SCANNED JUL 2 0 2018

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.

	endar year 2017 or tax year beginning	s.gov/i diffissort for man	, and ending		1 Open to Public Inspection
	of foundation		,	A Employer identification	number
BI	LL AND SHARON ALLEN FAMII	Y FOUNDATION		20-5854617	
Numbe	and street (or P O box number if mail is not delivered to street a	idress)	Room/suite	B Telephone number	
81	O COLVILLE ROAD			704-375-59	<u>37 </u>
	town, state or province, country, and ZIP or foreign po ARLOTTE, NC 28207	ostal code		C If exemption application is pe	ending, check here
	ck all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
	Final return	Amended return			
	Address change	Name change		2 Foreign organizations med check here and attach coil	eting the 85% test, mputation
H Che	ck type of organization. X Section 501(c)(3) ex	empt private foundation		E If private foundation stat	tus was terminated
	Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition U	under section 507(b)(1)	(A), check here 🕨 🗀
I Fair i	market value of all assets at end of year J Accounting	ng method X Cash	Accrual	F If the foundation is in a	60-month termination
•		her (specify)		under section 507(b)(1)	(B), check here 🕨 🔛
▶\$	15,827,561. (Part I, colum	nn (d) must be on cash basis	s)		
Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1.	1 Contributions, gifts, grants, etc , received	814,039.		N/A	1 15
:	2 Check In the foundation is not required to attach Sch. B			* *	12 3
	Interest on savings and temporary cash investments	82,231.	82,231.		STATEMENT 1
'	4 Dividends and interest from securities	150,283.	148,576.		STATEMENT 2
	5a Gross rents	,			* (^
	b Net rental income or (loss)	1,000,171.	<u> </u>	<u>.</u>	*
ᅄ	6a Net gain or (loss) from sale of assets not on line 10 6 Gross sales price for all 3,836,238.	;; , 000, 171.	<u> </u>		
Revenu		<u>*</u>	1,000,171.	~ ^ %×	10 ×
Be.	7 Capital gain net income (from Part IV line 2) 8 Net short-term capital gain	435	1,000,171		× .
	9 Income modifications				
ı	Gross sales less returns	î.	*	, ; %	,* ×
	0a and allowances b Less Cost of goods sold	<i>ι</i> / '		₹.,#\$	^; *
ļ	G Gross profit ory(loss)	80/			
1		$ \dot{b} -31,791.$	70,323.		STATEMENT 3
1		<u> </u>	1,301,301.		
1	3 Compensation of officers directors trustees, etc	0.	0.		0.
	5 Pension plans, employee behenits 6a Legal fees				
ટા	b Accounting fees STMT 4	4,045.	4,045.		0.
Expe	c Other professional fees STMT 5	115,342.	115,342.		0.
Ш e 1	7 Interest				
ı İğ	8 Taxes STMT 6	-29,220.	562.		0.
1 1	9 Depreciation and depletion				
[필2	0 Occupancy				
₽ 2	1 Travel, conferences, and meetings				
	2 Printing and publications	12.007	12 063		
.⊆	3 Other expenses STMT 7	13,967.	13,967.		0.
te 2	4 Total operating and administrative	104,134.	133,916.		0.
ŏ.	expenses Add lines 13 through 23	646,000.	100,010.	 	646,000
-	5 Contributions, gifts, grants paid 6 Total expenses and disbursements.	040,000.			010,000
	Add lines 24 and 25	750,134.	133,916.		646,000
٦,	7 Subtract line 26 from line 12:			1	
ן ן	Excess of revenue over expenses and disbursements	1,264,799.			
	b Net investment income (if negative enter -0-)		1,167,385.		
	C Adjusted net income (if negative, enter -0-)			N/A	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

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	31 Total liabilities and net assets/fund balances	12,749,009.	13,659,374.	
E	Part III Analysis of Changes in Net Assets or Fund	Balances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), li (must agree with end-of-year figure reported on prior year's return)	ne 30	1	12,749,009.
2	Enter amount from Part 1, line 27a		2	1,264,799.
3	Other increases not included in line 2 (itemize)		3	0.
4	Add lines 1, 2, and 3		4	14,013,808.
5	Decreases not included in line 2 (itemize) ► CAPITAL LOSS	ADJUSTMENT	5	354,434.
-	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II		6	13,659,374.

