26 Total expenses and disbursements	3.				
Add lines 24 and 25		5,713,672.	0.	0.	6,672,818.
27 Subtract line 26 from line 12:					
8 Excess of revenue over expenses and disb	oursements	121,799,005.	0 0 0 2 = =		
b Net investment income (if negative, ei			2,042,677.		
C Adjusted net income (if negative, enter				0.	5 000 DE (00:00
623501 11-23-16 LHA For Paperwork Redu	ction Act Notic	e, see instructions.			Form 990-PF (2016)

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1_	125,481,378.
2	Enter amount from Part I, line 27a	2	121,799,005.
3	Other increases not included in line 2 (itemize) See Statement 6	3	62,229,984.
4	Add lines 1, 2, and 3	4	309,510,367.
5	Decreases not included in line 2 (itemize)	5	0.
8	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	309,510,367.

125,481,378. 309,510,367.

312,600,640

128,040,581.

30 Total net assets or fund balances

31 Total liabilities and net assets/fund balances

		NGLER FOUN						5	6-606	1548	Page S
(a) List and desc	ribe the kind(s) of property sold (e.common stock, 200 sh	, real estate,		I P	How ac - Purc - Don		(c) Date ((d) Date (mo., da	
1a											
b NO	NE				↓_						
<u>c</u>		"			┼					ļ	
<u>d</u>					╁╌					_	
(e) Gross sales price		reciation allowed or allowable)		t or other basis xpense of sale					ain or (loss s (f) minus		
8											
b	ļ		<u> </u>								
<u>c</u>			<u> </u>								
<u>d</u>	<u>. </u>		 	 							
Complete only for assets showing	no gain in col	umn (h) and owned by	the foundation	on 12/31/69			0	Gains (C	ol. (h) gair	minus	
(i) F.M.V. as of 12/31/69	(j) /	Adjusted basis of 12/31/69	(k) Ex	cess of col. (I) col. (I), if any				(k), but r	not less that (from col.	ın -0-) or	
8											
b C	 	<u> </u>									
d	 		 	<u> </u>							
e		······································									-
2 Capital gain net income or (net ca	apıtal loss)	If gain, also ente			}	2					
Net short-term capital gain or (los If gain, also enter in Part I, line 8,	, column (c).	in sections 1222(5) a	nd (6):		}	_					
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Sec	ction 4940(e) to	r Beduced	Tay on No	t Inv	3 Octo	ent Inc	ome			
(For optional use by domestic private						_					
			13 TO(a) WA OII			,					
f section 4940(d)(2) applies, leave t	his part blank	.									
Was the foundation liable for the sec	tion 4942 tax	on the distributable a	mount of any ye	ear in the base pe	riod?					Yes	X No
If "Yes," the foundation does not qua											
1 Enter the appropriate amount in	each column		instructions be	fore making any						(d)	
Base period years Calendar year (or tax year beginni	ing in)	Adjusted qualifying di		Net value of n		ritable			Distri (col. (b) di	ibútión ratio Ivided by col.	
2015			30,275. L2,120.				6,050				4630 4426
2014 2013			03,037.				5,554				3746
2012			50,639.				2,989		·		5829
2011			0,439.				8,268				6894
2 Total of line 1, column (d)								2		. 2	<u>5526</u>
3 Average distribution ratio for the			on line 2 by 5,	or by the numbe	r of ye	ars		1			-10-
the foundation has been in existe	ence if less th	an 5 years						3		.0	<u>5105</u>
4 Enter the net value of noncharital	hla una accat	o for 2016 from Bart V	luna E					4	1 15	71,283	925
4 Enter the net value or nonchantal	DIE-026 02261	5 101 20 10 11 0111 FAIL A	, iiie 3					├		1,205	, , , ,
5 Multiply line 4 by line 3								5		8,744	, 558
•											
6 Enter 1% of net investment incor	me (1% of Pa	rt I, line 27b)						6		20	,427
7 Add lines 5 and 6								,		8,764	925
7 Add lines 5 and 6								7			
8 Enter qualifying distributions from	m Part XII, lin	e 4						8	1	6,672	,818