1,224,065

524,944

749,009.

ightharpoons

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24 Unrestricted 25 Temporarily restricted 26 Permanently restricted

1,224,065

659

and complete lines 24 through 26, and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

28 Paid-in or capital surplus, or land, bldg., and equipment fund

29 Retained earnings, accumulated income, endowment, or other funds

and complete lines 27 through 31.

30 Total net assets or fund balances

27 Capital stock, trust principal, or current funds

8 Enter qualifying distributions from Part XII, line 4
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.

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615,364.

11,674.

627,038.

646,000.

5 Multiply line 4 by line 3

7 Add lines 5 and 6

6 Enter 1% of net investment income (1% of Part I, line 27b)

6

	990-PF (2017) BILL AND SHARON ALLEN FAMILY FOUNDATION 20 1 VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(c), or 4948	<u>-5854</u>	617		Page 4
		- see ın	struc	tion	s)
	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)				****
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		1	1,6	<u>74.</u>
	of Part I, line 27b				
	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-)	ļ			0.
	Add lines 1 and 2		1	1,6	<u>74.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1	1,6	74.
	Credits/Payments		,	,	ı
	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6,080.		*	*	t
	Exempt foreign organizations - tax withheld at source 6b 0.				y 4
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.				
	Backup withholding erroneously withheld 6d 0 •			***	3
	Total credits and payments. Add lines 6a through 6d			6,0	80.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			5,5	94.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11 1	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11				
	t VII-A Statements Regarding Activities				
1a i	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	-		Yes	No
6	any political campaign?		1a		X
b í	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		1b		X
ı	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		,		18/4
(distributed by the foundation in connection with the activities.		1%		<i>(4)</i> ;
c [Did the foundation file Form 1120-POL for this year?		10	-	X
d E	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			~%, ·	
((1) On the foundation. ▶ \$ O . (2) On foundation managers. ▶ \$ O .		÷		
e F	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		`		\$. J.
r	managers. ► \$ 0 .				140
2 H	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	*	X [°]
- 1	If "Yes," attach a detailed description of the activities.			,	
3 ł	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		Х
4a [Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
		A\N	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				
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			į	
	By language in the governing instrument, or			1	
•	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		I		
	remain in the governing instrument?		6	x	
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	
7 [
7 [
			l	I	
8a E	Enter the states to which the foundation reports or with which it is registered. See instructions.			ŀ	
8a E	Enter the states to which the foundation reports or with which it is registered. See instructions. NC				
8a 8	Enter the states to which the foundation reports or with which it is registered. See instructions. NC If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		0.h	v	
8a 6 b !	Enter the states to which the foundation reports or with which it is registered. See instructions. NC 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		8Ь	х	
8a 6 b 1 0	Enter the states to which the foundation reports or with which it is registered. See instructions. NC 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 calendary			х	
8a 8 b 1: 0 9 1:	Enter the states to which the foundation reports or with which it is registered. See instructions. NC 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		8b 9	х	X

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Pa	art VII-A Statements Regarding Activities (continued)			- ugo o
•			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the 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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► BILL ALLEN Telephone no. ► 704-37	5-5	937	
	Located at ► 810 COLVILLE ROAD, CHARLOTTE, NC ZIP+4 ► 28			
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	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		ŧ	,
<u> </u>	foreign country	ļ	, , ,	200
Pa	art 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.	<u> </u>	Yes	No
1a	a During the year, did the foundation (either directly or indirectly):		1.0	3
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	l		.3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			, a
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	l (۸.	*
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		* .	
	(5) Transfer any income or assets to a disqualified person (or make any of either available		A	*
	for the benefit or use of a disqualified person)? Yes X No		*	4
	(6) Agree to pay money or property to a government official? (Exception Check "No"			Ĵ
	If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1	4	4
	termination of government service, if terminating within 90 days.) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		10	,
L	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	۱.,	* * \$	~~*
	Organizations relying on a current notice regarding disaster assistance, check here	1b		*
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			,
•	before the first day of the tax year beginning in 2017?	1c	~	х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	<u> </u>	٠	
	defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			41
	before 2017?			1
	If "Yes," list the years \blacktriangleright ,,,,			90
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
C	f the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			1
)			
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	of "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	-		
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	لِبِ	X
	Fo	rm 99 0	J-PF	(2017)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)	ıly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of s	service	(c) Compensation
NONE		
		<u></u>
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 information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		<u> </u>
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 lines 1 and 2.		Amount
1 N/A		Amount
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	•	0.
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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations	s, 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	11,553,512.
b	Average of monthly cash balances	1b	1,386,096.
c	Fair market value of all other assets	1c	1,635,209.
d	Total (add lines 1a, b, and c)	10	14,574,817.
e	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	1c (attach detailed explanation) le 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	14,574,817.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	218,622.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,356,195.
6	Minimum investment return. Enter 5% of line 5	6	717,810.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certair	
_	foreign organizations, check here 🕨 🔲 and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	717,810.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	11,674.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	706,136.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	706,136.
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	706,136.
F	art XII, Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	П	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	646,000.
ь	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	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	646,000.
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	11,674.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,674. 634,326.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies	for the section
	4940(e) reduction of tax in those years.		

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Part XIII	Undistributed Income	(see instructions)
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		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1	Distributable amount for 2017 from Part XI, line 7				706,136.
2	Undistributed income, if any, as of the end of 2017	: ₹ .			3 1 3
ŧ	a Enter amount for 2016 only			645,033.	
t	Total for prior years:	*	0.	. *	
2	Excess distributions carryover, if any, to 2017:	*	U•		7/1: 4
	a From 2012	×		,	
	b From 2013		*,	*	. ,
	From 2014	**************************************		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	d From 2015	3 .	`		**
	e From 2016		1		A :
	f Total of lines 3a through e	0.	*	<u> </u>	
	Qualifying distributions for 2017 from	***		, ,	
	Part XII, line 4: ► \$ 646,000.	* ;	* *	3.	***
į	Applied to 2016, but not more than line 2a	* *	*	645,033.	
(Applied to undistributed income of prior	<i>′</i> ;		* 2 * *	Ä
	years (Election required - see instructions)	• 3	0.	`	(
(Treated as distributions out of corpus		1.00	¥?	* * * * * * * * * * * * * * * * * * * *
	(Election required - see instructions)	0.	***\\	*	2 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(d Applied to 2017 distributable amount	/		* * * * * * * * * * * * * * * * * * *	967.
(e Remaining amount distributed out of corpus	0.	***		*** * ****
5	Excess distributions carryover applied to 2017 (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:				
ŧ	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			* * * * * * * * * * * * * * * * * * * *
ı	Prior years' undistributed income. Subtract	*			* * % .
	line 4b from line 2b	· ·	0.	* % à,	<u> </u>
(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		0.	,	
(Undistributed income for 2016. Subtract line				*****
	4a from line 2a. Taxable amount - see instr.			0.	, , ,
1	Undistributed income for 2017. Subtract				
	lines 4d and 5 from line 1. This amount must				
_	be distributed in 2018				705,169.
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				1
	section 170(b)(1)(F) or 4942(g)(3) (Election				
	may be required - see instructions)	0.			•
ŏ	Excess distributions carryover from 2012	0.			
٥	not applied on line 5 or line 7 Excess distributions carryover to 2018.	- 0.			
9	Subtract lines 7 and 8 from line 6a	0.			
0	Analysis of line 9:				
ä	Excess from 2013				
ŧ	Excess from 2014				
(Excess from 2015				
	Excess from 2016				
	Excess from 2017				

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Part XIV Private Operating F			-A, question 9)	N/A	
'1 a If the foundation has received a ruling o	•				
foundation, and the ruling is effective fo	•		. ▶ ∟		
b Check box to indicate whether the found		ng foundation described ii		4942(J)(3) or 49	342(j)(5)
2 a Enter the lesser of the adjusted net	Taxyear (a) 2097	(h) 001C	Prior 3 years	(4) 0014	() Tatal
income from Part I or the minimum	(a) 2047	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for		ļ			ľ
each year listed					
b 85% of line 2a				//	
c Qualifying distributions from Part XII,					
line 4 for each year listed		1			
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			/	<i>f</i>	
e Qualifying distributions made directly					
for active conduct of exempt activities.		1			
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon:					
"Assets" alternative test - enter: (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 shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		/			
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	<u> </u>				
Part XV Supplementary Info at any time during t			f the foundation	had \$5,000 or moi	re in assets
Information Regarding Foundation List any managers of the foundation whyear (but only if they have contributed in the	no have contributed more		ributions received by the	foundation before the clos	e of any tax
BILL ALLEN					
b List any managers of the foundation whether entity) of which the foundation has			or an equally large portio	n of the ownership of a pa	artnership or
NONE					
2 Information Regarding Contribut Check here ► X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does n		ests for funds If
a The name, address, and telephone num					
b The form in which applications should l	be submitted and informa	ition and materials they sl	nonlq iucinde.		
c Any submission deadlines		-			<u>_</u>
d Any restrictions or limitations on award	ts such as hy geographic	al areas, charitable fields	kinds of institutions or a	ther factors	
o mily resultations of initiations on award	is, such as my geographic	ui arvas, viiaritaule lielūs,	กาเนอ บา เกรเมเบเเยกร, Of C	oungi raciolis,	

Page 11

Part XV

Supplementary Information (continued)

NONE

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0.