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Port VI Evoire Tex Board on Investment Income (Section 4		048 000			age 4
Part VI Excise Tax Based on Investment Income (Section 4		948 - See	ınstru	ctior	15)
1a Exempt operating foundations described in section 4940(d)(2), check here and are	•				
	necessary-see instructions)				- 4
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ L and enter 1%	1	4	0,8	54.
of Part 1, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter	4% of Part I, line 12, col. (b). 丿	[_
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	y. Others enter -0-)	2			0.
3 Add lines 1 and 2		3	4	0,8	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	y. Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	4	0,8	54.
6 Credits/Payments:					
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a 29,800.				
b Exempt foreign organizations - tax withheld at source	6b				
c Tax paid with application for extension of time to file (Form 8868)	6c	1			
d Backup withholding erroneously withheld	6d		_		
7 Total credits and payments. Add lines 6a through 6d		7	2	9,8	00.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is	attached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9	1	1,0	<u>54.</u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpai	d . ▶	_10			
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	Refunded ▶	11			
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local li	egislation or did it participate or intervene	ın		Yes	
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political pu	rposes (see instructions for the definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities	es and copies of any materials publisi	ned or			
distributed by the foundation in connection with the activities			1 1		
c Did the foundation file Form 1120-POL for this year?			10		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	the year:				
(1) On the foundation. > \$ 0 • (2) On foundation mana	gers. ► \$ 0.				
e Enter the reimbursement (if any) paid by the foundation during the year for political exp		•			
managers. ▶ \$ 0.					
2 Has the foundation engaged in any activities that have not previously been reported to the	he IRS?		2		X
If "Yes," attach a detailed description of the activities.					
3 Has the foundation made any changes, not previously reported to the IRS, in its govern	ing instrument, articles of incorporation, o	or			ļ
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cha	anges		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?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the y	ear?		5		X
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	ed either:				
 By language in the governing instrument, or 			1 1		
 By state legislation that effectively amends the governing instrument so that no mand 	atory directions that conflict with the state	e law			
remain in the governing instrument?			6	X	
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 X\	/	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see instru	actions) >				
NC			1		1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	he Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation	· ·		8b	X	[
9 Is the foundation claiming status as a private operating foundation within the meaning of	of section 4942(j)(3) or 4942(j)(5) for cale	endar			
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes			9		х
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a so			10		X
		Fo	rm 99 ()-PF	(2016)

Form 990-PF (2016) C. D. SPANGLER FOUNDATIO			20-00012	48	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:				- 1	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire	ectly,			
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization				- 1	
4945(d)(4)(A)? (see instructions)			s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or aducational nurnosas or f				
	or cuduational purposes, or i		s X No		
the prevention of cruelty to children or animals?			S LAS NO		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	NT / N		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	+
Organizations relying on a current notice regarding disaster assistance check h	ere				-
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		. 			
expenditure responsibility for the grant?	N	[/A Yo	s No		
If "Yes," attach the statement required by Regulations section 53.4945	5-5(d).			l l	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		i	-	
a personal benefit contract?		Y	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	x
If "Yes" to 6b, file Form 8870.			F		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es 🗶 No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	$\overline{}$
Part VIII Information About Officers, Directors, Trust		nagers, Highl			
Paid Employees, and Contractors	ooo, r ouridation me		•		
1 List all officers, directors, trustees, foundation managers and their	compensation.	 -			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e)	xpense int, other
(a) Name and address	hours per week devoted	(if not paid, enter -0-)	and deferred	accou	int, other wances
	to position	6 iller -0-)	compensation	2110	wances
Good Chahamanh 10		0.	0.		^
See Statement 10		0.	<u> </u>	1	0.
				<u> </u>	
				}	
		I			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compansation		unt, other wances
NONE		 	Compensation		
NONE					
				1	
		 		1	
				1	
				 	
		<u> </u>			
Total number of other employees paid over \$50,000			▶ .		0

Form 990-PF (2016) C. D. SPANGLER FOUNDATION, INC.		061548 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical		Evanges
number of organizations and other beneficiaries served, conferences convened, research papers produce	ed, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2	Amount
1 N/A	o rand c.	runount
2		
All other program-related investments. See instructions.	ŀ	
3		
Total. Add lines 1 through 3	>	0.