Total

723611 01-03-18

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a		······································		· · · · · · · · · · · · · · · · · · ·	
b					
C					
d	1 1				
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	82,231.	
4 Dividends and interest from securities			15		
5 Net rental income or (loss) from real estate.				420 / 1 11 11	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Debt-financed property				V	
b Not debt-financed property					
6 Net rental income or (loss) from personal		رن ٬	-		
property					
7 Other investment income			14	-31,791.	
8 Gain or (loss) from sales of assets other			 		
than inventory			18	1,000,171.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a]
b					
c			1		
d	1 1				
e					
12 Subtotal Add columns (b), (d), and (e)	_ / å	0.		1,200,894.	0
13 Total Add line 12, columns (b), (d), and (e)	· · · · · · · · · · · · · · · · · · ·			13	1,200,894
(See worksheet in line 13 instructions to verify calculations.)			"-	_,

Part XVI-B	Relationship of Activities to the Accomplishment of Exempt Purposes

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2017)

$\overline{}$			LEN FAMILY FOUN		854617 Page	13
Part)	Exempt Organ		o and Transactions and	d Relationships With Nonch	iaritable	
1 Did			owing with any other organization	n described in section 501(c)	Yes N	10
			ating to political organizations?	ii described iii section 301(c)		-
,	nsfers from the reporting found		- ·			
	, ,	ation to a noncharitable exemp	or organization of		10/11	X
	Cash					<u>X</u>
-	Other assets				1a(2)	<u>~</u>
	er transactions:					v
٠.	Sales of assets to a noncharita					<u>x</u> x
٠, ,	Purchases of assets from a no	· -	on			
• -	Rental of facilities, equipment,					X
٠,,	Reimbursement arrangements	i				<u>X</u>
٠,,	Loans or loan guarantees					X
	Performance of services or me	•				<u>X</u>
	aring of facilities, equipment, ma				<u> </u>	<u>X</u>
				vays show the fair market value of the go		
				e in any transaction or sharing arrangeme	ent, show in	
coli	umn (d) the value of the goods,					
(a) Line To	o (b) Amount involved		itable exempt organization	(d) Description of transfers, transactions	, and sharing arrangements	
		N/	<u>A</u>			
				1		
	<u> </u>					
រព ទ	the foundation directly or indirect section 501(c) (other than section Yes," complete the following sch	on 501(c)(3)) or in section 527	, one or more tax-exempt organiz ?	zations described	Yes X	No
	(a) Name of or	ganization	(b) Type of organization	(c) Description of rela	itionship	
	N/A					
	//	$\overline{}$		-		
Sign Here	Under penalties of perjury I declare and belief, it is true, correct, and co	polete Declaration of preparer (other	tuding accompanying schedules and start than taxpayer) is based on all afformation of the start	atements, and to the best of my knowledge ion of which prepare has any knowledge PRESIDENT/DIREC TOR Title		No
	Print/Type preparer's n		pr's signature		PTIN	
	ROBERT A.		hatte Brown	self- employed		
Paid	JR.	ROBE	RT A. BROWER	·	P00834791	
Prepa		<u> </u>	DMAN LLP	Firm's EIN ► 56		

Phone no. (704) 367-7020 Form **990-PF** (2017)