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndation	ns, see instructions)
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	124,260,000.
b	Average of monthly cash balances	1b	49,632,310.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	10	173,892,310.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	173,892,310.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,608,385.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	171,283,925.
6	Minimum investment return. Enter 5% of line 5	6	8,564,196.
P	art XI Distributable Amount (see Instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certai	in
1	Minimum investment return from Part X, line 6	1	8,564,196.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	40,854.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	8,523,342.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,523,342.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	8,523,342.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	6,672,818.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	The state of the s	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	6,672,818.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,672,818.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies	s for the section

Form **990-PF** (2016)

Part XIII Undistributed Income (see instructions)

-		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1	Distributable amount for 2016 from Part XI,	Corpus	rears prior to 2013	2013	
•	line 7				8,523,342.
2	Undistributed income, if any, as of the end of 2016				.,
	a Enter amount for 2015 only			5,910,456.	
	b Total for prior years:				
	1		0.		
3	Excess distributions carryover, if any, to 2016.				
	a From 2011				
	b From 2012				
	c From 2013				
	d From 2014				
	e From 2015	1		Ī	
	f Total of lines 3a through e	0.			
4	Qualifying distributions for 2016 from				
	Part XII, line 4. \triangleright \$ 6,672,818.				
	a Applied to 2015, but not more than line 2a			5,910,456.	
	b Applied to undistributed income of prior		_		
	years (Election required - see instructions)		0.		
	c Treated as distributions out of corpus	_			
	(Election required - see instructions)	0.			
	d Applied to 2016 distributable amount				762,362.
	e Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6	Enter the net total of each column as indicated below;	ì			
	& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
	b Prior years' undistributed income. Subtract	· · · · · · · · · · · · · · · · · · ·			
	line 4b from line 2b		0.		
	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		0.		
	d Subtract line 6c from line 6b. Taxable				
	amount - see instructions	1	0.		
	e Undistributed income for 2015. Subtract line				
	4a from line 2a. Taxable amount - see instr.			0.	
	f Undistributed income for 2016. Subtract				
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2017				7,760,980.
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)	0.			
8	Excess distributions carryover from 2011	۾ ا			
_	not applied on line 5 or line 7	0.			
9	Excess distributions carryover to 2017.	^			
4.0	Subtract lines 7 and 8 from line 6a	0.			
ıU	Analysis of line 9:				
	a Excess from 2012				
	b Excess from 2013				
	c Excess from 2014 d Excess from 2015				
	e Excess from 2016			1	

	PANGLER FOU		ic.	56-606	1548 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	r 2016, enter the date of	the ruling	▶		·
b Check box to indicate whether the found	dation is a private operatii	ng foundation described	n section	4942(j)(3) or 494	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed)	1	ļ		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of				ĺ	
exempt activities		İ	[
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c			ļ		
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:]		J	,	
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)			 	 	
b "Endowment" alternative test - enter 2/3 of minimum investment return	}		1	1	
shown in Part X, line 6 for each year					
listed				 	
c "Support" alternative test - enter:					
Total support other than gross investment income (interest,					
dividends, rents, payments on	Ì				
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 support from					
an exempt organization					
(4) Gross investment income			<u> </u>		
Part XV Supplementary Info	rmation (Comple	ete this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during					
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	no have contributed more	than 2% of the total con	tributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed i	more than \$5,000). (See s	section 507(d)(2).)			
None					
b List any managers of the foundation wh	no own 10% or more of th	ne stock of a corporation	(or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha	is a 10% or greater intere	st.			
None					
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here ▶ 🗓 if the foundation of				not accept unsolicited reque	ests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi-	viduals or organizations i	inder other conditions, c	omplete items 2a, b, c, and	d.
a The name, address, and telephone num	iber or e-mail address of	the person to whom app	ications should be addre	ssed:	
b The form in which applications should	be submitted and informa	ation and materials they s	hould include:		
···					
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	

Tare AV Supplementary information				
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year	1		Ì	
	†			
]		
SEE ATTACHED STATEMENT	N/A	ALL PUBLIC	SEE STATEMENT	
		CHARITIES		6,661,518
	}	1	1	}
		 		