Use Only

Firm's address ▶ 4350 CONGRESS STREET, SUITE 900

CHARLOTTE, NC 28209

COMMUNITY SCHOOL OF THE ARTS 345 N. COLLEGE ST, 4413 CHARLOTTE, NC 28202 EXTRA MILE EDUCATION FOUNDATION TWO GATEMAY CENTER, SUITE 348, 603 STANMIX STREET PITTSEURGH, PA 15222 GIRLS ON THE RUN INTERNATIONAL 120 COTTAGE PLACE CHARLOTTE, NC 28207 KINDERMOURN 1320 HARDING PLACE CHARLOTTE, NC 28207 KINDERMOURN 1320 HARDING PLACE CHARLOTTE, NC 28217 KINDERMOURN 1320 HARDING PLACE CHARLOTTE, NC 28217 KINDERMOURN 1320 HARDING PLACE CHARLOTTE, NC 28217 MONE PUBLIC CHARITY ELLPS FAMILIES AND CHILDREN COPE WITH LOSS 10,00 MUSCULAR DYSTROPHY ASSOCIATION NONE PUBLIC CHARITY HILPS FOR SUPPORT WITH INTELLECTULA AND BEVELOPMENTAL 30,00 MUSCULAR DYSTROPHY ASSOCIATION NONE PUBLIC CHARITY HILP FOR SUPPORT HILDREN AND ADULTS HILT INTELLECTULA AND BEVELOPMENTAL 30,00 MUSCULAR DYSTROPHY ASSOCIATION NONE PUBLIC CHARITY HILP FOR SUPPORT HILDREN AND ADULTS HILD FOR SUPPORT STRUMENT ASSITANCE, AND SUMMER CAMPS FOR KIDS 20,00 MUSCULAR DYSTROPHY ASSOCIATION 1515 MOCKINGBIRD LANE, W701 CHARLOTTE, NC 28209 NATIONAL MULTIPLE SCLEROSIS SOCIETY 3101 INDUSTRIAL DRIVE, SUITE 210 RALEIGH, NC 27609 OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY RESEARCH AND AMARENESS FOR MULTIPLE SCLEROSIS CYCLING PROGRAMS FOR THOSE IN NEED	Part XV Supplementary Information				
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1320 HARDING PLACE CHARLOTTE, NC 28204 LIFESPAN, INC 200 CLANTON ROAD CHARLOTTE, NC 28217 NONE PUBLIC CHARITY PUBLIC CHARITY CHILDREN AND ADULTS WITH INTELLECTUAL AND DEVELOPMENTAL 30,00 MUSCULAR DYSTROPHY ASSOCIATION NONE PUBLIC CHARITY HELP FOR SUPPORT GROUPS, EQUIPMENT ASSITANCE, AND SUMMER CAMPS FOR KIDS 20,00 NATIONAL MULTIPLE SCLEROSIS SOCIETY NONE PUBLIC CHARITY RESEARCH AND AWARENESS FOR MULTIPLE SCLEROSIS 3101 INDUSTRIAL DRIVE, SUITE 210 RALEIGH, NC 27609 OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY PUBLIC CHARITY CYCLING PROGRAMS FOR THOSE IN NEED					
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LIFESPAN, INC 200 CLANTON ROAD CHARLOTTE, NC 28217 MUSCULAR DYSTROPHY ASSOCIATION NONE PUBLIC CHARITY MITH INTELLECTUAL AND DEVELOPMENTAL 30,00 MUSCULAR DYSTROPHY ASSOCIATION NONE PUBLIC CHARITY HELP FOR SUPPORT GROUPS, EQUIPMENT ASSITANCE, AND SUMMER CAMPS FOR KIDS 20,00 NATIONAL MULTIPLE SCLEROSIS SOCIETY NONE PUBLIC CHARITY HELP FOR SUPPORT GROUPS, EQUIPMENT ASSITANCE, AND SUMMER CAMPS FOR KIDS 20,00 OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY PUBLIC CHARITY RESEARCH AND AWARENESS FOR MULTIPLE SCLEROSIS 20,00 OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY CYCLING PROGRAMS FOR THOSE IN NEED	1320 HARDING PLACE			CHILDREN COPE WITH	
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CHARLOTTE, NC 28217 CHILDREN AND ADULTS WITH INTELLECTUAL AND DEVELOPMENTAL 30,00 MUSCULAR DYSTROPHY ASSOCIATION NONE PUBLIC CHARITY CHARLOTTE, NC 28209 NONE PUBLIC CHARITY PUBLIC CHARITY RESEARCH AND SUMMER CAMPS FOR KIDS 20,00 NATIONAL MULTIPLE SCLEROSIS SOCIETY NONE PUBLIC CHARITY RESEARCH AND AWARENESS FOR MULTIPLE SCLEROSIS RALEIGH, NC 27609 OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY PUBLIC CHARITY PUBLIC CHARITY CYCLING PROGRAMS FOR THOSE IN NEED	LIFESPAN, INC	NONE	PUBLIC CHARITY	ENRICHMENT	
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MUSCULAR DYSTROPHY ASSOCIATION NONE PUBLIC CHARITY FROUPS, EQUIPMENT ASSITANCE, AND SUMMER CAMPS FOR KIDS PUBLIC CHARITY RESEARCH AND AWARENESS FOR MULTIPLE SCLEROSIS SOCIETY NONE PUBLIC CHARITY PUBLIC CHARITY RESEARCH AND AWARENESS FOR MULTIPLE SCLEROSIS 20,00 OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY PUBLIC CHARITY PUBLIC CHARITY RESEARCH AND AWARENESS FOR MULTIPLE SCLEROSIS 20,00 THOSE IN NEED	CHARLOTTE, NC 28217			CHILDREN AND ADULTS	
MUSCULAR DYSTROPHY ASSOCIATION 1515 MOCKINGBIRD LANE, #701 CHARLOTTE, NC 28209 NATIONAL MULTIPLE SCLEROSIS SOCIETY 3101 INDUSTRIAL DRIVE, SUITE 210 RALEIGH, NC 27609 OVER THE EDGE CYCLING CLUB 20,00 PUBLIC CHARITY RESEARCH AND AWARENESS FOR MULTIPLE SCLEROSIS 20,00 PUBLIC CHARITY CYCLING PROGRAMS FOR THOSE IN NEED				WITH INTELLECTUAL AND	
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SROUPS, EQUIPMENT ASSITANCE, AND SUMMER CAMPS FOR KIDS NATIONAL MULTIPLE SCLEROSIS SOCIETY NONE PUBLIC CHARITY RESEARCH AND AWARENESS FOR MULTIPLE SCLEROSIS RALEIGH, NC 27609 OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY CYCLING PROGRAMS FOR THOSE IN NEED	MUSCULAR DYSTROPHY ASSOCIATION	NONE	PUBLIC CHARITY	HELP FOR SUPPORT	
CHARLOTTE, NC 28209 ASSITANCE, AND SUMMER CAMPS FOR KIDS 20,00 NATIONAL MULTIPLE SCLEROSIS SOCIETY NONE PUBLIC CHARITY RESEARCH AND AWARENESS FOR MULTIPLE SCLEROSIS RALEIGH, NC 27609 OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY CYCLING PROGRAMS FOR THOSE IN NEED					
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3101 INDUSTRIAL DRIVE, SUITE 210 RALEIGH, NC 27609 OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY CYCLING PROGRAMS FOR THOSE IN NEED	NAME ON A CONTROL OF THE CONTROL OF THE CONTROL	NONE	DIDLIC CUARTE	BECEADOU AND AMADEMECS	
OVER THE EDGE CYCLING CLUB OVER THE EDGE CYCLING CLUB 2325 CROYDON RD PUBLIC CHARITY CYCLING PROGRAMS FOR THOSE IN NEED		HOME	FORLIC CHARITY		
OVER THE EDGE CYCLING CLUB NONE PUBLIC CHARITY CYCLING PROGRAMS FOR THOSE IN NEED				FOR MULTIPLE SCLEROSIS	20 000
2325 CROYDON RD THOSE IN NEED					20,000
2325 CROYDON RD THOSE IN NEED					
		NONE	PUBLIC CHARITY	i l	
CHARLOTTE NC 28207				THOSE IN NEED	
	CHARLOTTE, NC 28207			<u> </u>	3,500 526,000

Part XV Supplementary Information	n			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	,,,,,,
PHILIPS ACADEMY OF NORTH CAROLINA, INC.	NONE	PUBLIC CHARITY	SCHOOL FOR STUDENTS WITH LEARNING	
3115 PROVIDENCE ROAD			DISABILITIES AND	
CHARLOTTE, NC 28211		<u> </u>	AUTISM	30,000.
PIRATES CHARITIES	NONE	PUBLIC CHARITY	YOUTH HEALTH, FITNESS,	
115 FEDERAL STREET			AND EDUCATION PROGRAMS	
PITTSBURGH, PA 15212				30,000.
RIGHT MOVES FOR YOUTH, INC.	NONE	PUBLIC CHARITY	WORK WITH STUDENTS TO	
2211 W. MOREHEAD STREET			IMPROVE SCHOOL	
CHARLOTTE, NC 28208	1	1	ATTENDANCE, IMPROVE	
			BEHAVIOR, AND ENGAGE	
			IN EDUCATION.	20,000.
TEXAS RANGERS BASEBALL FOUNDATION	NONE	PUBLIC CHARITY	YOUTH HEALTH FITNESS	
1000 BALLPARK WAY			AND EDUCATION PROGRAMS	
ARLINGTON, TX 76011	Į.			30,000.
THE IVEY	NONE	PUBLIC CHARITY	SUPPORT AND ACTIVITY	,
6030 SOUTH PARK DRIVE			CENTER FOR ADULTS	
CHARLOTTE, NC 28210			LIVING WITH MEMORY	
onnine series			LOSS AND THEIR	
			CAREGIVERS	82,500.
THE PRESTON BRADLEY CENTER	NONE	PUBLIC CHARITY	CENTER FOR ARTS,	
941 W LAWRENCE AVE			CULTURE, AND	
CHICAGO, IL 60640			COMMUNITY, FREE LUNCH	
			PROGRAM.	2,500.
YMCA OF GREATER CHARLOTTE	NONE	PUBLIC CHARITY	HEALTH, FITNESS, AND	
8100 OLD MALLARD CREEK ROAD			EDUCATION PROGRAMS	
CHARLOTTE, NC 28262				30,000.
MECUL ENDING COUNTY ACUADIC CENTED	NONE	DUDI IC CUADITOV	NAMAMODIUM WINU A	
MECKLENBURG COUNTY AQUATIC CENTER	NONE	PUBLIC CHARITI	NATATORIUM WITH A	
800 EAST MARTIN LUTHER KING JUNIOR			COMPETITION POOL,	
BLVD CHARLOTTE, NC 28202			THERAPEUTIC POOL, AND	
			FITNESS CENTER	10,000.
SUSTAIN CHARLOTTE	NONE	PUBLIC CHARITY	1	
2151 HAWKINS ST, STE 200			COMMUNITY BASED	
CHARLOTTE, NC 28203			APPROACH TO	
			SUSTAINABILITY OF THE	
		 	CHARLOTTE AREA	25,000.
	ļ			
CLT BIKE CAMP	NONE	PUBLIC CHARITY	BIKE CAMP TO PROMOTE	
321 BALDWIN AVE			HEALTHY LIFESTYLE AND	
CHARLOTTE, NC 28204		<u> </u>	COMMUNITY INVOLVEMENT	5,000.
Total from continuation sheets				