		1		
,				
	1	1		}
		 		
		1		
		1]
]		
		1		
		[
Total		<u></u>	▶ 3a	6,661,518
b Approved for future payment	T			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ppresection related payments		1		}
				1
None]		
		}		
		ļ	<u> </u>	
]
		 		
				1
				[
		<u></u>		L
Total			36	0

Page 11

Enter gross amounts unless otherwise indicated.	Unrelated t	ousiness income		d by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue.	code		code		
<u> </u>			 		
b			 	 + -	
<u> </u>			╀┈╌┼		
			+ +	 +	
e			╁		
·			+ +		
g Fees and contracts from government agencies			} 		
2 Membership dues and assessments			╀──┼		
3 Interest on savings and temporary cash	}		1	00 671	
investments	\ <u> </u>		14	92,671.	
4 Dividends and interest from securities	<u> </u>		14	1,950,006.	
5 Net rental income or (loss) from real estate:		. <u></u>	ļļ.		
a Debt-financed property			 		
b Not debt-financed property			↓ ↓		
6 Net rental income or (loss) from personal			1 1		
property			1_1		
7 Other investment income			1		
8 Gain or (loss) from sales of assets other			1 1		
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			ll.		
b					
C					
d					
е					
		0		2,042,677.	0
12 Subtotal. Add columns (b), (d), and (e)				13	2,042,677
13 Total. Add line 12, columns (b), (d), and (e)	ons.)				
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation. Part XVI-B Relationship of Activit		nplishment of E	xempt	Purposes	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			olishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation.) Part XVI-B Relationship of Activity	ties to the Accord	column (e) of Part XVI-			olishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			olishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			olishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			olishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			olishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			olishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			olishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			plishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			plishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			plishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			plishment of
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculated. Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			plishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			plishment of
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activit Line No. Explain below how each activity for which	ties to the Accord	column (e) of Part XVI-			plishment of

Form 99(P-PF (2016) C. D.	SPANGLER	FOUND	ATION, INC.		56-6	061548	Pa	age 1
Part 2		egarding Trans		and Transactions a	ind Relation	ships With Non	charitable		<u></u>
1 Did	the organization directly or indi	rectly engage in any o	f the followin	g with any other organization	on described in sec	tion 501(c) of		Yes	No
the	Code (other than section 501(c)(3) organizations) or	ın section 52	7, relating to political organ	izations?				
a Tra	nsfers from the reporting found	ation to a noncharitab	le exempt or	ganization of:					
(1)	Cash						1a(1)		X
(2)	Other assets						1a(2)		X
b Oth	er transactions;							l '	
	Sales of assets to a noncharita						1b(1)		X
٠,	Purchases of assets from a no	•	ganization				1b(2)	 	X
	Rental of facilities, equipment,						1b(3)	 -	x
	Reimbursement arrangements Loans or loan guarantees	•					1b(4) 1b(5)	 -	X
1.1	Performance of services or me	amharchin ar fundraic	ına salıcitətia	ine			1b(6)	├	X
	iring of facilities, equipment, ma	•	•				10	 -	$\frac{1}{x}$
	e answer to any of the above is	-	-	•	ways show the fair	market value of the or		ets.	
	ervices given by the reporting f	•	-			-		,	
	ımn (d) the value of the goods,				,				
(a)Line n	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	on of transfers, transaction	ns, and sharing ar	rangeme	ents
			N/A						
					<u> </u>				
									
	 	 							
	 				- 				
					 				
		 			+				
		 			+				
		 			+				
	 	 							
	 	 							
2a Ist	he foundation directly or indirec	ctly affiliated with, or re	elated to, one	or more tax-exempt organi	zations described				
	ection 501(c) of the Code (othe	•	-	• •			Yes	X	No.
	es," complete the following sch		,						
	(a) Name of or	ganization		(b) Type of organization		(c) Description of re	ationship		
	N/A								
	[Hada-acadhia (F T	Alias I I				a hoat of on, the suite of			
Q:	Under penalties of perjury, I declare and belief, it is true, correct, and co						May the IHS return with th		
Sign Here	1 1 1 1 A = =	C	. 5		WIGE	שינים לד השפט	shown below	(see ins	str)?
	Signature of officer or trustee	. Whowen	~ // 	5-15-17 Date	Title	PRESIDENT	_ X Yes	<u> </u>	_ N(
	Print/Type preparer's n		Preparer's s		Date	Check if	PTIN		
	1 , pu p. upa. a. u ii				1	. — 1			

BWC/

Phone no. (704)344-7500 Form **990-PF** (2016)

P00859332

Firm's EIN ▶ 13-4008324

self- employed

5/11/17

Paid

Preparer

Use Only

Brian W. Coffey

Firm's name ▶ PricewaterhouseCoopers LLP

Firm's address ▶ 214 N. Tryon Street, Suite 4200 Charlotte, NC 28202

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

Department of the Treasury Internal Revenue Service

Name of the organization

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.lrs.gov/form990 .

OMB No 1545-0047

2016

SPANGLER FOUNDATION

Employer identification number

	C. D.	SPANGLER	FOUNDATION,	INC.	56-6061548
Organization type (chec	k one):		·		
Filers of:	Section	on:			
Form 990 or 990-EZ		501(c)() (ent	er number) organization		
		4947(a)(1) nonex	empt charitable trust not	treated as a private foundation	
		527 political orga	nization		
Form 990-PF	X	501(c)(3) exempt	private foundation		
		4947(a)(1) nonex	empt charitable trust trea	ated as a private foundation	
		501(c)(3) taxable	private foundation		
Note: Only a section 50		•	I Rule or a Special Rule on can check boxes for b	oth the General Rule and a Special Ru	ule. See instructions.
General Rule					
•	_			, during the year, contributions totaling tructions for determining a contributor	-
Special Rules					
sections 509(a) any one contrib	(1) and 170 outor, durin	0(b)(1)(A)(vi), that	checked Schedule A (Fo	990-EZ that met the 33 1/3% support rm 990 or 990-EZ), Part II, line 13, 16a er of (1) \$5,000 or (2) 2% of the amou	, or 16b, and that received from
year, total cont	ributions o	of more than \$1,00		form 990 or 990-EZ that received from s, charitable, scientific, literary, or educand III.	
year, contributi is checked, eni purpose. Don't	ons exclus ter here the complete	ively for religious, total contribution any of the parts u	charitable, etc., purpose ns that were received du	form 990 or 990-EZ that received from s, but no such contributions totaled nor the year for an exclusively religious applies to this organization because it ag the year	nore than \$1,000. If this box s, charitable, etc.,
•		•		pecial Rules doesn't file Schedule B (l on line H of its Form 990-EZ or on its F	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

<u>c. d.</u>	SPANGLER FOUNDATION, INC.		-6061548
Part I	Contributors (See instructions). Use duplicate copies of Part I if addition	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SPANGLER COMPANIES, INC. P.O. BOX 36007 CHARLOTTE, NC 28236-6007	\$ <u>25,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Delcor, Inc. P. O. Box 36007 Charlotte, NC 28236-6007	s 100,470,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Moncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

C. D. SPANGLER FOUNDATION, INC.

56-6061548

Part II	Noncash Property (See instructions) Use duplicate copies of Part	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	Publicly Traded Securities - BAC		
		s_100,470,000.	10/26/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u></u>		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_	
		\$	90, 990-EZ, or 990-PF) (20

Employer identification number

SPANGLER FOUNDATION T	NC.	56-6061548						
Exclusively religious, charitable, etc., con the year from any one contributor. Complete	tributions to organizations described in columns (a) through (e) and the following the columns (b) through (c) and the following the columns (c) and the following through (c) and the fol	section 501(c)(7), (8), or (10) that total more than \$1,000 for any line entry. For graphizations						
Use duplicate copies of Part III if addition	is, chantable, etc , contributions of \$1,000 or le: ial space is needed.	ss for the year (Enterthis info once)						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
	(a) Transfer of gift							
Transferee's name, address, a		Relationship of transferor to transferee						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
(e) Transfer of gift								
Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
(e) Transfer of gift								
Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee						
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
(e) Transfer of gift								
Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee						
	Exclusively religious, charitable, etc., con the year from any one contributor. Complete completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if addition (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a (b) Purpose of gift Transferee's name, address, a	(e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (d) Transfer of gift Transferee's name, address, and ZIP + 4						