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.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization

Employer identification number

BILL AND SHARON ALLEN FAMILY FOUNDATION 20-5854617 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., ;; ... purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

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) (2017)

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

BILL AND SHARON ALLEN FAMILY FOUNDATION

20-5854617

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZtP + 4	(c) Total contributions	(d) Type of contribution
1	BILL ALLEN 810 COLVILLE ROAD CHARLOTTE, NC 28207	\$ <u>407,019.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SHARON ALLEN 810 COLVILLE ROAD CHARLOTTE, NC 28207	\$ 407,019.	Person X 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 Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

BILL AND SHARON ALLEN FAMILY FOUNDATION

20-5854617

art II Nonc	ash Property (see instructions) Use duplicate copies of Pa	art 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
(a) No. -om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. From	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) . Date received
_		 \$	

ame of orga	inization	Employer identification number					
	ND SHARON ALLEN FAMILY F		20-5854617				
Part III	the year from any one contributor. Complete colu	imns (a) through (e) and the follow	n section 501(c)(7), (8), or (10) that total more than \$1,000 for ving line entry. For organizations				
	completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional s	haritable, etc., contributions of \$1,000 or le	ess for the year (Enter this info once) > \$				
(a) No.	<u> </u>						
from Part I	(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				
,							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I		(-,	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		· · · · · · · · · · · · · · · · · · ·					
		 					
	(e) Transfer of gift						
ļ	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee				
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(a) No. from	(b) Purpose of gift	(a) Has of mift	(d) Description of how gift is held				
Part I	(b) Furpose of gift	(c) Use of gift	(a) Description of now girt is neid				
i							
	(e) Transfer of gift						
}	Transferee's name, address, and	7IP + 4	Relationship of transferor to transferee				
	Transfer of S Training, Education of Esta		Modulation and Designation of the designation of th				
(a) No. from							
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
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		<u> </u>					
		(e) Transfer of gift	t				
1							
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee				
}							

FORM 990-PF INTERE	ST ON SAVING	S AND T	EMPORA	RY C	ASH	INVESTME	ents s	TATEMENT 1
SOURCE			(A) VENUE BOOKS		NET	(B) INVESTME INCOME		(C) ADJUSTED NET INCOME
AMORTIZATION - BOND INTEREST MERRILL LYNCH - 57174E41 OID ADJUSTMENT PNC INTEREST INCOME SALEM INVESTMENT PARTNERS III SALEM INVESTMENT PARTNERS IV US GOVT INTEREST - 57174E41			-8,62 64,29 1,57 6,57	97. 79. 76. 14.		-8,62 64,29 1,57 6,57	97. 79. 76. 14.	
TOTAL TO PART I, LI	NE 3		82,23	31.		82,23	31.	
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM	SEC	URITIES	S	TATEMENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S		A) ENUE BOOK	NET]	(B) INVEST- INCOME	
HAWTHORNE MERRILL LYNCH - 57174E41	15. 152,641.	2,	0. 373.	15	10,26	.5. .8. 14	15. 18,561.	
TO PART I, LINE 4	152,656.		373.		0,28		18,576.	
FORM 990-PF		OTHER	INCOM	Œ			S	TATEMENT 3
DESCRIPTION			REV	A) ENUE BOOK		(B) NET INV MENT IN	/EST-	(C) ADJUSTED NET INCOME
CLASS ACTION FUNDS SETTLEMENT INCOME FROM SALEM I PARTNERS III, LP INCOME FROM SALEM I PARTNERS IV, LP	NVESTMENT	•	_	-189, 157,	371. 937. 775.	-77	371. 7,927.	
TOTAL TO FORM 990-P	F, PART I, I	LINE 11			791.		,323.	

FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	4,045.	4,045.		0.
TO FORM 990-PF, PG 1, LN 16B	4,045.	4,045.		0.
FORM 990-PF C	OTHER PROFES	SIONAL FEES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CUSTODIAN FEES BOOKKEEPING FEES	103,342. 12,000.			0.
TO FORM 990-PF, PG 1, LN 16C	115,342.	115,342.		0.
FORM 990-PF	TAX	ES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES EXCISE TAXES	562. -29,782.			0.
TO FORM 990-PF, PG 1, LN 18	-29,220.	562.		0.

FORM 990-PF	OTHER EXPENSES		STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OTHER DEDUCTIONS FROM SALEM INVESTMENT PARTNERS III, LLC INVESTMENT MANAGMENT FEES-	7,564.	7,564.		0.	
PNC	3,689.	3,689.		0.	
OTHER DEDUCTIONS FROM SALEM INVESTMENT PARTNERS IV, LLC	2,714.	2,714.		0.	
TO FORM 990-PF, PG 1, LN 23	13,967.	13,967.		0.	

FORM 990-PF U.S. AND STATE/CI	TY GOV	ERNMENT	OBLIGATIONS	STATEMENT 8
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
TOTAL GOVERNMENT SECURITIES - SEE ATTACHED	х		1,838,760.	1,835,741.
TOTAL U.S. GOVERNMENT OBLIGATIONS		-	1,838,760.	1,835,741.
TOTAL STATE AND MUNICIPAL GOVERNMENT	OBLIG	ATIONS		
TOTAL TO FORM 990-PF, PART II, LINE	10A	-	1,838,760.	1,835,741.
FORM 990-PF CORE	PORATE	STOCK		STATEMENT 9
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
TOTAL CORPORATE STOCKS (ML 571-15340,74E41,17668,22906,28731)-	SEE AT	TACHED	7,177,864.	9,291,378.
TOTAL TO FORM 990-PF, PART II, LINE	10B	•	7,177,864.	9,291,378.

FORM 990-PF CORPORATE BONDS		STATEMENT 10
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
TOTAL CORPORATE BONDS - SEE ATTACHED	1,012,954.	1,030,269.
TOTAL TO FORM 990-PF, PART II, LINE 10C	1,012,954.	1,030,269.

FORM 990-PF (THER INVESTMENTS		STATEMENT 11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
SALEM III INVESTMENTS	COST	538,556.	538,556.
PNC BANK CD/MMA	COST	1,062,961.	1,062,961.
SALEM IV INVESTMENTS	COST	1,096,653.	1,096,653.
TOTAL MUTUAL FUNDS/CEF (ML	COST		
571-22906,74E41,15340,28731) SEE	3		
ATTACHED		684,223.	706,305.
BONDS- ACCRUED INTEREST	COST	0.	11,237.
BONDS- ACCRUED INTEREST	COST	0.	7,058.
TOTAL TO FORM 990-PF, PART II, I	LINE 13	3,382,393.	3,422,770.