6,661.518

Total cash contributions through 12/31/16

FORM 990-PF, PART XV LINE 32 CONTRIBUTIONS PAID DURING THE YEAR

American Academy of Sciences	To assist in educational opportunities	10,000
Arts & Science Council	Program Support	165,000
BEST NC (formerly NC Business Leaders For Education)	To assist in educational opportunities	10,000
Boy Scouts of America	Program Support	15,000
CELC Pre-K Study	To assist in educational opportunities	15,000
Charlotte Ballet	Program Support	25,000
Charlotte Mecklenburg Library Foundation	Program Support	5,000
Charlotte Symphony Orchestra	Program Support	25,000
Charlotte Symphony Orchestra	Program Support	20,000
Children's Theatre of Charlotte	Program Support	10,000
Communities in Schools	To assist in educational opportunities	10,000
Community Building Initiative	Program Support	5,000
Crisis Assistance Ministry	Program Support	20,000
Darlington School	To assist in educational opportunities	250,000
Fidelity Charitable	Program Support	1,780,000
Harvard Business School	To assist in educational opportunities	1.500,000
Harvard Magazine	Program Support	1,000
Linville Foundation	Program Support	2,500
Matching Gifts for Education - Employees (National Gypsum)	To assist in educational opportunities	4,646
Matching Gifts for Education - Retirees (National Gypsum)	To assist in educational opportunities	5,725
MeckEd	Program Support	25,000
Metropolitan Museum of Art	Program Support	9,252
Myers Park Baptist Church	To assist in religious activities	173,000
National Association of Watch and Clock Collectors	Program Support	1,000
National Merit Scholarship Corporation	To assist in educational opportunities	11,895
Northwestern University	To assist in educational opportunities	25,000 100,000
Novant Health Presbyterian Medical Hospital	Program Support	5,000
Planned Parenthood South Atlantic	Program Support	10,000
Planned Parenthood South Atlantic Project L I F T	Program Support To assist in educational opportunities	1,000,000
Project Thrive	To assist in educational opportunities	200,000
Read Charlotte	To assist in educational opportunities	100,000
Southminster Foundation	Program Support	8,000
Stanford University	To assist in educational opportunities	100,000
Teach For America	To assist in educational opportunities	200,000
Trees Charlotte Foundation	Program Support	25,000
Trinity Episcopal School	To assist in educational opportunities	20,000
UNC Foundation	To assist in educational opportunities	170,000
Union Baptist Church	To assist in religious activities	500
United Way of Central Carolinas	Program Support	175,000
Wellesley College	To assist in educational opportunities	300,000
Westport Baptist Church	To assist in educational opportunities	1,000
Woodberry Forest	To assist in educational opportunities	10,000
YMCA of Greater Charlotte	Program Support	105,000
Spangler Companies Inc Employee-Directed Gifts	To assist health and human services	1,000
American Cancer Society American Heart Association	To assist health and human services	500
American Red Cross	To assist health and human services	500
Charlotte Family Housing	Program Support	1,000
Cystic Fibrosis Foundation	To assist health and human services	500
First Presbyterian Church	To assist in religious activities	350
Humane Society of Charlotte	Program Support	200
Muscular Dystrophy Association	To assist health and human services	500
North Mecklenburg Animal Rescue	Program Support	250
Ovarian Cancer Research Fund	To assist health and human services	1,000
Safe Alliance	Program Support	300
Salvation Army, The	Program Support	350
Sjogren's Syndrome	To assist health and human services	250
St Mark's Episcopal Church	To assist in religious activities	250
St Patrick's Catholic Church	To assist in religious activities	500
Town of Cornelius Animal Shelter	Program Support	250
Wofford College	To assist in educational opportunities	300

Form 990-PF Intere	st on Savi	ngs and Tem	porary	Cash In	vestments	Statement :
Source		Reve	Revenue Net Inv		(b) vestment come	(c) Adjusted Net Income
Bank of America US Treasury Bills		4,603. 8,068.	 	4,603. 88,068.	0	
Total to Part I, li	9	92,671.		92,671.	0	
Form 990-PF	Dividend	s and Inter	est fro	om Secur	ities	Statement
Source	Gross Amount	Capital Gains Dividend	Re	(a) evenue Books	(b) Net Inves ment Inco	•
Bank of America Merrill Lynch	1,500,000		-	500,000.	1,500,00	
To Part I, line 4	1,950,006	•	0. 1,9	950,006.	1,950,00	6. 0
Form 990-PF		Accounti	ng Fees	3		Statement
Description		(a) Expenses Per Books	(l Net In ment I		(c) Adjusted Net Incom	
Accounting and Tax	_	11,000.	- 	0.		0. 11,000
To Form 990-PF, Pg	1, ln 16b	11,000.		0.		0. 11,000
Form 990-PF		Тах	es			Statement
Description		(a) Expenses Per Books	Net I	o) nvest- Income	(c) Adjusted Net Incom	
EXCISE TAX - CURREN	1T	40,854.		0.	· · · · · · · · · · · · · · · · · · ·	0. 0
To Form 990-PF, Pg	1, ln 18	40,854.		0.		0. 0

Form 990-PF	Other E	xpenses			Statement	5
Description	(a) Expenses Per Books	(b) Net Inves ment Incom		(c) djusted t Income		
Bank service charge	300.	·	0.	(0. 30	00.
To Form 990-PF, Pg 1, 1n 23	300.		0.	(0. 30	00.
Form 990-PF Other Increases	in Net Ass	ets or Fun	d Balan	ces	Statement	6
Description				_	Amount	
Increase in unrealized gains (SFAS 124)	net of defe	rred excis	e tax		62,229,9	84.
Total to Form 990-PF, Part II	I, line 3			=	62,229,9	84.
Form 990-PF	Corporat	e Stock			Statement	7
Description			Book V	alue	Fair Marke Value	t
CORPORATE STOCK SYMBOL BAC			265,20	0,000.	265,200,0	00.
Total to Form 990-PF, Part II	, line 10b		265,20	0,000.	265,200,0	00.
Form 990-PF	Other Lia	bilities			Statement	8
Description			BOY Am	ount	EOY Amount	
DEFERRED EXCISE TAX CURRENT TAX PAYABLE		_	1,55	9,203.	3,079,2	
Total to Form 990-PF, Part II	, line 22		1,55	9,203.	3,090,2	73.

Form 99	00-PF	Explanation	Concerning	Part VII-A,	Line 12	Statement 9

Explanation

The foundation made distributions to Fidelity Charitable donor advised funds which are included in the foundation's qualifying distributions. Fidelity Charitable and the donor advised funds cannot expend funds for any purpose other than the exempt purposes described in Section 170(c)(2)(B).

	List of Officers, Dand Foundation Mana		State	ement 10
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	
MEREDITH R. SPANGLER PO BOX 36007 CHARLOTTE, NC 28236	CHAIRMAN 0.00	0.	0.	0.
C.D. SPANGLER, JR. PO BOX 36007 CHARLOTTE, NC 28236	DIRECTOR 0.00	0.	0.	0.
W. D. CORNWELL, JR. PO BOX 36007 CHARLOTTE, NC 28236	VP/SEC/TR/DIR 0.00	0.	0.	0.
ANNA SPANGLER NELSON PO BOX 36007 CHARLOTTE, NC 28236	VP/DIRECTOR 0.00	0.	0.	0.
ABIGAIL R. SPANGLER PO BOX 36007 CHARLOTTE, NC 28236	DIRECTOR/PRES 0.00	0.	0.	0.
CINDY L. MARR PO BOX 36007 CHARLOTTE, NC 28236	VP/ASST SEC 0.00	0.	0.	0.
MEGHAN G. ELLIS PO BOX 36007 CHARLOTTE, NC 28236	VP/ASST SEC 0.00	0.	0.	0.
STEPHEN W. DIXON PO BOX 36007 CHARLOTTE, NC 28236	ASST SEC 0.00	0.	0.	0.
Totals included on 990-PF, Page	e 6, Part VIII	0.	0.	0.